JAN 11 2024

Clear Form

Tax year_ <u>2023</u>

BOR no. 3603-1-2023

DTE 1 Rev. 12/22

County Highland

Date received 1/11/2024

HIGHLAND COUNTY AUD Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form. Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☐ Original complaint ☐ Counter complaint Notices will be sent only to those named below.

		Name		Street address, City, State, ZIP code		
Owner of property	6 K. 67 S. G	TRICH BAKER		. K.)	11235 BIG OAK RD	
2. Complainant if not own	er		E se vizo s	deri	odinak skit settyjet (s)	
3. Complainant's agent			andres of States:		ps/ unit city by kyarea .	asi inanierjent au F 📋
4. Telephone number and email address of contact person 7/Le \$4.84703 TRICIALYNN 282 & CMAIL COM					ozen enino nondoso.	
5. Complainant's relations	hip to prop	erty, if not owner				
e and id the first of my	If more	than one parcel is	included, see "M	lultip	le Parcels" Instruction.	to asiften an out to state of
6. Parcel numbers from ta	x bill				Address of property	
27-14-00,	1-110	0.00	1026	Te	Afterson S	
The state of the s	(Macr	9 (8)		ethic.	e tought in the mesigning of	LANK LANK
7. Principal use of property	y RZ	STAIL				
8. The increase or decreas			ter-complaints sup	portin	ng auditor's value may hay	ve -0- in Column C
Parcel number	Com	Column A nplainant's Opinion (Full Market Valu	of Value		Column B Current Value Full Market Value)	Column C Change in Value
		150,00	0		185,000	-35,000
9. The requested change in value is justified for the following reasons:						
10. Was property sold within the last three years? Yes No Unknown If yes, show date of sale 6-22-2022 and sale price \$ _/50,000 ; and attach information explained in "Instructions for Line 10" on back.						
11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.						
12. If any improvements were completed in the last three years, show date and total cost \$						
13. Do you intend to present the testimony or report of a professional appraiser? Yes ANO Unknown						

SEE ATTACHMENT

14. If you have filed a prior complaint on this parcel since the las for the valuation change requested must be one of those below. section 5715.19(A)(2) for a complete explanation.		
☐ The property was sold in an arm's length transaction.	☐ The property lost value due to a casualty.	
☐ A substantial improvement was added to the property.	Occupancy change of at least 15% had a substeam economic impact on my property.	tantial
15. If the complainant is a legislative authority and the complaint complainant, R.C. 5715.19(A)(8) requires this section to be com-	t is an original complaint with respect to property not opleted.	owned by the
☐ The complainant has complied with the requirements of F adoption of the resolution required by division (A)(6)(b) or	R.C. section 5715.19(A)(6)(b) and (7) and provided not find that section as required by division (A)(7) of that section	otice prior to the ction.
I declare under penalties of perjury that this complaint (including knowledge and belief is true, correct and complete.	any attachments) has been examined by me and to	the best of my
DateComplainant or agent (printed)	RICH BAKER Title (if agent)	
Complainant or agent (signature) <u>Jucia Ba</u>	ker	
Sworn to and signed in my presence, this(Date)	day of(Month)	(Year)
Notary		
		0.37

Tax year 2024

BOR no. 36

DTE 1 Rev. 12/22

FEB 16 2024

County

Date received 211

Complaint Against the Valuation of Real Property

HIGHLAND COUNTY AMESTIC SAND type or print all information. Read instructions on back before completing form.

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

Original complaint Counter complaint

	Notices will t	be sent only to those n	amed below.		
		ame	Street address, City, State, ZIP code		
1. Owner of property	Jesse Stolt	zfus	12325 Pommert	Rd Greenfield OH 45123	
2. Complainant if not own	ner				
3. Complainant's agent					
4. Telephone number and	d email address of contact pers				
937-481-3258	Email: jesse	Skylineroof	ing oh. com		
5. Complainant's relation	ship to property, if not owner		J		
	If more than one parcel is	s included, see "Mul	tiple Parcels" Instruction	1.	
6. Parcel numbers from ta	ax bill		Address of propert	tv	
26-03-000-0	69.03	12325 Pomme	ert Rd Greenfield	-	
			75 77 70 77	01. 10122	
7. Principal use of proper	ty Retail				
8. The increase or decrease	se in market value sought. Cou	nter-complaints suppo	ting auditor's value may ha	ave -0- in Column C.	
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)		Column B Current Value (Full Market Value)	Column C Change in Value	
26-03-000-069.03	"300,000. 00 To "900	2,000.00?	1,222,800		
9 The requested change	in and the last of the second		,		
Improvement Code 5	in value is justified for the following the second of the	ving reasons:			
Location Hurts Va	Inc of Property.	1001 10 10			
Property Value d	id not increase ou	er 100% from	2022 1. 1	1 2222 T V	
To trad property sold with	nin the last three years?	es 🔀 No 🗌 Unkno	wn If yes, show date of sa	ale <u><i>N-</i> A</u>	
and sale price \$ N-A	; and attach info	rmation explained in "l	nstructions for Line 10" on	back.	
11. If property was not sold	but was listed for sale in the last	three years, attach a c	ony of listing agreement or	other surificial and 1/ A	
12. If any improvements we	ere completed in the last three	years, show date	and total	al cost \$	
13. Do you intend to presen	nt the testimony or report of a p	orofessional annraiser	2 □ Vas □ No ▼ Um	den accom	
?-1-2021 office Im	aprovment in Existins	Building # 25	000 INO M ON	KHOWII	
-1-2022 office Im	provment in Existing provment in Existing	Building #5,0	No Insulation	n, Had overhead Soone	
	10 10 1010 041101119 -	DELL SELL	0.000 No Insulat	ion, On overhead doo.	
-1-2023 Build Ne	w 80'x 150' Pole Buildin	s +2,000 sq ft	#240,000		
1- 2013 70' 40'	Commenter of the Hung		A.		

for the valuation change requested must be one of those below. F section 5715.19(A)(2) for a complete explanation.	reappraisal or update of property values in the county, the reason Please check all that apply and explain on attached sheet. See R.C.
$\hfill \square$ The property was sold in an arm's length transaction.	☐ The property lost value due to a casualty.
☐ A substantial improvement was added to the property.	Occupancy change of at least 15% had a substantial economic impact on my property.
15. If the complainant is a legislative authority and the complaint i complainant, R.C. 5715.19(A)(8) requires this section to be comp	s an original complaint with respect to property not owned by the leted.
☐ The complainant has complied with the requirements of R. adoption of the resolution required by division (A)(6)(b) of	C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the that section as required by division (A)(7) of that section.
I declare under penalties of perjury that this complaint (including a knowledge and belief is true, correct and complete.	ny attachments) has been examined by me and to the best of my
Date 2-16-2024 Complainant or agent (printed)	Sisse Stoltzfus Title (if agent)
Complainant or agent (signature)	
Sworn to and signed in my presence, this (Date)	t day of February 2024
Notary Notary	(teal)
) , in the state of the state o	JEFFERY LISTER Notary Public, State of Ohio My Comm. Expires 07/05/2026

\sim 1			-	ж.	-		
CI	ea	т	г.	•1	П	8 8 1	

	and the best of the contract o		
Tax year_	2023	BOR no. 3603 - 3-2023	DTE 1 Rev. 12/2
County	Highland	Date received 2 20 2024	

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form.

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☐ Original complaint ☐ Counter complaint Notices will be sent only to those named below.

		TVOLICES WIII DE	sent only to the	SC Hall	iled below.	
		Na	me		Street address,	City, State, ZIP code 4512-3
1. Owner of property		Counter RicHard J		1	504 N Worth ART	on Greenfield OH
2. Complainant if not own	er					,
3. Complainant's agent						
4. Telephone number and	email ac	Idress of contact perso	8		÷	
5. Complainant's relations	ship to pr	operty, if not owner	\$			
	If mo	re than one parcel is	included, see "	Multip	le Parcels" Instruction.	
6. Parcel numbers from ta	ax bill				Address of property	
26-18-001-	001.	00	405	Tai	Jon-ST	
			~	117	3102 01	
			-			
7. Principal use of propert	v C	ommerc is	0 =	_		
			tor complaints of	nnorti	ag guditar'a value masu ka	0 10 0 10 0
8. The increase or decrease	oc iii iiiai	ket value sought. Coun	ter-complaints st	ipportii	ng auditor's value may ha	ve -0- in Column C.
Parcel number	Co	Column A Complainant's Opinion of Value (Full Market Value)		(1	Column B Current Value Full Market Value)	Column C Change in Value
21-18-001-001-00 156,000,00 242 200,00						
,						
9. The requested change in value is justified for the following reasons: Occupancy code not the same as Other forces in same Business. The code should be equally taxed Examples of other like Businesses included in this packet All baxation Should be Equal Bee Allackin suls Included of Same Commercial business						
10. Was property sold within the last three years? Yes No Unknown If yes, show date of sale						
and sale price \$; and attach information explained in "Instructions for Line 10" on back.						
11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.						
12. If any improvements were completed in the last three years, show date \(\frac{2}{19}\)/202Z and total cost \(\frac{152,000.00}{2}\)						
13. Do you intend to prese	13. Do you intend to present the testimony or report of a professional appraiser? 🗌 Yes 🔲 No 📈 Unknown					

for the valuation change requested must be one of those below. Please check all that apply and explain on attached section 5715.19(A)(2) for a complete explanation.	
☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.	
A substantial improvement was added to the property. Occupancy change of at least 15% had a substantial improvement was added to the property. economic impact on my property.	antial
15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not complainant, R.C. 5715.19(A)(8) requires this section to be completed.	owned by the
☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided no adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that sec	otice prior to the tion.
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to a knowledge and belief is true, correct and complete.	he best of my
Date 2/14/2024 complainant of agent (printed) Richard Cruff Title (if agent) Ou N Complainant or agent (signature)	ev
Sworn to and signed in my presence, this 2/14/2024 day of	(Year)
Notary	
Incorrect Occupancy code based on other e business operations,	YACT

FEB 2 0 2024

HIGHLAND COUNTY AUDITOR

Clear Form

Tax year 2023 BOR no. 3603 - 4-2023 DTE 1 Rev. 12/22 County Highland Date received 2/5/24 3/5/2024

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form.

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

Original complaint Counter complaint Notices will be sent only to those named below.

		e sent only to those na	T	City, State, ZIP code
Owner of property	Maria S.	4. 110.		
Complainant if not owner	Mary S.	raner	102 Core No	Frankfort 047 45628
Complainant's agent				
	mail address of contact person	nn		
928-279-47		f C. Hofmail	0000	
5. Complainant's relationshi		F C 110 TIMACL	COM	
·	If more than one parcel is	included, see "Multi	ple Parcels" Instruction.	
6. Parcel numbers from tax			Address of property	
27-12-001-015		414 1080		
		11 1 Zafal	jette St Gi	45/23
7. Principal use of property	parking lot			
	in market value sought. Coun	ter-complaints supporti	na auditor's value may hay	(a. O. in Column C
Parcel number 27-12-001-015:00	Column A Complainant's Opinion (Full Market Valu	of Value	Column B Current Value Full Market Value)	Column C Change in Value
9. The requested change in the Appraised The property to	value is justified for the follow Value increase Thes doubled 2 is	bu 100%. 7	here were no Au	
10. Was property sold within and sale price \$11. If property was not sold but	; and attach infor	mation explained in "In	structions for Line 10" on	back.
12. If any improvements were				
13. Do you intend to present to	the testimony or report of a pr	rofessional appraiser?	X Yes No I Unk	rnown

	Please check all that apply and explain on attached sheet. See R.C.
☐ The property was sold in an arm's length transaction.	☐ The property lost value due to a casualty.
A substantial improvement was added to the property.	Occupancy change of at least 15% had a substantial economic impact on my property.
15. If the complainant is a legislative authority and the complaint complainant, R.C. 5715.19(A)(8) requires this section to be comp	is an original complaint with respect to property not owned by the pleted.
☐ The complainant has complied with the requirements of R adoption of the resolution required by division (A)(6)(b) of	R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the that section as required by division (A)(7) of that section.
I declare under penalties of perjury that this complaint (including a knowledge and belief is true, correct and complete.	any attachments) has been examined by me and to the best of my
Date <u>2-5-24</u> Complainant or agent (printed) <u>M</u>	ARY S. Fuller_ Title (if agent) O Wher
Complainant or agent (signature) May 5. F	lle
Sworn to and signed in my presence, this(Date)	day of(Month) (Year)
Notary	

MAR 5 2024

HIGHLAND COUNTY AUDITOR