

Tax year 2022
County Harrison

BOR no. 22-01
Date received _____

RECEIVED DTE 1
HARRISON COUNTY 02/19

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 Form 2.

Original complaint Counter complaint

Notices will be sent only to those named below.

ALLISON M. ANDERSON
AUDITOR

Name		Street address, City, State, ZIP code	
1. Owner of property	Eric, Margaret Wilson		P.O. Box 508 Hope Dale Oh 43976
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number of contact person	740 937-2426		
5. Email address of complainant	deputyericclare@yahoo.com		
6. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" on back.			
7. Parcel numbers from tax bill	Address of property		
01-0000 247.00	Toot Rd Cadiz Ohio		
8. Principal use of property	cattle Pasture		
9. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -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

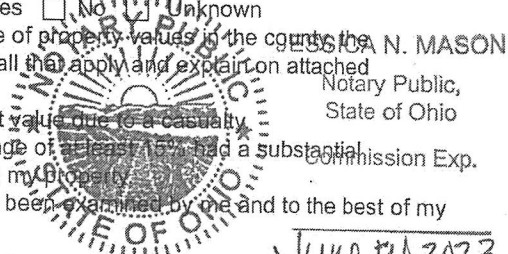
10. The requested change in value is justified for the following reasons:
did not receive the paper work from auditor office. sent to wrong address. the mail carrier would not leave certified letter. My dad told me she took it back had to drive to cadiz twice to get letter. See other paper ->

- 11. 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 11" on back.
- 12. 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.
- 13. If any improvements were completed in the last three years, show date _____ and total cost \$ _____.
- 14. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown
- 15. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.
 - The property was sold in an arm's length transaction.
 - A substantial improvement was added to the property.
 - The property lost value due to a casualty.
 - Occupancy change of at least 15% had a substantial economic impact on my property.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 4-25-2023 Complainant or agent Margaret Wilson Title (if agent) _____
 Signature _____ day of April year 2022

Sworn to and signed in my presence, this _____ day of _____ year _____
 Notary Jessica N. Mason Signature _____



Tax year 2022 BOR no. 22-02 RECEIVED ^{DTE 1} MAY 9 2022
 County HARRISON Date received HARRISON COUNTY

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.

ALLISON M. ANDERSON
AUDITOR

Name		Street address, City, State, ZIP code	
1. Owner of property	Vickers Family Trust	41116 Patton Rd	
2. Complainant if not owner	Cindy Vickers, Trustee	Jewett OH 43986	
3. Complainant's agent	towner or Dallas Vickers III, Trustee		
4. Telephone number of contact person	(740) 945-0281	(724) 875-8598	
5. Email address of complainant			
6. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" on back.			
7. Parcel numbers from tax bill		Address of property	
23-0000221.000		41116 Patton Rd	
23-0000222.000		Jewett, OH 43986 (All)	
23-0000223.000			
8. Principal use of property <u>Home & Farm</u>			
9. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -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
23-0000221.000	21,360 / 57,980	68,830 / 57,980	Land Only 42,270
23-0000222.000	5,130 / 1,480	25,360 / 1,480	20,230
23-0000221.000	11,900 / 0	57,960 / 0	41,060
10. The requested change in value is justified for the following reasons: <u>placed back on CAUV. Land values lower per CAUV guidelines. Remove recapment charges.</u>			

11. 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 11" on back.

12. 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.

13. If any improvements were completed in the last three years, show date N/A and total cost \$ _____

14. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown

15. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason of the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- The property was sold in an arm's length transaction.
- A substantial improvement was added to the property.

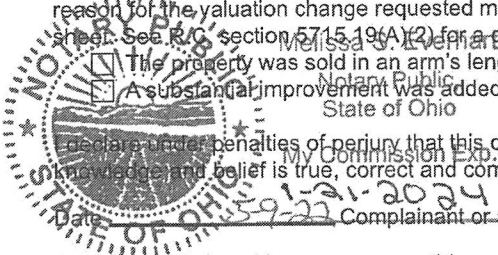
- The property lost value due to a casualty.
- Occupancy change of at least 15% had a substantial economic impact on my property.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 5-9-22 Complainant or agent Cindy K. Vickers Title (if agent) Trustee

Sworn to and signed in my presence, this 9th day of May year 2022

Notary Melissa S. Reppert
Signature



Tax year 2022 BOR no. 3402-22-03
 County _____ Date received MAY 31 2022

DTE 1
Rev. 02/19

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 Form 2

Original complaint Counter complaint

Notices will be sent only to those named below.

ALLISON M. ANDERSON
AUDITOR

Name		Street address, City, State, ZIP code	
1. Owner of property	Roxie Wright	220 W Spring St CADIZ OH 43907	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number of contact person	740-491-7158		
5. Email address of complainant	roxie.wright.8128@yahoo.com		
6. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" on back.			
7. Parcel numbers from tax bill	Address of property		
05-0001538.000	Spring St CADIZ OH 43907		
8. Principal use of property	SMALL piece of LAND		
9. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -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
05-0001538.000	No building (340)	25200	-24,860
10. The requested change in value is justified for the following reasons: Billed for Keyser's Garage - 05-0001631.000			

11. 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 11" on back.
12. 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.
13. If any improvements were completed in the last three years, show date _____ and total cost \$ _____
14. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown
15. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in this area, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

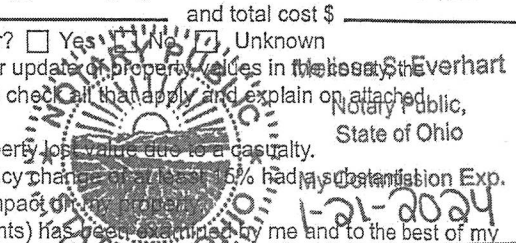
- The property was sold in an arm's length transaction. The property lost value due to a casualty.
- A substantial improvement was added to the property. Occupancy change of 70% or 15% had a substantial economic impact on the property.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 5-31-2022 Complainant or agent Roxie L Wright Signature Title (if agent) _____

Sworn to and signed in my presence, this 31st day of May year 2022

Notary Allison M Anderson Signature



Tax year 2022 BOR no. 22-04 RECEIVED DTE 10/21/21 HARRISON COUNTY Date received _____

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.

ALLISON M. ANDERSON AUDITOR

Name		Street address, City, State, ZIP code	
1. Owner of property	<u>Dorothy Garabrant</u>	<u>37115 Bowen Rd - Leips, OH 43988</u>	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number of contact person	<u>740-945-2127</u>		
5. Email address of complainant			
6. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" on back.			
7. Parcel numbers from tax bill	Address of property		
8. Principal use of property			
9. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -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
<u>20-0049</u>	<u>0</u>	<u>2340</u>	<u>-2340</u>
10. The requested change in value is justified for the following reasons: <u>Trailers have been destroyed. I don't have the real titles but here are copies. Couldn't live in trailers any more cause of falling apart, mold & leaking.</u>			

- 11. 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 11" on back.
- 12. 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.
- 13. If any improvements were completed in the last three years, show date _____ and total cost \$ _____.
- 14. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown
- 15. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.
 - The property was sold in an arm's length transaction.
 - A substantial improvement was added to the property.
 - The property lost value due to a casualty.
 - Occupancy change of at least 15% had a substantial economic impact on my property.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 7-18-22 Complainant or agent Dorothy Garabrant Signature _____ Title (if agent) _____

Sworn to and signed in my presence, this _____ day of July year 2022

Notary Deidra A. Lute Signature _____
DEIDRA A. LUTE
Notary Public, State of Ohio
My Commission expires 9/13/2025



Tax year 2022 BOR no. dd-05 RECEIVED DTE 1 HARRISON COUNTY JUL 28 2022
County Harrison Date received

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.

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

ALLISON M. ANDERSON
AUDITOR

Name		Street address, City, State, ZIP code	
1. Owner of property	David A. Miller	46415 Thornwood Ct, Sterling, VA 20165	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number of contact person	(202) 538-2290		
5. Email address of complainant	davidamiller_email@yahoo.com		
6. Complainant's relationship to property, if not owner	If more than one parcel is included, see "Multiple Parcels" on back.		
7. Parcel numbers from tax bill	Address of property		
09000592300	R7 T11 S10 NW 162.232A SR 800 Lane SR 800 Lane		
8. Principal use of property	Unknown	Text	
9. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -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
10. The requested change in value is justified for the following reasons: Valuation at Probate (2015) is \$4,032. Furthermore, this value is illiquid, cannot be sold, and has no meaningful market value. There is no land involved, this is 1/5 ownership in coal (deep coal) rights only. Owner is taxed more than surface & other mineral rights owners combined. Attachment 1: Probate Court of Crawford County, signed by Harrison County, 11/25/2015 with Value as \$4,032.00 (line 4, second page) Attachment 2: Mineral Valuation Report to provide Probate Court with estimate.			

- 11. 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 11" on back.
- 12. 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
- 13. If any improvements were completed in the last three years, show date _____ and total cost \$ _____
- 14. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown (Atch)
- 15. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. 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 economic impact on my property.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 7/27/2022 Complainant or agent D. A. Miller Signature Title (if agent) _____

Sworn to and signed in my presence, this 27 day of July year 2025

Notary [Signature] Signature

JOHN DANIEL YATES
Notary Public
Commonwealth of Virginia
Registration No. 7967495
My Commission Expires Apr 30, 2025

Tax year 2022 BOR no. 22-06 DTE 1 Rev. 08/21
County HARRISON Date received RECEIVED HARRISON COUNTY

Complaint Against the Valuation of Real Property

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

Notices will be sent only to those named below.

ALLISON M. ANDERSON
AUDITOR

Name		Street address, City, State, ZIP code	
1. Owner of property	<u>Anthony Rominger</u>	<u>845 Rd Y5 Hartford KS 66854</u>	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number of contact person	<u>740-510-5033</u>		
5. Email address of complainant			
6. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" on back.			
7. Parcel numbers from tax bill	Address of property		
<u>22-0091.999999</u>	<u>78685 Hamilton Ridge Rd Freeport OH 43703</u>		
8. Principal use of property			
9. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -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
<u>22-0091.999999</u>	<u>\$ 0</u>	<u>\$ 4810</u>	<u>\$ - 4810</u>
10. The requested change in value is justified for the following reasons: <u>I bought the property from my mother and found out after the fact that this trailer was no longer on the property and a different one was, so I've been trying to get all the stuff switched and fixed since I bought it. (The title I received wasn't the trailer being taxed, she never changed it)</u>			

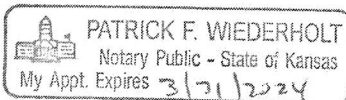
11. Was property sold within the last three years? Yes No Unknown If yes, show date of sale 10-4-19 and sale price \$ 20,000; and attach information explained in "Instructions for Line 11" on back.
12. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.
13. If any improvements were completed in the last three years, show date _____ and total cost \$ _____.
14. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown
15. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. 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 economic impact on my property.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 9/9/22 Complainant or agent Anthony Rominger Title (if agent) _____
Signature

Sworn to and signed in my presence, this 9th day of Sept year 2022

Notary Patricia Hellerolt
Signature



Tax year 2022 BOR no. 22-07 DTE 1M
 County HARR. Date received _____ RECEIVED ev. 02/19
 HARRISON COUNTY

Complaint Against the Valuation of a Manufactured or Mobile Home Taxed Like Real Property

NOV - 2 2022

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

Attach additional pages if necessary.
 Original complaint Counter complaint
 Notices will be sent only to those named below.

ALLISON M. ANDERSON
 AUDITOR

	Name	Street address, City, State, ZIP code	
1. Owner of home	<u>Robert Wolfe</u>	<u>45883 ANNAPOLIS Rd. Hopewell VA</u>	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number of contact person	<u>740-946-1110</u>		
5. Email address of complainant			
6. Complainant's relationship to home, if not owner			
If more than one home is included, see "Multiple Homes" on back.			
7. Registration number from tax bill	Address of home		
	<u>45891 ANNAPOLIS Rd Jewett</u>		
8. Principal use of home			
9. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Registration Number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
<u>110059</u>	<u>NONE</u>	<u>NONE</u>	<u>-17,895</u>
10. The requested change in value is justified for the following reasons: <u>TRAILER WAS DESTROYED IN FIRE</u>			

11. Was home 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 11" on back.
12. If home was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.
13. If any improvements were completed in the last three years, show date _____ and total cost \$ _____
14. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown
15. If you have filed a prior complaint on this home since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.
- The home was sold in an arm's length transaction. The home lost value due to a casualty.
 A substantial improvement was added to the home. Occupancy change of at least 15% had a substantial economic impact on my property.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 11-16-22 Complainant or agent [Signature] Title (if agent) _____

Sworn to and signed in my presence, this November year 2022

Notary Brook Noelle Hayhurst
 Signature



RECEIVED
HARRISON COUNTY

BOR NO. 4101-2208

NOV 30 2022

Tax year _____ BOR no. RECEIVED HARRISON COUNTY
County _____ Date received _____

DTE 1
Rev. 08/21

ALLISON M. ANDERSON
AUDITOR

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	
* 1. Owner of property	STANK RHONDA GORE	190 DEVORE ST CADIZ, OH 43907	
2. Complainant if not owner			
3. Complainant's agent			
* 4. Telephone number of contact person	1-716-546-3010		
5. Email address of complainant			
6. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" on back.			
7. Parcel numbers from tax bill	Address of property		
8. Principal use of property			
9. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -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
27-0007	0	2660	- 2660
10. The requested change in value is justified for the following reasons: SURRENDER TITLE TO MR. SAM TAYLOR - USED MOBILE HOME FOR STORAGE.			

11. 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 11" on back.

12. 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.

13. If any improvements were completed in the last three years, show date _____ and total cost \$ _____

14. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown

15. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- The property was sold in an arm's length transaction.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- Occupancy change of at least 15% had a substantial economic impact on my property.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 11-30-2022 Complainant or agent Rhonda Gore Signature _____ Title (if agent) _____

Sworn to and signed in my presence, this 30th day of November year 2022

Notary Melissa S. Everhart Signature _____ My Commission Exp. 1-21-2024



RECEIVED
HARRISON COUNTY

3402-0209

Tax year 2022

BOR no. _____

DTE 1
Rev. 12/22

County HARRISON

Date received _____

ALLISON M. ANDERSON
AUDITOR

JAN 11 2023

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.

ALLISON M. ANDERSON
AUDITOR

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.

HARRISON COUNTY

Name		Street address, City, State, ZIP code	
1. Owner of property	DAVID N. & CYNTHIA FRITZ	2800 Possum Hollow Rd SE New Phila, OH 44663	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 330-844-0994 david@fritz.eng.pro			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
7. Principal use of property			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -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
22-0000234.000	30,360	30,360	-30,360
9. The requested change in value is justified for the following reasons: SEE DESTROYED FORM. RAZED 5/2017.			

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 _____ and total cost \$ _____.

13. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. 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 economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

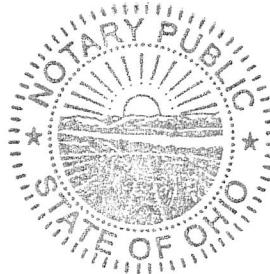
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 1/11/23 Complainant or agent (printed) DAVID N. FRITZ Title (if agent) OWNER

Complainant or agent (signature) *David N. Fritz*

Sworn to and signed in my presence, this 11 day of January 2023
(Date) (Month) (Year)

Notary *Jessica N. Mason*



JESSICA N. MASON
Notary Public,
State of Ohio

Commission Exp. June 14, 2023

Tax year 2023

BOR no. 3402-2210

DTE 1
Rev. 12/22

County HARRISON-TOWNSHIP WASHINGTON

Date received _____

RECEIVED
HARRISON COUNTY

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

JAN 18 2023

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

ALLISON M. ANDERSON
AUDITOR

Name		Street address, City, State, ZIP	
1. Owner of property		James Horner 31600 Ymca Road, Tippicanoe, OH 44699	
2. Complainant if not owner		Kimberly Ferrell - daughter (POA) 77990 Kinsay Orchard Rd, Freeport, OH 43973	
3. Complainant's agent			
4. Telephone number and email address of contact person Kim Ferrell - home (740) 658-3258, ferrellkimberly@hotmail.com			
5. Complainant's relationship to property, if not owner daughter of James Horner, (durable POA, also)			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
many manufactured Home on Parcel 30-0000108,000		31600 Ymca Road, Tippicanoe, Ohio 44699	
7. Principal use of property manufactured home - lived in up to Dec 2022 - no longer safe to live here			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -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
manufactured Home on 30-0000108,000	\$ 0.00	\$ 9200.00 ^{upon purchase 1971}	\$ - 9200.00
9. The requested change in value is justified for the following reasons: MANUFACTURED HOME has ceilings falling down, floor boards breaking through, mold and mildew growing on inside. Exit to outside through front is blocked off with debris. NOT healthy or safe for elderly (84yr old) parents to continue living there. A NEW CABIN STRUCTURE has been built on property - they moved to there, Dec 2022.			

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 NONE and total cost \$ NONE.

13. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. 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 economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 1-12-23 Complainant or agent (printed) Kimberly J. Ferrell Title (if agent) N/A

Complainant or agent (signature) Kimberly J Ferrell

Sworn to and signed in my presence, this 12 day of January 2023
(Date) (Month) (Year)

Notary Ronna L Tuckosh



RONNA L TUCKOSH
Notary Public, State of Ohio
My Commission Expires July 15, 2026

Tax year 2000-2022

BOR no. 3402-2211

DTE 1
RECEIVED
REV 12/22
HARRISON COUNTY

County HARRISON

Date received _____

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form. JAN 20 2023

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.

ALLISON M. ANDERSON
AUDITOR

	Name	Street address, City, State, ZIP code	
1. Owner of property	JOSEPH N AND STACY	88881	
2. Complainant if not owner	L AMAISMEDOR		
3. Complainant's agent			
4. Telephone number and email address of contact person	740-381-5709	JOE AMAISMEDOR @GMAIL.COM	
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill	Address of property		
110000250000	88881 BLUE RIDGE ROAD HARRISON OHIO 43916		
7. Principal use of property	RESIDENCE - CANYON TREE FARM		
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -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
	SEE ATTACHED	FROM MARY JANE	
	BECAUSE WE WOULD ASK FOR BACKPAY ON AS MANY YEARS AS POSSIBLE		00
9. The requested change in value is justified for the following reasons:			
WE WERE BOTH CHARGED FOR RADL ROAD			

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 _____ and total cost \$ _____

13. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- The property was sold in an arm's length transaction.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- 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 is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 1-20-2023 Complainant or agent (printed) _____ Title (if agent) _____

Complainant or agent (signature) 

Sworn to and signed in my presence, this 20th day of January 2023

Notary Melissa S. Everhart



Melissa S. Everhart
Notary Public,
State of Ohio
My Commission Exp.

1-21-2024

Tax year 2022 BOR no. 3402-2212 RECEIVED
 County HARRISON Date received _____ HARRISON COUNTY

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form. JAN 26 2023

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.

ALLISON M. ANDERSON
AUDITOR

	Name	Street address, City, State, ZIP code	
1. Owner of property	Jaimie D Huebner	88045 Willis Run Rd Uhrichsville Ohio 446	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 330-691-8051 jaimiesr1@gmail.com			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
7. Principal use of property			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -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
15-0210	0	16,900.00	-16,900.00
15 0036	0	2300.00	-2300.00
9. The requested change in value is justified for the following reasons: Tore down 3 years ago because of Floors Falling in			

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 _____ and total cost \$ _____.

13. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. 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 economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 1-26-23 Complainant or agent (printed) Jaimie D Huebner Title (if agent) _____

Complainant or agent (signature) Jaimie D Huebner

Sworn to and signed in my presence, this 26th day of January 2023

Notary Melissa S. Everhart



Melissa S. Everhart
Notary Public,
State of Ohio
My Commission Exp.

1-21-2024

Tax year 2022

BOR no. _____

County HARRISON

Date received JAN 30 2023

Complaint Against the Assessment of Real Property Other than Market Value

Use this form to file board of revision complaints regarding assessment issues other than the market value of property. Complaints against market value should be filed on the DTE Form 1. Answer all questions and type or print additional information. Read the instructions on the back before completing form. Attach additional pages as necessary.

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

	Name	Street address, City, State, ZIP code
1) Owner of property	<u>JOHN O. TABACCH</u>	<u>PO Box 283, Croyz, OH 43907</u>
2) Complainant if not owner		
3) Complainant's agent		
4) Telephone number of contact person	<u>740-491-0379</u>	
5) Email address of complainant	<u>JTABACH@GMAIL.COM</u>	
6) Complainant's relationship to property, if not owner		

If more than one parcel number is included, see "Multiple Parcels" on back

7) Parcel number from tax bill	# Acres, if applicable	Address of property
	<u>SEE ATTACHMENT 1</u>	

8) Indicate the reason for this complaint:

- The classification of property under RC 5713.041.
- The classification of property under RC 319.302.
- The denial of a CAUV application filed under RC 5713.32 or the conversion of CAUV property under RC 5713.35.
- The valuation of property on the agricultural land tax list.
- Determination whether good cause exists for land on the CAUV program to remain idle under RC 5713.30(A)(4).
- Determination of whether good cause exists for the failure to file a CAUV renewal application pursuant to RC 5713.351.
- The denial of the partial exemption of a qualifying child care center under RC 323.16.

9) If the complaint is seeking a change in the value of the property, complete line 9. Complainants appealing other issues do not need to complete this line.

Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
<u>01-0000252000</u>	<u>CAUV</u>	<u>NON CAUV</u>	

10) The requested change is justified for the following reasons: SEE ADDENDUM

11) If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.
 The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalty of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct, and complete.

Date 1/30/2023 Complainant or agent [Signature] Signature

Sworn to and signed in my presence, this 30th day of JANUARY year 2023

Notary Melissa S. Everhart Signature

Melissa S. Everhart
Notary Public,
State of Ohio
My Commission Exp. 1-21-2029



Tax year 2022
County Harrison

BOR no. _____
Date received _____

FEB - 2 2023

Complaint Against the Assessment of Real Property Other than Market Value

Use this form to file board of revision complaints regarding assessment issues other than the market value of property. Complaints against market value should be filed on the DTE Form 1. Answer all questions and type or print all information. Read the instructions on the back before completing form. Attach additional pages as necessary.

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

Name		Street address, City, State, ZIP code	
1) Owner of property	Andrew Kuhns	27200 Friendly Ridge Tippecanoe OH 44699	
2) Complainant if not owner			
3) Complainant's agent			
4) Telephone number of contact person	740-658-3770		
5) Email address of complainant			
6) Complainant's relationship to property, if not owner	OWNER		
If more than one parcel number is included, see "Multiple Parcels" on back			
7) Parcel number from tax bill	# Acres, if applicable	Address of property	
30-220.000	15.11	Same	
30-221.000	47.56		
8) Indicate the reason for this complaint:			
<input type="checkbox"/> The classification of property under RC 5713.041. <input type="checkbox"/> The classification of property under RC 319.302. <input checked="" type="checkbox"/> The denial of a CAUV application filed under RC 5713.32 or the conversion of CAUV property under RC 5713.35. <input type="checkbox"/> The valuation of property on the agricultural land tax list. <input type="checkbox"/> Determination whether good cause exists for land on the CAUV program to remain idle under RC 5713.30(A)(4). <input type="checkbox"/> Determination of whether good cause exists for the failure to file a CAUV renewal application pursuant to RC 5713.351. <input type="checkbox"/> The denial of the partial exemption of a qualifying child care center under RC 323.16.			
9) If the complaint is seeking a change in the value of the property, complete line 9. Complainants appealing other issues do not need to complete this line.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value

10) The requested change is justified for the following reasons: Ask to be put back on CAUV for tax year 2022 and remove recoupment fee.

11) If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

Melissa S. Everhart

Notary Public,
State of Ohio

My Commission Exp. _____

I declare under penalty of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct, and complete.

Date _____ Complainant or agent X Andrew C. Kuhns Signature _____ (Agent)

Sworn to and signed in my presence, this 3rd day of February 2023 year _____

Notary Melissa S. Everhart Signature

