

Clear Form

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FEB 02 2026

DTE 2
Rev. 12/22Tax year 2025BOR no. #8County Coshocton

Date received _____

Coshocton County Auditor

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.

☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1) Owner of property	William & Martha Hershberger	4301 TR 629 Millersburg OH 44654	
2) Complainant if not owner			
3) Complainant's agent			
4) Telephone number of contact person	330-201-6835		
5) Email address of complainant	marthawilliam2008@gmail.com		
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	# Acres, if applicable	Address of property	
026-00000323-05	44.732	N-A	
8) Indicate the reason for this complaint:			
<input type="checkbox"/> The classification of property under RC 5713.041. <input type="checkbox"/> The classification of property under RC 319.302. <input type="checkbox"/> The denial of a CAUV application filed under RC 5713.32 or the conversion of CAUV property under RC 5713.35. <input type="checkbox"/> The valuation of property on the agricultural land tax list. <input type="checkbox"/> Determination whether good cause exists for land on the CAUV program to remain idle under RC 5713.30(A)(4). <input checked="" type="checkbox"/> Determination of whether good cause exists for the failure to file a CAUV renewal application pursuant to RC 5713.351. <input type="checkbox"/> The denial of the partial exemption of a qualifying child care center under RC 323.16.			
9) If the complaint is seeking a change in the value of the property, complete line 9. Complainants appealing other issues do not need to complete this line.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value

10) The requested change is justified for the following reasons: When we purchased this piece of property in June of 2025 we thought the property was in CAUV and didn't know that the previous owner had not renewed the CAUV. We are filing an initial application to get the property back in CAUV as we plan to continue with commercial farming and timber. We are asking the BOR to waive the recoupment charges.

11) 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.

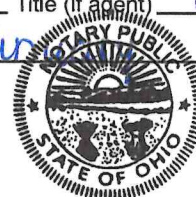
I declare under penalty of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct, and complete.

Date 1-7-26 Complainant or agent Martha Hershberger Title (if agent) owner

Sworn to and signed in my presence, this 9th

day of Jan

Notary William M. Gunney Signature



Holly M. Tenney
Notary Public, State of Ohio
My Commission Expires
June 24, 2030

Good day Mr. and Mrs. Hershberger,

The Coshocton county auditor office has received your application and payment for CAUV, and process that. However, on the DTE 2 (Complaint) you missed filling out #10. This will need to be filled out and attached and mailed back to us or dropped off in office at 349 Main St., Coshocton, OH 43812. Also we will need a copy of the entire Forest Management Plan, not just the signature page.

If you have any question please feel free to give us a call at 740-622-1243.

I filled it out now. Sorry about that. - Martha

COPY

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Application no. _____ County _____ Tax year _____

JAN 20 2026 109
REV. 01/21

Initial Application for the Valuation of Land at Its Current Agricultural Use

File with the county auditor prior to the first Monday in March. Include a \$25 filing fee.

1. Owner's name William Martha Hershberger Phone 330-201-6335 E-mail marthawilliam2008@gmail.com
2. Owner's mailing address 4301 Township Rd 629 Millerburg OH 44654

3.

Parcel number	Acres	Parcel number	Acres
026-00000323-05	44.732		

4. If the TOTAL acreage being used exclusively for commercial agriculture purposes is less than ten acres, show the total gross income from agricultural products. If the TOTAL acreage is ten or more acres, specify the number of acres and land use for the last three years.

Year	Farmed Acres	Use of Land (Crop)	Units/Acre	Price/Unit	Gross Income
Last year					
2 years ago					
3 years ago					

5. List the acreage in each crop or land use for the current year. The entire acreage above must be accounted for below.

Anticipated land use for the current year:	Acres
Commodity crops – corn/soybeans/wheat/oats	22.0098
Hay – baled at least twice a year	
Permanent pasture – used for commercial animal husbandry	
Noncommercial woodland – contiguous to 10 (ten) acres of farmed land	
Commercial timber	22.6900
Other crops – nursery stock/vegetables/flowers	
Homesite(s) – minimum 1 (one) acre per house	
Roads/waste/pond	
Conservation program – CRP/CREP/etc. (provide the contract and map)	
Conservation practices limited to 25% or less of total acreage (provide map)	
Other use, e.g. agritourism, biofuel production	
Total acres – must match acres above	

6. Is this land farmed by someone other than the owner? yes (yes/no) If yes, provide contact information (name and phone number) Scott Moore, 330-763-0411

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: [Signature] Date: 1-14-26

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 auditor Grant Daugherty /JM Date filed with county auditor 20 Jan 26 Mail
Name on tax list 716 Taxing district 716-323-05 Parcel number 44.7320 Number of acres

CAUV

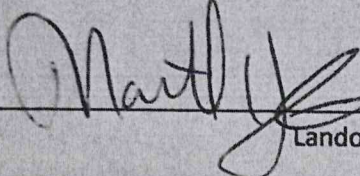
Forest Management Plan

Client Name: William and Martha Hershberger

Not an
EQIP
level plan

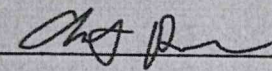
Primary Contact: Martha Hershberger
Phone Number: 330.201.6335
Email Address: marthawilliam2008@gmail.com
Mailing Address: 4301 T.R. 629, Millersburg, OH
44654
Property Address: C.R. 19, Killbuck, OH 44637
Property Parcel IDs: 0260000032305

Property County, State: Coshocton, OH
Deeded Acreage¹: 44.7320
Planned Acreage²: 21.3829
Carbon Agreement Acreage³: 0.00
Plan Status: New
Prepared: 10/2/2025
Expires: 10/2/2035

x  Landowner


Date: 10-10-25

Prepared by:

x 

Date: 10/02/2025

Anthony F. Pappas, SAF Certified Forester #308671

x 

Date: 07/10/2025

Emma Clark, Regional Consultant/ Forest Technician



Mission Statement

"To wisely manage, conserve, and utilize our shared natural resources for the benefit of not only economic returns but also to the perpetual existence of our forests and the life within them using scientifically based and ecologically-sound forest and habitat management principles."

Additional deliverables to Client emailed separately:

- Heritage Habitat Services Packet
- Inventory data
- GIS data
- Other related documents



¹ County Assessor's/Auditor's Office

² In-house ArcPro GIS calculation of Client's forested acreage.

³ Landowner records

[illegible]