

PETITION TO THE VALUE ADJUSTMENT BOARD REQUEST FOR HEARING

Section 194.011, Florida Statutes Alt Key 386 3621

You have the right to an informal conference with the property appraiser. This conference is not required and does not change your filing due date. You can present facts that support your claim and the property appraiser can present facts that support the correctness of the assessment. To request a conference, contact your county property appraiser.

For portability of homestead assessment difference, use the Petition to the Value Adjustment Board – Transfer of Homestead Assessment Difference – Request for Hearing Form (DR-486PORT). For deferral or penalties, use the Petition to the Value Adjustment Board – Tax Deferral or Penalties – Request for Hearing Form (DR-486DP). Forms are incorporated, by reference, in Rule 12D-16.002, Florida Administrative Code.

	ERX OF THE VAL	THEADINGUNE	NT EQUARD (
Petition# 2024-0215	County Lake		ax year 2024	Date received 9.12.24			
	MPLEVED BY J	HEPENMONIER	bacak in Alfred				
PART 1. Taxpayer Information	Š						
Taxpayer name: American Homes 4 Rent, LLC; AR I	easing Company	Representative: I Parcel ID and	Ryan, LLC c/o	Robert Peyton			
Mailing address Ryan, LLC for notices 16220 North Scottsdale F Scottsdale, AZ 85254	td, Ste 650	physical address or TPP account #	06-23-26-001 3691 Briar R	10-000-13300 Run Drive			
Phone 954-740-6240		Email	ResidentialA	ppeals@ryan.com			
The standard way to receive information is by							
I am filing this petition after the petition de documents that support my statement.	adline. I have attac	hed a statement of	of the reasons	I filed late and any			
I will not attend the hearing but would like m your evidence to the value adjustment boar evidence. The VAB or special magistrate m	d clerk. Florida law a uling will occur unde	llows the property or the same statuto	appraiser to cro ory guidelines a	oss examine or object to your s if you were present.)			
Type of Property	al and miscellaneou ralor classified use	Is High-water re	-	Historic, commercial or nonprofit Business machinery, equipment			
PART 2. Reason for Petition Check	cone. If more than	one, file a separ	ate petition.	n e station de la companya de la com La companya de la comp			
Real property value (check one) Denial of classification	se 🗌 increase	Denial of exe	mption Select of	or enter type:			
 Parent/grandparent reduction Property was not substantially complete or Tangible personal property value (You must return required by s.193.052. (s.194.034, F) Refund of taxes for catastrophic event 	st have timely filed a	 Denial for late filing of exemption or classification (Include a date-stamped copy of application.) Qualifying improvement (s. 193.1555(5), F.S.) or change of ownership or control (s. 193.155(3), 193.1554(5), or 193.1555(5), F.S.) 					
Check here if this is a joint petition. Atta determination that they are substantially				erty appraiser's			
5 Enter the time (in minutes) you think you by the requested time. For single joint pet group.	itions for multiple un	its, parcels, or acc	ounts, provide t	the time needed for the entire			
My witnesses or I will not be available to	•						
You have the right to exchange evidence with evidence directly to the property appraiser at appraiser's evidence. At the hearing, you have	least 15 days befor we the right to have	e the hearing and witnesses sworn.	l make a writte	n request for the property			
You have the right, regardless of whether you of your property record card containing inform information redacted. When the property app to you or notify you how to obtain it online.	nation relevant to th	e computation of	your current as	ssessment, with confidential			

Your petition will not be complete until you pay the filing fee. When the VAB has reviewed and accepted it, they will assign a number, send you a confirmation, and give a copy to the property appraiser. Unless the person filing the petition is completing part 4, the taxpayer must sign the petition in part 3. Alternatively, the taxpayer's written authorization or power of attorney must accompany the petition at the time of filing with the signature of the person filing the petition in part 5 (s. 194.011(3), F.S.). **Please complete one of the signatures below.**

PART 4. Employee, Attorney, or Licensed Professional Signature Complete part 4 if you are the taxpayer's or an affiliated entity's employee or you are one of the following licensed representatives. I am (check any box that applies): An employee of		
Under penalties of perjury, I declare that I am the owner of the property described in this petition and that I have read petition and the facts stated in it are true. Signature, taxpayer Print name Date PART 4. Employee, Attorney, or Licensed Professional Signature Complete part 4 if you are the taxpayer's or an affiliated entity's employee or you are one of the following licensed representatives. I am (check any box that applies): An employee of	npleted power of attorney or authorization for representation to this form.	hout attaching a completed power of attorney or a itten authorization from the taxpayer is required for
PART 4. Employee, Attorney, or Licensed Professional Signature Complete part 4 if you are the taxpayer's or an affiliated entity's employee or you are one of the following licensed representatives. I am (check any box that applies):	ury, I declare that I am the owner of the property described in this petition and that I have read this	der penalties of perjury, I declare that I am the ow
Complete part 4 if you are the taxpayer's or an affiliated entity's employee or you are one of the following licensed representatives. I am (check any box that applies): An employee of	gnature, taxpayer Print name Date	Signature, taxpayer
representatives. I am (check any box that applies): An employee of	ttorney, or Licensed Professional Signature	RT 4. Employee, Attorney, or Licensed Profess
An employee of	are the taxpayer's or an affiliated entity's employee or you are one of the following licensed	
A Florida Bar licensed attorney (Florida Bar number). A Florida real estate appraiser licensed under Chapter 475, Florida Statutes (license number). A Florida real estate broker licensed under Chapter 475, Florida Statutes (license number). A Florida certified public accountant licensed under Chapter 473, Florida Statutes (license number). I understand that written authorization from the taxpayer is required for access to confidential information from the prapraiser or tax collector. Under penalties of perjury, I certify that I have authorization to file this petition on the taxpayer's behalf, and I declar am the owner's authorized representative for purposes of filing this petition and of becoming an agent for service of under s. 194.011(3)(h), Florida Statutes, and that I have read this petition and the facts stated in it are true	applies):	m (check any box that applies):
A Florida real estate appraiser licensed under Chapter 475, Florida Statutes (license number		
□ A Florida real estate broker licensed under Chapter 475, Florida Statutes (license number	ed attorney (Florida Bar number).	A Florida Bar licensed attorney (Florida Bar num
□ A Florida real estate broker licensed under Chapter 475, Florida Statutes (license number	e appraiser licensed under Chapter 475, Florida Statutes (license number	A Florida real estate appraiser licensed under C
A Florida certified public accountant licensed under Chapter 473, Florida Statutes (license number		
I understand that written authorization from the taxpayer is required for access to confidential information from the properties of perjury, I certify that I have authorization to file this petition on the taxpayer's behalf, and I declar am the owner's authorized representative for purposes of filing this petition and of becoming an agent for service of under s. 194.011(3)(h), Florida Statutes, and that I have read this petition and the facts stated in it are true.		
am the owner's authorized representative for purposes of filing this petition and of becoming an agent for service of under s. 194.011(3)(h), Florida Statutes, and that I have read this petition and the facts stated in it are true.		
Signature, representative Print name Date PART 5. Unlicensed Representative Signature		· · · · · · · · · · · · · · · · · · ·
Signature, representative Print name Date PART 5. Unlicensed Representative Signature	or. ury, I certify that I have authorization to file this petition on the taxpayer's behalf, and I declare that zed representative for purposes of filing this petition and of becoming an agent for service of proce	praiser or tax collector. Ider penalties of perjury, I certify that I have author In the owner's authorized representative for purport
Complete part 5 if you are an authorized representative not listed in part 4 above. I am a compensated representative not acting as one of the licensed representatives or employees listed in part AND (check one) Attached is a power of attorney that conforms to the requirements of Part II of Chapter 709, F.S., executed with taxpayer's authorized signature OR I the taxpayer's authorized signature is in part 3 of this form. I am an uncompensated representative filing this petition AND (check one) the taxpayer's authorization is attached OR I the taxpayer's authorized signature is in part 3 of this form.	or. ury, I certify that I have authorization to file this petition on the taxpayer's behalf, and I declare that zed representative for purposes of filing this petition and of becoming an agent for service of proce , Florida Statutes, and that I have read this petition and the facts stated in it are true.	praiser or tax collector. Ider penalties of perjury, I certify that I have author in the owner's authorized representative for purposed der s. 194.011(3)(h), Florida Statutes, and that I
Complete part 5 if you are an authorized representative not listed in part 4 above. I am a compensated representative not acting as one of the licensed representatives or employees listed in part AND (check one) Attached is a power of attorney that conforms to the requirements of Part II of Chapter 709, F.S., executed with taxpayer's authorized signature OR I the taxpayer's authorized signature is in part 3 of this form. I am an uncompensated representative filing this petition AND (check one) the taxpayer's authorized signature is attached OR I the taxpayer's authorized signature is in part 3 of this form.	or. ury, I certify that I have authorization to file this petition on the taxpayer's behalf, and I declare that zed representative for purposes of filing this petition and of becoming an agent for service of proce , Florida Statutes, and that I have read this petition and the facts stated in it are true. T. Perform	praiser or tax collector. Inder penalties of perjury, I certify that I have author in the owner's authorized representative for purpose der s. 194.011(3)(h), Florida Statutes, and that I Robert Z. Perform
 I am a compensated representative not acting as one of the licensed representatives or employees listed in part AND (check one) Attached is a power of attorney that conforms to the requirements of Part II of Chapter 709, F.S., executed with taxpayer's authorized signature OR in the taxpayer's authorized signature is in part 3 of this form. I am an uncompensated representative filing this petition AND (check one) the taxpayer's authorized signature is in part 3 of this form. 	or. ury, I certify that I have authorization to file this petition on the taxpayer's behalf, and I declare that zed representative for purposes of filing this petition and of becoming an agent for service of proces, Florida Statutes, and that I have read this petition and the facts stated in it are true. Image: Text representative Robert Peyton 9/10/2024 e, representative Print name Date	praiser or tax collector. Inder penalties of perjury, I certify that I have author in the owner's authorized representative for purpose der s. 194.011(3)(h), Florida Statutes, and that I is
taxpayer's authorized signature OR the taxpayer's authorized signature is in part 3 of this form. I am an uncompensated representative filing this petition AND (check one) the taxpayer's authorization is attached OR the taxpayer's authorized signature is in part 3 of this form.	or. ury, I certify that I have authorization to file this petition on the taxpayer's behalf, and I declare that zed representative for purposes of filing this petition and of becoming an agent for service of proce , Florida Statutes, and that I have read this petition and the facts stated in it are true. <u>T. Perfor</u> <u>Print name</u> <u>9/10/2024</u> e, representative Signature	praiser or tax collector. Inder penalties of perjury, I certify that I have author in the owner's authorized representative for purpose der s. 194.011(3)(h), Florida Statutes, and that I is
the taxpayer's authorization is attached OR the taxpayer's authorized signature is in part 3 of this form.	or. ury, I certify that I have authorization to file this petition on the taxpayer's behalf, and I declare that zed representative for purposes of filing this petition and of becoming an agent for service of proces , Florida Statutes, and that I have read this petition and the facts stated in it are true. <u> T. Purter</u> <u> Robert Peyton</u> <u> 9/10/2024</u> e, representative <u> Print name</u> <u> Date</u> Representative Signature are an authorized representative not listed in part 4 above.	praiser or tax collector. Inder penalties of perjury, I certify that I have author in the owner's authorized representative for purpose der s. 194.011(3)(h), Florida Statutes, and that I is
	or. ury, I certify that I have authorization to file this petition on the taxpayer's behalf, and I declare that zed representative for purposes of filing this petition and of becoming an agent for service of proces, Florida Statutes, and that I have read this petition and the facts stated in it are true. Image: the true of true of the true of true of true of the true of the true of the true of true of true of true of the true of the true of the true of the true of tr	praiser or tax collector. Inder penalties of perjury, I certify that I have author in the owner's authorized representative for purpose der s. 194.011(3)(h), Florida Statutes, and that I is
I understand that written authorization from the taxpayer is required for access to confidential information from the required for access to confidential information for access to confidential information for access to con	or. ury, I certify that I have authorization to file this petition on the taxpayer's behalf, and I declare that zed representative for purposes of filing this petition and of becoming an agent for service of proces, Florida Statutes, and that I have read this petition and the facts stated in it are true. Image: proceeding the service of process, Florida Statutes, and that I have read this petition and the facts stated in it are true. Image: proceeding the service of process, Florida Statutes, and that I have read this petition and the facts stated in it are true. Image: proceeding the service of process, Florida Statutes, and that I have read this petition and the facts stated in it are true. Image: proceeding the service of process, Florida Statutes, and that I have read this petition and the facts stated in it are true. Image: proceeding the service of process, Florida Statutes, and that I have read this petition and the facts stated in it are true. Image: proceeding the service of process, Florida Statutes, and that I have read this petition and the facts stated in it are true. Image: proceeding the service of process, Florida Statutes, and that I have read this petition and the facts stated in it are true. Image: proceeding the service of process, Florida Statutes, and that I have read this petition and the facts stated in it are true. Image: proceeding the service of process, proceeding the service of process, proceeding the service of the licensed representatives or employees listed in part 4 above. Image: proceeding the taxpayer's authorized signature is in part 3 of this form. <td>praiser or tax collector. Inder penalties of perjury, I certify that I have author in the owner's authorized representative for purpose der s. 194.011(3)(h), Florida Statutes, and that I is </td>	praiser or tax collector. Inder penalties of perjury, I certify that I have author in the owner's authorized representative for purpose der s. 194.011(3)(h), Florida Statutes, and that I is
appraiser or tax collector.	or. ury, I certify that I have authorization to file this petition on the taxpayer's behalf, and I declare that zed representative for purposes of filing this petition and of becoming an agent for service of proces , Florida Statutes, and that I have read this petition and the facts stated in it are true. <u>7. Performance</u> Robert Peyton <u>9/10/2024</u> e, representative <u>Print name</u> <u>Date</u> <u>Representative Signature</u> are an authorized representative not listed in part 4 above. ed representative not acting as one of the licensed representatives or employees listed in part 4 above er of attorney that conforms to the requirements of Part II of Chapter 709, F.S., executed with the signature OR ☐ the taxpayer's authorized signature is in part 3 of this form. sated representative filing this petition AND (check one)	praiser or tax collector. Inder penalties of perjury, I certify that I have author in the owner's authorized representative for purpose der s. 194.011(3)(h), Florida Statutes, and that I
Under penalties of perjury, I declare that I am the owner's authorized representative for purposes of filing this petition becoming an agent for service of process under s. 194.011(3)(h), Florida Statutes, and that I have read this petition facts stated in it are true.	or. ury, I certify that I have authorization to file this petition on the taxpayer's behalf, and I declare that zed representative for purposes of filing this petition and of becoming an agent for service of procest, Florida Statutes, and that I have read this petition and the facts stated in it are true. Image: The statutes, and that I have read this petition and the facts stated in it are true. Image: The statutes, and that I have read this petition and the facts stated in it are true. Image: The statutes, and that I have read this petition and the facts stated in it are true. Image: The statutes, and that I have read this petition and the facts stated in it are true. Image: The statutes, and that I have read this petition and the facts stated in it are true. Image: The statutes, and that I have read this petition and the facts stated in it are true. Image: The statutes, and that I have read this petition and the facts stated in it are true. Image: The statutes, and that I have read this petition and the facts stated in it are true. Image: The statutes, and that I have read this petition and the facts stated in it are true. Image: The statutes of the statute of the taxpayer's authorized signature is in part 3 of this form. Image: The statute of the taxpayer is required for access to confidential information from the properties of the statutes of the taxpayer is required for access to confidential information from the taxpayer is required fo	praiser or tax collector. Inder penalties of perjury, I certify that I have author in the owner's authorized representative for purpose der s. 194.011(3)(h), Florida Statutes, and that I is
Signature, representative Print name Da	or. ury, I certify that I have authorization to file this petition on the taxpayer's behalf, and I declare that zed representative for purposes of filing this petition and of becoming an agent for service of proces , Florida Statutes, and that I have read this petition and the facts stated in it are true. <u>7</u> . <u>Partice</u> <u>Robert Peyton</u> <u>9/10/2024</u> e, representative <u>Print name</u> <u>Date</u> Representative Signature are an authorized representative not listed in part 4 above. ed representative not acting as one of the licensed representatives or employees listed in part 4 above. er of attorney that conforms to the requirements of Part II of Chapter 709, F.S., executed with the signature OR ☐ the taxpayer's authorized signature is in part 3 of this form. sated representative filing this petition AND (check one) norization is attached OR ☐ the taxpayer's authorized signature is in part 3 of this form. en authorization from the taxpayer is required for access to confidential information from the proper tor. ury, I declare that I am the owner's authorized representative for purposes of filing this petition and service of process under s. 194.011(3)(h), Florida Statutes, and that I have read this petition and	praiser or tax collector. Inder penalties of perjury, I certify that I have author in the owner's authorized representative for purpose der s. 194.011(3)(h), Florida Statutes, and that I

LAKE COUNTY PROPERTY APPRAISER VAB APPEAL WORKSHEET RESIDENTIAL

			RES	SIDENTIA	L				
Petition #	Ŀ	2024-0215		Alternate K	ey: 3863621	Parcel II	D: 06-23-26-00 ⁴	10-000-13300	
Petitioner Name	Ryan,llo	c c/o Robert	Peyton	Property	2004 BE		Check if Multiple Parcels		
The Petitioner is:	Taxpayer of Re	cord 🗹 Tax	payer's agent	Address		LIAR RUN DR ERMONT			
Other, Explain:				Address	021				
Owner Name	American Res	idential leas	sing company	Value from TRIM Notic		re Board Actior nted by Prop Appr	I value atter i	Board Action	
1. Just Value, rec	nuired			\$ 346,8	08 \$	346,80	8		
2. Assessed or c	•	lue *if appli	icable	\$ 297,3		297,35	_		
3. Exempt value,				\$	- \$				
4. Taxable Value,				\$ 297,3	-	297,35	0		
*All values entered		tv taxable va	alues. School an				•		
Last Sale Date	8/22/2014	-	ce: \$18		Arm's Length		Book <u>nd00</u> I	^D age <u>3000</u>	
ITEM	Subje	oct	Compar	ahle #1	Compar	able #2	Comparable #3		
AK#	38636		3863		3863		3863		
Address	3691 BRIAR CLERM	RUN DR	3546 FOXC CLERN	HASE DR	810 TRIPLE CLERN	CROWN CT	3719 BRIAR CLERM	RUN DR	
Proximity			same	-	same		same	-	
Sales Price			\$445,	000	\$570,	000	\$395,0		
Cost of Sale			-15	%	-15	%	-15	%	
Time Adjust			0.00		0.00		0.00		
Adjusted Sale		-	\$378,		\$484,		\$335,7		
\$/SF FLA	\$206.07 p	per SF	\$176.75		\$220.53		\$208.80		
Sale Date			5/11/2		6/5/2		5/10/2	-	
Terms of Sale			✓ Arm's Length	Distressed	✓ Arm's Length	Distressed	✓ Arm's Length	Distressed	
Value Adj.	Description		Description	Adjustment	Description	Adjustment	Description	Adjustment	
Fla SF	1,683		2,140	-22850	2,197	-25700	1,608	3750	
Year Built	2008		2008		2009		2009		
Constr. Type	block/stucco		block/stucco		block/stucco		block/stocco		
Condition	good		good		good		good		
Baths	2.0		2.0		3.0	-10000	2.0		
Garage/Carport	2 car		2 car		2 car		2 car		
Porches	167 SF		324 sf		326 sf		166 sf		
Pool	N		N	0	Y	-20000	N	0	
Fireplace	0		0	0	0	0	0	0	
AC	Central		Central	0	Central	0	Central	0	
Other Adds	n		n lot		n		n		
Site Size	lot		lot		lot		lot		
Location	good		good		good	+	good		
View	good		good		good		good		
			-Net Adj. 6.0%	-22850	-Net Adj. 11.5%	-55700	Net Adj. 1.1%	3750	
			Gross Adj. 6.0%	22850	Gross Adj. 11.5%	6 55700	Gross Adj. 1.1%	3750	
Adj. Sales Price	Market Value	\$346,808	Adj Market Value	\$355,400	Adj Market Value	\$428,800	Adj Market Value	\$339,500	
	Value per SF	206.07							

The IAAO "Standard on Ratio Studies", approved April, 2013, paragraph 9.1, indicates that a range of assessment level from .90 and 1.10 times the desired level of assessment is acceptable for any class of property. Thus, after applying a -15% 1st & 8th criteria adjustment factor to a Market Value indication, a Just Value/Market Value ratio of 76.5% to 93.5% falls within the acceptable range.

Based upon the facts presented herein, it is the Property Appraiser's opinion that the Market Value placed upon this property is considered to be fair and just as of January 1st. The Income, Market, and Cost approaches to value have been considered in the assessment of this property and are an integral part of the Property Appraiser CAMA. All factors considered as per F.S. s.193.011 and approved mass appraisal standards.

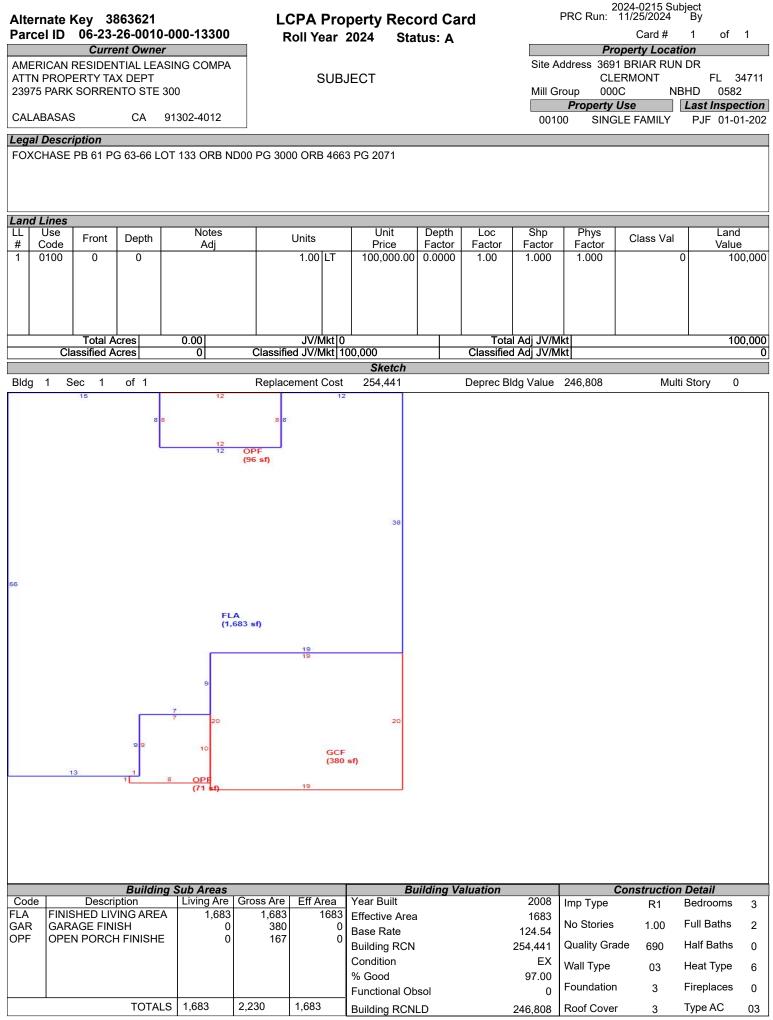
DEPUTY: Mohamed Shariff

DATE 11/7/2024

2024-0215 Comp Map



Bubble #	Comp #	Alternate Key	Parcel Address	Distance from
	•		3691 BRIAR RUN DR	Subject(mi.)
1	subject	3863621		
	-		CLERMONT	-
2	comp 3	3863614	3719 BRIAR RUN DR	
	•		CLERMONT	same sub
3	comp 1	3863577	3546 FOXCHASE DR	_
-			CLERMONT	same sub
4	comp 2	3863629	810 TRIPLE CROWN CT	
-	00mp 1		CLERMONT	same sub
5				
6				
7				
8				
Ő				



100,000

246,808

0

LCPA Property Record Card Roll Year 2024 Status: A

2024-0215 Subject PRC Run: 11/25/2024 By

Card # 1 of 1

	Miscellaneous Features *Only the first 10 records are reflected below													
Code														

	Building Permits													
Roll Year	Permit ID	Issue Date	Comp Date	Amount	Туре	Description	Review Date	CO Date						
2009	200801365	06-06-2008	03-10-2009	80,000	0000	SFR 3691 BRIAR RUN DR	03-10-2009							

			Sales Inform	ation					Exemptions				
Instrument No	Book	/Page	Sale Date	Instr Q/U Code Vac/Imp Sale Price Code Description				Year	Amount				
	4663 ND00 3769	2071 3000 1480	08-03-2015 08-22-2014 05-06-2009	MI WD WD	UQQ	UQQ		100 186,900 160,900					
	Total									0.00			
value Summary													
Land Value Bldg Value Misc Value Market Value Deferred Amt Assd Value Cnty Ex Amt Co Tax									nt Co Tax Val	Sch Tax	Val Prev	vious Valu	

297350

0.00

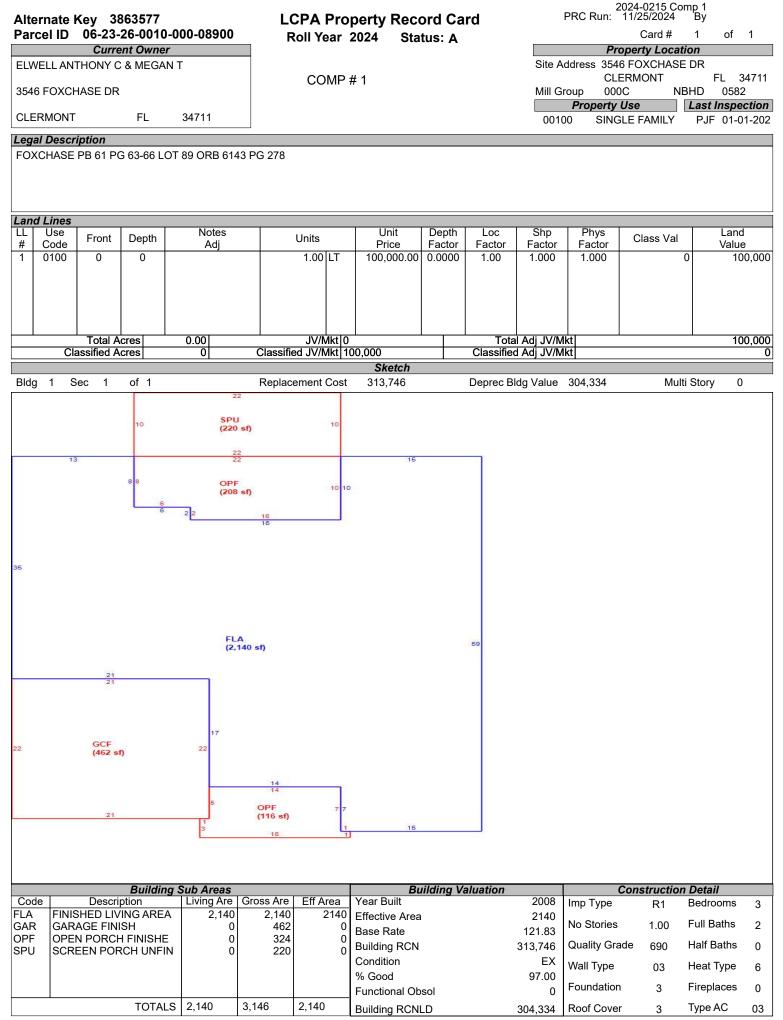
297350

346808

338,990

49458

346,808



100,000

304,334

0

404,334

LCPA Property Record Card Roll Year 2024 Status: A

2024-0215 Comp 1 PRC Run: 11/25/2024 By

Card # 1 of 1

	Miscellaneous Features													
	*Only the first 10 records are reflected below Code Description Units Type Unit Price Year Blt Effect Yr RCN %Good Apr Value													
Code	Description	Units	Туре	Unit Price	Year Blt	Effect Yr	RCN	%G000	Apr Value					
		1	1					1						

	Building Permits													
Roll Year	Permit ID	Issue Date	Comp Date	Amount	Туре	Description	Review Date	CO Date						
2010	200900895	08-14-2009	02-08-2010	4,000	0002	BATHROOM REMODEL	02-08-2010							
2010	200900781	07-28-2009	02-08-2010	5,850	0003	SEN	02-08-2010							
2009	200801020	04-03-2008	02-11-2009	78,000	0000	SFR 3546 FOXCHASE DR								

			Sales Inform	ation					Exemptions				
Instrument No	Book	/Page	Sale Date	Instr	Q/U	Code	Vac/Imp	Sale Price	Code	Description	Year	Amount	
2023057855 2022073504	6143 5963 3789	0278 2368 1690	05-11-2023 05-19-2022 06-12-2009	WD WD WD	QQQ	01 01 Q	-	445,000 270,000 204,000	039 059	HOMESTEAD ADDITIONAL HOMESTEAD	2024 2024	25000 25000	
										Total		50,000.00	
	Value Summary												
Land Value Bldg Value Misc Value Market Value Deferred Amt Assd Value Cnty Ex Amt Co Tax Val Sch Tax Val Previous Va										ous Valu			

294284

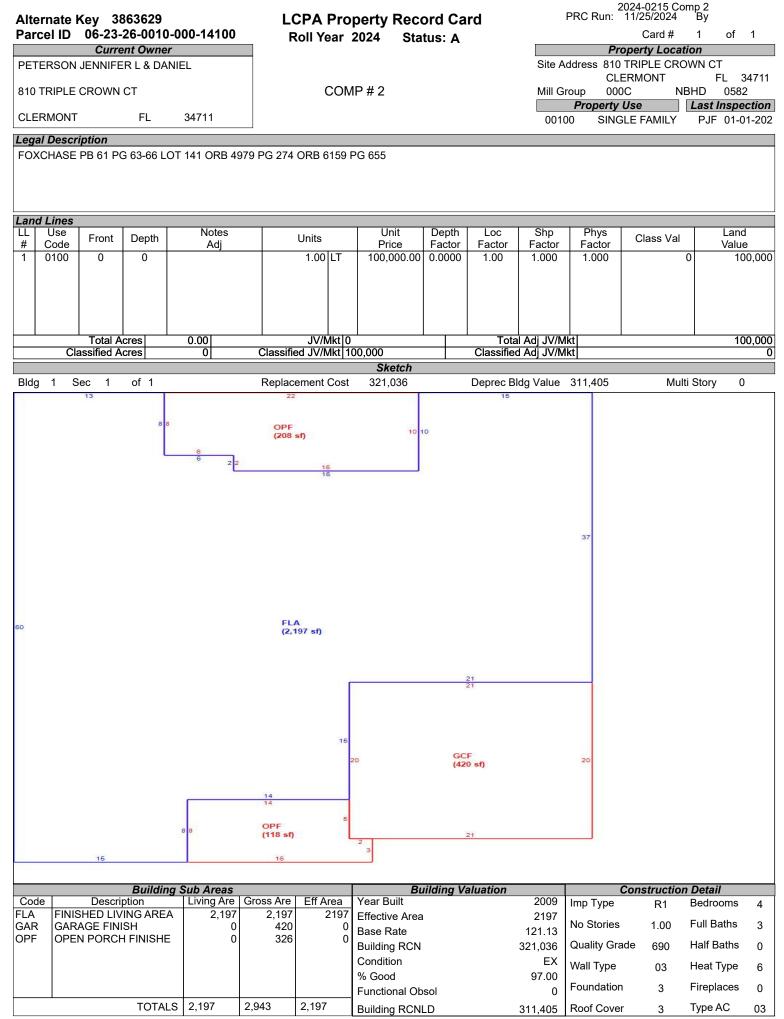
50,000.00

244284

269284

394,617

0



Alternate Key 3863629 Parcel ID 06-23-26-0010-000-14100

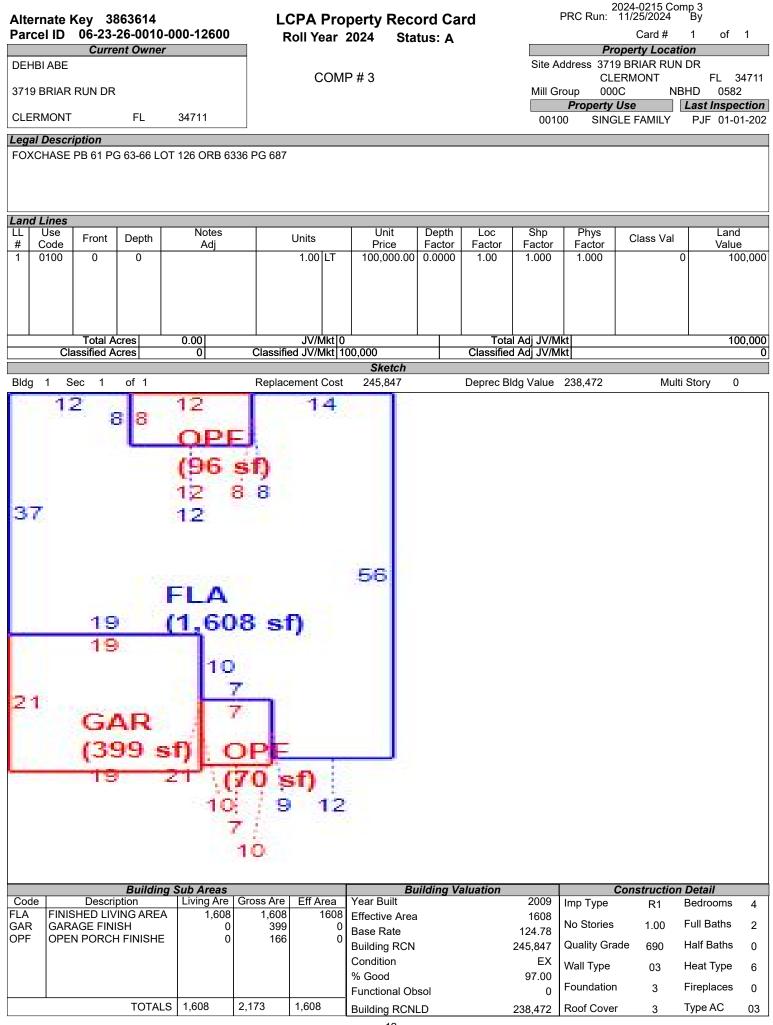
LCPA Property Record Card Roll Year 2024 Status: A

2024-0215 Comp 2 PRC Run: 11/25/2024 By

Card # 1 of 1

Roll Teal 2024 Status. A															
						*••	-		aneous F						
	T									re reflected k			1	· I · ·	
Code		Descrip			Uni		Туре	-	it Price	Year Blt	Effect Y	-	%G000		Value
POL3	SWIMMING I		RESIDEN	ITIAL		6.00		SF	46.00	2011	2011	15456.0			13,138
PLD3	POOL/COOL					4.00		SF SF	7.33	2011	2011	6700.0			4,690
SEN2	SCREEN EN	CLUSEI	JSIRUC	TURE	215	0.00	3		3.50	2011	2011	7525.0	0 70.00		5,268
Building Permits															
Roll Ye	ar Permit	ID	Issue Da	ate C	omp D	ate	Am	ount	Type		Descri	otion	Review	Date C	O Date
2012					5,30		SCRN ENCL			12-05-2		-			
2012			03-21-20		2-05-2	011		30,35	0 0003	POL			12-05-2	011	
2010	20090075	8	07-27-20	09 02	2-03-2	010		80,00	0 0001	SFR 810 TR	PLE CRC	WN CT	02-03-2	010	
				Sales In	nforma	ation						Exe	mptions		
Instr	ument No	Book	/Page	Sale D	ate	Instr	Q/U	Code	Vac/Imp	Sale Price	Code	Descriptio		Year	Amount
202	23070566 6159 0655 06-05-2023 WD		Q	01	1	570,000	039	HOMESTE	۱D	2024	25000				
-			QC	Ū	11	I	100		ADDITIONAL HOM	IESTEAD	2024	25000			
201	017081702 4979 0274 07-26-2017		WD	Q	Q	I	290,000								
		4461	0657	03-31-2		WD	Q	Q	I	262,000					
	3841 1544 10-19-2009		WD	Q	Q	I	225,900								
										1				1	

									Total		50,000.00	
Value Summary												
Land Value	Bldg Value	Misc Value	Market Value	Deferred Am	nt Assd Va	lue C	nty Ex Ar	nt Co Tax Va	I Sch Tax	Val Prev	rious Valu	
100,000	311,405	23,096	434,501	0	43450	1 :	50,000.00	384501	40950	1 4	24,914	



100,000

238.472

0

338,472

LCPA Property Record Card Roll Year 2024 Status: A

2024-0215 Comp 3 PRC Run: 11/25/2024 By

Card # 1 of 1

Miscellaneous Features *Only the first 10 records are reflected below										
Code	Description	Units	Units Type Unit Price Year Blt				RCN	Apr Value		
L		1						I		

	Building Permits											
Roll Year	Permit ID	Issue Date	Comp Date	Amount	Туре	Description	Review Date	CO Date				
2010	200900592	06-04-2009	02-05-2010	80,000	0001	SFR 3719 BRIAR RUN DR	02-05-2010					
L							1					

			Sales Inform	Exemptions								
Instrument No	b Book	/Page	Sale Date	Instr	Q/U	Code	Vac/Imp	Sale Price	Code	Description	Year	Amount
2024059585	6336 4580 3896	0687 0568 1502	05-10-2024 01-12-2015 03-30-2010	WD WD WD	QQQ	01 Q Q		395,000 188,500 177,000	039 059	HOMESTEAD ADDITIONAL HOMESTEAD	2016 2016	
									Total 50,000			50,000.00
Value Summary												
Land Value Bldg Value Misc Value Market Value Deferred Amt Assd Value Cnty Ex Amt Co Tax Val Sch Tax Val Previous Valu												

155550

50,000.00

105550

130550

330,977

182922