




Spencer Coggs
City Treasurer

James F. Klajbor
Deputy City Treasurer

OFFICE OF THE CITY TREASURER
Milwaukee, Wisconsin

February 17, 2015

To: Milwaukee Common Council
City Hall, Room 205

From:  James F. Klajbor
Deputy City Treasurer

Re: Request for Vacation of Inrem Judgment
Tax Key No.: 351-1905-000-4
Address: 1717 - 1719 W VINE ST
Owner Name: SABIR ALI
Applicant/Requester: SABIR ALI
2014-4 Inrem File
Parcel: 132
Case: 14CV-6152

Attached is a completed application for Vacation of Inrem Judgment and documentation of payment of costs.

The City of Milwaukee acquired this property on 11/11/2014.

JFK/em





OFFICE OF THE CITY TREASURER

CITY HALL - ROOM 103 • 200 EAST WELLS STREET • MILWAUKEE, WISCONSIN 53202
TELEPHONE: (414) 286-2260 • FAX: (414) 286-3186 • TDD: (414) 286-2025

FORMER OWNER'S REQUEST TO VACATE IN REM TAX FORECLOSURE JUDGMENT

FOLLOW THE INSTRUCTIONS LISTED BELOW:

1. Type or print firmly with a black ball point pen.
2. Use separate form for each property.
3. Refer to the copy of the attached ordinance for guidelines and eligibility. No written request to proceed under the ordinance may be submitted for consideration to the Common Council where more than 90 days has elapsed from the date of entry of the in rem tax foreclosure judgment to the date of receipt of the request by the City Clerk.
4. Administrative costs totaling \$1,370 must be paid by Cashier's Check or cash to the Office of the City Treasurer prior to acceptance of this application.
5. Complete boxes a, b, c, and d and sign and date application.
6. Forward completed application to the City Treasurer, 200 East Wells Street, Room 103, Milwaukee, WI 53202

APPLICANT INFORMATION:

A. PROPERTY ADDRESS: 1717-1719 W Vine St

TAX KEY NUMBER: 351-1905-4

NAME OF APPLICANT: SABIR ALI

MAILING ADDRESS: 2641-N 27th St #A-3

MILWAUKEE CITY WI STATE 53210 ZIP CODE (414) 763-1599 TELEPHONE NUMBER

B. WAS THE PROPERTY LISTED IN "A" ABOVE YOUR PRIMARY RESIDENCE? YES NO

IS THE PROPERTY LISTED IN "A" ABOVE CURRENTLY OCCUPIED? YES NO

C. LIST ALL OTHER REAL PROPERTY IN THE CITY OF MILWAUKEE IN WHICH YOU HAVE AN OWNERSHIP INTEREST (If not applicable, write NONE.):

None

ADDRESS _____ ZIP CODE _____

ADDRESS _____ ZIP CODE _____

ADDRESS _____ ZIP CODE _____

(Use reverse side, if additional space is needed.)

D. HAVE MONIES FOR ADMINISTRATIVE COSTS BEEN DEPOSITED WITH THE CITY TREASURER'S OFFICE? (Documentation must be attached.)

YES NO

Applicant warrants and represents that all of the information provided herein is true and correct and agrees that if title to the property is restored to the former owner, applicant will indemnify and hold the City harmless from and against any cost or expense, which may be asserted against the City as a result of its being in the chain of title to the property. **Applicant understands that if this request is withdrawn or denied the City shall retain all of the administrative costs applicant paid. There are no refunds.**

APPLICANT'S SIGNATURE: Sabir Ali DATE: 2-9-15

State Bar of Wisconsin Form 3-2003
QUIT CLAIM DEED



* 1 0 4 3 4 7 8 8 *

DOC.# 10434788

Document Number

Document Name

THIS DEED, made between Mohammad Choudry

and SABIR ALI ("Grantor," whether one or more),

_____ ("Grantee," whether one or more).

Grantor quit claims to Grantee the following described real estate, together with the rents, profits, fixtures and other appurtenant interests, in Milwaukee

County, State of Wisconsin ("Property") (if more space is needed, please attach addendum):

1717-19 W. VINE ST. MILWAUKEE WIS., 53205
PLAT PAGE 35129 NEIGHBORHOOD 3000
C LEHMANN'S SUBD IN NE 1/4 SEC 19-7-22 BLOCK 217 LOT 5 TID #44

RECORDED 02/12/2015 02:53PM
JOHN LA FAVE
REGISTER OF DEEDS
Milwaukee County, WI
AMOUNT: 30.00
FEE EXEMPT #:
TRANSFER FEE: 144.30

Recording Area

Name and Return Address

SABIR ALI
2641 N. 27th St.
MILWAUKEE WI. 53210

3511905000

Parcel Identification Number (PIN)

This is NOT homestead property.
~~(is)~~ (is not)

Dated October 15, 2014

[Signature] (SEAL)
* MOHAMMAD CHOUdry

_____ (SEAL)
*

_____ (SEAL)
*

_____ (SEAL)
*

AUTHENTICATION

Signature(s) _____

authenticated on _____

*
TITLE: MEMBER STATE BAR OF WISCONSIN
(If not, _____
authorized by §706.06, Wis. Stats.)

THIS INSTRUMENT DRAFTED BY
Mohammad Choudry

ACKNOWLEDGMENT

State of Wisconsin,
Milwaukee County, } ss.
Personally came before me on 10-15-2014
the above named Mohammad Choudry

to me known to be the person(s) who executed the foregoing instrument and acknowledge the same.

[Signature]
* Thomas J. McNeel
Notary Public, State of Wisconsin
My commission (is permanent) (expires Aug 26, 2017)

(Signatures may be authenticated or acknowledged. Both are not necessary.)

NOTE: THIS IS A STANDARD FORM. ANY MODIFICATIONS TO THIS FORM SHOULD BE CLEARLY IDENTIFIED. FORM NO. 3-2003

QUIT CLAIM DEED

© 2003 STATE BAR OF WISCONSIN

Wisconsin Legal Blank Co., Inc.
Milwaukee, Wis.

* Type name below signatures.

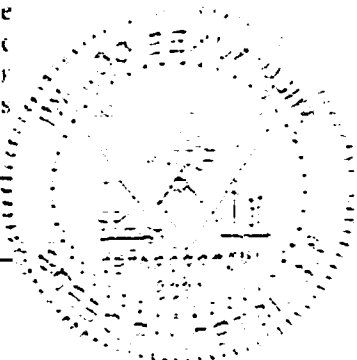
STATE OF WISCONSIN
MILWAUKEE COUNTY

I, the undersigned Register of Deeds of Milwaukee County, hereby certify that this document is a true and correct copy of the original on file or record in my office. Witness my hand and official seal this

FEB 13 2015

date

John La Fave
JOHN LA FAVE
Register of Deeds



Office of the City Treasurer - Milwaukee, Wisconsin
Administration Division
Cash Deposit of Delinquent Tax Collection

<u>Cashier Category</u>	<u>Cashier Payclass</u>	<u>Dollar Amount</u>
1910	Delinquent Tax Collection	
	1911 City Treasurer Costs	220.00
	1912 DCD Costs	450.00
	1913 City Clerk Costs	200.00
	1914 City Attorney Costs	500.00
	Grand Total	1,370.00

Date 2/13/2015

Comments for Treasurer's Use Only

Administrative Costs - Request for Vacation of Judgment

File Number: 2014 - 4
Taxkey: 351-1905-000-4
Property Address: 1717 1719 W VINE ST
Owner Name SABIR ALI

Applicant: SABIR ALI

Parcel No. 132

CaseNumber: 14CV-6152