

Received By:

75690

MAR 23 2023

Tax year 2022 BOR no. 22-43
County Hancock Date received 3/23/2023

DTE 1
Rev. 12/22

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.

Form with sections for Owner of Property, Complainant, Agent, Telephone number, Relationship, Parcel numbers, Principal use, and Market value table.

10. Was property sold within the last three years? Yes [X] No [] Unknown [] If yes, show date of sale 08/04/20 and sale price \$4,180,000

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 N/A and total cost \$ N/A

13. Do you intend to present the testimony or report of a professional appraiser? Yes [] No [X] 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;
Property's occupancy changed by 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 2/28/23 Complainant or agent (printed) Mark H. Gillis, Esq. Title (if Agent) Attorney for Complainant

Complainant or agent (signature)
Sworn to and signed in my presence, this 28 day of FEBRUARY, 2023.

Notary [Signature]



Cassidy Beaver
Notary Public, State of Ohio
My Commission Expires 10-25-2026
75690

(7) and (9) Continuation

(7)

(9) Complainant's Opinion Of:

Parcel Number	Address Of Property	(A) Market Value	(B) Current Value	(C) Change in Value
1 58-0001010514	1709 Medical Blvd. Findlay, OH 45840	3,981,600	2,633,750	1,347,850
2 58-0001010515	Medical Blvd. Findlay, OH 45840	198,400	136,550	61,850
TOTALS		4,180,000	2,770,300	1,409,700