

ROOMING HOUSE LICENSE APPLICATION/RENEWAL

City of Milwaukee
Department of Neighborhood Services
841 N. Broadway 10th Floor
Milwaukee, WI 53202

PROSPECT AV. 1927 N
SEP 21 2005/2:25 PM
04-0152124/H/0 150.00

1. ADDRESS OF LICENSED PREMISE: 1927 N. Prospect Ave
2. LICENSE APPLICANT:

Name: Rushbee Co / Prospect Residence
Address: 410 Holley Realty 401 Pilot Court Suite B
City: Waukegan State: WI Zip: 53188 Street

Phone: 262-547-6250 Date of Birth: _____

NOTE: INDIVIDUAL APPLICANTS MUST PROVIDE FULL NAME, INCLUDING MIDDLE INITIAL, HOME ADDRESS, AND HOME PHONE. ALL APPLICANTS MUST PROVIDE A STREET ADDRESS ABOVE. A POST OFFICE BOX IS NOT ACCEPTABLE. HOWEVER, YOU MAY INDICATE A PREFERRED MAILING ADDRESS BELOW.

IF APPLICANT IS A NONRESIDENT OF MILWAUKEE COUNTY, A LOCAL REPRESENTATIVE INSIDE THE MILWAUKEE COUNTY LIMITS MUST BE AUTHORIZED BY THE OWNER/OPERATOR TO EXERCISE ALL MANAGEMENT AND CONTROL OF THE PREMISES. PLEASE PROVIDE THIS INFORMATION ON PAGE 2 IF APPLICABLE.

3. APPLICANT TYPE (Indicate one of the following):

- Individual
☒ Partnership List name, address and phone number of all partners on Page 2.
— Corporation List name, address and phone number of all officers and directors on Page 2.
— Other Type of organization _____ List name, address and phone number of all officers on Page 2.

4. IF THE APPLICANT OR ANY PARTNERS, OFFICERS OR DIRECTORS LISTED ON THIS APPLICATION HAVE EVER BEEN CONVICTED OF ANY OFFENSE OTHER THAN MINOR TRAFFIC VIOLATIONS, LIST DETAILS BELOW. (INCLUDE OTHER MUNICIPAL CODE CONVICTIONS, I.E. BUILDING CODE.) THERE IS NO STATUTE OF LIMITATIONS. FAILURE TO LIST ALL CONVICTIONS WILL RESULT IN AN OBJECTION TO THIS APPLICATION BY THE POLICE DEPARTMENT. USE A SEPARATE SHEET IF NECESSARY.

CHARGE	DATE	LOCATION	COURT	DISPOSITION OF CASE
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N/A

5. NUMBER OF ROOMERS PERMITTED BY CURRENT LICENSE 18
6. NUMBER OF ROOMERS OCCUPYING THE PREMISES AT TIME OF APPLICATION 14
7. NUMBER OF UNITS 18 NUMBER OF BATHROOMS 9
8. IS THE CURRENT LICENSE POSTED IN A CONSPICUOUS PLACE AT OR NEAR THE PRINCIPAL ENTRANCE TO THE DWELLING/FACILITY? YES ☒ NO _____

9. APPLICATION MUST BE SIGNED AND NOTARIZED BELOW.

The above completed information is true to the best of my knowledge.

[Signature] 9/7/05 Sammy M. Lindner APPLICANT'S
SIGNATURE DATE NOTARY PUBLIC

My Commission Expires 6/29/08

PLEASE GO TO PAGE 2

ADDRESS OF LICENSED PREMISE: 1927 N. Prospect Ave

Name: Leo Trautner
 Address: 210 Holley Realty, 401 Pilot Court, Waukesha, WI 53188 State Zip
 Street City

Phone: 262-547-6250 Date of Birth: _____

NOTE: PROVIDE FULL NAME, INCLUDING MIDDLE INITIAL, HOME ADDRESS, AND HOME PHONE. YOU MUST INDICATE A STREET ADDRESS ABOVE. A POST OFFICE BOX IS NOT ACCEPTABLE. HOWEVER, YOU MAY INDICATE A PREFERRED MAILING ADDRESS BELOW.

Name: Eugene Zernatsky
 Address: 210 Holley Realty, 401 Pilot Court, Waukesha, WI 53188 State Zip
 Street City

Phone: 262-547-6250 Date of Birth: _____

NOTE: PROVIDE FULL NAME, INCLUDING MIDDLE INITIAL, HOME ADDRESS, AND HOME PHONE. YOU MUST INDICATE A STREET ADDRESS ABOVE. A POST OFFICE BOX IS NOT ACCEPTABLE. HOWEVER, YOU MAY INDICATE A PREFERRED MAILING ADDRESS BELOW.

Name: Bill Abbott
 Address: 1925 N. Prospect Ave, Unit 2 Milwaukee, WI 53202 State Zip
 Street City

Phone: 414-276-8628 Date of Birth: _____

NOTE: PROVIDE FULL NAME, INCLUDING MIDDLE INITIAL, HOME ADDRESS, AND HOME PHONE. YOU MUST INDICATE A STREET ADDRESS ABOVE. A POST OFFICE BOX IS NOT ACCEPTABLE. HOWEVER, YOU MAY INDICATE A PREFERRED MAILING ADDRESS BELOW.

Holley Realty
401 Pilot Court, Waukesha, WI 53188

PLEASE ATTACH ADDITIONAL PAGE(S) IF NECESSARY.