ccl-246c (Rev. 12//13/07)

## PETITION FOR A SPECIAL PRIVILEGE

SP <u>2438</u>

AMENDMENT	· · · · · · · · · · · · · · · · · · ·
<b>\$250.00 Publication Fee</b> SP: 1030 CC: 82-543	0/1
Must Accompany This Petition	8/15 .20 <u>08</u>
SUBMIT PETITION IN DUPLICATE	AUG 2 1 2006
To the Honorable, The Common Council of the City of Milwaukee:	,
	· ·
The Licensee: MARK Clough (Name of Individual, Partners, Corporation or LLC)	
being the owners of the following property known by street address as 3935 W	Viet St
being the owners of the following property fatorit by shoot accurate to	Street Address and Zip Code)
in the <u>15th</u> Aldermanic District respectfully petition the Common Council of th provisions of Section 66.0425 of the Wisconsin Statutes, that the following privileg	
Change of ownership for concrete stoop with step	
(Here describe the privilege)	
compensation as provided by law in the sum to be fixed by the proper city officers, the existence of the privilege, a certificate of insurance indicating applicant holds a sums of \$25,000.00/\$50,000.00 bodily injury, and \$10,000.00 property damage, in might arise by reason of the privilege.  Petitioner further agrees to remove said privilege whenever public necessi	public liability policy in at least the suring the city against any liability that
resolution adopted by the Common Council or other legislative body.	ty oo logalloo whom to oldelod apoli
Should this special privilege be discontinued for any reason whatsoever, p construction work executed pursuant to this special privilege, to restore to its former Commissioner of Public Works, any curb, pavement, or other public improvement of disturbed by reason of the granting of this special privilege. Petitioner further agree 66.0425 of the Wisconsin Statutes, or the legality of this special privilege in any was	er condition and to the approval of the which was removed, changed or es not to contest the validity of Section
Name (Please Print): MARK Clough (Individual, Partner, or Agent if corporation	or I i C as shown ahous)
Signature: Mark Clarush (Individual, Partner, or Agent if corporation or	
Corporation or LLC Name:(If applicable as shown above)	
(PVOCB fillulis as brownings (i)	•

State:

\_\_ Zip:\_

Mailing Address (If different than Property address above):\_

Telephone: 414 9337752

## Architect/Engineer/Contractor (If Applicable)

Name:				
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		•		
Address:		······································		
÷				
City:		State:	Zip:	<del></del>
			•	
<b></b>	P* 3.6_11.			•
Telephone:	E-Mail:			<del></del>

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

Make Check Payable to "City of Milwaukee".

2008 AUG 26 AM 8: 26

CHY OF MLWAUKEE