

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 735 N 34<sup>th</sup> ST MILW, WI  
 TAX KEY NUMBER 388 0508-8  
 NAME OF APPLICANT JOSEPH M. FONS  
 MAILING ADDRESS P.O. BOX 1089  
BROOKFIELD, WI 53008 262 782 8988  
 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).  
5512 N 31<sup>st</sup> ST / 5536 N 31<sup>st</sup> ST / 9900 W FOND DU LAC / 6114 W CAPITOL  
6478 N 104 / 10305 W JONES / 6426 N 106 / 6420 N 106 / 6414 N 105 / 6420-105  
 (Use reverse side, if additional space is needed.)

01 SEP -4 P 2 88  
 CITY OF MILWAUKEE  
 CITY TREASURER

<p>D. HAVE MONIES FOR ADMINISTRATIVE COSTS BEEN DEPOSITED WITH THE CITY TREASURER'S OFFICE: (Documentation must be attached)</p> <p>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></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 <input checked="" type="checkbox"/> NO <input type="checkbox"/></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 Joseph M Fons DATE 8-31-01  
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AGENTS NAME: ATTY JOHN T LYNCH  
4745 W. FOREST HOME AVE  
GREENFIELD, WI 53219  
414 453-1470



TRICITY NATIONAL BANK

6400 South 27th Street • Oak Creek, Wisconsin 53154

JOSEPH FONIS

REMITTER

AUGUST 31, 2001

20

377147

79119  
750

PAY TO THE ORDER OF

TREASURER OF CITY OF MILWAUKEE\*\*\*\*\*

\$1,370.00

THREE THOUSAND THREE HUNDRED SEVENTY DOLLARS AND ZERO CENTS\*\*

DOLLARS

CASHIER'S CHECK

KENYA 388-0508-8

*Joseph J. Fonis*

AUTHORIZED SIGNATURE

⑆ 377147 ⑆



⑆ 075001199⑆

⑆ 000000 ⑆ 086⑆