

Clear Form

2023-013

DTE 1 Rev. 12/22

Tax year _____ BOR no. _____
County MADISON 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.

1. Owner of property		Stephen FH & BARBARA J.S. REVARD		8585 Plain City Geo RD PLAIN CITY, OH 43064	
2. Complainant if not owner					
3. Complainant's agent					
4. Telephone number and email address of contact person 614-580-4469 bsrevard@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		
01-00275.002			PLAIN CITY GEO RD PLAIN CITY, OH. 43064		
01-00276.000			PLAIN CITY GEO RD PLAIN CITY, OH. 43064		
7. Principal use of property 01-00275.002 RECREATION, 01-00276.000 Agriculture					
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		
01-00275.002	\$2650.00	38,970.00	-36,320.00		
01-00276.000	\$14,515.00	29,030.00	-14,515.00		
9. The requested change in value is justified for the following reasons: ① 01-00275.002 is only .61 of an acre, not buildable and used for agriculture ② 01-00276.00 is on flood plain, floods frequently and becomes inaccessible					

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

MADISON COUNTY AUDITOR
2024 FEB -1 PM 1:08
LONDON, OHIO

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 _____ Complainant or agent (printed) _____ Title (if agent) _____

Complainant or agent (signature) _____

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

Notary _____

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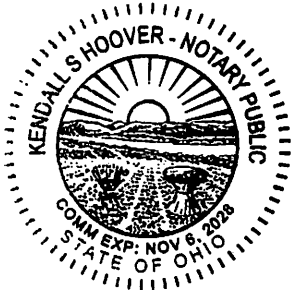
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 1/26/2024 Complainant or agent (printed) Stephen F.H. REVARD Title (if agent) _____
~~BARBARA J.S. REVARD~~

Complainant or agent (signature) *Stephen F.H. Revard* *Barbara J.S. Revard*

Sworn to and signed in my presence, this 26th day of January 2024
(Date) (Month) (Year)

Notary *K. Hoover*



The undersigned hereby certifies that the above-named person
 is a resident of the State of New York and is qualified to
 hold the office of Justice of the Peace in the Town of
 ... County of ... State of New York.
 Witness my hand and seal of office this ... day of ...
 19... at ...

GABRIEL H. ...
 ...

...

...

