



WAYNE F. WHITTOW
City Treasurer

James L. Hanna
Deputy City Treasurer

James F. Klajbor
Special Deputy City Treasurer

OFFICE OF THE CITY TREASURER
Milwaukee, Wisconsin

October 20, 2011

To: Milwaukee Common Council
City Hall, Room 205

From:  Wayne F. Whittow
City Treasurer

Re: Request for Vacation of Inrem Judgment
Tax Key No.: 284-2113-000-2
Address: 3412 3414 N 15TH ST
Owner Name: NANNIE B TRIGGS
Applicant/Requester: DARLENE ROSE POA
2011-2 Inrem File
Parcel: 82
Case: 11CV7456

Attached is a completed application for Vacation of Inrem Judgment and documentation of payment of costs.

The City of Milwaukee acquired this property on 09/16/2011.

WFW/slk

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 90 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 3412 - 3414 N. 15th Street, Milwaukee 53201
TAXKEY NUMBER ~~284-211-3000~~ 284-2113-2
NAME OF APPLICANT NANNIE B. TRIGGS
MAILING ADDRESS 1810 W. Woodbury LN
Glendale WI 53209 414 351-0364
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 TREASURER'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. **All charges incurred such as Water usage, city services, etc. while the City held title to the property are the responsibility of the applicant if request to vacate is approved. Applicant understands that if this request is withdrawn or denied the City shall retain all of the administrative costs applicant paid.**

APPLICANT'S SIGNATURE

Nannie B. Triggs

DATE 10/19/11

DESIGNATION OF AGENT

I, Nannie B. Triggs (name of principal), name the following person as my agent:

Name of agent: Darlene Rose

Agent's address: 1810 W. Woodbury Ln., Glendale, WI 53209

Agent's telephone number: 414 351-0364

DESIGNATION OF SUCCESSOR AGENT(S) (OPTIONAL)

If my agent is unable or unwilling to act for me, I name as my successor agent:

Name of successor agent: _____

Successor agent's address: _____

Successor agent's telephone number: _____

If my successor agent is unable or unwilling to act for me, I name as my 2nd successor agent:

Name of 2nd successor agent: _____

Second successor agent's address: _____

Second successor agent's telephone number: _____

GRANT OF GENERAL AUTHORITY

I grant my agent and any successor agent general authority to act for me with respect to the following subjects as defined (see Appendix) in the Uniform Power of Attorney for Finances and Property Act in chapter 244 of the Wisconsin statutes:

(INITIAL each subject you want to include in the agent's general authority.)

<u>NT</u>	Real property
<u>NT</u>	Tangible personal property
<u>NT</u>	Stocks and bonds
<u>NT</u>	Commodities and options
<u>NT</u>	Banks and other financial institutions
<u>NT</u>	Operation of entity or business
<u>NT</u>	Insurance and annuities
<u>NT</u>	Estates, trusts, and other beneficial interests
<u>NT</u>	Claims and litigation
<u>NT</u>	Personal and family maintenance
<u>NT</u>	Benefits from governmental programs or civil or military service
<u>NT</u>	Retirement plans
<u>NT</u>	Taxes

RELIANCE ON THIS POWER OF ATTORNEY FOR FINANCES AND PROPERTY

Any person, including my agent, may rely upon the validity of this power of attorney or a copy of it unless that person knows that the power of attorney has been terminated or is invalid.

SIGNATURE AND ACKNOWLEDGMENT

Your signature *Nannie B. Triggs* Date 10-13-11

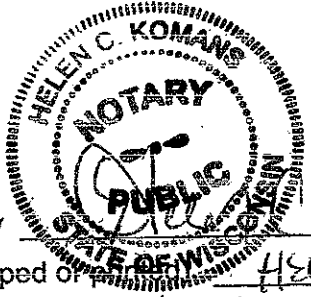
Your name printed NANNIE B. TRIGGS

Your address: 3412 N. 15th Street, Milwaukee WI 53206

Your telephone number: _____

State of: WISCONSIN County of: Milwaukee

This document was acknowledged before me on
Date 10-13-11 by name of principal NANNIE B. TRIGGS



(Seal, if any)

Signature of notary *H. Komans* DATED: 10-13-2011

Name of notary (typed or printed) HELEN C. KOMANS

My commission expires: MARCH 03, 2013

This document prepared by: Darlene Rose

The following optional form may be used by an agent to certify facts concerning a power of attorney for finances and property:

AGENT'S CERTIFICATION AS TO THE VALIDITY OF POWER OF ATTORNEY FOR FINANCES AND PROPERTY AND AGENT'S AUTHORITY

State of: WISCONSIN

County of: Milwaukee

I, Darlene Rose (name of agent), certify under penalty of perjury that NANNIE B. TR. 1995 (name of principal) granted me authority as an agent or successor agent in a power of attorney dated 10/13/11

I further certify that to my knowledge:

- (1) The principal is alive and has not revoked the power of attorney or my authority to act under the power of attorney, and the power of attorney and my authority to act under the power of attorney have not terminated.
- (2) If the power of attorney was drafted to become effective upon the happening of an event or contingency, the event or contingency has occurred.
- (3) If I was named as a successor agent, the prior agent is no longer able or willing to serve.
- (4) _____
(insert other relevant statements)

SIGNATURE AND ACKNOWLEDGMENT

Agent's signature Darlene Rose Date 10/13/11

Agent's name printed DARLENE ROSE

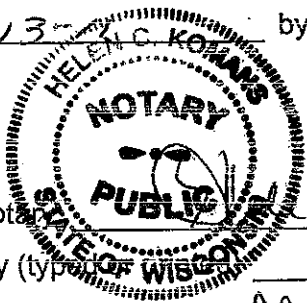
Agent's address: 1810 W. Woodbury Ln, Glendale, WI 53209

Agent's telephone number: 414 351-0364

State of: Wisconsin County of: Milwaukee

This document was acknowledged before me on

Date 10-13-2011 by (name of agent) DARLENE ROSE



Signature of notary Helen C. Komars (Seal, if any) DATE: 10-13-2011

Name of notary (typed) HELEN C. KOMARS

My commission expires: MARCH 03, 2013

This document prepared by: Darlene Rose

Office of the City Treasurer - Milwaukee, Wisconsin
Administration Division
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	200.00 ✓
	1914 City Attorney Costs	500.00
	Grand Total	1,370.00

Date 10/20/2011

Comments for Treasurer's Use Only

Administrative Costs - Request for Vacation of Judgment

File Number: 2011 - 2
Taxkey Number: 284-2113-000 - 2
Property Address: 3412 3414 N 15TH ST
Owner Name NANNIE B TRIGGS

Applicant: DARLENE ROSE POA

Parcel Number: 82
CaseNumber: 11CV7456