ccl-246c (Rev. 12//13/07)	PETITION F	FOR A SPECIAL		SP	437
\$250.00 Publicatio	n Fee	SP: <u>1801</u> CC:_	980666		
Must Accompany	This Petition				0
SUBMIT PETITION	IN DUPLICAT	`E		AUG 1 8 2006	3
To the Honorable, The				Tur	
The Licensee:	1-400 C	Name of Individual, Partners	dominiums, Corporation or LLC)	Tric	
	,		ess as <u>1515 N Van Bu</u>		e)
in the <u>3rd</u> Alderman	anic District respe i.0425 of the Wisc	ctfully petition the Com consin Statutes, that the	nmon Council of the City of following privilege be gr	of Milwaukee ac anted:	cording to the
Change of ownership fo	r steps & covered	walk			
		(Here describe the	e privilege)		
Milwaukee, to abide by damages to person or p compensation as provid the existence of the priv	any order or resol roperty by reason ed by law in the s ilege, a certificate 0,000.00 bodily inj	ution of the Common C of the granting of such um to be fixed by the p of insurance indicating	es to comply with all laws Council affecting this privi n privilege, to furnish a bo proper city officers, and to g applicant holds a public operty damage, insuring	lege, to be prima and and pay ann a file and keep co Iliability policy in	arily liable for nual urrent throughout n at least the
Petitioner furthe resolution adopted by the			ever public necessity so re lody.	equires when so	ordered upon
construction work execu Commissioner of Public	ited pursuant to the Works, any curb, the granting of this	nis special privilege, to pavement, or other pu special privilege. Peti	son whatsoever, petitioner restore to its former cond blic improvement which v tioner further agrees not privilege in any way.	lition and to the was removed, ch	approval of the nanged or
Name (Please Print): BI Prospect Mym Signature: July	L'Julie M + Company L'Met	work	or Agent if corporation or LLC as		lominiums, I
Corporation or LLC Nan	ne: Lyon	Court Cond	OMÍNIWMS, as shown above)	Inc.	
Mailing Address (If diffe	rent than Property	address above):	5445 N. 6	reen Ba	y Ave
Che Che	ndale		State: UTT	Zin: 63	209

Telephone: 414-540-0004 E-Mail:

Architect/Engineer/Contractor (If Applicable)

Name:				
Address:				
City:		State:	Zip:	
Telephone:	E-Mail:			

FILE WITH CITY CLERK LICENSE DIVISION ROOM 105, CITY HALL, 200 EAST WELLS STREET, 414-286-2238.

Make Check Payable to "City of Milwaukee".

RONALD D. LEONHAR