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Rev.	1	2	12	2

Tax year_2022	BOR no2022 - 006
county Sandusky	Date received 1/26/23

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.

Name Street address, City, State, ZIP code Store Street address, City, State, ZIP code Store Store State ZIP code ZI		on the ba	Orig		Counter co	l pages as necessar omplaint I below	у.		
1) Owner of property 2) Complainant if not owner 3) Complainant if not owner 3) Complainant's agent 4) Telephone number of contact person 5) Email address of complainant 5) Complainant's relationship to property, if not owner 1) Towner than one parcel number is included, see "Multiple Parcels" on back 7) Percel number from tax bill 1/4 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 3 - 2 - 3 - 4 - 3 - 4 - 4 - 4 - 4 - 4 - 4 - 4					T				
2) Complainant's agent 3) Complainant's agent 4) Telephone number of contact person 4/8 3.55 3.76 7 5) Email address of complainant 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 4/4 - 2.3 - 0.0 - 0.0 4 - 0.0 3.2 . (al. 4/4 - 2.3 - 0.0 - 0.0 4 - 0.0 3.2 . (al. 4/4 - 2.3 - 0.0 - 0.0 4 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 4 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 4 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 4 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 4 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 1 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 1 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 1 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 1 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 1 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 1 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 1 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 1 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 1 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 1 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 1 - 0.0 3.3 . (al. 4/4 - 2.3 - 0.0 - 0.0 1 - 0.0 3.3 . (al. 4/4 - 2.3 . (al. 4/4	1) Owner of property		Ripaler	77					
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Parcel number from tax bill					d soo "Muk	tinla Darsala" on h	- ale		
/ 4 - 2 - 0 - 0 - 5 - 0 75 - 43 / 4 - 2 3 - 0 - 0 - 0 0 4 - 0 3 2 . 6 / 4 - 2 3 - 0 - 0 - 0 0 4 - 0 47 , 71 3) 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 5713.36(A)(4). Determination of whether good cause exists for land on the CAUV program to remain idle under RC 5713.36(A)(4). Determination of whether good cause exists for land on the CAUV program to remain idle under RC 5713.36(A)(4). The denial of the partial exemption of a qualifying child care center under RC 323.16. If the complaint is seeking a change in the value of the property, complete line 9. Complainants appealing other issues do not need complete this line. Parcel number	7) Parcel number from tax	bill	# Acres. if ar	oplicable			ack		
YU - 23	14-22-00-0	005-00			Address	or property			
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(Full Market Value) (Full All Expended on the Complete of the Co	The denial of the par If the complaint is seekin complete this line.	her good cause rtial exemption g a change in t	exists for the fa of a qualifying the value of th Column ainant's Opir	ailure to file a CAUV g child care center le property, comple A nion of Value	renewal appli under RC 32 e line 9. Cor	cation pursuant to RC 23.16. mplainants appealing Column B	5713.351. g other issues do not need to Column C		
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Date Title (if agent) Sworn to and signed in my presence, this day of vear	☐ The complainant has	complied with	the requireme	on to be completed ents of R.C. section	-5715 19/Δ\/	6)/h) and (7) and no	wide a matica matica at the		
Sworn to and signed in my presence, this day of vear	0	oot, and oomp	icic.	Tollow 1 #	to				
veal	Sworn to and signed in my	presence, this	S	(/ Signature					
							year		

Application no	o	County_SOr	ndusky	_Tax year	2023	DTE 109
		or the Valuation				Rev. 01/19
	File with the coun	ty auditor prior to the	first Monday in N	March. Includ	de a \$25 fili	na fee.
1. Owner's na	ime bradley & Ji	amie steams	<u>419-355-371</u>	Ø7E	-mail bSt	ng fee. CATNS5@WOh.rr.
2. Owner's ma	ailing address 147(OCR 41 Fren	nont, oh 4	3420		with the same of t
3.						
	cel number	Acres	Parce	el number		Acres
	00-0005-00	75.43_				
	00-004-00	32.61				
14-25-	00-0019-00	47,71				
4 K4b - TOTA						
gross incor	L acreage being use ne from agricultural r the last three years	ed exclusively for commo	ercial agriculture p acreage is <u>ten or</u>	urposes is <u>le</u> more acres,	ss than ten specify the	acres, show the total number of acres and
Year	Farmed Acres	Use of Land (Crop)	Units/Acre	Pric	e/Unit	Gross Income
Last year	128,57	CORN/BURN	100			
2 years ago	121,57	COCN/BLAND	7.50			
3 years ago	128,57	Corn / Brass				
5-List the acre	eage in each crop or	land use for the current	t year. The entire a	acreage above	e must be a	ccounted for below.
Anticipated la	and use for the curre	nt year:				Acres
Commodity crops – corn/soybeans/wheat/oats						128.57
	at least twice a year					O
Permanent pasture – used for commercial animal husbandry						0
		quous to 10 (ten) acres	of farmed land			236'
Commercial t						0
	- nursery stock/vege - minimum 1 (one) a					0
		cre per nouse	_			1.0
Roads/waste/pond Conservation program – CRP/CREP/etc. (provide the contract and map)						5,62
Conservation practices limited to 25% or less of total acreage (provide map)						
Other use, e.g. agritourism, biofuel production						0
Total acres – must match acres above						155,78
6. Is this land farmed by someone other than the owner? (yes/no) If yes, provide contact information (name and phone number)						
I declare under penalties of perjury that I have examined this application and, to the best of my knowledge and belief, it is true, correct and complete. I authorize the county auditor to inspect this property and I agree to provide documentation of income, if requested, to verify the accuracy of this application.						
Signature of owner: Date: 1-20-23						
County Auditor's Use Only						
Receipt for Payment of Fee: I hereby certify that the owner paid the filing fee of \$25 on the date this application was filed.						
County audito	nr.		Dole filed will	JAN 267		25.00 ek 2198
County auditor Date filed with county auditor AUDITOR						\$30
Name on tax list Taxing district SANDUParce Number Number FREMONT OHIO					Number of acres	