

CITY OF MILWAUKEE
APPLICATION FOR MOBILE HOME PARK
(TRAILER HOME COMMUNITY)

ccl-146 (04/28/08)

FILL OUT APPLICATION COMPLETELY

FEE: 1-25 SITES \$77.00 26-50 SITES \$149.00
51-100 SITES \$181.00 OVER 100 SITES \$204.00

MAIL TO: City Clerk - License Division - 200 E. Wells Street - Room 105 Milwaukee, WI 53202 WITH THE APPROPRIATE FEE, CHECK OR MONEY ORDER MADE PAYABLE TO: "CITY OF MILWAUKEE"

NAME OF INDIVIDUAL Zollmer FROMM
CORP/LLC NAME FROMM/TUCKER COLLEGIATE HOME PARK, LLC
BUSINESS NAME College Mobile HOME PARK
BUSINESS PHONE 1-414-962-3809
BUSINESS ADDRESS 6160 S. 6th Street
BUSINESS CITY, STATE & ZIP CODE MILWAUKEE, WI. 53221
MAILING ADDRESS (INCLUDE CITY, STATE & ZIP CODE) 6160 S. 6th St Milwaukee, WI. 53221
NUMBER OF SITES 132 Total Fee: 204

TOTAL FEE: _____

SIGNATURE OF APPLICANT

DO NOT WRITE BELOW THIS LINE

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TO BE COMPLETED BY THE NEIGHBORHOOD SERVICES DEPARTMENT
PLEASE COMPLETE AND RETURN THE ORIGINAL APPLICATION NO LATER THAN MAY 15, via inter-office mail to:
City Hall - License Division - Room 105

APPROVED BY NEIGHBORHOOD SERVICES: Yes No
APPROVED BY NEIGHBORHOOD SERVICES

NAME Thomas E. Messel

TITLE Building Codes Enforcement Supervisor Date 5/14/08

DO NOT WRITE BELOW THIS LINE

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TO BE COMPLETED BY THE LICENSE DIVISION

Clerk P Filed 5-14-08 License 88 Issued _____

ADDENDUM TO MOBILE HOME PARK APPLICATION
(TRAILER HOME COMMUNITY)

I, Zellmer Fromm AS OWNER OF THE MOBILE HOME PARK AT 6160 S. 6th Street
Full legal name Address of premises

Do hereby state that the following individual is authorized by me to manage the above premises and that he/she resides on the premises and will continue to reside on the premises for the remainder of the license period.

NAME OF ON SITE MANAGER WILLIAM JOHNSON

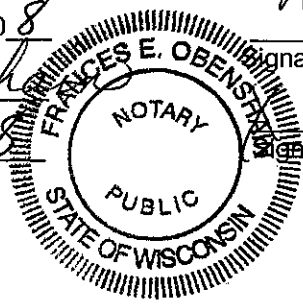
Address & Unit of manager lot 5-17 6160 S. 6th St. Milwaukee, WI. 53221

Is there a Business office located on the premises? Yes No (you are required by City of Milwaukee Ordinance to maintain a business office on site.)

Address & Unit number of office 6160 S. 6th St. Milwaukee, WI. 53221

Subscribed and sworn to before me
this 14th day of May, 2008

Frances E. Obenshain
Notary Public, State of Wisconsin
My commission expires: 07/27/08



[Signature]
Signature of Individual/Partner/Officer/Member

[Signature]
Signature of Partner/Officer/Member