PETITION FOR A SPECIAL PRIVILEGE

SP 1294

\$208.00 Publication Fee Must Accompany This Petition SUBMIT PETITION IN DUPLICATE	AMENDMENT 6 Z 3635	Nov. 28	, 20 0 [
To the Honorable, The Common Council of the Cir.	y of Milwaukee:		
Council Members:			
The undersigned Heather (State whether petitione	L MaKi r is an individual, co-partnership, Wi	isconsin or foreign corporation	ı)
being the owners of the following described real est	ate:		e e
	(Legal description)		· .
and number as <u>2400 S, 5+h Place</u> City of Milwaukee according to the provisions of Se	ection 66.045 of the Wisconsin St	respectfully petition the Co	et also known by street ommon Council of the ivilege be granted:
(H	lere describe the privilege)		
			· · · · · · · · · · · · · · · · · · ·
of which a plan or sketch is herewith sub of Milwaukee, to abide by any order or resolution of to person or property by reason of the granting of su	the Common Council affecting t	his privilege, to be primaril d pay annual compensation	y liable for damages as provided by law ir

insurance indicating applicant holds a public liability policy in at least the sums of \$25,000.00/\$50,000.00 bodily injury, and \$10,000.00 property damage, insuring the city against any liability that might arise by reason of the privilege.

Petitioner further agrees to remove said privilege whenever public necessity so requires when so ordered upon resolution adopted by the Common Council or other legislative body.

Should this special privilege be discontinued for any reason whatsoever, petitioner agrees to remove all construction work executed pursuant to this special privilege, to restore to its former condition and to the approval of the Commissioner of Public Works, any curb, pavement, or other public improvement which was removed, changed or disturbed by reason of the granting of this special privilege. Petitioner further agrees not to contest the validity of Section 66.045 of the Wisconsin Statutes, or the legality of this special privilege in any way.

FILE WITH CITY CLERK LICENSE DIVISION **ROOM 105 CITY HALL, 200 EAST WELLS STREET**

(if firm, socie	ty or corporation	, give its full name)	•	
A 3.3				

Address

(Title or office held in same)

(Local Phone Number of Engineer/Contractor)