

	DESCRIPTION	ROLL NO	ODOMETER
R-14-7	BRENT, RICHARD 527 N. MORRIS		
E-2-4	BROWN, ELIJAH 2742 N. KERBY		
A-3-9	BROWN, JESSIE MAE (MRS.) 3222 N. GANTENBEIN		
A-3-10	BROWN, JOE 3216 N. GANTENBEIN		
E-2-4	BROWN, RUTH 2742 N. KERBY		
A 3-17	BROWNING, DEMETRIAS 217 N. FARGO		
A 3-17	BROWNING, LOUIS 217 N. FARGO		
A 3-17	BROWNING, ROBERT LOUIS 217 N. FARGO		
R-14-2	BRYSON, DOVIE (MRS.) 536 N. MONROE		
R-8-8	RUFFINGTON, JOHNNY 405 N. FARGO		
A-3-1	BURNS, MABEL (MRS.) 3233 N. VANCOUVER		
E 4-8	CAGE, ANNA 325 N. RUSSELL		
A -4-4	CALDWELL, EDWARD 260 N. IVY		
R-8-3	CALDWELL, HORACE 3247 N. GANTENBEIN		
R-15-3	CATLIN, A.W. 409 N. MORRIS		
R-15-3	CATLIN, ARTHUR 409 N. MORRIS		
E-4-1	CLARK, GEORGE 2651 N. GANTENBEIN		
RS-4-9	CLARK, HUGH E. 7 N. RUSSELL		



1331 N. E. PORTLAND BLVD



527 N. MORRIS

R E S U M E /

DATE 2/5/73

NAME Richard & Lanelle Brent

Mr. and Mrs. Brent were successfully relocated from 527 N. Morris where they were renting, to a standard, three-bedroom, single-family dwelling unit at 1333 N. E. Portland Blvd., which they purchased.

The Brents received a fixed moving allowance and a downpayment assistance for tenants and certain others.

JM:ch

(signed) _____
worker

RESIDENTIAL RELOCATION RECORD

Project Name _____ Parcel No. R-14-7 Advisor NIC
 Client's Name Brent, Richard Phone _____
 Address 527 N. Morris Ethn Black Age 29

- Male Family Married Renter/Occupant
 Female Individual Single Owner/Occupant

Family Composition

Total Number in Family 4
2 wife, husband

Other:	Relation	Age	Relation	Age
	WIFE	23		
	SON	10		
	SON	7		

Economic Data

Employer \$ _____
 Address _____
 Other Source of Income
WELFARE \$ 20400
 _____ \$ _____
 Total Monthly Income \$ (20400)

- Eligible for Public Housing YES NO Presently Receiving Welfare YES NO
 Eligible for Welfare YES NO Other Assistance _____
 Eligible for (Other) YES NO _____

Claimant was displaced from real property within the project area on or after date of pertinent contract for Federal assistance and/or date of HUD approval of budget for project:
 YES NO

Date of initial interview 11-15-71 Date of Info pamphlet delivery 11-15-71
 Date Notice to Move given _____ Date Effective _____ Expires _____

CLAIMANT'S INITIAL DATE OF OCCUPANCY NOVEMBER 1970

(a) for owner-occupants - indicate initial date of occupancy and ownership

Date of initiation of negotiations for purchase of property 5-20-71
 Date of Acquisition 1-4-73
 Date of letter of Intent _____
 Date of move 12-30-71

DWELLING UNIT FROM WHICH RELOCATED

Private Sales	<input checked="" type="checkbox"/>	Single Family	<input checked="" type="checkbox"/>
Private Rental	<input type="checkbox"/>	Duplex	<input type="checkbox"/>
Other	<input type="checkbox"/>	Multiple Family	<input type="checkbox"/>

Age of Housing Unit 1930

Size of Habitable Area 1144

Furnished with claimant's furniture
 YES NO

Total Number of Rooms 7 Rent Paid \$ 125.00 Utilities _____

Number of Bedrooms 2 Monthly Housing Payments \$ _____ Taxes _____

Liens \$ _____ (please explain) _____

Acquisition Price \$ _____ Amenities _____

REPLACEMENT DWELLING UNIT

Address 1333 NE Port Blvd. LPA Referred _____ Self Referred

Private Sales	<input type="checkbox"/>	Single Family	<input type="checkbox"/>
Private Rental	<input type="checkbox"/>	Duplex	<input type="checkbox"/>
Other	<input type="checkbox"/>	Multiple Family	<input type="checkbox"/>

Outside city Outside state

Age of Housing Unit NEW (1972)

Size of Habitable Area 960

No. of Rooms 6 No. of Bedrooms 3

For Claimants Who Purchased

Purchase Price of Replacement Dwelling \$ 18,500.00

Taxes \$ _____

RHP or TACO (including incidental costs) \$ 3,150.00

For Claimants Who Rented

Rent \$ _____

Utilities \$ _____

Total Rent Assistance \$ _____

Amount of Annual Payment \$ _____

No. of Housing Referrals to:

1 Standard Sales

3 Standard Rent

Agency Referrals:

MCW HAP OTHER (_____)

Food Stamp Legal Aid Other (_____)

Benefits Received

Date 12-10-71 Ck # 191EH Type RHP-MC Amount \$ 3,150.00

Date _____ Ck # _____ Type _____ Amount \$ _____

Date _____ Ck # _____ Type _____ Amount \$ _____

RESIDENTIAL RELOCATION RECORD

CLIENT'S NAME BRENT, Richard & Lanell RELOCATION ADVISOR J. McIntosh
 ADDRESS 527 N. Morris PHONE 288-8614 PROJECT NAME Emanuel - R-20
 SEX M ETHN Black VETERAN _____ AGE 29 PARCEL NO. R-14-7
 MARITAL STATUS Married TENURE Tenant
 DISABILITY _____ INDIV _____ FAMILY X
 ELIGIBLE FOR: PUBLIC HOUSING X FHA 235 _____
 RENT SUPPLEMENT _____ OTHER _____
 INITIAL INTERVIEW 11/15/71 DATE INFO PAMPHLET DELIVERED 11/15/71
 NOTICE TO MOVE _____ DATES EFFECTIVE _____ EXPIRATION DATE _____
 NOTIFY IN CASE OF EMERGENCY _____

DATE ON SITE:	<u>Nov. 1970</u>
INITIATION OF NEGOTIATIONS:	<u>5/20/71</u>
DATE OF ACQUISITION:	<u>1/4/73</u>

ECONOMIC DATA

Employer Unemployed \$ _____
 Address _____
 MCW (Helen Weymore) 204.00
 Social Security _____
 Pension _____
 Other _____
 TOTAL MONTHLY INCOME \$ 204.00

FAMILY COMPOSITION

Name	Relation	Age
<u>Lanell</u>	<u>Wife</u>	<u>23</u>
<u>Richard, Jr.</u>	<u>Son</u>	<u>10</u>
<u>Richard Lee</u>	<u>Son</u>	<u>7</u>

DWELLING UNIT FROM WHICH RELOCATED

Subsidized Sales	Single Family	S	SS	Age of Structure _____	No. Rooms <u>7</u>
Subsidized Rental	Multiple Family	<u>X</u>		No. Bedrooms <u>3</u>	Furn. _____ Unfurn <u>X</u>
Public Housing	Duplex			Utilities \$ _____	
Private Rental	Mobile Home			Monthly Payments (Rent) \$ <u>125</u>	
Private Sales				Acquisition Price \$ <u>16,000</u>	
Size of Habitable Area <u>1144</u>				Taxes \$ _____	Equity \$ _____
				Liens \$ _____	

HOUSING REFERRALS

Address	Bedrooms
<u>1333 NE PORTLAND BLVD</u>	<u>3</u>

AGENCY REFERRALS

Name of Agency	Date
<u>Multnomah County Welfare</u>	
<u>Food Stamp Program</u>	
<u>Housing Authority</u>	
<u>Legal Aid</u>	
<u>FISH</u>	
<u>Health Dept.</u>	

AGENCY ACTION:	REASONS:
Appeals	
Victed	
Refused Assistance	
Address Unknown (tracing)	
Other (death, etc.)	

TEMPORARY RELOCATION

Within Project	
Outside Project	

Date Moved In _____
 Address _____
 Reason _____

REPLACEMENT DWELLING UNIT

Client Referred X LFA Referred _____

Address 1333 N. E. Portland Blvd. Phone _____ Date of Move 12/30/71

WHERE RELOCATED:				S	SS
Same City	X	Subsidized Sales		Single Family	X
Outside City		Subsidized Rental		Multiple Family	
Out of State		Public Housing		Duplex	
		Private Rental		Mobile Home	
		Private Sales	X		

Furnished _____ Unfurnished X Number of Rooms 6 Number of Bedrooms 3 Habitable Area 960

Utilities \$ _____ Monthly Payments (Rent) \$ _____ Purchase Price \$ 18,500

Age of Structure: ¹⁹⁷² 6 mos. Taxes \$ _____ Equity \$ _____ Distance Moved Away _____

Name of Moving Company Self-move Name of Realtor Hollcraft Homes

BENEFITS RECEIVED				Purchase Price	\$ 18,500
Type	Ck #	Date	Amount		
RHP	191 EH	12/10/71	\$ 2,850		
TACO (Rental)			\$	Down Payment	\$ 850.00
TACO (Rental)			\$		
TACO (Rental)			\$	RHP	\$ 2,850.00
TACO (Rental)			\$		
TACO (Sales)	27886 G	11/29/71	\$	Total Down	- \$ 3,700
Fixed Moving	191 EH	12/10/71	\$ 500.00	Total Mortgage	\$ 14,800
Actual Move			\$		
Storage			\$		
Incidental			\$		
Interest			\$		
TOTAL BENEFITS RECEIVED			\$ 3,350.00		

REALTOR: Hollcraft Homes ESCROW CO. Pioneer National OFFICER Betty Whitaker

DATE	NOTES	C/W
2/24/71	<p><u>Survey:</u> Unemployed at time of survey. Would like to buy if economically possible.</p>	
11/15/71	<p>Mr. Brent came into our office today. He explained that the people at Albina Realty were interested in showing him some subsidized housing units; but suggested that he come to our office to find out what benefits were due him. Mr. Chet Daniels, co-relocation advisor, and myself outlined the various benefits available to him. Mr. Brent said that his landlord had told him some months ago that the program wasn't in operation and that it would be at least two years before he (Mr. Brent) would have to move. He also mentioned that there were many problems requiring immediate repair at his house that the landord would not fix. He said that he had put out a considerable amount of his own money for some repairs. Due to the landlord's refusal to make necessary repairs, Mr. Brent did not pay his rent and is now expecting to be evicted. Mr. Brent has made application with the samll business administration for a small business loan and therefore would like to stay in the Portland area. He said he already has some potential clients and is quite anxious to move into a two or three bedroom apartment so he can begin his business. Mr. Daniels referred him to an apartment on N. Gantenbein. We suggested, and Mr. Brent agreed, that he wait until he financially sound before buying.</p>	
11/17/71	<p>Called Richard Brent and briefly outline the benefits available to him. He did not rent 'the unit on N. Gantenbein and is goin to meet with Albina Realty to view a number of rent supplement units.</p>	
11/18/71	<p>Mr Brent came into our office and again we briefly outlined the benefits available to him. After moving, he will apply for moving benefits only. After renting for a number of months, he will then apply for his downpayment benefit. However, if they are not financially sound they will opt to receive a rental assistance benefit. It was explained that they have a six month period following their move to apply for the aforementioned benefits. We gave Mr. Brent a letter to deliver to the Housing and Urban Development Office explaining that the Brents were being displaced as a result of the acquisition of the property in which they live by the Portland Development Commission.</p>	
11/22/71	<p>Mailed benefit letter today.</p>	
11/23/71	<p>Mr. Brent came into the office this morning. He said that the Albina Realty Co. had been giving him the run around. He asked if we had any more subsidized rental units that we could refer him to, we told him that we did not. We said that he would spend today looking for a place to live.</p> <p>Helen Weymore, from the Welfare Office at the Multi-Service center, called and said that Mrs. Brent was in her office asking for help in finding a new place to live. She complained that she new very little about the Emanuel program and that we had been giving her the "run-around." I told Mrs. Weymore that the Brents had been in our office at least three times. Mrs. Weymore said that the Brents were paranoic and that they frequented her office with complaints that all the people they deal with are out to get them.</p> <p>The first time that M. Brent came into our office, we explained the various benefits that were available to him. Chet Daniels referred him to a two bedroom subsidized housing unit on N. Gantenbein. Mr. Brent looked at the unit, liked it, but did not rent it because he felt obligated to Albina Realty who was trying to rent him a place. However, Albina Realty has not been very (helpful in locating a unit for them to rent.</p>	

INTERVIEW REGISTER

Date

Relocation
Worker

Mrs. Brent came into our office in a hurry. After a lengthy discussion it turns out that the basic problem is in the fact that Mr. and Mrs. Brent do not communicate with each other. Mr. Brent had not been telling her the information related to him by our office.

I drove Mrs. Brent to offices of the Portland Housing Authority where she registered for public housing. They told her that there might be a unit available by December 8th. Thus, it seems at this time that the best thing to do would be to locate some temporary housing for the Brents.

Stan Jones, project supervisor, authorized an interim payment of \$200, dislocation allowance, so that the Brents would have enough money to pay the rent at a new unit.

11/26/71 Claim forms were prepared and processed for payment.

11/26/71 Stan Jones, project supervisor, informed me that there was a secretarial position open with one of the neighborhood project offices. He requested that I inform Mrs. Brent of said opening. Mrs. Brent was in today and I referred her to the appropriate office.

11/29/71 Mrs. Sue Parr of Community Services, Portland Development Commission called and asked that I contact Mrs. Brent to arrange for an interview.

11/29/71 Mrs. Brent came into our office today. I told her to call Mrs. Parr concerning an interview for the above mentioned job. She called Mrs. Parr from one of our office telephones. It seems that the proposed job would require a considerable amount of evening work. Mrs. Brent cannot work evenings due to a lack of availability of child care for her son. The job would also require an ability to take shorthand and Mrs. Brent cannot take shorthand. While in the office, I called Mrs. Leach, at the Housing Authority, and asked about the estimated length of time before a unit was made available for the Brent's. She said at this time there was nothing available. However, the ~~Hammix~~ Brents were being considered for a unit that might be available after the 8th of Dec.

Mrs. Brent asked about their interim payment and I informed her that the claim forms were being processed.

11/29 Received check #27886 for \$200.00 as interim payment for the Brents. We are somewhat hesitant to pay the Brents their \$200.00. They are not paying rent where they are currently staying thus they should be able to get by on their welfare benefits of \$204.00. The Brents want their dislocation allowance to pay their past due electric bill. Since the Brents are not paying rent they should be able to survive on benefits received. If we pay them their dislocation allowance at this time, they may find themselves short of the required monies when they move into public housing.

11/30 Mr. Hollcraft, building contractor, brought Mr. and Mrs. Brent into our office yesterday afternoon. The Brent's signed an earnest money receipt with Mr. Hollcraft to purchase a ~~two~~³ bedroom house at 1333 N.E. Portland, Blvd. The Brent's are entitled to receive, from us, a downpayment assistance of 2,850.00. They gave us a letter authorizing us to place in their escrow account at Pioneer National Title Insurance Co., the sum of \$2,850.00 representing their Replacement Housing Payment for Tenants and Certain others, together with their moving cost allowance and dislocation allowance in the total sum of \$500.00.

12/1 Called housing authority and arranged to have unit at 1333 N.E. Portland Blvd., inspected. Called Housing Authority and informed them of the Brent's recent decision.

INTERVIEW REGISTER

Date		Relocation Worker
12/1	Mr. Hollcraft called and gave me the escrow account number for the Brent's. The account number is 388890 and said account we be handled by Betty Whitaker of the Pioneer National Title Insurance co., whose branch office is located at 227 N.E. 122nd. Mr Hollcraft will send us a verification on the issuance of a title insurance policy.	JMc
12/2	Mr. Herb Farthing, housing inspector, inspected the dwelling at 1333 N.E. Portland Blvd., today.	
12/3	Received notification from Mr. Holcraft that he instructed Betty Whitaker to credit Richard L. Brent's Escrow Account Number 388890 at PNTI Co. with \$350.00 cash which he has deposited with him as his share of the down payment on the house located at 1333 N.E. Portland Boulevard.	
12/6	Received notification that the unit at 1333 N.E. Portland Blvd is in standard condition. Received copy of title insurance. Prepared claim forms and sent them to main office along wiht letter signed by the Brents authorizing us to place money in escrow. It was determined that the Brent's were eligible to receive XXXXXX \$300 moving benefit. It was determined that the amount necessary for a conventional loan was \$3,700.00. Thus the matching amount necessary for the Brents to supply is \$850.00. They will use their moving benefit and dislocation allowance plus an additional \$300 as as matching funds.	JMc
12/10/71	Received warrant #191 EH in the amount of \$3,150.00 which represents a Replacement Housing Benefit of \$2,850.00 plus a \$300 moving benefit. Mailed check #27886 G in the sum of \$200.00 and warrant number 191 EH in the sum of \$3,150.00 to Pioneer National Title Insurance Co. They were directed to deposit the above amounts in Brent's escrow account and to apply them to the purchase price of the house at 1333 N.E. Portland Boulevard in the form of a downpayment.	
12/16	Received notification from escrow that deal on dwelling at 1333 N.E. Portland Blvd. was closing.	
12/17	Mailed letter to Brents requesting that they return keys to former unit and that they sign release of personal property at former unit;	J. Mc

File Closed

December 17, 1971

Mr. and Mrs. Richard Brent
1333 N. E. Portland Blvd.
Portland, Oregon

Dear Mr. and Mrs. Brent:

We are enclosing a release of personal property form for your signature. After signing, will you please return the form to our office in the enclosed, stamped, self-addressed envelope.

At your convenience, will you please return the keys to your former dwelling at 527 N. Morris to our Emanuel Site Office at 235 N. Monroe.

Your cooperation in this matter will be greatly appreciated.

Very truly yours,

Benjamin C. Webb
Chief of Relocation and
Property Management

BCW/JM:ch
Enclosure

Pioneer National Title Insurance Company

421 SOUTHWEST STARK ST.
PORTLAND, OREGON 97204



AC 6 PNTI (7-67)

RECEIVED FROM <i>Portland Development Co.</i>		DATE <i>12-13-71</i>	
<i>(Hallcraft Homes - Brent)</i>		ACCOUNT NO. <i>388890</i>	
FUNDS REC'D	DESCRIPTION	AMOUNT	
<i>Warrant No. 197</i>	<i>warrant from City of Portland</i>	<i>3,150</i>	<i>-</i>
<i>24-105</i>	<i>Business check</i>	<i>200</i>	<i>-</i>
		TOTAL	<i>3,350 -</i>
CHECKS ARE RECEIVED UPON THE CONDITION THAT THE PROCEEDS WHEN COLLECTED, LESS COLLECTION CHARGES, IF ANY, WILL BE CREDITED TO THE ABOVE ACCOUNT.		RECEIVED BY <i>B. Whitaker</i>	
		RECEIPT NO.: R455486	



Pioneer National Title Insurance Company

227 N.E. 122ND AVENUE • P.O. BOX 16595 • PORTLAND, OREGON 97233 • TELEPHONE 224-0550

December 14, 1971

OREGON DIVISION

Portland Development Commission
Site Office
Emanuel Hospital Project
235 N. Monroe St.
Portland, Oregon 97227

ESCROW NO. 388890-
RE: Hollcraft Homes - Brent
1333 N.E. Portland Blvd.

In connection with the above numbered Escrow, we enclose the following:

() Statement of Receipts and Disbursements one copy of buyer's
() Our check # in the sum of \$

() Deed recorded		Book	Page
records of	County,		
() Mortgage recorded		Book	Page
records of	County,		
() Note dated		in the sum of \$	
() Title Insurance Policy No.		in the sum of \$	
() Fire Insurance Policy in the amount \$			
(X) Receipt number R455486			

Any other documents to which you are entitled will be forwarded as soon as they are available.

Yours very truly,
Pioneer National Title Insurance Company

By: Betty L. Whitaker
(Mrs.) Betty Whitaker, Escrow Officer

vas

Pioneer National Title Insurance Company

Oregon Division • 421 S.W. Stark Street • Telephone 224-0550 • Portland, Oregon 97204

East Multnomah County Branch Telephone: ext 213

Esc. No. 388890

ESCROW STATEMENT

December 13 1971

Brent, Richard L & Lanelle, H/W
PROPERTY ADDRESS **1333 N.E. Portland Blvd.**

DESCRIPTION	Debit		Credit	
	\$		\$	
Deposit of earnest money with Seller			350.00	
Deposit by Portland Development Commission			3,350.00	
Demand-Deposit				
Title Insurance Policy No.				
Escrow Fee				
Taxes (No pro-rates)				
City Liens				
Reconveyance				
RECORDING				
Deed to				
Deed to				
Mortgage to				
Trust Deed to				
Release of Mortgage to				
Reconveyance				
Contract between and				
% Interest Adjustment on \$ from to				
Insurance pro rata on \$ from to				
Paid for real estate commission				
Paid Hollcraft HOMes, due for sales price		18,500.00		
Paid for				
Credit to Buyer for balance due on Contract			14,800.00	
Balance - Our Check Herewith				
Balance - Debit				
TOTAL		18,500.00	18,500.00	

This covers money settlement only.
Any papers to which you are entitled
will follow later.

Pioneer National Title Insurance Company

By Betty L. Whitaker
(Mrs.) Betty L. Whitaker

Note: No Pro-rates
vas

Note:

December 10, 1971

Pioneer National Title Insurance Co.
122nd Avenue Branch
P. O. Box 16595
Portland, Oregon

ATTENTION: Betty Whitaker

Re: Escrow Account No. 388890
BRENT, Richard L. and Lanelle

Gentlemen:

Enclosed is our check number 27886 G in the sum of \$200.00, and our warrant number 191 EH in the sum of \$3,150.00 which are for deposit to the above subject escrow account. The total of these sums (\$3,350.00) must be applied to the purchase price of the house at 1333 N. E. Portland Boulevard in the form of a downpayment. To satisfy federal requirements we must receive a copy of the closing statement clearly indicating that the above sums, together with the \$350.00 deposited with you by Thomas J. Holcraft, were applied on the downpayment for the purchase of this house and not used for any other purposes.

We appreciate your cooperation in this matter. Please feel free to contact us if you have any questions regarding allocation of these funds.

Very truly yours,

W. Stanley Jones
Relocation Supervisor

WSJ:sic

enc.

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
 PORTLAND, OREGON 97201

N^o 191 EH

DATE December 10, 1971

PAY TO **Pioneer National Title Insurance Company**

\$3,150.00

DOLLARS

TO THE TREASURER OF THE
 CITY OF PORTLAND, OREGON

AUTHORIZED SIGNATURE
NON-NEGOTIABLE

AUTHORIZED SIGNATURE

Portland Development Commission · 224-4800

DETACH BEFORE DEPOSITING CHECK

DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUNT
		Deposit in escrow for Richard L. and Lanelle Brent. Replacement Housing Payment for Tenants per claim filed. From 527 N. Morris (R-14-7). Lum Sum RHP \$2,850.00 Fixed payment - Family \$500.00 Less Dislocation Allowance Pd. 11/29/71, Ck. #278866 <u>(200.00)</u> Fixed payment - own furniture <u>300.00</u> Total Due Claimant <u>\$3,150.00</u>	

Account Distribution

NO.	TITLE	AMOUNT
E 1501	Relocation Payment EH (Relocation Housing - \$2,850.00) (Fixed Payment - Family 300.00)	<u>\$3,150.00</u>

AL

JMS

CLAIM FOR REPLACEMENT HOUSING PAYMENT
FOR TENANTS AND CERTAIN OTHERS

NAME, ADDRESS, AND ZIP CODE OF DISPLACING AGENCY:
Portland Development Commission
1700 S.W. Fourth Avenue
Portland Oregon 97201

PROJECT NAME (if applicable)
Emanuel
PROJECT NUMBER: ORE R-20

INSTRUCTIONS: Complete all applicable items and sign certification in Blank 6. Consult the displacing agency as to whether you need a Claimant's Report of Self-Inspection of Replacement Dwelling to complete and submit with this claim. Omit Block 4 if you have moved into a rental unit. Omit Block 3 if you have purchased and occupied a dwelling unit. Complete only Blocks 1 and 5 if you are a homeowner temporarily displaced because of code enforcement or voluntary rehabilitation.

PENALTY FOR FALSE OR FRAUDULENT STATEMENT. U.S.C. Title 18, Sec. 1001, provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies. . . or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both."

1. FULL NAME OF CLAIMANT
Richard and Lanelle Brent

Family Individual

2. DWELLING UNIT FROM WHICH YOU MOVED

PARCEL NO. R-14-7

a. Address: 527 N. Morris
Portland, Oregon
b. Apartment or room number: House
c. Number of bedrooms: 2

d. Monthly rental: \$ 100.00
e. Date you moved out of this dwelling: 12/16/74
Month-Day-Year

3. DWELLING UNIT TO WHICH YOU MOVED (RENTAL)

a. Address (include ZIP Code): _____
b. Apartment or room number: _____
c. Number of bedrooms: _____

d. Monthly rental: \$ _____
e. Date you moved into this dwelling: _____
Month-Day-Year

4. DWELLING UNIT TO WHICH YOU MOVED (PURCHASE)

a. Address (include ZIP Code): 1333 N.E.
Portland Blvd., Portland, Oregon
b. Number of bedrooms: 3
c. Downpayment: \$ 2,850.00

d. Incidental expenses (total from table on next page): \$ N/A
e. Date you purchased this dwelling: December
November 30, 1971

5. INFORMATION IN SUPPORT OF CLAIM OF HOMEOWNER TEMPORARILY DISPLACED BECAUSE OF CODE ENFORCEMENT OR VOLUNTARY REHABILITATION

a. Address of dwelling unit from which you moved: _____
b. Address of dwelling unit to which you moved (include ZIP code): _____
c. Date of move: _____
Month-Day-Year

d. Monthly rental for temporary unit: \$ _____
e. Will you require temporary housing for more than 3 months?
 Yes No
If "Yes", total number of months you will require temporary housing: _____ months

6. I submit this information in support of a claim for a Replacement Housing Payment under Section 204 of P.L. 91-646, and I certify under the penalties and provisions of U.S.C. Title 18, Section 1001, and any other applicable law, that the information submitted herewith has been examined by me and is true, correct, and complete, and that I understand that, apart from the penalties and provisions of U.S.C. Title 18, Section 1001, and any other applicable law, falsification of any item submitted herewith may result in forfeiture of the entire claim.

November 30, 1971
Date

Richard L Bent
Signature of Claimant (s)

Complete the following table if you have incurred incidental expenses in connection with the purchase of your replacement dwelling:

Item (a)	COSTS INCURRED BY CLAIMANT			FOR LOCAL AGENCY USE
	Charged to Claimant on Closing Statement (b)	Paid Directly by Claimant (c)	Amount Claimed (Col. (b) + (c)) (d)	Amount Approved (e)
	\$	\$	\$	\$
TOTAL	\$	\$	\$ <u>1/</u>	\$

1/ Enter this amount in Block 4, Line d.

Listing of enclosed documents in support of amounts entered in Column (d) above:
(Documentation must be provided to support any claim for incurred costs.)

NAME & ADDRESS OF CLIENT:

Richard and Lanelle Brent
527 N. Morris
Portland, Oregon

COMPUTATION PREPARED BY:

McIntosh
November 30, 1971
Date

A. COMPUTATION OF DOWNPAYMENT ASSISTANCE FOR CLAIMANT MOVED TO UNIT PURCHASED

Required Information

- IF// 1. Amount necessary for downpayment - *conventional* \$ 3,700.00
 2. Costs incidental to purchase (Total amount approved by agency, from table on claim form, Column (e)) \$ -0-

Computation

3. Base amount (Sum of Lines 1 and 2) \$ 3,700.00

NOTE: If Line 3 is \$2,000 or less, skip Lines 4, 5, and 6 and enter the amount of Line 3 on Line 8 a.

4. Amount on Line 3 in excess of \$2,000

Line 3 \$ 3,700.00
 - \$ 2,000.00

\$ 1,700.00

5. Amount on Line 4 divided by 2

Line 4 \$ 1,700.00
 2

\$ 850.00

\$850
 500
\$350.00

6. Matching amount (If amount on Line 5 exceeds \$2,000, enter \$2,000. Otherwise, enter the amount on Line 5.) \$ 850.00

7. Base amount (Sum of amount on Line 6 and \$2,000)

Line 6 \$ 850.00
 + \$ 2,000.00

\$ 2,850.00

8. Amount of downpayment assistance

a. Amount on Line 3 or Line 7 \$ 2,850.00

b. Minus adjustments (attach explanation; e.g., amount previously received for rental assistance payment)

- \$ -0-

\$ 2,850.00

(Enter this amount in the space provided in Block 4 on page one of this form.)

**CLAIM FOR RELOCATION PAYMENT FOR FIXED
PAYMENT (FAMILIES AND INDIVIDUALS)**

NAME, ADDRESS AND ZIP CODE OF LOCAL AGENCY

Portland Development Commission
1700 S.W. Fourth Avenue
Portland, Oregon 97201

PROJECT NAME (if applicable)

Emanuel
Project Number: ORE R-20

PENALTY FOR FALSE OR FRAUDULENT STATEMENT. U.S.C. Title 18, Sec. 1001, provides:

"Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies . . . or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both."

1. FULL NAME OF CLAIMANT Richard and Lanelle Brent Family Individual

2. DATE(S) OF MOVE

12-16-71

3. DWELLING UNIT FROM WHICH YOU MOVED PARCEL NO. R-14-7

- | | |
|---|--|
| a. Address <u>527 N. Morris</u>
<u>Portland, Oregon</u> | d. Number of rooms occupied (excluding bathrooms, hallways, and closets): <u>7</u> |
| b. Apartment, Floor, or Room Number <u>(house)</u> | e. Date you moved into this address: <u>November, 1970</u> |
| c. Was it furnished with your own furniture?
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

4. DWELLING UNIT TO WHICH YOU MOVED

- | | |
|---|--|
| a. Address (include ZIP Code) <u>1333 N.E.</u>
<u>Portland Blvd., Portland, Oregon</u> | c. Were household goods moved to or from storage?
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If "Yes", complete table, "Statement of Claim for Storage Costs" |
| b. Apartment, Floor, or Room Number <u>(house)</u> | |

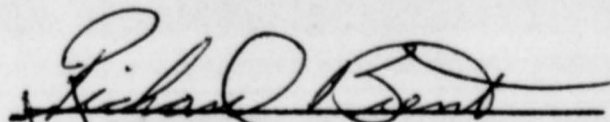
5. TOTAL CLAIM (if 5 b. marked above)

Dislocation Allowance	<u>\$200.00</u>	Paid Nov. 29, 1971 Ck#27886G
Fixed Moving Payment (Consult local agency)	<u>\$300.00</u>	
	Total	<u>\$ 300.00</u>

6. I CERTIFY under the penalties and provisions of U.S.C. Title 18, Sec. 1001, and any other applicable law, that this claim and information submitted herewith have been examined by me and are true, correct and complete, and that I understand that, apart from the penalties and provisions of U.S.C. Title 18, Sec. 1001, and any other applicable law, falsification of any item in this claim or submitted herewith may result in forfeiture of the entire claim. I further certify that I have not submitted any other claim for, or received, reimbursement or compensation from any other source for any item of loss or expense paid pursuant to this claim, and that any bills or receipts submitted herewith accurately reflect moving services actually performed and/or storage costs actually incurred.

November 30, 1971

Date


Signature of Claimant

DETERMINATION OF ELIGIBILITY FOR RELOCATION PAYMENT
FOR MOVING EXPENSES (FAMILIES AND INDIVIDUALS)

NAME AND ADDRESS OF CLAIMANT

Richard and Lanelle Brent
527 N. Morris

NAME OF LOCAL AGENCY

Portland Development Commission

INSTRUCTIONS: Attach this form to the pertinent claim form filed by claimant. Attach an explanation of any difference between amounts claimed and amounts approved.

1. Does claimant meet basic eligibility requirements? Yes No

If "No," explain:

2. Complete if claim is for a fixed payment including an amount for moving articles located in household storage space:

Date items inspected: 11 - 30 - 71
Month-Day-Year

3. If claim is for a self-move, does approved amount exceed estimated cost of accomplishing the move through services of a commercial mover or contractor?

Yes No

If "Yes," explain basis for approved amount:

4. CERTIFICATION

I CERTIFY that I have examined the claim, and the substantiating documentation, and have found it to be in accord with the applicable provisions of Federal law and the regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, the claim is hereby approved and payment is authorized as follows:

(form continued on next page)

(For Local Agency Use Only)

(Complete either A or B:)

Item	Amount <u>1/</u>	Authorized Signature	Date
A. Fixed Payment and Dislocation Allowance	\$		
1. Fixed payment \$ <u>300.00</u>			
2. Dislocation allowance \$ <u>(paid)</u>			
3. Total \$ <u>300.00</u>	<u>\$300.00</u>	<i>[Signature]</i>	<u>12-7-71</u>
B. Actual Moving and Related Expenses	\$		
1. Initial payment including, if applicable, storage and related costs in the amount of \$ _____	_____	_____	_____
2. Supplementary payment (s) for storage costs:	_____	_____	_____
3. Final payment for moving expenses covering storage and related costs	_____	_____	_____

[Handwritten initials]

1/ Attach full explanation of any adjustments made; e.g., amount set off against claim or amount of dislocation allowance made as an advance payment.

5. RECORD OF PAYMENTS MADE

Date	Check Number	Amount	Date	Check Number	Amount
		\$			\$

CONNIE McCREADY
COMMISSIONER
DEPARTMENT OF PUBLIC UTILITIES



CITY OF PORTLAND
OREGON

97204

BUREAU OF BUILDINGS
CITY HALL

C. N. CHRISTIANSEN, Director
Building Division
C. C. Crank, Chief
Electrical Division
R. A. Niedermeyer, Chief
Plumbing Division
George W. Wallace, Chief
Permit Division
Albert Clerc, Chief
Housing Division
S. J. Chegwiddden, Chief

December 3, 1971

Portland Development Commission
235 N. Monroe Street
Portland, Oregon 97227

Re: 1333 N.E. Portland Boulevard

Attn: Jim McIntosh

Gentlemen:

As the result of a displaced person and at your request, an inspection was made by the Housing Division of the one-story, wood frame, three bedroom, single-family dwelling and attached garage at the above address.

Our inspector reports the structure is in standard condition and complies with City Housing regulations at this time.

Yours truly,

C. N. CHRISTIANSEN
BUILDING INSPECTIONS DIRECTOR

S. J. Chegwiddden
Chief Housing Inspector

CHF:mfm

cc: Thos. J. Hollcraft
3354 S.E. Hawthorne Blvd
Portland Dev. Comm.
5630 N.E. Union Ave.



3354 S.E. HAWTHORNE BV.
PORTLAND, OREGON 97214
TELEPHONE (503) 236-2141

December 2, 1971

Mr. James W. McIntosh
Portland Development Commission
235 N. Monroe
Portland, Oregon

Dear Mr. McIntosh:

This is to inform you that we have this day instructed Betty Whitaker to credit Richard L. Brent's Escrow Account Number 388890 at PNTI Co. with \$350.00 cash which he has deposited with us as his share of the down payment on the house located at 1333 N.E. Portland Boulevard.

Sincerely,

Thomas J. Hollcraft, President
HOLLCRAFT HOMES, INC.

TJH:sb

cc: Betty Whitaker
Pioneer National Title Co.
227 N. E. 122nd P.O. Box 16595
Portland, Oregon

MEMORANDUM

TO: File

FROM: James W. McIntosh

SUBJECT: Mr. and Mrs. Richard Brent

Mr. and Mrs. Richard Brent currently occupy and rent a dwelling at 527 N. Morris that is within the Emanuel Project area. Their initial date of rental of said house was November 1970; thus qualifying them for moving benefits, a rental assistance payment or a downpayment benefit. The house at 527 N. Morris has two stories with two bedrooms upstairs and two down. The Brents occupied the entire lower level including one bedroom upstairs. The remainder of rooms upstairs were sub-rented to a Donna Parks. The Brents rented the entire house from the owner (verified by landlord) and then sub-let a portion to their friend Mrs. Parks and her children who were temporarily in need of housing while her husband was in prison.

OWNER'S
EARNEST MONEY RECEIPT

Portland Oregon

Nov. 30, 1971

RECEIVED OF Mr. & Mrs. Richard L. Brent, husband & wife hereinafter mentioned as the purchaser, the sum of Note for Five Hundred & 00/100 (\$ 500.00) Dollars as earnest money and in part payment for the purchase of the following described real estate situated in the City of Portland, County of Multnomah, State of Oregon, and more particularly described as follows, to-wit:

Lot 12, Block 22, Columbia HTS
otherwise known as 1333 N.E. Portland Blvd.

for the sum of Eighteen Thousand five Hundred & 00/100 Dollars \$ 18,500.00 on the following terms, to-wit: The earnest money hereinabove received for \$ Note 500.00 upon acceptance of title and delivery of deed or delivery of contract . . . \$ 18,000.00; balance of Eighteen Thousand & 00/100 Dollars \$. . . ; payable as follows Subject to Buyer assuming present mortgage for 14,500.00; Balance of 3,500.00 to come from Emmanuel Project funds of P.D.C. for displacement.

Subject to closing by December 15, 1971

A title insurance policy from a reliable company insuring marketable title in the seller is to be furnished the purchaser forthwith at seller's expense; preliminary to closing, seller may furnish a title insurance company's title report showing its willingness to issue title insurance, and such report shall be conclusive evidence as to status of seller's title. None

It is agreed that if the title to the said premises is not marketable, or cannot be made so within thirty days after notice, with a written statement of defects, is delivered to seller, the earnest money herein received for shall be refunded. But if the title to the said premises is marketable, and the purchaser neglects or refuses to comply with any of the conditions of this sale within . . . days and to make payments promptly, as hereinabove set forth, then the earnest money herein received for shall be forfeited to the seller as liquidated damages, and this contract shall thereupon be of no further binding effect.

The property is to be conveyed by good and sufficient deed free and clear of all liens and encumbrances to date except Zoning Ordinances, building restrictions, taxes due and payable for the current fiscal year and None

Seller and purchaser agree to pro rate the taxes which become due and payable for the current fiscal year on a fiscal year basis. Rents, interests and premiums for existing insurance shall be pro rated on a calendar year basis. Adjustments are to be made as of the date of the consummation of the sale herein or delivery of possession, whichever first occurs.

Possession of said premises is to be delivered to purchaser on or before closing, 19 Time is of the essence hereof. This contract is binding upon the heirs, executors, administrators and assigns of the purchaser and seller. However, the purchaser's rights herein are not assignable without written consent of seller. In any suit or action brought on this contract, the prevailing party shall be entitled to recover reasonable attorney's fees to be fixed by the court, and if an appeal is taken from any judgment or decree entered therein, the prevailing party shall be entitled to recover such sum as the appellate court shall adjudge as reasonable attorney's fees.

Special conditions: Seller to furnish Drapes throughout house and refrigerator. Seller to pay closing costs if any.

Hollcraft Homes, Inc
by Thomas J. Hollcraft, pres. Owners

I hereby agree to purchase the above property and to pay the price of Eighteen Thousand five Hundred & 00/100 (\$ 18,500.00) Dollars as specified above.

Address 527 N. Morris

Purchaser Richard L Brent

Phone

Lanette Brent



Pioneer National Title Insurance Company

421 S.W. STARK STREET • PORTLAND, OREGON 97204 • TELEPHONE 224-0550

OREGON DIVISION

A consolidated statement of all charges and advances in connection with this order will be provided at closing.

PNTI - EMC

ATTN: Betty

O.P. \$ _____ Prem. \$ _____
M.P. \$ _____ Prem. \$ _____

Gentlemen:

We are prepared to issue title insurance policy in the usual form insuring the title to the land described on the attached description sheet:

Vestee: **HOLLCRAFT HOMES, INC.,
an Oregon corporation.**

Dated as of **November 26**, 19 **71** at 8:00 a.m.

cc: **Hollcraft Homes**
cc: **Portland Develop. Comm.**

Pioneer National Title Insurance Company

By *Dick Grace*
Dick Grace

Subject to the usual printed exceptions and stipulations,

1. **1971-72 taxes, \$91.64; not paid. (Affects other property also)**
(Account No. 17310-4310, Code 001)

2. **Mortgage, including the terms and provisions thereof, executed by Hollcraft Homes, Inc., an Oregon corporation, to Benj. Franklin Federal Savings and Loan Association of Portland, a corporation, dated June 29, 1971, recorded July 1, 1971 in Book 797 page 1992, Mortgage Records, given to secure the payment of a note for \$16,650.00.**

Note: Completion Notice dated September 17, 1971, recorded September 22, 1971 in Book 814 page 632, Mechanics Lien Records.

Note: We find no unsatisfied judgments of record against Richard L. Brent or Lanelle Brent, as of the date hereof.

Report No. **388890**
DG:jlh -- UNIT 4

-----END OF REPORT-----

PRELIMINARY REPORT ONLY

DESCRIPTION SHEET

See page 1 for vesting and encumbrances, if any.

Description of the tract of land which is the subject of this report:

Lot 12, Block 22, COLUMBIA HEIGHTS, in the City of Portland,
County of Multnomah and State of Oregon.

Report No.

388890

November 30, 1971

Portland Development Commission
235 N. Monroe
Portland, Oregon 97227

Gentlemen:

You are hereby authorized to place in my escrow account at Pioneer National Title Insurance Co., the sum of \$2,850.00 representing my Replacement Housing Payment for Tenants and Certain Others, together with my moving cost allowance and dislocation allowance in the total sum of \$500.00.

Richard L Brent

Lanette Brent

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
PORTLAND, OREGON 97201

Nº 27886 G

DATE November 29, 19 71

PAY TO THE ORDER OF **Richard and Lanellie Brent**

\$ 200.00

DOLLARS

NON-NEGOTIABLE

THE FIRST NATIONAL BANK OF OREGON
S.W. Fifth and College Branch
Portland, Oregon

Portland Development Commission · 224-4800

DETACH BEFORE DEPOSITING CHECK

DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUNT
		Reimbursement per Claim for Relocation Payment, 527 N. Morris (R-14-7). Dislocation Allowance	\$200.00

Account Distribution

<u>NO.</u>	<u>TITLE</u>	<u>AMOUNT</u>
E 1501	Relocation Payments (EH) (Fixed - own furniture - Family)	\$200.00

AL

BD

(For Local Agency Use Only)

DETERMINATION OF ELIGIBILITY FOR RELOCATION PAYMENT
FOR MOVING EXPENSES (FAMILIES AND INDIVIDUALS)

NAME AND ADDRESS OF CLAIMANT:

Richard Brent
527 N. Morris
Portland, Oregon 97227

NAME OF LOCAL AGENCY:

Portland Development Commission
1700 S. W. Fourth Avenue
Portland, Oregon 97201

INSTRUCTIONS: Attach this form to the pertinent claim form filed by claimant. Attach an explanation of any difference between amounts claimed and amounts approved.

1. Does claimant meet basic eligibility requirements? Yes No

If "No," explain:

2. Complete if claim is for a fixed payment including an amount for moving articles located in household storage space:

Date items inspected: _____
Month-Day-Year

3. If claim is for a self-move, does approved amount exceed estimated cost of accomplishing the move through services of a commercial mover or contractor?

Yes No

If "Yes," explain basis for approved amount:

4. CERTIFICATION

I CERTIFY that I have examined the claim, and the substantiating documentation, and have found it to be in accord with the applicable provisions of Federal law and the regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, the claim is hereby approved and payment is authorized as follows:

(For Local Agency Use Only)

(Complete either A or B:)

Item	Amount <u>1/</u>	Authorized Signature	Date
A. Fixed Payment and Dislocation Allowance	\$		
1. Fixed payment \$ _____		<i>[Signature]</i> 3610	<u>11-29-71</u>
2. Dislocation allowance \$ <u>200.00</u>			
3. Total \$ <u>200.00</u>	<u>200.00</u>		
B. Actual Moving and Related Expenses	\$		
1. Initial payment including, if applicable, storage and related costs in the amount of \$ _____	_____	_____	_____
2. Supplementary payment (s) for storage costs:	_____	_____	_____
3. Final payment for moving expenses covering storage and related costs	_____	_____	_____

1/ Attach full explanation of any adjustments made; e.g., amount set off against claim or amount of dislocation allowance made as an advance payment.

5. RECORD OF PAYMENTS MADE

Date	Check Number	Amount	Date	Check Number	Amount
<u>11/29/71</u>	<u>278866</u>	<u>\$ 200.00</u>	<u>30</u>		\$

PORTLAND DEVELOPMENT COMMISSION

SITE OFFICE
EMANUEL BISHOPITAI PROJECT
255 N. MONROE ST.
PORTLAND, OREGON 97227
PHONE 255-9168

November 23, 1971

Housing Authority of Portland
4400 N. E. Broadway
Portland, Oregon 97213

Gentlemen:

This is to inform you that Mr. and Mrs. Richard Brent
of 529 N. Morris, Portland, Oregon 97227
who wishes to file an application with your office will be displaced
as a result of the acquisition of the property, in which he (or she)
resides, by the Portland Development Commission in the urban renewal
project, ORE R-20.

Thank you for any help that you may render Mr. and Mrs.
Brent in his (her) efforts to obtain suitable housing.

Very truly yours,

W. Stanley Jones

WSJ:slc

PORTLAND DEVELOPMENT COMMISSION

SITE OFFICE
EMANUEL HOSPITAL PROJECT
255 N. MONROE ST.
PORTLAND, OREGON 97227
PHONE 288-8188

November 22, 1971

Mr. Richard Brent
527 N. Morris
Portland, Oregon

Dear Mr. Morris:

A thorough study has been made of the property you rent, the neighborhood in which you live, and the availability of like property in the general area. The relocation benefits to which you are eligible are as follows:

Relocation advisory assistance to help you find a replacement dwelling.

Moving payment to compensate you for the actual cost of moving your personal property, not to exceed 50 miles.

Rent supplement should you decide to rent instead of purchase. If you purchase and file a claim within six months from date of move, you will receive an additional amount which, when added to the rent supplement already paid, will equal the downpayment benefit to which you are entitled. All rental replacement housing payments in excess of \$500 will be made in four equal installments on an annual basis.

An amount to be used as the downpayment on a replacement property. Any downpayment benefit claimed in excess of \$2,000 requires that the relocatee contribute 50% of the amount in excess of \$2,000. The full amount of the downpayment and incidental costs claimed must be shown in the closing statement. The combined total of the downpayment benefit and incidental costs claimed cannot exceed \$4,000.

The Act provides that the relocation benefits shall not be considered as income for the purposes of the (Federal) Internal Revenue Code of 1954, or for the purpose of determining eligibility or the extent of

Page 2.

eligibility of any person for assistance under the Social Security Act or any other Federal law."

If you need additional information, please contact me at my office located at 235 N. Monroe Street, Portland, Oregon 97227. My telephone number is 288-8169.

Very truly yours,

James W. McIntosh
James W. McIntosh

November 15, 1971

Housing and Urban Development
Portland Area Office
520 S. W. Sixth Avenue
Cascade Building
Portland, Oregon 97204

Gentlemen:

This is to inform you that Mr. and Mrs. Richard Brent of 527 N. Morris, Portland, Oregon who wish to file an application with your office will be displaced as a result of the acquisition of the property, in which they live, by the Portland Development Commission in the urban renewal project, ORE R-20.

Thank you for any help that you may render Mr. and Mrs. Brent in their effort to obtain suitable housing.

PORTLAND DEVELOPMENT COMMISSION

STB OFFICE
EMANUEL HOSPITAL PROJECT
235 N. MONROE ST.
PORTLAND, OREGON 97227
PHONE 255-9100

September 1, 1971

Mr. Richard Brent
527 N. Morris
Portland, Oregon

Dear Mr. Brent:

As you may know, you are situated in the Emanuel Hospital Project which is being carried out with assistance from the U. S. Department of Housing and Urban Development (HUD). The property which you presently occupy will be acquired some time in the future by the Portland Development Commission as part of the approved project plans for this area.

If you are in occupancy on the date the Portland Development Commission acquires the property in which you reside, or are in occupancy at the time of receipt of this letter, you may be eligible for relocation assistance. We strongly advise you to contact us before moving in order to determine your eligibility for benefits. A summary of the types of relocation payments for which you may be eligible is contained in the attached brochure.

We urge you not to form advance opinions as to the benefits and amounts to which you may be entitled. Certain conditions must be met before eligibility can be established and before the amount of benefits, if any, can be determined.

Please check with us before making any move. If you are unable to call during our regular office hours - 8:30 a.m. to 5:00 p.m., Monday through Friday, an alternate appointment can be arranged by calling 255-9100. Our office is located at 235 N. Monroe St.

We look forward to seeing you soon.

Very truly yours,

Benjamin C. Webb
Chief, Relocation and
Property Management

BCW:ch
Enclosure

HOUSING RESOURCES SURVEY

RELOCATION ASSISTANCE NEEDS OF RESIDENTS OF EMANUEL HOSPITAL PROJECT AREA

(To be filled in for each dwelling unit in the Project Area)

Analyst JC Date of survey 2-24-71 Tabulator _____ Date tabulated _____
 Dwelling Unit No. 6 Structure No. 4 Census Block No. 40 Census Tract No. 22A
 Street Address 527 N Morris Apartment No. ---

A. Status Of Relocation Assistance Needs At This Dwelling Unit:

1. Assistance may be needed, yes , no
2. Why no assistance may be needed
 - a. Vacant
 - b. Will be vacated on the following date _____
 - c. Other reasons _____

B. Residents Of This Dwelling Unit Who May Need Relocation Assistance:

No.	Name	Family relation	Age	Sex	Occupation
1.	BRENT, RICHARD	Head of household	29	M	Ex Sec Council
2.	Edith		23	F	SEC.
3.	RICHARD JR		10	M	Student
4.	RICHARD LEE		2	M	
5.	PARKS, DORINDA	(UNRELATED)	27	F	
6.	JEFF		8	M	Student
7.	DANNY		7	M	
8.	DE ANN		4	F	
9.					

C. Family Income And Extent Of Travel To Locations Of Employment:

1. Jobholders in this household, employers and location of jobs: Distance

Names of jobholders	Names of employers	Street address where jobs are located to work	Distance
BRENT, Richard	VERNON Neighborhood	59 N.E. STANTON	
	Care -		

2. Monthly income from jobs and from all other sources received by persons in this household:

Names of persons in this household who have income from any source	Amount of income per month	
	In month before this survey	In an average month during 1970
Richard Brent	\$ Unemployed	\$ 675.00
Dorinda Parks ADC	130.00	estimated
Total family or household income per month	\$ Unemployed	\$

D. Characteristics Of Replacement Housing Needs Expected To Be Sought:

1. Location (indicate approximate cross streets) WITHIN CITY LIMITS
2. Transportation, number of autos owned ---, use bus , walk
3. Will rent house , apartment , expect to pay rent, including utilities, at \$ _____ per mo. (Furniture is owned, yes , no , stove and refrigerator owned, yes , no)
4. Will buy house in price range \$ _____, down payment of \$ _____, monthly payment of \$ _____
5. If now buying this house, how much are payments on contract or mortgage monthly \$ _____
6. Size of unit to be sought, number of bedrooms 4, kitchen 1, dining room 1, living room 1, number of bathrooms 2, total sq. ft. in dwelling unit _____
7. Other characteristics W O B I M

(W)

With Basement

date on site: 4/1/71

HOUSING RESOURCES SURVEY
To be Filled in For Each Dwelling Unit in All Survey Areas

Analyst JC Date _____ Surveyed 2-24-71 Tabulator _____ Date _____
 Dwelling Unit No. 6 Structure No. 4 Census Block No. 40 Census Tract No. 22A
 Street Address 527 N. MORRIS Apartment No. _____
 Legal Description _____

NAME OF OCCUPANT: BENT RICHARD NAME & ADDRESS OF OWNER: REV. ELMERA + CHRISTINE HIGH NAME & ADDRESS OF PROP. MGR: _____
527 N. MORRIS 527 N. MORRIS _____
 TELEPHONE: 288-8614 TELEPHONE: 287-9198 TELEPHONE: _____
 INTERVIEWED? (X) Yes () No INTERVIEWED? () Yes () No INTERVIEWED? () Yes () No

I. DESCRIPTION OF STRUCTURE

Kind of dwelling unit	No. of units in bldg.
<input checked="" type="checkbox"/> One-family house	_____
_____ Apt. in a house	_____
_____ Apt. in apt. bldg.	_____
_____ Apt. in comm. bldg.	_____
_____ Mobile home or trailer	_____

This structure has 1 stories (do not count basement) 27

II. OCCUPANCY STATUS OF DWELLING UNIT

_____ Owner occupied
 Renter occupied
 _____ Vacant

III. SIZE OF DWELLING UNIT

1144 Sq. ft. in first floor (county figure)
1844 Sq. ft. in dwelling unit (if more than 1 floor)
8 Total no. of rooms (include kitchen, dining, living and bedrooms, exclude bathrooms)
2 No. of bathrooms
4 No. of bedrooms (rooms used mainly for sleeping)

IV. ASSESSOR'S MARKET VALUATION DATA

A. Dates or period of time

1971 Period market value data applicable
1967 Date of last appraisal
1930 Date structure was originally built
 _____ Date of any major alterations

B. Market value data for one-family dwelling

	Market value	Computed value per sq. ft.
Land	\$ <u>4000</u>	\$ _____
Improvements	<u>5040</u>	_____
Total	<u>9040</u>	_____

C. Market value data for dwelling unit in a multiple-family structure or commercial bldg.

	Market value for entire structure	Computed value per sq. ft. for this dw. unit
Land	\$ _____	\$ _____
Improvements	_____	_____
Total	_____	_____

_____ Sq. ft. of all d. u. in this structure
 _____ Sq. ft. of commercial space and value of commercial space: Land \$ _____, improvements \$ _____, total \$ _____.

V. RENTAL RATE FOR THIS RENTED UNIT

Monthly average	Cash rent	Utilities	Total paid by renter
Rent	\$ <u>200.00</u>	<u>4/1/71</u>	\$ _____
Electricity	<u>250.00</u>	\$ <u>80.00</u>	_____
Gas	_____	_____	_____
Water	<u>when</u>	_____	_____
Heat (oil, or other)	<u>elec</u>	_____	_____
Total	\$ <u>200.00</u>	\$ <u>80.00</u>	\$ <u>280.00</u>

Deposits required of renter
 Advance rent \$ 200.00, other \$ 50.00

Rental information obtained from
 Tenant , owner _____, manager _____, or estimated from assessor's data _____.

VI. FOR SALE INFORMATION FOR THIS HOUSE THAT IS OCCUPIED BY OWNER OR RENTER

Listed with broker, yes _____, no _____
 Advertised by owner, yes _____, no _____
 Cash asking price \$ _____
 Period house has been for sale, months _____

VII. REMARKS

1 1-71080-4280 HIGH, ELMER A & CHRISTINE Y

MAP: 2730
 ZONE: A25
 RATIO: 1401
 LVY C:001

BY FIRST NATIONAL BANK
 PO BOX 3131
 PORTLAND OREGON 97208

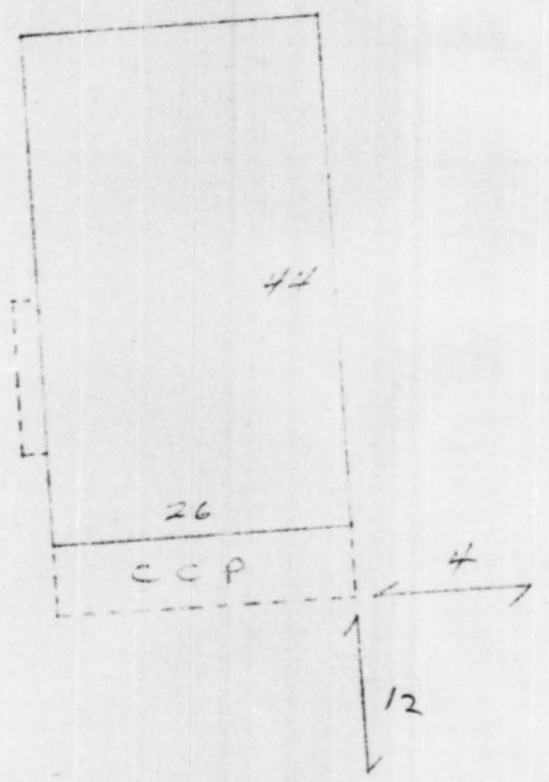
RIVERVIEW SUB *Richard Wilson* LOT BLOCK
Sandy Blvd 11 14

Oct. 6 1970
Book 758 - P. 926
J. Clayton

ext. 411
Any transfer or
Contract buyer

PROPERTY ADDRESS: 527 N MORRIS ST
 PORTLAND

APPEALS:



AVE. OR ST.

AVE. OR ST.

ASSESS YEAR	MIN RIGHTS	SUMMARY - ASSESSED VALUATION - REAL PROPERTY			TOTAL	SIGN. DATE
		TIMBER	LAND	IMPS		
1968			3850	4850	8700	2/3/68
1971			5400	5040	9040	U.D.

Y. Colwell

Rent paid to:
Richard Wilson
G.C. Parker & Assoc. Inc
1035 N.E. Sandy Blvd
Suite 209
282-4505

761-6139 - Home

ECON. G.A.P. A Newer built home was old run down
 COND. G.A.P. DIST. NOT best have use

REMARKS

INSPECTION: OUTSIDE
 CHECKED: DATE 1/31/68 SIGN: *Ken Robinson* DEPUTY
 REVIEWED: DATE MAY 11 1969 BLDG COUNT INDEX RE-CHECKED NOTIFIED

DATE FEB 22 1969
 BY REASLEY S. MILLER

IDENTIFICATION	DATE	ADJUSTMENTS	IND VALUE
18,900	9/70	C	753.672

CLASS	4	STORY	1	AREA	1144	BASE FACTOR	1.05
ADDRESS	527 N. Morris						
FDN.	Con	Br	W.P.	BSMT	Fall	3 4	1 2 1 4
BSMT ROOMS	0						La. Bath
FLOORS	S	Lin	Tile	Hdw	Br	Can	
ROOF	H	F	Alum	Corr	Shk	Tile	Built-Up
EXTER	S	Shks	Siding	Bik	Stuc	Bk	P.D.
INTER	1 1/2	Drywall	Trim	Br	Hdw	Br	Avg
PLUMB G FACILITY	Sink	D.W.	Toil.	W.B.	Tub	Enc	Shower
To Quantity	11		11	11	11		1
HEAT	H.W.	Pkge	Pipe	Floor	Oil	Gas	HA 742
FIREPLACE	Ins	O.S.	S	D	T	1 Sty	2 Sty
ATTIC	Unf	Br	Br	Bath	La	H	1 2 1 4
2ND STY	BR	Bath	La	H			
BAYS	2x13	26 #	DORMERS				
MISC							
MISC	VF & H	R & O	VF	Tile			
OUTSIDE	200 #	BT	Sprinkler	YL			

750
1350
510
340
2500
1200
100
15490

MONTHLY RENTAL \$	X GRM	= S	IND VALUE
ZONING		SITE ADJUSTMENTS	
ROAD TYPE D.G.			
TOPOGRAPHY		4AE	
AREA IMPROVEMENTS		VIEW	
SIDEWALKS & AIRDS		OTHER	
WATER		DEPTH FACTOR	
SEWER		STANDARD DEPTH	
OTHER		EFFECTIVE DEPTH	

LAND DESCRIPTION	SIZE OR ACRES	BASIC UNIT VALUE	ADJUST FACTORS	ADJ. D. UNIT VALUE	VALUE
40 A108 @ 22FF 800' NC			S		800
@ .90 ac	4320	3888			3888

FIRST FLOOR	GARAGE	AREA	REPL COST	ADJ REP COST	TOTAL
Rec Hall	Class				
Serv Hall	Type				
Liv. Rm	Dim. X				
Din. Area	Dim. X				
Form Rm	Fdn	1144	15490	31	4800
Neck	Floor				
Kitchen	Floor				
Utility	Const.	108	282	31	8
Bedroom	Roof				
Bath	Misc				
La					
Den					
TOTAL DEPRECIATED REPLACEMENT COST					4888

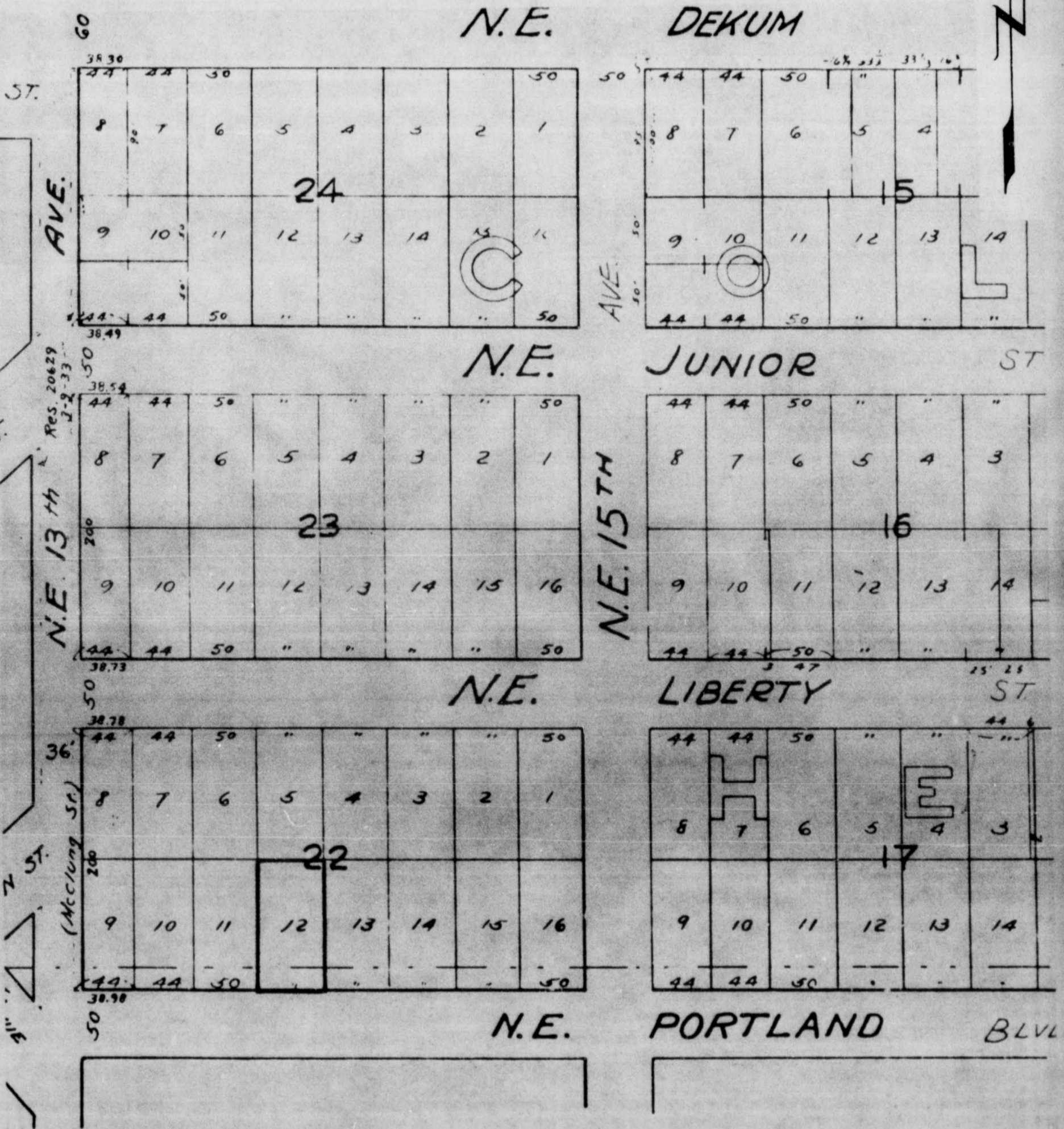
TOTAL AREA	SUB-TOTAL
	3850
REMARKS:	SITE ADJ
	TOTAL APPR VALUE
	19 APPR VALUE
	19 APPR VALUE
	19 APPR VALUE
	19 APPR VALUE

MISC	ADJUSTMENT	Age	APPR. VALUE
Garden shed	BURT	1930	19 68
Dim. 9 x 12	PERM. NO	58	APPR. VALUE
Fdn W.P.	PREV. APPR	19	APPR. VALUE
Const Frame	1962	19	APPR. VALUE
Roof Camp	D.F.A. RM MO	19	APPR. VALUE
MISC	RENTAL	19	APPR. VALUE
Dim X		19	APPR. VALUE
Fdn		19	APPR. VALUE
Const.		19	APPR. VALUE
Roof		19	APPR. VALUE

APPRaiser: *[Signature]* DATE: 4 24 67

The sketch below is made solely for the purpose of assisting in locating said premises and the Company assumes no liability for variations, if any, in dimensions and location ascertained by actual survey.

Pioneer National Title Insurance Company
Title and Trust Division



388890

R E C E I P T

I hereby acknowledge receipt of a copy of the Portland Development
Commission's RELOCATION SERVICES FOR FAMILIES AND INDIVIDUALS.

Richard L. Beant

11/15/71

date