

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	Robert J Carraher	5469 Cork Cold Springs Rd Geneva Ohio 44041
2. Complainant if not owner		
3. Complainant's agent		
4. Telephone number of contact person	(440) 466-3590	
5. Email address of complainant	westernbob@hotmail.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
22-018-00-016-00	5469 Cork Cold Springs Rd Geneva Ohio 44041

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
22-018-00-016-00	\$80,000	\$124,800	

10. The requested change in value is justified for the following reasons:
 Stone & mortar part of the wet basement walls is disintegrating making the stones fall out and needs to be replaced with concrete block to fix correctly. The lg back deck is exposed and at 30 yrs old is sagging & badly weathered & needs replaced. Soffit & gutters & siding & front ramp need replaced/repaired

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. 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 03/31/2025 Complainant or agent Robert J Carrah Title (if agent) _____
 Signature