

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 \$1370.00 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 1641 N. Van Buren St. #2
TAX KEY NUMBER _____
NAME OF APPLICANT Carey Patterson
MAILING ADDRESS 1641 N. Van Buren St. #2
Milw. WI 53202 414-277-9682
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).

(Use reverse side, if additional space is needed)

MILWAUKEE CITY TREASURER'S
DIVISION
2002 DEC 13 P 1:32

<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. 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?</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 Applicant understands that if this request is withdrawn or denied the City shall retain all of the administrative costs applicant paid.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 Carey Patterson DATE 12-13-02

THE BACK OF THIS DOCUMENT CONTAINS A REFLECTIVE SECURITY MARK • HOLD AT AN ANGLE TO VIEW

TCF NATIONAL BANK

TCF National Bank
500 West Brown Deer Road
P.O. Box 170995
Milwaukee, WI 53217-8096

002990975

Issued by Integrated Payment Systems Inc., Englewood, Colorado
To Citibank (New York State) Buffalo, N.Y. 10-86/220

OFFICIAL CHECK

DATE
DEC 13, 2002

THE AMOUNT IN NUMBERS MUST MATCH THE AMOUNT IN WORDS THE AMOUNT IN NUMBERS MUST MATCH THE AMOUNT IN WORDS
ONE THOUSAND THREE HUNDRED SEVENTY DOLLARS AND NO/100 THE AMOUNT IN NUMBERS MUST MATCH THE AMOUNT IN WORDS THE AMOUNT IN NUMBERS MUST MATCH THE AMOUNT IN WORDS

MATCH THE AMOUNT IN WORDS WITH THE AMOUNT IN NUMBERS

*****370.00*****

PAY TO THE ORDER OF: CITY TREASURER OFFICE

ACCOUNT NO. *****0425 29635

RE: CAREY PATTERSON

Drawer: TCF National Bank
Arl W. Brown

MEMO: TCF National Bank

COUNTER SIGNATURE REQUIRED FOR AMOUNTS OVER \$5,000.00

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