



IMPORTANT NOTICE: A \$25 FILING FEE MUST ACCOMPANY THIS APPEAL, WITHIN 30 DAYS OF ASSESSED CHARGES.

Checks should be made payable to: City of Milwaukee and a copy of the bill should be included with your appeal

IMPORTANT NOTICE FOR CUSTOMERS PAYING BY CHECK

When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account, or to process the payment as a check transaction.

IF THE CHARGES HAVE ALREADY APPEARED ON YOUR TAX BILL, THIS APPEAL CANNOT BE FILED

PLEASE READ CAREFULLY:

This Board may only determine if the City Department followed proper administrative procedures. It cannot hear appeals as to whether a Building Order is valid or not (those must be appealed to the Standards and Appeals Commission).

TO: Administrative Review Appeals Board
City Hall, Rm. 205
200 E. Wells St.
Milwaukee, WI 53202
(414) 286-2231

DATE: 8/24/18

RE: 5500 N 54th St
4265 N 27th St
(Address of property in question)

Under ch. 68, Wis. Stats., s. 320-11 of the Milwaukee Code of Ordinances, this is a written petition for appeal and hearing.

I am appealing the administrative procedure followed by DEPT. OF NEIGHBORHOOD SERVICES
(Name of City Department)

Amount of the charges \$ 2032.00 + FILING FEE \$25.00 (1016.00) > 2032.00

Charge relative to: VACANT BLDG. REGISTRATION (6 MONTHS)

I feel the City's procedure was improper due to the following reasons and I have attached any supporting evidence, including city employee's names/dates which I spoke to regarding this issue and copies of any city orders received:

IMPROPER AND UNWARRANTED INSPECTION
2544.00 1016.00 VACANT BLDG INSP. RENEWAL FEE
+ DOUBLE \$762.00 x 2
ADDITIONAL BECAUSE HAD CODE VIOLATIONS

Ilona Stank
Signature

ROGER & ILONA STANK HW
Name (please print)

5511 N 53RD ST
Mailing address and zip code
53218

414-461-2208
Daytime phone number

Receipt of A.R.A.B. Appeal Fee

Date:	10/3/18
Received Of:	Ilona Stank
Property at:	5500 N. 54 th St. and 4265 N. 27 th St.
Received By:	LME
Check # (If Applicable):	5202
Amount Received	\$25.00