



# City of Milwaukee Property Registration Program

## Additional Owners

Please Attach to  
Property Registration Form

**Property Address:** \_\_\_\_\_

\_\_\_\_\_  
Last Name First Name MI Jr., III, etc.

\_\_\_\_\_  
Address City State Zip

\_\_\_\_\_  
Phone

### Owned by Legal Entity

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Name of Legal Entity Phone

\_\_\_\_\_  
Registered Agent Last Name First Name MI Jr., III, etc.

\_\_\_\_\_  
Address City State Zip Code

PREFERRED MAILING ADDRESS (optional):

\_\_\_\_\_  
Address City State Zip Code

This material is available in alternative formats for individuals with disabilities upon request. Please contact ADA Coordinator, ADACoordinator@milwaukee.gov, 414-286-3475, TTY: 711. Provide a 72 hour advance notice, seven days for Braille, to ensure accommodation of request.

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