SP 224.2

ccl-246d (Rev. 5/3/06) PETITION FO	OR A SPECIAL PRIVILES  AMENDMENT	SF
\$250.00 Publication Fee SF Must Accompany This Petition	P: 430 CC: 510503A	May 18, 2006
, 20 SUBMIT PETITION IN DUPLICATE		
To the Honorable, The Common Council of	the City of Milwaukee:	
The undersigned Robert L.	Anderson ame of Individual, Partners, Corporation or LI	.C)
being the owners of the following property k	known by street address as	2768-76 S. 34 <sup>th</sup> St. 53215 (Street Address and Zip Code)
in the <u>8<sup>th</sup></u> Aldermanic District to the provisions of Section 66.0425 of the temperature.	t respectfully petition the Common C Wisconsin Statutes, that the followir	Council of the City of Milwaukee according ng privilege be granted:
back-up driveway	(Here describe the privilege)	
Of which a plan or sketch is herewith subm Milwaukee, to abide by any order or resolut damages to person or property by reason of compensation as provided by law in the suit the existence of the privilege, a certificate of sums of \$25,000.00/\$50,000.00 bodily injur- might arise by reason of the privilege.	tion of the Common Council affection of the granting of such privilege, to furnition to be fixed by the proper city office insurance indicating applicant hold by, and \$10,000.00 property damage	g this privilege, to be primarily liable for urnish a bond and pay annual ers, and to file and keep current throughou ds a public liability policy in at least the e, insuring the city against any liability that
Petitioner further agrees to remove resolution adopted by the Common Council	e said privilege whenever public nec il or other legislative body.	essity so requires when so ordered upon
Should this special privilege be disconstruction work executed pursuant to this Commissioner of Public Works, any curb, public works, any curb, public by reason of the granting of this 66.0425 of the Wisconsin Statutes, or the I	pavement, or other public improvem special privilege. Petitioner further a	ormer condition and to the approval of the ent which was removed, changed or agrees not to contest the validity of Section
Name (Please Print): Robert Anderson Signature:	(Individual, Partner, or Agent if corpo	ration or LLC)

(OVER)

Mailing Address (If different than above): 3434 West St. Paul Av.

(If applicable)

\_\_\_\_\_\_State:\_\_WI \_\_\_\_\_Zip:\_\_\_53208

Corporation or LLC Name: N/A

City: Milwaukee