

## IMPORTANT NOTICE: A \$25 FILING FEE MUST ACCOMPANY

THIS APPEAL, WITHIN THE DEADLINE REFERENCED BY THE BILL.

Checks should be made payable to: City of Milwaukee and a copy of the

bill should be included with your appeal

IMPORTANT NOTICE FOR CUSTOMERS PAYING BY CHECK
When you provide a check as payment, you authorize us either to use information from your check to make
a one-time electronic fund transfer from your account, or to process the payment as a check transaction.

IF THE CHARGES HAVE ALREADY APPEARED ON YOUR TAX BILL, THIS APPEAL CANNOT BE FILED.

| City Ha<br>200 E.                    | strative Review Board of Appeals<br>all, Rm. 205<br>Wells St.                   |                        |  |   |           |
|--------------------------------------|---|------------------------|--|---|-----------|
|                                      | kee, WI 53202   |                        |  |   |           |
|                                      | 86-2231   |                        | 2112   | , ,                                     | -01       |
| DATE: \/ \alpha                      | 23/2023   | RE:_                   | 2463 W<br>(Address of proper                     | Chambe                                  | 5571      |
|                                      |   |                        | (Address of proper                               | rty in question)                        |           |
| Under ch 68 Wis                      | s. Stats., s. 320-11 of the Milwaukee Cod                                       | le of Ordinances, this | is a written petition for                        | r appeal and heari                      | ıg.       |
|                                      |   | <b>*</b>               | NC   |   |           |
|                                      | he administrative procedure followed l  | by                     | of City Department)                              |   |           |
| Amount of the cl                     | harges \$ 387.27  | (тчаше                 | of City Department)                              |   |           |
|                                      | 1 1 1 - 1 1 1 1   | 0                      |  |   |           |
| Charge relative                      | to: Little pick   | (                      |  |   |           |
| I feel the City's pincluding city en | procedure was improper due to the fol<br>aployee's names/dates which I spoke to | llowing reasons and i  | I have attached any si<br>e and capies of any ci | apporting evident<br>ty orders received | ce,<br>I: |
| I ma                                 |   |                        |  |   |           |
|                                      |   | 1/ 1                   | 1  |   | 07,110    |
| and                                  | it was well "   | under                  | 6 yards  | 0+                                      |           |
| trast                                | autside for   | pich                   | up. It   | told                                    | ne        |
| end                                  | I time that   | It wa                  | s quele  | d up.                                   |           |
| The                                  | request nu  | nbers                  | were #   | = 16310                                 | 97/       |
| #163                                 | 336893. It  | was th                 | e city:  | of Mil                                  | washee    |
| that                                 | was wrong i   | in this                | one t  | ichet                                   | ,         |
|                                      | Don   |                        | MZ   | 7                                       |           |
| 9.23                                 |   | Signature              |  |   |           |
| Ī                                    | Daniel Sheeha   | nort                   | imma Li  | <i>'U</i>                               |           |
|                                      | Na  | me (please print)      |  |   |           |
| 10:                                  | 3 shepard Court Mailing address and zip code Muhwenago w Is                     | - 26                   | 2-424-<br>Daytime phone numb                     | 6699<br>ber                             |           |
|                                      | Monago WIS.   | 3177                   |  |   |           |
|                                      | dshe  | ehan (a)               | WI. CC.C   | om                                      |           |
|                                      | 72.1  | Mail Address(es)       |  |   |           |

form 3/21/2022

## Receipt of ARBA Fee

Date: 1/17/25

Received Of: Daniel Sheehan

Property at: 2463 W. Chambers St.

Received By: LME

Check # (If Applicable): 1710

Amount: \$25.00