



**Spencer Coggs**  
City Treasurer

**James F. Klajbor**  
Deputy City Treasurer

**Margarita M. Gutierrez**  
Special Deputy City Treasurer

**Robyn L. Malone**  
Special Deputy City Treasurer

**OFFICE OF THE CITY TREASURER**  
**Milwaukee, Wisconsin**

March 26, 2024

To: Milwaukee Common Council  
City Hall, Room 205

From: *EM* Erika Martinez  
Tax Collection and Enforcement Coordinator

Re: Request for Vacation of Inrem Judgment  
Tax Key No.: 2311013000  
Address: 4503 N 26TH ST  
Owner Name: LISA BERK  
Applicant/Requester: LISA BERK  
2023-3 Inrem File  
Parcel: 35  
Delinquent Tax Years: 2019-2023  
Case: 23-CV-5116

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

The City of Milwaukee acquired this property on 12/28/2023.

JFK/em



..Number:  
..Version  
ORIGINAL  
..Sponsor  
THE CHAIR  
..Title

Resolution authorizing the return of real estate located at 4503 N 26<sup>th</sup> ST, in the 1<sup>st</sup> Aldermanic District, to former owner(s) LISA BERK.

..Drafter  
City Treasurer  
Elizabeth Esqueda  
03/27/2024



OFFICE OF THE CITY TREASURER
TAX ENFORCEMENT DIVISION

CITY HALL - ROOM 103 • 200 EAST WELLS STREET • MILWAUKEE, WISCONSIN 53202
TELEPHONE: (414) 286-2260 • FAX: (414) 286-3186 • TDD: (414) 286-2025

FORMER OWNER'S REQUEST TO VACATE
IN REM TAX FORECLOSURE JUDGMENT

FOLLOW THE INSTRUCTIONS LISTED BELOW:

- 1. Type or print firmly with a black ballpoint pen.
2. Use separate form for each property.
3. Refer to the copy of the attached ordinance for guidelines and eligibility.
4. Administrative costs totaling \$1,670 must be paid by Cashier's Check or cash to the City Treasurer prior to acceptance of this application.
5. Complete boxes A, B, C, and D, sign, date the application, and include a copy of government issued photo ID.
6. Forward completed application to the City Treasurer, 200 East Wells Street, Room 103, Milwaukee, WI 53202

APPLICANT INFORMATION:

A. PROPERTY ADDRESS: 4503 N. 26th Street
TAX KEY NUMBER: 2311013000
NAME OF APPLICANT: LISA M. BERK D.O.B. 11/08/61
MAILING ADDRESS: 3900 W. Parkhill Dr
MIL WI 53208 980 254-2598
CITY STATE ZIP CODE TELEPHONE NUMBER
EMAIL ADDRESS: lisa m 4488 @ Gmail. Com

B. WAS THE PROPERTY LISTED IN "A" ABOVE YOUR PRIMARY RESIDENCE? YES [X] NO [ ]
IS THE PROPERTY LISTED IN "A" ABOVE CURRENTLY OCCUPIED? YES [ ] NO [X]

C. LIST ALL OTHER REAL PROPERTY IN THE CITY OF MILWAUKEE IN WHICH YOU HAVE AN OWNERSHIP INTEREST (If not applicable, write NONE.):
none
ADDRESS ZIP CODE
ADDRESS ZIP CODE
ADDRESS ZIP CODE
(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 [X] 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 the City harmless from and against any cost or expense, which may be asserted against the 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. There are no refunds.

APPLICANT'S SIGNATURE: [Signature] DATE: 3/25/24