

REQUEST FOR VACATION OF IN REM JUDGMENT

FOLLOW THE INSTRUCTIONS LISTED BELOW:

1. Type or print firmly with ball point pen.
2. Use separate form for each property.
3. Check 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 45 days has elapsed from the date of entry of the in rem judgment to the date of receipt of the request by the City Clerk.
4. **Administrative costs totaling \$1370.00 must be paid by Cashiers Check to the City Treasurer's Office prior to acceptance of this application.**
5. Complete boxes a, b, c, d, and e.
6. Forward completed application to City Treasurer, 200 East Wells Street, Room 103, Milwaukee, WI 53202.

APPLICANT INFORMATION:

A. PROPERTY ADDRESS 350 E W. Kilbourn
TAX KEY NUMBER 387-0726-6
NAME OF APPLICANT Dorothy Knox
MAILING ADDRESS 350 E W. Kilbourn
Milwaukee WI 53208 (414) 931-8380
CITY STATE ZIP CODE TELEPHONE NUMBER

B. FORMER OWNER YES NO

If no, describe interest in this property _____

C. LIST ALL OTHER REAL PROPERTY IN THE CITY OF MILWAUKEE THAT THE FORMER OWNER HAS AN OWNERSHIP INTEREST IN (If not applicable, write NONE).

(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

E. DEPT OF NEIGHBORHOOD SERVICES FILING:

Have applications to record the subject property and any other unrecorded properties in which the former owner has an ownership interest been filed with the Department of Neighborhood Services per s. 200-51.5?

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 City harmless from and against any cost or expense which may be asserted against 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 **Applicant understands that if this request is withdrawn or denied the City shall retain all of the administrative costs applicant paid.**

APPLICANT'S SIGNATURE Dorothy Knox DATE 3/5/02



Payment Receipt

CT-11

Office of the City Treasurer • City Hall, Room 103
200 East Wells Street • Milwaukee, Wisconsin 53202
Telephone: (414) 286-2240

Received of: Donia Knox

Tax Account No.: 387-0126-6

Property Address: 3302 W. Kilbourn

Cash \$ 137000 Check \$ _____

Installment Payment Bond Payment

Delinquent Tax Payment FN Rem
Year: 2001-03

Current Collection Tax Payment

Duplicate Tax Bill Fee Other

Received by: Sue Heapski

Date: 3-8-02

DOCUMENT NO.

DEED

This Deed made between WANDA

DOBIAY KNOX

conveys and grants the following described real estate in MILWAUKEE
County State of Wisconsin.

~~3502 W Kilbourn, Milwaukee~~
3502 W Kilbourn, Milwaukee
Lyman's Subd in NW 1/4 Sec
25-7-21 Block 1 E 26'
of S 112 1/2' Lot 24

THIS SPACE RESERVED
NAME AND RETURN ADDRESS
DOBIAY KNOX
3502 W Kilbourn
Milwaukee WI

389-0726-6
PARCEL IDENTIFICATION NUMBER

This 15 homestead property

Together with all and singular the hereditaments and appurtenances thereto belonging.

And

warrants that the title is good, indefeasible in fee simple and free and clear of encumbrances except

and will warrant and defend the same.

Dated this 15 day of August 19 99

(SEAL) [Signature] (SEAL)
WANDA Tolocko

(SEAL) _____ (SEAL)

AUTHENTICATION

Signature _____
Notary Public _____
State of _____

TITLE MEMBER STATE OF _____
(If not authorized by statute, not necessary)

(Signatures may be authenticated by separate affidavits, both as may be necessary)

ACKNOWLEDGMENT

State of ~~WISCONSIN~~ TEXAS
County of ELLIS
Personally came before me this 30TH day of APRIL 19 99 the above named WANDA TOLOCKO

I do hereby certify that the foregoing is a true and correct copy of the same.

[Signature]
Notary Public ELLIS County of ELLIS

01-21-2003

TAMIE LYNN HOLLAND
NOTARY PUBLIC EXPIRES
January 21, 2003