

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 \$1,370.00, must be paid by Cashiers Check or cash 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 4767 North 53rd Street
TAXKEY NUMBER 227-0104-100-7
NAME OF APPLICANT Ronald Rayman
MAILING ADDRESS 5464 North Port Washington Rd, Suite 141
Milwaukee, WI 53217 414-587-5124
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).

NONE

(Use reverse side, if additional space is needed)

D. HAVE MONIES FOR ADMINISTRATIVE COSTS BEEN DEPOSITED WITH THE CITY TREASRUER'S OFFICE? (Documentation must be attached)

YES NO

E. DEPT OF NEIGHBORHOOD SERVICES 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 Neighborhood Services per s. 200-51.5.

YES NO

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 **Applicant understands that if this request is withdrawn or denied the City shall retain all of the administrative costs applicant paid.**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 Ronald Rayman DATE 9-11-06



Payment Receipt

CT-11

Office of the City Treasurer • City Hall, Room 103
200 East Wells Street • Milwaukee, Wisconsin 53202
Telephone: (414) 286-2240

Received of: Ronald Rayman

Tax Account No.: 227-0104-100-7

Property Address: 4767 N. 53rd St.

Cash \$ _____ Check \$ 1370.00
North Shore

Installment Payment Bond Payment

Delinquent Tax Payment Year: _____

Current Collection Tax Payment

Duplicate Tax Bill Fee Other

Received by: KAM *Vacation of Judgment*

Date: 9-26-2006

Office of the City Treasurer - Milwaukee, Wisconsin
 Customer Services Unit
 Cash Deposit of Delinquent Tax Collection

<u>Cashier Category</u>	<u>Cashier Payclass</u>	<u>Dollar Amount</u>
1910	Delinquent Tax Collection	
	1911 City Treasurer Costs	220.00
	1912 DCD Costs	450.00
	1913 City Clerk Costs	200.0 ✓
	1914 City Attorney Costs	500.00
	Grand Total	1,370.00

Date 9/26/2006

Comments for Treasurer's Use Only

Administrative Costs - Request for Vacation of Judgment

File Number: 2006 - 01
 Taxkey Number: 227-0104-100 - 7
 Property Address: 4767 4767 N 53RD ST
 Applicant: RONALD RAYMAN
 Parcel Number: 54
 CaseNumber: 06-CV-003677

Teller Validation

Batch Date: 09/27/06 Receipt # 00082418
 Teller ID: hballis2210002

Payment Tendered: 9/26/2006 1:54 PM
 3300 Police Receipts
 Document No. DISTRICT # 4
 Transaction Total: \$276.00

3302 PD-Quarterly-Parking Permits
 941501 0450 6610 0001
 Allocation Total: \$261.28

3304 PD-Quarter-Wis Sales Tax 5.6%
 214201 0733 3311
 Allocation Total: \$14.72

3305 PD-Annual-Parking Permits
 941501 0450 6610 0001
 Allocation Total: \$0.00

3307 PD-Annual-Wis Sales Tax 5.6%
 214201 0733 3311
 Allocation Total: \$0.00

3313 PD-Record & Copy Services
 941024 0001 3311 0001
 Allocation Total: \$0.00

CA
 OK 2010 \$240.00
 OK 906 \$12.00
 OK 1490 \$12.00

WAYNE F. WHITTOW
 City Treasurer

***** DUPLICATE *****

City of Milwaukee
PAYMENT RECEIPT
 Office of the City Treasurer
 City Hall, Room 103

***** DUPLICATE *****