

# 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 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	6200 N 84 <sup>th</sup> St / <del>6100 N 84<sup>th</sup> St</del> *		
TAX KEY NUMBER	153-9982-311-8 <sup>①</sup>	<del>153-9982-210-3</del> <sup>②</sup>	
NAME OF APPLICANT	BALM IN Gilead FOR All People / DR. WALTER LEIGH <sup>CEO - Founder - Agent</sup> Bates		
MAILING ADDRESS	6150 W Fond du lac Ave (Suite 202)		
Milwaukee	Wis	53218	(414) 461-5048
CITY	STATE	ZIP CODE	TELEPHONE NUMBER

B. FORMER OWNER	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
If no, describe interest in this property <u>Balm In Gilead For All People / Dr. Walter Leigh Bates, CEO, Founder, Agent</u>		
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).		
* 6100 N 84 <sup>th</sup>	NONE	
(Use reverse side, if additional space is needed.)		

<p>D. HAVE MONIES FOR ADMINISTRATIVE COSTS BEEN DEPOSITED WITH THE CITY TREASURER'S OFFICE: (Documentation must be attached)</p> <p>YES _____ NO _____</p>	<p>E. DEPARTMENT OF BUILDING INSPECTION 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 Building Inspection per s. 200-51.5?</p> <p>YES _____ NO _____</p>
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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 Dr. Walter Leigh Bates DATE 8-2-01  
 I:\COMMONTAXENFOR\VACATE.APP

# CASHIER'S CHECK

100710  
12-1193/750

\*\*\*\*\*BALM IN GILEAD\*\*\*\*\*

DATE August 03, 2001

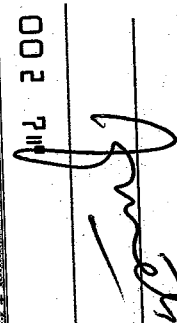
REMITTER

PAY TO THE ORDER OF \*\*\*\*\*CITY TREASURER'S OFFICE\*\*\*\*\*

\$ \*\*\*\*\*1,370.00\*\*

\*\*One Thousand Three Hundred Seventy Dollars and Zero Cents\*\*

  
North Milwaukee State Bank  
Milwaukee, Wisconsin 53216

  
AUTHORIZED SIGNATURE

MP

800

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