FILED CLARK COUNTY AUDITOR

| MAR 2 6 2025 | Tax year |)24 | _ во | R no. 24-040 | Rev. 12/22 | | |
|---|---|--|---|-------------------|-----------------------|--|--|
| HILLARY HAMILTON | CountyCL | _ARK | _ Dat | e received 3/26/ | 2025 | | |
| | and the second second | the Valuat | | of Real Propert | | | |
| 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. | | | | | | | |
| | Nar | | | | City, State, ZIP code | | |
| Owner of property Springfield Hospitali | | ty LLC 5879 McInnis Rd., Dublin, OH 43016 | | blin, OH 43016 | | | |
| | | hool District Bd. of Educ. 4435 Bosart Road, Springfield, OH 45503 | | | | | |
| 3. Complainant's agent | Dahad M. Maraus Ca | | 612 Park Street, Ste. 300, Columbus, OH 43215 | | Columbus, OH 43215 | | |
| 4. Telephone number and email address of contact person 614-573-3015 | | | | | | | |
| bmorrow@parkstretlg.com | | | | | | | |
| 5. Complainant's relationship to property, if not owner School District | | | | | | | |
| If more than one parcel is included, see "Multiple Parcels" Instruction. | | | | | | | |
| 6. Parcel numbers from tax bill | | Address of property | | | | | |
| 3200200001100001 | 3200200001100001 | | 2302 Saint Paris Connector, Springfield, OH 45504 | | | | |
| | | | | | | | |
| | | | | | | | |
| 7. Principal use of property | Commercial Vacant | | | | | | |
| 8. The increase or decrease in m | 8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C. | | | | | | |
| | Column A | | | Column B | Column C | | |
| Parcel number | Complainant's Opinior | | /- | Current Value | Change in Value | | |
| | (Full Market Val | ue) | () | ull Market Value) | | | |
| 3200200001100001 | | 600,000 | | 187,310 | 412,690 | | |
| | | | | | | | |
| | | | | | | | |
| | 9. The requested change in value is justified for the following reasons: | | | | | | |
| Recent sale of one parcel is the best evidence of value. | | | | | | | |
| | | | | | | | |
| 40 Manager de la designation de la constantination de la constantin | In the second of the | | | - 16 | 8/2/2023 | | |
| 10. Was property sold within the last three years? 🔞 Yes 🗌 No 📋 Unknown If yes, show date of sale | | | | | | | |
| and sale price \$ 600,000 ; 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 las for the valuation change requested must be one of those below. 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% economic impact on my property. | had a substantial | | |
| 15. If the complainant is a legislative authority and the complaint complainant, R.C. 5715.19(A)(8) requires this section to be complained. | | property not owned by the | | |
| The complainant has complied with the requirements of F adoption of the resolution required by division (A)(6)(b) of | | | | |
| I declare under penalties of perjury that this complaint (including knowledge and belief is true, correct and complete. | any attachments) has been examined by | y me and to the best of my | | |
| Date 3-21-25 Complainant or agent (printed) Rol | bert M. Morrow Title (if agent) | Atty for Bd of Educ | | |
| Complainant or agent (signature) | w | | | |
| Sworn to and signed in my presence, this | day ofMarch | 2025 | | |
| Notary Kendal C Mig | (Month) KENDAL C. NININ Attorney At Lav | | | |
| | Notary Public, State of My commission has no exp | of Ohlo piration date | | |