	DESCRIPTION	 ROLL NO	ODOMETER
AB 1-3	DOWNING, JACK L 2803 N. COMMERCIAL		
A 2-4	DREW, JOHN 3102 N. GANTENBEIN	 •	
A 4-7	DUMAS, LUCILLE 3316 N. GANTENBEIN		
A 4-7	DYE, JONAS 3316 N. GANTENBEIN		
RS 3-4	EADEN, ALEX, JR. 2740 N. VANCOUVER		
A 2-5	EDWARDS, CHESTER . 227 N. MONROE		
A 4-11	ELLIS, ROSCOE 233 N. COOK		
R 8-9	FAULKNER, FANNIE 327 N. FARGO		
E 2-5	MACK, FERRELL A. 2732 N. KERBY		
R 9-7	FIELD, HERBERT 417 N. MONROE	•	
E 2-7	FISCHMAN, STEPHEN M. 553 N. KNOTT		
E 3-7	FLORES, JESSIE 540 N. KNOTT		
E-4-7	FLOWERS, LONNIE 423 N. RUSSELL		
A 2-8	FRAHS, THEODORE 3111 N. VANCOUVER		
AB 3-2	FRARY, MYRA L. .2932 N. COMMERCIAL		
R 10-2	FRYKMAN, MARGARET 3137 N. COMMERCIAL		
R 10-10	GARNETT, ALBERT 529 N. MONROE		
RS 3-6	GLASS, LILLIAN (CONLEY) 2728 N. VANCOUVER		

NAME Glass, Lillian L.

PROJECT Oreg R-20

CHECKLIST FOR RELOCATION FILES -- INDIVIDUALS

Copy of Notice to Acquire/V	acate
Copy of Real Estate Option	(for owner-occupant only)
City inspection letter (for	code enforcement displacee)
Signed RECEIPT from displace	ee for information statement or
brochure	se for information statement or
INTERVIEW SHEET filled or	
Recorded personal interviews	10
Copies of all comments	
Copies of all correspondence	with displacee
Verification of Income	
Request for HAP assistance	
FHA displacee qualifying (fo	rm 21/76
City inspection letter on re	onlessment)
Copy of earnest manay offer	pracement housing
Copy of earnest money offer Other:	on replacement housing
- vener,	
Moving authorization last	
Moving authorization letters	
Dwelling unit inventory shee	t
Log sheet for day of move (f	or professional move)
nerease of personal property	
DATE OF MOVE	
Keys turned into:	
Utilities shut off	
Escrow releases, grants and	amounts withheld
Verify no rent outstanding	and are
Other:	
HUD forms 6140.1 and 6140.2	
HUD forms 6153 and 6154	
Other:	
Other:	
	J. L. MARTINDALE
	VICE PRESIDENT
DATE FILE CLOSED	
The state of the s	

THE BANK OF CALIFORNIA

RESIDENTIAL RELOCATION RECORD

Client's Name	
Male	
Female Individual Single Owner/Occupant Family Composition Economic Data Total Number in Family Employer \$ wife, husband Address	
Family Composition Economic Data Total Number in Family Employer \$ wife, husband Address	_
Total Number in Family Employer \$wife, husband Address	
wife, husband Address	
Other Deleties Ass Deleties Ass Other Course of Income	
Other: Relation Age Relation Age Other Source of Income	
Total Monthly Income \$ (5) -	7
Eligible for Public Housing YES NO Presently Receiving Welfare YES NO Other Assistance YES NO Other Assistance	
Claimant was displaced from real property within the project area on or after date of tinent contract for Federal assistance and/or date of HUD approval of budget for proje YES NO	
Date of initial interview Date of Info pamphlet delivery	
Date Notice to Move given Date EffectiveExpires	
CLAIMANT'S INITIAL DATE OF OCCUPANCY 23 VRS	
(a) for owner-occupants - indicate initial date of occupancy and ownership	
Date of Initiation of possibilities for numbers of property	
Date of initiation of negotiations for purchase of property	
Date of Acquisition Date of Acquisition	
9-7-71	

DWELLING UNIT FROM WHICH RELOCATED

Private Sales	×	Single Family	×		Age of Housing	Unit		
Private Rental		Duplex			Size of Habitab	le Area _		_
Other		Multiple Family			Furnished with			,
Total Number of	Rooms		Ren	t Paid \$	U	tilities _		
Number of Bedroom	ns _		Mon	thly Housi	ng Payments \$		Taxes	_
Liens \$		(please e	xplair	n)				
Acquisition Price								
		REPLAC	EMENT	DWELLING	UNIT			_
Address 396	2	NE 12 AP		LPA R	eferred	Self	Referred _	X
Private Sales	$\overline{}$							
Private Rental	I	Duplex		Age o	f Housing Unit _	1923		
Other		Multiple Family		. Size	of Habitable Area	1130)	
				No. o	f Rooms	No. of Be	drooms	2
						- 1940	7 12	
	-	ts Who Purchased	in posterior	1 = 0	For Claimant			
N. 1932 27 10 152 1		lacement Dwellin	g \$					
Taxes \$ 3 4					Utilities \$_			
RHP or TACO (inc	ludin	g incidental cos	ts) \$					
				44.	95 Amount of An	nual Payme	nt \$	
No. of Housing R	eferr	als to:	Agen	cy Referra	ls:			
O_Stand	ard S	ales		MCW	НАР	OTHE	R (_)
Stand	ard F	lent		_Food Stam	Legal Ai	d0the	er (_)
Benefits Receive	d							
Date		Ck #	Ту	ре	Amount	\$		
Date		_Ck #	ту	ре	Amount	\$		
Date		Ck #	Ту	pe	Amount	\$		

CLIENT'S NAME GL	ASS.	Lillian (Conley)		R	ELOCATION ADVISOR	
ADDRESS 2728 N.	Vanc	ouver PHONE	284 -3	515 P	ROJECT NAME Emanuel Hospital ORE, R-2	
SEX_F_ ETHN_blac	k	VETERAN A	GE_6	2 P	ARCEL NO. RS-3-6	
MARITAL STATUS	D	TENUREow	ner		DATE ON SITE: 23 years	
DISABILITY	E	INDIV_X_ FAMIL	.Y		INITIATION OF	
ELIGIBLE FOR: PUR	BLIC	HOUSING_X FHA 2	×	57112 01		
REM	IT SU	JPPLEMENTOTHER	<u> </u>	ACQUISITION: October 6, 1971		
INITIAL INTERVIEW		Jun 71		D	ATE INFO PAMPHLET DELIVERED	
NOTICE TO MOVE		DATES EFFEC	TIVE_		EXPIRATION DATE	
NOTIFY IN CASE OF	EMER	RGENCY				
EmployerAddress			51.0	00	Name Relation Age	
		DWELLING (JNIT F	ROM WHI	CH RELOCATED	
Subsidized Sales Subsidized Rental Public Housing Private Rental Private Sales Size of Habitable	X	Single Family Multiple Family Duplex Mobile Home	S	SS X	Age of Structure No. Rooms No. Bedrooms Furn. Unfurn Utilities \$ Monthly Payments (Rent) \$ Acquisition Price \$ 6,500.00 Taxes \$ Equity \$ Liens \$	
но	USIN	REFERRALS			AGENCY REFERRALS	
Address			Bedroo	oms	Name of Agency Date	
					Multnomah County Welfare Food Stamp Program	
					Housing Authority	
					Legal Aid	
					FISH	
					11.11.2	

INTERVIEW REGISTER

Relocation Worker

Date	
9/25 72	DeTemple price change must change sink drain \$342.00. New price \$972.00.
9/26 72	DeTemple contacted by Glass attorney. Pleased with progress.
9-21-72	DeTemple was requested to proceed as rapidly as possibleSaid they would start braking up concrete on Monday.
9-22-72	TeTample cannot get a permit to proceed without a variance or including the changing the sink drain.
9-25-72	To change the sink drain would add \$342.00 to the original bid. DeTemple was authorized to proceed with job including changing the sink drain
9-26-72	De Temple says they were contacted by Glass' attorney. The attorney was pleased to know the job was proceeding as rapidly as possible. (It may be Monday before permit will be issued.
9-30-72	City Inspection approved
3-9-72	Inspection
3-14-72	
4-8-72	Estimate from Walker
4-12-72	Letter to Ass't City Engineer
4-17-72	Letter from Legal Aid
2-15-72	Call Chet Collingsworth - Says condition standard.
2-25-72	Made app't for Mel Hanson to make estimate
2-28-72	Ben Webb & Bob Lundin - no one at home.

Date_	INTERVIEW REGISTER
2/1 72	Around this date was the first time Mrs. Glass inquired about her problem with water in basement.
2/15 72	Called Chet Collingsworth Substandard conditions.called for estimate on correction possibilities.
2/25 72	Made appointment for Mel Hansen to make estimate.
2/28 72	Ben Webb and Bob Lundin visited. No one at home.
3/9 72	Inspected house with water in basement.
3/14 72	Inspected house again. Water in basement.
4/8 72	Estimate from Rex Walker to fix.
4/12 72	Letter from Assistant City Engineer citing neighborhood problem. No solution.
4/17 72	Letter from legal aid with enclosure of letter from City.
4/21 72	Letter to Russell Dawson and Helen Benjamin regarding permission to exceed Schedular cost of comparable replacement dwelling to rehabilitate substandard dwelling up to standard.
6/21	Resubmitted a copy of previous letter dated 4-21-72 to Helen Benjamin.
6/23 72	Reply from H.U.D. concurring with P.D.C. analysis.
6/27 72	Request from Ben Webb to establish reasonable cost of a house com- parable to her acquired property that was on the market at the time of search for housing.
8/28 72	Letter from H.U.D. to John Kenward. Requests immediate action.
9/18 72	Letter from Bob Nelson requesting being placed on Commission agenda.
9/21 72	DeTemple got bid to do job. \$507.00.
9/22 72	DeTemple has hang-up on permit.

February 22, 1973 DeTemple Company 615 N. W. Couch Street Portland, Oregon 97209 Gentlemen: Enclosed is our check No. 694 EH in the amount of \$849.00 which represents payment as per your invoice dated 12-4-72, for installation of back water valve and change of sink waste as quoted, for Mrs. Lillian L. Glass, 2728 N. Vancouver. Very truly yours, James C. Crotley Relocation Advisor JCC: k Encl.

URBAN REDEVELOPMENT FUND-PROJECT EXPENDITURES-EMANUEL HOSPITAL, ORE. R-20

Warrant Number

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE PORTLAND, OREGON 97201 Nº

694

EH

DATE February 21

. 19_73

PAY TO

De Temple Company

\$ 849.00

DOLLARS

TO THE TREASURER OF THE CITY OF PORTLAND, OREGON

call Blenze

NON-NEGOTIABLE

AUTHORIZED SIGNATURE

Portland Development Commission

224-4800

DETACH BEFORE DEPOSITING CHECK

Portiona De-	elopment Commission		AMOUNT
DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	
		Reimbursement per claim for RHP for Homeowners filed. Hove of Lillian L. Glass from 2728 N. Vancouver, (Parcel RS-3-6).	\$849.00

Account Distribution

.

TITLE

AMOUNT

RELOCATION PAYMENT 901

Project: Parcel: RS-3-6	
Payable to: Le Temple Company	
For: X RHP for Homeowners	<u></u>
Rental: Total approved \$; Annual amount \$	
or Purchase:\$	
Fixed Moving Payment	
Dislocation Allowance	
Actual Moving Costs	
Storage Costs (if separate claim)	
Business: Moving Expenses	
Business: In Lieu Payment	
Business: Storage Costs	
Business: Loss of Property	
Business: Searching Expenses	_
Name of Client Lillian L. Glass At Less - \$	*
Move from 2728 N Vancaume Total \$ 849.0	00
Accounting: Indicate symbol & Acct. No. Relocation Payment; Project Cost *()	

MARVIN S. NEPOM ATTORNEY AT LAW BOO OREGON NATIONAL BUILDING 610 S W ALDER PORTLAND, OREGON 97205 TELEPHONE (503) 223-1137 February 15, 1973 James C. Crolley Relocation Advisor Portland Development Commission 235 N. Monroe Street Portland, Oregon 97227 Re: LILLIAN LUCILLE GLASS Dear Mr. Crolley: In accordance with your letter request of February 9, 1973, and our telephone conversation, Mrs. Glass has signed and I am enclosing your claim form for replacement housing payment for additional funds. Consistent with our discussion, I have informed Mrs. Glass that by signing the claim form, the plumber can be paid and she is not jeopardizing any right she presently has to look to the Portland Development Commission to correct the drainage problem. I assume that Mrs. Glass will be in touch with you further as to the drainage problem and the leakage in her basement, which I understand is not as yet remedied. On the basis of the foregoing understanding, you are authorized to retain the enclosed claim form. If my understanding of the purpose of the claim form is different than is outlined above, then the claim form should be returned to me by return mail, since Mrs. Glass in no way authorizes the use of the enclosed claim form as a complete settlement by reason of the existing problems with the drainage. Very truly yours, MARVIN S. NEPOM MSN/cjb Encls. Mrs. Lillian Lucille Glass 3965 N.E. 15th Portland, Oregon 97212

February 9, 1973 Mr. Marvin S. Nepom Attorney at Law 610 S. W. Alder **Room 800** Portland, Oregon 97205 Dear Mr. Nepom: Re: Lillian Lucille Glass Enclosed are claims to be signed for additional funds for Replacement Housing Payment. Hrs. Glass' dwelling required unforseen repairs, resulting from inadequate drainage affecting her property. This problem was not alluded to by the previous owner nor did a City Building Department inspection reveal the problem. We have attempted to correct this situation by having a plumbing firm install a shut-off valve to prevent water from entering the basement area through the sewer line. It is for this repair that a statement was submitted by DeTemple Plumbing Company and is now due. Very truly yours, James C. Crolley Relocation Advisor JCC:k Encl.

MEMORANDUM Date January 3, 1973 Ben Webb TO: Jim Crolley FROM: Relocation Payment - Lillian L. Glass SUBJECT: Mrs. Glass moved from the Project Area at 2728 N. Vancouver Avenue to 3965 N. E. 15th on October 27, 1971 at which time our cost based on Schedule for Average Price of Comparable Sales Housing was \$14,639. This schedule was not based on small, medium or large units. The schedule which was approved ten months later is based on unit size. The unit that Mrs. Glass occupied was 912 sq. ft. or a medium size unit with an average price of \$17,202. We are now recomputing her RHP to the higher price in order to remedy conditions that existed at the time of purchase which is "eligible to be included in the Purchase Price of the Replacement dwelling". This analysis of substandard conditions and remedy was concurred with by John H. Carter, Jr. by letter dated 23 June, 1972. Mrs. Glass's RHP has been computed by the comparable method, and the above information suggests that the price for a comparable determined as \$16,400 seems reasonable. JCC: k

CLAIM FOR REPLACEMENT HOUSING PAYMENT FOR HOMEOWNERS

	S, AND ZIP CODE OF DISPLACING AGENO relopment Commission ourth Avenue	PROJECT NAME (Emanuel	if applicable)
Portland, Or		PROJECT NUMBER	R-20
Replacement PENALTY FOR "Whoever, in United State fraudulent so knowing the shall be fine	: Complete all applicable items and agency as to whether you need a Dwelling to complete and submit with FALSE OR FRAUDULENT STATEMENT. U.S any matter within the jurisdictions knowingly and willfully falsifies tatements or representations, or make the contain any false, fictitioned not more than \$10,000 or imprison E OF OWNER-OCCUPANT CLAIMANT (as showing the contain and the cont	Claimant's Report of Selecth this claim. S.C. Title 18, Sec. 1001, or of any department or against a constant of a constant or against a constant or a cons	f-Inspection of provides: ency of the e, fictitious or iting or document nt or entry, ears, or both."
	acing agency or in condemnation pro		
Lillian	L. Glass amilyx Individual	10-27 Parce	-71 1 No. <u>RS 3-6</u>
3. INFORMAT	ION IN SUPPORT OF CLAIM		
A. Diffe	rential Payment		
	1. Data on dwelling unit from which	ch vou moved	
	Address of dwelling unit from which		ncouver
	Date you first occupied this dwell	Mont h	0. 1948 -Day-Year
3.	Number of bedrooms in the dwelling	2	
4.	Date of initiation of negotiations dwelling 5-7-71	s for local agency acquis	ition of
5.	Payment made by local agency for t	the dwelling \$ 6500	_
Part	II. Data on dwelling unit to which	n you moved	
6.	Address of dwelling unit to which 3965 N. E. 15th 97212	you moved (include ZIP C	ode)
7.	Number of bedrooms in replacement	dwelling3	
8.	Purchase price of the replacement Cost of rehabilitation TOTAL	dwelling \$ 14.500. 849. 15,349	

C. Incidental Expenses (List incidental expenses incurred by you in connection with the purchase of replacement dwelling. If more space is necessary, use additional sheets.)

	COSTS INCU	RRED BY CLAIMAN	r	FOR LOCAL AGENCY USE
Item (a)	Charged to Claim- ant on Closing Statement (b)	Paid Directly by Claimant (c)	Amount Claimed (Col. (b) + (c) (d)	Amount Approved (e)
	\$	\$	\$	\$
				-
OTAL	\$	\$	\$	\$

Listing of documents submitted herewith in support of amounts entered in Column (d) above: (Documentation for the above claim must be submitted.

I submit this information in support of a claim for a Replacement Housing Payment under Section 203 of P.L. 91-646, as amended, and I certify under the penalties and provisions of U.S.C. Title 18, Sec. 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, Sec. 1001, and any other applicable law, falsification of any item submitted herewith may result in forfeiture of the entire claim.

Feb 13 1973

Signature of Owner-Occupant (s)

(For Local Agency Use Only) DETERMINATION OF ELIGIBILITY FOR REPLACEMENT HOUSING PAYMENT FOR HOMEOWNERS

NAME AND ADDRESS OF CLAIMANT: Lillian Glass 2728 N. Vancouver Avenue

NAME OF LOCAL AGENCY:

2/20 N. Vancouver Avenue	Portland Development Commission
INSTRUCTIONS: Complete this form to determine eligible Housing Payment for Homeowners. Attach the completed filed by claimant. Note that the determination of the incidental to purchase of a replacement dwelling is made attach an explanation of any entries which differ from	form to the pertinent claim form e amount of payment to cover costs ade on the applicable claim form.
1. Did the claimant own the dwelling at the time of ac	cquisition? Yes No
Initial Date of Ownership: May 30, 1948 Date of Month-Day-Year	f Acquisition: 10-27-71 Month-Day-Year
 Did the claimant own and occupy the dwelling at leation of negotiations?x Yes No 	ast 180 days prior to the initia-
Initial Date of Ownership: May 30, 1948 Da	Negotiations: 5-7-71
3. Did the claimant purchase and occupy the replacement the date of displacement?x Yes No	nt housing within one year from
Date of Displacement: 10-27-71 Date of I	Purchase of Replacement Housing: 9-3-71
Oate of Occupancy of Replacement Housing: 10-27- (If the claimant was unable to occupy the replacement one-year period, use reverse side of this form to provide the second of the seco	ent housing within the required
4. Did the claimant have a bona fide mortgage on his option to initiation of negotiations? Yes Issuance Date of Mortgage: Date	dwelling for at least 180 days
Date of Initiation of Negotiations:	gage:
5. Has the replacement housing been inspected and four of dwelling inspection record or, if the claimant in the report obtained from the claimant.)xYes	moved outside the locality, attach
6. CERTIFICATION OF LOCAL AGENCY This is to certify that the property purchased by the and the property was occupied by the claimant within ment. I further certify that I have examined this accord with the applicable provisions of Federal Lathe Department of Housing and Urban Development purchased is hereby approved and payment in the amount of the control of the	in one year following his displace- claim and have found it to be in aw and the regulations issued by rsuant thereto. Therefore, this
7. RECORD OF PAYMENT Date of Payment: 2/21/73 Check No. 6	94EH Amount: \$ 849.00
RHP-4 Page 4.	7 FA MINOUTE . \$ 077.00

(For Local Agency Use Only)
WORKSHEET FOR COMPUTATION OF REPLACEMENT
HOUSING PAYMENT FOR HOMEOWNERS

	D ADDRESS OF CLAIMANT	COMPUTATION P	REPARED BY	' :
Lett	i an L. Bland	Corollin		1-3-73
		Name		Date
locks l	TIONS: Attach this form to the pertinent claim anation of any difference between amounts claim B and C; then complete Block A. PUTATION OF TOTAL REPLACEMENT HOUSING PAYMENT F	ed and amounts a		Attach Complete
1.	Amount of differential payment (Block B, Line	6) \$ 8044		
2.	Plus interest payment (Block C, Step 4, Last line)	+ \$		
3.	Plus costs incidental to purchase (Total amount approved by agency, from claim form, Block 3C, Column (e)	+ \$		
4.	Total (Sum of Lines 1, 2, and 3)	\$ 8849		
5.	Minus adjustments (Attach explanation; e.g., amount previously received as Replacement Hous Payment for Tenants and Certain Others)	ing - \$ 8000		
6.	Total Replacement Housing Payment for Homeowne (Line 4 minus Line 5)	r	\$	349.00
. COMPI	(Enter this amount in the space provided in Blothe Guideform Determination of Eligibility for ment Housing Payment for Homeowners) JTATION OF DIFFERENTIAL PAYMENT			
Requi	red Information	14.500		/
	Actual purchase price of replacement dwelling	\$15,349	Cast to 1	loving up
	Cost of comparable replacement dwelling (Cost based on: 2 ComparativeOther)			
	Acquisition payment made by agency for			
	claimant's former dwelling	\$ 6500.		
	claimant's former dwelling	\$ 6500.		
omputat	claimant's former dwelling	\$ 6500.		
omputat 4.	ion			

ITEM		SUBJE	СТ	CON	MPARABL	z: #1	CO	MPARABL	Ε #2	CO	(PARADL	E #3
Multiple Listing #		XXX		The	Leil.		au	we B	oling	1	C 22 86 8	
Sale or Rent Price	6	00.0	v	FHA	14/50	7.10	1	4500.	-20 .	1	200	
Address			Laurenan		NEI			I NE	15tx)		JAE.	10.0
No. of Rooms	BR	Bath /	Total Rooms	BR 2	Bath /		3R 4	Bath /	Total Rooms	BR		Roca Roca
Туре	1 5	Ton	Ý		š fina		1	STV U	larrie	15	74 W	1/200
State of Int. Repair Ext.		n e		1	000		970		7		o d	_
Type of Neighborhood	Bu	1641	22)			R.	G	over the	- Res	- 6	E rol	Kes
Street Improvements	V	55			120		1 .	Xee			00	
Availability of Public Services	00	vil			1			0			Sor	
Lot Size	23.	5 *	90	50	0×10	00.	5	0 7 10	70		78 × J	6
Year Built	1	895	_				-	484.	ears.	1	950	
Fireplace		10			! Yes			155			XES	
Heating System	CIRR	ichm?	TO C	700			011	- 70	ern	ail	Hur	
Basement	N	0.		1	c.G		1	CB		7	CB	
Garage	·N	0			el 1	3	5	engel	0	6	arry	2_
Habitable Area	91	2		1	059					1	11/2	-
Total Area												
furnished or Unfurnished	7-0	anit;	her				PM-			Berch	- Usan	0.0
Extraordinary Amenities	m	tr.								PYY	Row	
Amenities Comparable # The adjusted pri		is co	onsidere	ed mos		subjec	t beca	use:				

STATIMENT

Portland, Oregon 9720 Dec. 4, 1 972

DETEMPLE COMPANY



615 N.W. COUCH STREET, NEAR BROADWAY

Phone: 227-2641

Portland, Development 235 N. Monroe St. Portland, Oregon

TERMS: NET CASH

To Balance

Oct. 23

849.00

Schies evas already submitted and is now post due

Mrs. Glass

This account is subject to a service charge for late payment. This charge is computed at an annual rate of 8%.

DETEMPLE COMPANY

OUR SERVICE CARS
"Completely Equipped at
Your Door"



227-2641
615 N. W. COUCH STREET
NEAR BROADWAY

Sold to

Г

L

Portland, Oregon 97209

Oct. 23 19 72

Portland Bevelopment Comm. 235 N. Monroe St. Portland, Oregon

TERMS: NET CASH

Re: 3965	N. E. 15th Ave.				
	Ernie Wiley				
Install Change s	back water valve as quoted ink waste as quoted	507 342	00	849	00

URBAN REDEVELOPMENT FUND-PROJECT EXPENDITURES-EMANUEL HOSPITAL, ORE. R-20



DATE

Warrant Number

EH

'PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE PORTLAND, OREGON 97201

Nº

82

October 7 19 71

PAY TO

Pioneer National Title Insurance Company

8,000.00

DOLLARS

TO THE TREASURER OF THE CITY OF PORTLAND, OREGON 1980 Bev 28

AUTHORIZED SIGNATURE

NON-NEGOTIABLE

AUTHORIZED SIGNATURE

Portland Development Commission - 224-4800

DETACH BEFORE DEPOSITING CHECK

DATE INVOICE OR CONTRACT NOS. Deposit in escrow for Lillian Lucille Glass, replacement housing payment per claim filed - move from 2728 N. Vancouver (Parcel RS-3-6) \$8,000.00			
Deposit in escrow for Lillian Lucille Glass, replacement housing payment per claim filed - move from 2728 N. Vancouver (Parcel RS-3-6) \$8,000.00	DATE	DESCRIPTION	AMOUNT
		Deposit in escrow for Lillian Lucille Glass, replacement housing payment per claim filed - move from 2728 N. Vancouver (Parcel RS-3-6)	\$8,000.00

Account Distribution

E1501

TITLE

Relo Payments (RHP)

AMOUNT

\$8,000.00

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

CLAIM FOR REPLACEMENT HOUSING PAYMENT

Portland Development Commission

NAME, ADDRESS, AND ZIP CODE OF DISPLACING AGENCY

1700 S. W. Fourth Avenue Portland, Oregon 97201

PROJECT NAME (If Applicable)

Emanuel Project

PROJECT NUMBER

ORE R-20

INSTRUCTIONS: Complete all applicable items and sign certification in Block 6. Consult the displacing agency as to whence you need a Claimant's Report of Condition of Dwelling (Form HUD-6141.2) to complete and submit with this claim.

PENALTY FOR FALSE OR FRAUDULENT STATEMENT. U.S.C. Title 18, Sec. 1901, provides: "Whoever, in any matter within the puriod any department or agency of the United States knowingly and willfully falsifies . . . or makes any false, fictitious or fraudulent afcrements senteness, or makes or uses any false writing or document knowing the same to contain any false, fictirious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both."

١.	FULL NAME OF	OWNER-OC	CUPANT CL	AIMANT.	
	las shown in dee.				n proceedii
		GLASS,	Lillian	Lucille	

(RS 3-6)

3. DATE OF DISPLACEMENT

Individual x Family L 4. DWELLING UNIT FROM WHICH YOU MOVED

2728 N. Vancouver

Portland, Oregon

b. Date you first accupied this awelling unit as

Month-Day-Year

c. Check one:

X Single-family dwelling unit

Two-family dwelling unit

d. Did you occupy this dwelling for at least one year prior to initiation of negotiations?

X Yes

☐ No

5. DWELLING UNIT TO WHICH YOU MOVED

a. Address (Include ZIP Code):

3965 N. E. 15th

Portland, Oregon

b. Number of bedrooms:

c. Purchase price:

\$ 14,500.00

d. If you have purchased and occupied this dwelling

(1) Date you signed purchase contract:

Month-Day-Year

(2) Date you moved into this dwelling:

Month-Day-Year

e. If you have purchased but not occupied this dwelling:

(1) Date you signed purchase contract:

Month-Day-Year

(2) Date of settlement:

Month-Day-Year

(3) Date you expect to occupy:

Month-Day-Year

5. I submit this information in support of a claim for a Replacement Housing Payment under Section 114(c) (3) of the Housing Act of 1949, as amended, and I certify under the penalties and provisions of U.S.C. Title 18, Sec. 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, Sec. 1001, and any other applicable law, falsification of any item submitted herewith may result in forfalture of the entire claim.

illian Lucille Glass

Signature of Owner-Occupant

FOR DISPLACING AGENCY USE ONLY

GLASS, Lillian Lucille

NAME OF CLAIMANT

	denos, cirrian Eucrire	
REPLACEMENT HOUSING PAYMENT	NAME OF DISPLACING AGENCY	
NEF LACEMENT HOUSING PATMENT	Portland Development Commi	ission
INSTAUCTIONS: Stuck completed Form HUD-6154 to claimant's copy of form HUD-6141.2.	Form HUD-6153 and, if applicable,	
DETERMINATION OF ELICIBILITY. (Attach an explanation of any entries Form NUD-5153.)	s which differ from claimant's entries on	
1. Did the cicimant own the single- or two-family dwalling at the time of	acquisition?	YES NO
Initial Date of Ownership:	ute of Acquisition:	X
May 30, 1948	May 30, 1948 Month-Day-Year	
2. Did the element own and accupy the single- or two-family dwelling at prior to the initiation of negotiations?	least one year	x
Initial Date of Ownership: Date	of Initiation of Negotiations:	
Month-Day-Year	Month-Day-Year	
3. If the cigiment moved prior to acquisition, did the claiment own and oc at least 18 months prior to the date of HUD approval of the project and infliction of negotiations?		
Initial Date of Ownership:	Date of HUD Approval of the Project:	
Month-Day-Year	Month-Day-Year	
4. Did the claimant purchase and occupy the replacement housing within	one year from the date of displacement?	
Date of Displacement: Date of Purchase of Replacement Housin	g: Date of Occupancy of Replacemen	X nt Housing:
Month-Day-Year Month-Day-Year	Month-Day-Year	
5. Has the replacement housing been inspected and found to be standard? (Attach copy of Dwelling Inspection Record or, if the claimant moved the locality, attach the report obtained from the claimant (Form HUD-	outside	X.
Date proviously substandard dwelling was inspected and fou		
Month-Day-Year		
NOTE: The claimant who purchases and occupies a substandard dwelling may be placement, he brings the substandard dwelling into conformance with the	come eligible for the payment if, within one year applicable codes or purchases and occupies a st	following dis- anderd



	ATION OF REPLACEMENT HO	MUSING PAYMENT	
Mare les a standard dwel			rice
and II (D-6/55) of repl			
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	in the bill the beautiful familie	i dia	
negative a payment received by the cla	ilmant for his single- or two-tamily	aweiring.	
			6,500.00
3. 13. 1 Line 2.			
			8,000.00
Amount of Replacement Housing Paymen			
anser \$5.00%. See of on Line 3 is les	s than \$5,000, enter amount on Line	3.)	
			·
5. Amount of my Additional Relocation Po			
"Include the second of the sec			
William Carolia (1700 Marchaell)	orors, paugrapa on		\$
	Serve January and American	Inc. I to	
a. According a supposent received under S		inca io	
Housing Payr >	nt.		2
Clare of cooper factor (2)			8,000.00
This is to configurate the property purchas	CERTIFICATION OF THE DISPLACIA		
within one year following his displacement			ecupled by the claiment
Late of Displacement:		Date Occupancy Establish	
		Date Occupancy Establish	
Late of Displacement:		Date Occupancy Establish	
Late of Displacement:	claim and have found it to be in acc of Housing and Urban Devalopment;	Month-Day-Year	ed:
Nexth-Day-Year I further partly that Lhave examined this to the requirement is seen by the Department of	claim and have found it to be in acc of Housing and Urban Devalopment;	Month-Day-Year	ed:
Nexth-Day-Year I further partly that Lhave examined this to the requirement is seen by the Department of	claim and have found it to be in acc of Housing and Urban Devalopment;	Month-Day-Year	ed:
Nexth-Day-Year I further partly that Lhave examined this to the requirement is seen by the Department of	claim and have found it to be in acc of Housing and Urban Devalopment;	Month-Day-Year	ed:
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I further and y that Lhave examined this a the requirement of the amount shown	claim and have found it to be in acc of Housing and Urban Devalopment;	Month-Day-Year	ed:
I further and y that Lhave examined this a the requirement of the amount shown	claim and have found it to be in according and Urban Development part on Line 8 above is authorized.	Month-Day-Year	ed:
I further and y that Lhave examined this a the requirement of the amount shown	claim and have found it to be in according and Urban Development; in on Line 8 above is authorized.	Month-Day-Year ord with the applicable propersuant thereto. Therefore Muthorized Signal	ed:
I further and y that Lhave examined this this requirement lesued by the Department experience lesued by the amount shown	claim and have found it to be in according and Urban Development in on Line 8 above is authorized.	Month-Day-Year ord with the applicable propursuant thereto. Therefore Authorized Significations	Lyisions of Federal Law and e, this claim is hereby
I further and y that Lhave examined this a the requirement of the amount shown	claim and have found it to be in according and Urban Development in on Line 8 above is authorized.	Month-Day-Year ord with the applicable propursuant thereto. Therefore Authorized Significations	existens of Federal Law and e, this claim is hereby
I further and by that Lhave examined this the regulations lesued by the Department of approved and payment of the amount shown	claim and have found it to be in according and Urban Devalopment; and Line 8 above is authorized.	Month-Day-Year ord with the applicable propursuant thereto. Therefore Authorized Significations and the state of the sta	Lay Director

CONNIE McCREADY
COMMISSIONER
DEPARTMENT OF PUBLIC UTILITIES



CITY OF PORTLAND OREGON

97204

September 30, 1971

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. Chegwidden, Chief

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

Attn: Mr. Crolley

Gentlemen:

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

Our inspector reports the structures are in standard condition and comply with City Housing regulations at this time.

Yours truly,

C. N. CHRISTIANSEN BUILDING INSPECTIONS DIRECTOR

S. J. Chegwidden

Chief Housing Inspector

Re: 3965 N.E. 15 Avenue

CMC:mfm

cc: Mrs. McCanna

3965 N.E. 15 Ave.

\$ 200. Portland	Oragon , Leternher 3 , 1971
ON DEMAND, I (or if more than one maker) we, jo	pintly and severally, promise to pay to the order of
	at 11239 SE DIVISION
two kundred and who -	DOLLARS,
	ereof may be paid at any time. It this note is placed in the hands of
an attorney for collection, I/we promise and agree to pay the holder's or action is filed hereon; however, if a suit or an action is filed, the ar-	mount of such reasonable attorney's fees shall be fixed by the court,
or courts in which the suit or action, including any appeal therein, is	Lillian Lucille Blass
Development Consenting	oferen ference
- everejamen carpotation	~
FORM No. 846—DEMAND NOTE.	Stevens-Ness Law Publishing Ca., Portland, Ore. SN
OFFICIAL EARNEST	MONEY AGREEMENT Oregon, SEPT 3 197/
Received of LILLAN LUCILLE GLASS	Oregon, Ser Jan 197
hereinafter called "purchaser," in the form of (check, cash, 1610 \$	
of the following described real estate situated in the City of PORT and State of Oregon, to-wit: 3965 NE 15 H	thano County of Much won AH
and State of Oregon, to-wit: 3763 706 75 -	4.22
TUTI	, 6 7.7.9
together with the following described personal property:	We Kee ALORTH REOPER CAPPETS DELECT
AND VENGTIAN BLINDS, & FIRE	PLACE SCREEN
for the sum of FOURTEEN THOUSAND FINE	day sold to the said purchaser, subject to the approval of the seller,
on the following terms, to wit: The sum, hereingbove receipted for, of,	
on Owner's acceptance as additional earnest money, the sum of Upon acceptance of title and delivery of deed or contract, the sum of	Dollars (\$)
The balance of fourthern thousand three	E HUNDRED AND 100 Dollars (\$ 14,300)
payable as follows: BALANCE TO BE PA	o in cash
+HIS PURCHASE contingent to	APPROVAL BY PORTLAND DEV. CORP.
FRONT DOORBELL AND PAINT UND	LOCK, LIGHT SWITCH IN HALLWAY, DER EVES & BLISTERED DAINT ON FRONT PRECH
The seller shall furnish to the purchaser in due course a title insura	m. Val Frai
title insurance company showing good and marketable title. Prior to purchaser a preliminary report made by a title insurance company sho	closing the transaction, the seller, upon request, will with to the
conclusive evidence as to the condition of seller's title. It is agreed that Realtor below in which to secure seller's acceptance, or if the title to the	if the seller does not approve the above sale within the period allowed
days after notice containing a written statement of defects is delivered same, the earnest morely herein receipted for shall be refunded, but the	to seller, or if the seller, having approved said sale fails to consumate the
of other remedies available to him. But if the above sale is approved by the seller and 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 ten days from the as hereinabove set forth, the earnest money herein receipted for shall be	
mission, and the residue, if any, shall be retained by the seller as liquid effect. The property is to be conveyed free and clear of all liens and end	
All light fixtures and bulbs, fluorescent lamps. Venetian blinds, wir	ndow and door screens, storm windows and doors, linoleum, attached
television antennas, curtain, towel and drapery rods, shrubs and trees, equipment that is not attached in any manner to the structure, and all f	and irrigation, plumbing and heating equipment, except fireplace
are to be left upon the premises as part of the property purchased.	
arms of the first of the manufacture and the second of the second of the first of the second of the	and payable for the current tax year, rents, interest, premiums for
fuel, if any, in storage tank at date of possession. Encumbrances to be date of closing. The purchaser shall reimburse the seller for sums held i	discharged by seller may be paid at his option out of purchase money at
Seller and purchaser agree that subject sale \ will be closed in	escrow, the cost of which shall be shared equally between seller
and purchaser. Possession of the above described premises is to be del or contract above mentioned, or as soon thereafter as existing laws and	livered to the purchaser SQ days from the delivery of deed
Realtor's Address: 11239 SE PIUISION	AWARD REALTY CAN Realtor
Realtor's Phone: 255-8630	By MILTON HARRIS (0)
AGREEMENT T	O PURCHASE Date SEPTEMBEE 3 , 197/ price and on the terms and conditions set forth above, and grant said
Realter a period of . 5 days hereafter to secure seller's accepted	ance hereof, during which period my offer shall not be subject to
revocation. Deed or contract is to be prepared in the name of 2122	IAN LUCILLE GLASS
	earnest money receipt by ging my signature and that of the Realtor.
Address 2728 N UANCOUVER Phone 289-3515	PURCHASER: Lillian Lucille Glass
Phone 289 -35/5	PURCHASER: T TO SELL Date SEPTEMBER 19.7/
	rty and the price and conditions as set forth in above agreement and
and agree to pay the above named Realtor for services a commission of	SONE THOUSAND FIFTEEN TOO (\$1015.00)
I authorize said Realtor to pay out of the cash proceeds of sale the exit any, as well as any encumbrances on said premises payable by me	at or before closing. I instruct Realtor to place in his special trust
account the above described earnest money deposit until needed in contract bearing my signature and that of the purchaser named above,	and of Realtor.
Address 3965 NE 15th Parthano, ORE.	SELLER: Mary of Canna
Phone 284-1922 REALTOR'S COPY 288-6746	SELLER:



DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

June 23, 1972

CASCADE BUILDING, 520 S.W. SIXTH AVENUE, PORTLAND, OREGON 97204

AREA OFFICES Portland, Oregon Seattle, Washington

REGION X
REGIONAL OFFICE
SEATTLE, WASHINGTON

RECEIVED

JUN 2 1972

PORTLAND DE COMMANDAMENT

10.2PPR Benjamin

Ben

221 + 2608 A. DIR. D. OPER SP. ASST

Dear Mr. Kenward:

Mr. John Kenward Executive Director

1700 S. W. 4th

Subject: Project Ore. R-20

Portland, Oregon 97201

Portland Development Commission

Replacement Housing Payment

Mrs. Lillian Glass

We have received your letter regarding Mrs. Glass's relocation. We concur with your analysis that the condition described is substandard and amounts necessary to remedy this condition would be eligible to be included in the "purchase price" of the replacement dwelling. The schedul limitation of \$14,639 must be applied, however, unless client concurs in use of the comparables method and such method would establish her eligibility for a higher differential amount.

Sincerely,

So Wohn H. Carter, Jr.

Director

Operations Division

This got overlooked - sorry about this.

I think that this claim should be on a replacement housing claim form, signed by Mrs. Glass.

BCW: ch Attach. answered 1-3-73

MEMORANDUM Date October 25, 1972 TO: Spence Benfield FROM: Jim McIntosh Lillian Glass SUBJECT: Word has it that a "check valve" was placed in her sewer line which in turn should alleviate her problem. Perhaps all she really needed was a bottle of prune juice. I've heard that prune juice does wonders for cleaning out one's system. (Sewer system, that is) Commissioner Anderson's office has indicated that it will be at least two years before the City can work on Mrs. Glass's sewer line. JM:ch

REGION X

REGION X
REGIONAL OFFICE
SEATTLE, WASHINGTON

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

CASCADE BUILDING, 520 S.W. SIXTH AVENUE, PORTLAND, OREGON 97204

AREA OFFICES
Portland, Oregon
Seattle, Washington

R É L 18 V E D

AUG 36 1972

PORTLAND DEVELOPMENT COMMISSION

Mr. John Kenward
Executive Director
Portland Development Commission
1700 S. W. 4th
Portland, Oregon 97201

Dear Mr. Kenward:

Subject: Ore. R-20, Emanuel Hospital Replacement Housing Payment

Mrs. Lillian Glass

EX. DIR. INTEPLY REFER TO:
DEP. DIR. 2PPR Benjamin
D. ADM. 222 - 2608
D. COM. S.
D. PLAN.
SP. ASST.
ACCOMPY AND COMPY AND COMP

As you know, subject displacee purchased a replacement house last November. It was inspected by the City, under contract to your agency, and found decent, safe and sanitary, in compliance with local housing code standards. In February of this year, it was discovered that a flooding condition existed on the property due to an overloaded sewer. Mrs. Glass engaged an attorney to assist her in having this condition remedied.

On June 23, we authorized your agency to include the cost of the sewer work to bring subject displacee's replacement house up to sanitary standards as a part of the "purchase price" of the replacement house. Two months later we understand that the necessary repair work has not yet started due to difficulties in applying the comparables method of replacement housing payment computation. We are concerned that this situation be remedied prior to the start of the rainy season.

This letter is your authorization to proceed with the necessary rehabilitation work immediately. If the entire costs cannot be paid by additional eligibilities under Repayment Housing Payment, the remainder should be taken from local funds. We further suggest that you review the procedures used in your housing inspection program to prevent similar occurrences in the future.

Sincerely,

Area Director

cc: Mrs. Lillian Glass 3965 NE 15th Ave. Portland, Oregon EMANUEL - BAY IN GLASS FILE

LLOYD ANDERSON



DEPARTMENT OF PUBLIC WORKS

ROOM 414, CITY HALL 1220 S.W. 5TH AVENUE PHONE 228-6141

X DIR.

DEP. DIR.

D. ADM

D. COM. S.

SP. ASST.

Bu

RECEIVED

OCT 19 1972

CITY OF PORTLAND OREGON

PORTLAND DEVELOPMENT COMMISSION

October 18, 1972

Mr. John B. Kenward
Portland Development Commission
1700 S. W. Fourth Avenue
Portland, Oregon 97201

Dear Mr. Kenward:

You have inquired about the sewer lines in the general area of NE 15th Avenue as it relates to Model Cities, and more specifically, the home of Mrs. Lillian Glass.

ome Master File Copy.

At the present time the City Engineer's Office is making a general study of this whole area regarding capacity of the sewers existing there. It is expected that the study will take several years before definite recommendations will be made.

Yours very truly,

Lloyd Anderson

Commissioner of Public Works

LEA:bg

EMANUEL- LAY IN GLASS FILE October 11, 1972 The Honorable Lloyd E. Anderson Commissioner of Public Works City Hall Portland, Oregon 97204 Dear Commissioner Anderson: On October 27, 1971 Mrs. Lillian Glass was displaced from her former residence at 2728 M. Vancouver Avenue by the Emanuel Hospital Project and, therefore, qualified for relocation assistance from the Portland Development Commission. Hrs. Glass found a replacement dwelling at 3965 N. E. 15th Avenue. Following established relocation procedures, we had the replacement unit inspected by the Bureau of Buildings which found the unit to meet City building code requirements. We then provided Mrs. Glass with the relocation assistance and payments provided for under Federal law. About the first of February, 1972, Mrs. Glass complained to us of water in her basement following a heavy rain. We investigated the situation, and on the basis of our own investigations and discussions with members of the Department of Sanitation staff, as well as discussions with qualified plumbers, we have determined that the water problem results from a backup in the sewer lines and that the only satisfactory solution is to increase the capacity of the system servicing the Glass unit. This information has been presented to our Commissioners who have instructed me to notify you of their concern for this situation; namely, that while the unit meets the City building code requirements, it may not meet the decent, safe and sanitary requirements as required by Federal law, and to request that the City take the necessary action to correct this altuation if it is within its power. We recognize that this is not a simple request that we are makingsof you; however, we went to assure you that we will appreciate any corrective action that the City is able to take to assist Mrs. Glass. We want to thank you for your attention in this matter. Very truly yours, John B. Kenward Executive Director JBK/BCW:ch

EMANUEL JC. October 11, 1972 The Honorable Lloyd E. Anderson Commissioner of Public Works City Hall Portland, Oregon 97204 Dear Commissioner Anderson: On October 27, 1971 Mrs. Lillian Glass was displaced from her former residence at 2728 M. Vancouver Avenue by the Emanuel Hospital Project and, therefore, qualified for relocation assistance from the Portland Development Commission. Mrs. Glass found a replacement dwelling at 3965 N. E. 15th Avenue. Following established relocation procedures, we had the replacement unit inspected by the Bureau of Buildings which found the unit to meet City building code requirements. We then provided Mrs. Glass with the relocation assistance and payments provided for under Federal law. About the first of February, 1972, Mrs. Glass complained to us of water in her basement following a heavy rain. We investigated the situation, and on the basis of our own investigations and discussions with members of the Department of Sanitation staff, as well as discussions with qualified plumbers, we have determined that the water problem results from a backup in the sewer lines and that the only satisfactory solution is to increase the capacity of the system servicing the Glass unit. This information has been presented to our Commissioners who have instructed me to notify you of their concern for this situation; namely, that while the unit meets the City building code requirements, it may not meet the decent, safe and sanitary requirements as required by Federal law, and to request that the City take the necessary action to correct this situation if it is within its power. We recognize that this is not a simple request that we are makingeof you; however, we want to assure you that we will appreciate any corrective action that the City is able to take to assist Mrs. Glass. We want to thank you for your attention in this matter. Very truly yours, John B. Kenward Executive Director JBK/BCW:ch

MEMORANDUM Date October 6, 1972 TO: The File - EMANGEL - JC. FROM: Benjamin Webb SUBJECT: Sewer Backup at 3965 N. E. 15th - Lillian Glass Under instructions given by the Commission at its September 25th meeting, I revisited the Sewer Department at City Hall to get the latest information on the sewer backup problem in the general area of 15th and Shaver, where the above-mentioned property is located. I had discussions with Stephen S. Strylewicz, Associate Civil Engineer; Tom Turner of the Sewer Maintenance Department; and Ray Sims of the Sewer Maintenance Program Planning. Mr. Sims had a map showing a red dot for each property that has reported a serious flooding condition throughout the City. There did not seem to be a single area that did not have some red dots, although some areas had more than others. The area in the general vicinity of 15th and Shaver was quite concentrated with red dots, although not as heavily as the area around North Lombard, say from between about Union Avenue and perhaps 15th or 20th Streets. Mr. Sims said that at this time he was not sure what work could be done to alleviate the problem. He said that they would first have to conduct some tests to determine what action would be required. First, they would run a T.V. survey, i.e., they would place a T.V. camera in the sewer line so they could observe the run-off action. On the basis of the T.V. survey they would then compute run-off and after this, determine the possible courses of action. The major constraints would be the shortage of staff to perform the work quickly and/or shortage of funds. Another problem is that the City is now in the process of separating the rain run-off sewers from the regular sewer line, and they would not want to go into extensive work in this area only to have to undo it within a relatively short period of time. Mr. Sims agreed that we should send a letter to them, analyzing the problem as we see it, and request remedial action. He did indicate that they would begin the test immediately without waiting for our letter. BCW: ch

1.28.72 I spoke with steen Jones and asked him to draft a life to Rublic utrikes Dept king their least useislance in a permanent evolution 10 a.m. Sept. 21, 1972 for our client, as requested by the commissioners at ADDITIONAL INFORMATION ON THE GLASS SEWER PROBLEM. Lee minutes of 9-25-72.

10-2-72 Ben Webb will dreft lette

file

Ernie Wiley called to say he had received three bids for installing a check and gate valve on this property, as follows:

De Temple	Plumbing	\$507
D&F	11	698
Walker	11	972

When Ernie called De Temple to get started immediately, the man just laughed at him. Ernie said he wanted construction to start Monday morning, but De Temple said he did not have any plumbers available then. He did agree to send a man in to start breaking up the concrete, however, and will proceed as soon as possible. Mrs. Glass has agreed to be at home Monday to let the workman into the house.

The check valve will automatically keep the sewer from backing up when the pressure builds up--but in the event something is going through at that moment, it will not be effective. Should be effective at least 90% of the time though. The gate valve will allow Mrs. Glass to shut the valve manually when it is apparent from heavy rains, etc., that pressure is building up in the street.

MEMORANDUM Date September 20, 1972 John B. Kenward TO: Benjamin Webb FROM: SUBJECT: EDPA Letter of September 18, 1972 Relative to Mrs. Lillian Glass At your request I telephoned Mr. Robert Nelson and discussed this matter at some considerable length. I filled him in on the history of this case and explained to him that we had been working on it for a considerable period of time but that the ultimate solution to the problem was really beyond our capabilities - that what she really needs is a proper sewer and that this is the responsibility of the City. Mr. Nelson acknowledged this and indicated that he had a meeting scheduled with Mrs. Glass this coming Friday at which time he would explain to her that she should go to the City with the problem and, if possible, should enlist the assistance of any of her neighbors who might be having a similar problem, and take their problems to the City. Mr. Nelson said that he had made the same request of Mrs. Glass some time in the past but that she had not followed through on it. He agreed with me that if Mrs. Glass was not willing to take the initiative in this matter with the City, that there was not much that we could do to arrive at a permanent solution to the problem. We did assure him that we are getting bids and that within the next day or so we expect to have a plumber on the job to put in certain check valves that will give a measure of relief, but that this is probably not going to be a 100% satisfactory solution. We, also, asked him to convey this information to Mrs. Glass and told him that we were conveying the same information to her. We are giving this matter top priority and expect to have activity under way within the next day or so. At any rate, we will have at the very least a commitment on it before the next Commission meeting. BCW: ch

Emanuel Displaced Persons Association, Inc. 106 N. E. Morris PORTLAND, OREGON 97212 Phone 287-3736 RECEIVED DEP. DIR D. OPER. September 18, 1972 D. ADM. SEP 19 1972 D. COM. S D. PLAN. PORTLAND DEVELOPMENT COMMISSION SP. ASST. Mr. John Kenward, Director Portland Development Commission 1700 S.W. 4th Portland, Oregon 97201 Master File Copy___

Dear Mr. Kenward:

Mrs. Lillian Glass called me and said she is getting upset because PDC seems to take her sewer problem lightly. One remark made to her was "that it probably won't rain that much" when she expressed concern about the approach of the season of heavy rain when her sewer backs up into her basement.

Would it be possible to place this item on the agenda for the next Commission meeting? It does need prompt resolution.

Sincerely yours,

Robert E. Nelson

copies: Mrs. Lillian Glass Mrs. Leo Warren

Commission members

J.C.



REGION X
REGIONAL OFFICE
SEATTLE, WASHINGTON

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT AREA OFFICE

CASCADE BUILDING, 520 S.W. SIXTH AVENUE, PORTLAND, OREGON 97204

AREA OFFICES
Portland, Oregon
Seattle, Washington

R É LE 18 V ED

AUG 36 1972

PORTLAND DEVELOPMENT COMMISSION

Mr. John Kenward
Executive Director
Portland Development Commission
1700 S. W. 4th
Portland, Oregon 97201

Dear Mr. Kenward:

Subject: Ore. R-20, Emanuel Hospital Replacement Housing Payment

Mrs. Lillian Glass

DEP. DIR.		1	REFER TO:
D. OPER.			Benjamin
D. ADM.	22	1-2608	3
D. COM. S			
D. PLAN.			
SP. ASST.			
SP. ASST.			
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As you know, subject displacee purchased a replacement house last November. It was inspected by the City, under contract to your agency, and found decent, safe and sanitary, in compliance with local housing code standards. In February of this year, it was discovered that a flooding condition existed on the property due to an overloaded sewer. Mrs. Glass engaged an attorney to assist her in having this condition remedied.

On June 23, we authorized your agency to include the cost of the sewer work to bring subject displacee's replacement house up to sanitary standards as a part of the "purchase price" of the replacement house. Two months later we understand that the necessary repair work has not yet started due to difficulties in applying the comparables method of replacement housing payment computation. We are concerned that this situation be remedied prior to the start of the rainy season.

This letter is your authorization to proceed with the necessary rehabilitation work immediately. If the entire costs cannot be paid by additional eligibilities under Repayment Housing Payment, the remainder should be taken from local funds. We further suggest that you review the procedures used in your housing inspection program to prevent similar occurrences in the future.

Sincerely,

cc: Mrs. Lillian Glass

3965 NE 15th Ave. Portland, Oregon

MEMORANDUM June 27, 1972 Date Stan Jones TO: Ben Webb FROM: SUBJECT: Mrs. Lillian Glass Please see the attached letter of June 23, 1972 from Helen Benjamin and note that she has concurred in our request to correct the substandard conditions in Mrs. Glass's house. Also note that she has indicated that the maximum amount that we can spend will be limited to either the schedular amount or an amount established through the selection of a comparable. Therefore, will you please establish the reasonable cost of a house comparable to her acquired dwelling, that was on the market at the time that she was looking for the house that she now occupies on N. E. 15th. If we can establish that the average reasonable cost of a comparable house is around \$15,500, we can proceed to hire a contractor to go ahead and correct the substandard conditions. If you require the use of multiple listings, please let us know; we have them here in the main office. BCW:ch May

June 21, 1972 Miss Helen Benjamin Relocation Specialist Department of Housing and Urban Development Portland Area Office 520 S. W. Sixth Avenue Portland, Oregon 97204 Dear Miss Benjamin: Re: Mrs. Lillian Glass Pursuant to our telephone conversation of June 21, 1972, we enclose a copy of our letter of April 21, 1972 to Mr. Russell H. Dawson relative to the above-mentioned displacee. If you have any further questions, please let us know. Vary truly yours, Benjamin C. Webb Chief, Relocation and Property Management BCW: ch Enclosure

April 21, 1972 Mr. Russell H. Dawson, Area Director Department of Housing and Urban Development Portland Area Office 520 S. W. Sixth Avenue Portland, Oregon 97204 Attention: Helen Benjamin, Relocation Representative Dear Mr. Dawson: Subject: Permission to Exceed the Schedular Cost of Comparable Replacement Dwelling to Rehab a Substandard Dwelling up to Standard Mrs. Lillian L. Glass was an owner-occupant of a two-bedroom house at 2728 N. Vancouver Avenue which is in the Emanuel Hospital Project area. She found a four-bedroom replacement house that she wanted to buy, at 3965 N. E. 15th Avenue. Our schedular cost of a two-bedroom house is \$14,639. Mrs. Glass was able to purchase this four-bedroom house at \$14,500. We requested an inspection of the new property from the City Bureau of Buildings, and on September 30, 1971 we received a letter from the City Building Inspector certifying that the structure was in standard condition and in compliance with City Housing Regulations. We relocated Mrs. Glass on the 11th of November, 1971 and closed her file. In February of 1972 there were some unusually heavy rains, and as a result water from the City sewer lines began to back up into her basement, creating a very inconvenient and unsanitary condition. We mentioned this problem to the City Sewer Department, and they informed us that this condition had existed in that area for several years, but that they had no immediate plans to remedy it by installing a larger Please see the attached copy of the Assistant City Engineer's letter to Mrs. Glass of April 12, 1972, and note that the City admits that this may be an unsanitary condition. We have seen the flooding ourselves, and in our opinion there is no doubt but that this is a very unsanitary condition and is in violation of the requirements that the house be decent, safe and sanitary. However, this unsanitary condition was not known to either Mrs. Glass or ourselves at the time that she moved in.

Mr. Russell H. Dawson April 21, 1972 We are now faced with the situation where the condition will either have to be corrected or Mrs. Glass will have to move to another location. She does not want to move again and is demanding that the situation be corrected. We therefore request permission to reopen the file and author-Ize rehabilitation work to be done as necessary to prevent the sewer from continuing to back up into the basement. It is our opinion that this work could be authorized under the provisions of Chapter 6, Section 3, Paragraph b2, Page 14 of the Relocation Handbook. We estimate that this will cost from \$800 to \$1,000. May we have your reply? Very truly yours, Benjamin C. Webb Chief of Relocation and Property Management BCW:ch Enclosure

REX L. WALKER Plumbing & Heating Co.

ESTABLISHED 1908

2038 N. E. ALBERTA STREET

PHONE AT 8-5593

PORTLAND 11, OREGON



Sales Engineer

Respectfully Submitted

AGREEMENT

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the following specifications, terms and c	onditions, on premises below d	escribed:	784-	5724
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LEGAL AID SERVICE MULTNOMAH BAR ASSOCIATION EA. D.R. A. DiR. ALBINA OFFICE 517 N. E. KILLINGSWORTH - 288-6746 - PORTLAND, OREGON 97 27 D. OPER SP. ASST. JAY FOLBERG Bew April 17, 1972 DIRECTOR OIN APR IN LALE Portland Development Commission
1700 S. W. Fourth Avenue Portland, Oregon Attn: Ben Webb, Relocation Dear Mr. Webb: Enclosed herewith is a copy of a letter dated April 12th, 1972, received from the Assistant City Engineer pertaining to Mrs. Lillian L. Glass, 2965 N. E. 15th. I believe that the letter is sufficient to establish the existence of an unsanitary condition at that premises, and, accordingly, ask that you initiate claim for the repairs suggested. Very truly yours, Supervising Attorney HJB/mlw Enclosure: One

DEPARTMENT OF PUBLIC WORKS
LLOYD E. ANDERSON
COMMISSIONER



JAMES L. APPERSON

CITY OF PORTLAND OREGON

97204

1220 S.W. 5TH AVENUE . PHONE (503) 228-6141

April 12, 1972

Mrs. Lillian L. Glass 2965 NE 15th Portland, Oregon

Dear Mrs. Glass:

The Sewer Repair Division has investigated the cause of the sewer backup that periodically floods your basement at 2965 NE 15th.

Their findings indicate that the heavy rainfall had overloaded the main sewer in the street, causing waste to back up into your sewer lateral from the main sewer and from your rain drains, if connected to the sewer. When the rain subsided, the water receded from your basement; this is further indication of an overloaded sewer. This overloading and periodic flooding could cause a health problem. We have done some disinfecting to help control the situation.

As a solution, we would suggest that you consider installing a back water valve in your sewer lateral. This valve closes when back pressure is applied and will prevent water from entering the basement. The valve must be placed between the floor drain and the rain drain connections when the rain drains are connected to the sewer.

If you are interested, or would like any information in the installation and costs of these valves, we suggest you contact any of the local licensed plumbing contractors. Further information relative to the sewers maintained by the City within the street area can be secured from Mr. Tom Turner, 228-6141, extension 412.

Very truly yours,

WILLIAM T. MONAHAN Assistant City Engineer

TT:bd

cc: Jim Barnes, Legal Aide 517 NE Killingsworth St. Portland, Oregon T. THOMPSON'

GEO WALLACE

BEN MALLER-SEWER IMANY,
SUPER.

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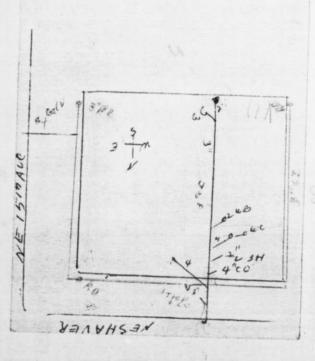


DIAGRAM SYSTEM AT 3965 N.E. 15, LILLIAM GLASS TO SHOW! THE DRAINALE

(5-59) Permit 96842 Address . Blk 5 Add. Dixon Place B. H. McCanna Contractor Joslin Plbg Co Stories and class of building 1-story old dwelling moved in Floor Drains 1 Beer Cab. Conn. To Sewer Laundry Trays 1 Dry Wells Water Permit 230182 Bldg. Pmt. 382103 Sewer Permit 76126 Remarks (House moved from 1445 NE Fremont St.) Date of First Inspection 5 13-60 Date of Final Inspection 10 21-60 Swallow Inspector

> DIAGRAM TO SHOW THE DRAINAGE SYSTEM AT 3965 N.E. 15, LILLIAN GLASS

WALLACE plumb super W. 29,6 T. THOM PSON

land, Oregon 97209 Jan. 9, 1977

DETEMPLE COMPANY



615 N.W. COUCH STREET, NEAR BROADWAY

Phone: 227-2641

Portland Development 235 N. Monroe St. Portland, Oregon

TERMS: NET CASH

To Balance

Oct. 23 - Over due Dec. 21

849.00 21.19

NAME AND ADDRESS OF DISPLACING AGENCY	PROJECT NAME
	PROJECT NO. R-20
Full name Date of Displacement	Parcel NoIndividual
A. I Address of unit <u>from</u> which you moved	ion of negotiations
A. II Address of unit to which you moved Number of bedrooms	of replacement dwelling \$ 14,500,
 Interest Payment. Outstanding mortgage on original dwe Number of monthly payments remaining Annual interest on mortgage of original Annual interest rate of mortgage on Prevailing interest rate on passbook 	on mortgage: nal dwelling new dwelling
C. Incidental expenses. Charged to Claimant S	\$\$\$
Determination 1. Did client own dwelling at time of acqu Initial date of ownership 1948 May	isition Yes No 30 Date of acquisition 19 40 pm
2. Did client own and occupy 180 days prio	r to negotiations?No
3. Did client purchase and occupy replacement of displacement Yes No Date of displacement Date of purchase of replacement housing Date of occupancy of replacement housing	Sept 3, 197'
4. Did claimant have a bona fide mortgage negotiations?YesNoNo	
5. Is replacement dwelling standard	

MEMORANDUM January 3, 1973 TO: Ben Webb FROM: Jim Crolley SUBJECT: Relocation Payment - Lillian L. Glass Mrs. Glass moved from the Project Area at 2728 N. Vancouver Avenue to 3965 N. E. 15th on October 27, 1971 at which time our cost based on Schedule for Average Price of Comparable Sales Housing was \$14,639. This schedule was not based on small, medium or large units. The schedule which was approved ten months later is based on unit size. The unit that Mrs. Glass occurred was 912 sq. ft. or a medium size unit with an average price of \$17,202. We are now recomputing her RHP to the higher price in order to remedy conditions that existed at the time of purchase which is "aligible to be included in the Purchase Price of the Replacement dwelling". This analysis of substandard conditions and remedy was concurred with by John H. Carter, Jr. by letter dated 23 June, 1972. Mrs. Glass's RHP has been computed by the comparable method, and the above information suggests that the price for a comparable determined as \$16,400 seems reasonable. JCC: k

3960 N. E. 16 AVE CONDITIONAL COMMITM FOR MURTGAGE INSURANCE THE NATIONAL HOUSING ACT PORTLANO, SEC. 202(b) SEC._____ ESTIMATE OF VALUE AND MONTHLY EXPENSE ESTIMATE MORTGAGEE CLOSING COSTS Fire Ins. . . . VALUE OF PROPERTYS 16, 400 Taxes.... Closing Co.ts...... 500 TOTAL (For Mortenese Justice Purpose J. . 5 16 700 Main. & Repairs 5 ... Hour & Unlines 3___ AFFROYLD FOR COMMITMENT 132 2 TO COR Issued: St \$223.5 Expires: 12-21- 1971 EXISTING PROPOSED COMMITMENT TERMS WAX, MORT. AMT. 5 16 700 NO. MOS. 300 MAX, INTEREST (See Gen. Cond. #1) Living Area 1105 Sq. Ft. INFORMATION The estimates of fire insurance, taxes, maintenance/repairs, heat/utilities and closing costs are furnished for mortgagee's and mortgagor's information. They may be used to prepare FHA Form 2900. Application for Credit Approval, when a firm commitment is desired. GENERAL COMMITMENT CONDITIONS .. MAXIMUM MORTGAGE AMOUNT AND TERMS -(a) OCCUPANT MORTGAGORS: The mortgage amount and term 3. COMMITMENT TERM: This commitment shall expire SIX MONTHS from the issue date in the case of an EXISTING HOUSE or ONE set forth in the heading are the maximum approved for this property assuming a satisfactory owner-occupant mortgagor. The maximum amount and term in the heading may be changed depending upon FHA's rating of the borrower, his income and credit. YEAR from its date in the case of an EXISTING HOUSE of ONE YEAR from its date in the case of PROPOSED CONSTRUCTION. (FILA classifies all cases as either "EXISTING" or "PROPOSED" for the purpose of determining when a commitment expires. Accordingly, a house, even though still under construction, may be classified as an existing house if it was not approved by FILA or VA ories to the heritaging of contents as not approved. (b) NONOCCUPANT MORTGAGORS: If the mortgagor does not occupy the house, the law limits the maximum mortgage amount to not to exceed 85% of the maximum amount available to an eligiby FHA or VA prior to the beginning of construction.) ble mortgagor who will occupy the house (85% of value if Sec. 203(i) or 221). In the case of nonoccupant mortgagors, the firm commitment when issued will reduce the mortgage amount and CANCELLATION:-This commitment may be cancelled after 50 days from the date of issuance if construction has not started, terms below that stated in the heading. unless the mortgagee has disbursed loan proceeds. (c) COMMITMENT CHANGES: The Commissioner may, upon request of the approved mortgagee, change the mortgage amount and term set forth in the heading. If the application is accompanied by a VA CRV, changes will be made only if VA issues PROPERTY STANDARDS:-All construction, repairs, or alterations proposed in the application or on the drawings and specifications returned herewith, shall equal or exceed the FHA Minian amendment. mum Property Standards, or the deviations agreed upon persuant FIRM COMMITMENT:-A firm commitment to insure a loan will be issued upon receipt of an Application for Credit Approval, FHA Form 2900, executed by an approved mortgagee and a borrower satisfactor, to the Completioner. to purpose and scope provisions of General Revision No. 6, dated August, 1968. SPECIFIC COMMITMENT CONDITIONS (Applicable when checked) HEALTH AUTHORITY APPROVAL:-Execution of Form 2573 by 6. VA INSPECTIONS:-Furnish a copy of a clear VA final report. the Health Authority indicating approval of the water supply and/ ASSURANCE OF COMPLETION:-If the required repairs cannot or sewage disposal installation is required. (Approval by letter be completed prior to submission of closing papers, a Form 2300 or Health Authority Form may be used.) (or such additional escrow in the amount of \$ amount as the lender desires) may be established as the means TERMITE CONTROL:-(n) EXISTING HOUSE - Furnish certificate to assure completion. from a recognized termite control operator that the house shows SECTION 235 AUTHORITY: no evidence of an active termite infestation. (b) PROPOSED CON-(a) This commitment may be converted to section 235(i) upon STRUCTION - Furnish original and two copies of Termite Soil receipt of an application covering an eligible borrower. Treatment Guarantee FHA Form 2052. Contract authority for this purpose has been obligated. (b) If contract authority is available, this commitment may SUBDIVISION REQUIREMENTS:-Comply with Requirements be converted to section 235(i) upon receipt of an application covering an eligible borrower. No. EXPIRATION DATE:-The Total Value stated above is based __for__ from Report dated _____ on Veterans Administration Certificate of Reasonable Value, Subdivision. .dated case number_ Regardless of General Commitment Condition Number 3, above, BUILDER'S WARRANTY:- The builder shall execute FHA Form this commitment expires on_ 2544, Builder's Warranty. 10. PROPERTY INSPECTIONS:-A notice of construction status shall be given by Form 2389X, letter or telephone at the time See special conditions No. UC-115; UC-117 ____below or on indicated below: attached sheet. (a.) ALL PROPOSED CONSTRUCTION CASES: (1.) At least two work days before "beginning of construction." (2.) When the building is enclosed, structural framing completely exposed and roughing-in of plumbing heating and electrical work installed and visible (3.) When construction completed and property ready for occupancy. REPARS: Notify FHA upon completion of required (b.) A certificate CENTRICATE OF COMPLETION: stating that the mortgacee has examined the proposed or a quited repairs and that they have been satisfac-(c.) torily completed will be accepted. While the partrum insurable emper-occupant loss indicated above "" ; 1025 of valuation, the second perform northern cannot be; determined potil then comply at is empressed to a firm commitment. Charteneter better ho. 537.1 We be made region all our richbe, title and interest in this consitment to FIRST NATIONAL BANK OF CLESCOI, 42nd & Going Branch German ditti, Inc. By: '. '. . , Assistant Cachier Movember 2, 1971

250,555 110		Budget Bureau No. ACREE
FE COL HOUSE	NG ASS	712.
STATEMENT OF APPRAISED VALUE FOR A MORTGAGE TO BE INSURED UNDER THE NATIONAL HOUSING ACT	TARRESTY ADDRESS	1.12
SEC. 200(b) SEC.	* * * * * * * * * * * * * * * * * * * *	
MORTGAGLE	ESTIMATE OF VALUE AND	MONTHLY EXPENSE
	VALUE OF PROPERTYS 16 400	Fire Ins \$
	Closing Costs \$ 300	Main. & Repairs \$
The state of the s	APPROVED FOR COMMITMENT	COMMITMENI
6738 L 100 4 4 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	APPROVED FOR COMMISSION	Issued: 6-21 19/1
	+ OF VALUE	Expires: 12-21 1971
The Federal Housing Commissioner has valued the above identified property for mortgage insurance purposes in the amount shown. FHA's estimate of "Value" ("Replacement Cost" in Section 213 or 220) does not fix a sales price, except when the mortgage is to be insured under section 235(i); does not indicate FHA approval of a purchaser of the property; nor does it indicate the amount of an insured mortgage that would be approved. THE ESTIMATE OF VALUE AND CLOSING COSTS ABOVE HAS THREE PARTS: "VALUE OF PROPERTY" IS FHA'S ESTIMATE OF THE VALUE OF THE PROPERTY. "Closing Costs" is the FHA estimate of the cost of closing a mortgage loan on the property. These costs may be paid by either the buyer or the seller. "Total for Mortgage Insurance Purposes" includes both the value of the property and estimated closing costs. The maximum mortgage which FHA can insure is based on this amount. Under those sections of the National Housing Act (such as 213 or 220) where the maximum mortgage amount must be based on estimated replacement.	"Replacement Cost" is an estimate of the property including land, labor, site pense but excluding payments for preparand insurance and closing costs. If the contract price of the property is e of Property", and the buyer pays closing ing costs can be included in the mortg PRICE OF THE PROPERTY IS MORE ERTY" AND THE BUYER PAYS THE BUYER IS PAYING MORE FOR THE ESTIMATE OF ITS VALUE. The law requires that FHA mortgagors repraised value" prior to the sale of the	equal to or less than "Value of costs, a part of the closage. IF THE CONTRACT THAN "VALUE OF PROPHE CLOSING COSTS, THE PROPERTY THAN FHA'S receive a statement of "approperty. If the sales conagor receives such a statement of the costs and the ser shall not be obligated to cour any penaltyunless the rechaser a written statement property (excluding closing
cost, the "Value of Property shall be deemed to mean replacement cost for mortgage insurance purposes"	costs) not less than \$ have the privilegeof proceedin out regard to the amount of the HOME BUYERS	. The purchaser shall ng withthis contract with- valuation."
DVANCE PAYMENTS - Make extra payments when able. You pay	stamp taxes. The estimate does not inclu	ude charges for such prepay-
ess interest and have your home paid for sooner. Notify the lender witting at least 30 days before the regular payment date on which ou intend to make an advance payment. ELINOUENT PAYMENTS Monthly payments are due the first day of ach month and should be made on or before that date. The lender tay make a late charge up to 2 cents for each dollar of any payment here than 15 days late. If you fail for 30 days to make a payment, or	BUILDER'S WARRANTY- When FHA aptions before construction, the builder is a house conforms to PHA approved plans, following the date on which title is convethe date on which the house was first occur	pproves plans and specifica- required to warrant that the This warranty is for 1 year eyed to the original buyer of upied, whichever occurs first.
o perform any other agreement in the mortgage, your lender may fore- lose. You could lose your home, damage your credit, and prevent our obtaining further mortgage loans. If extraordinary circumstances revent your making payments on time, see your lender at once. If ou are temporarily unable to make your payments because of illness, ess of job, etc., your lender may be able to help you. Ask your lender o explain FHA's forbearance policy. YOUR CREDIT IS AN IMPOR- ANT ASSET; DON'T LOSE IT THROUGH NEGLECT. DJUSTED PREMIUM CHARGE - If you make extra payments in any	If during the warranty period you notice do the builder is responsible, ask him in writing to do so, notify the FHA insuring of FHA case number shown in the heading. If to be at fault, the FHA will try to persual fine does not, you may seek legal relief to Most builders take pride in their work and tions. They cannot be expected to correct wear and tear or by poor maintenance. Keedition is the owner's responsibility.	riting to correct them. If he ffice in writing. Mention the finspection shows the builder hade him to make correction, under the builder's warranty. I will make justifiable correct damage caused by ordinary
ear of more than 15% of the original mortgage amount, you may have pay an adjusted premium charge. This charge is 1% of the original congage. FHA is authorized to charge a premium of not less than 1% f1% nor more than 1% per year, but has set the premium at 1% of 1% sesuming it will be paid over the whole mortgage term. When a mortage is paid off in advance, the premiums collected do not cover FHA est and an adjusted premium is charged to offset the loss. If this harge were not made, the premium would have to be higher. An adjusted premium is not made if a new FHA mortgage is placed on the reperty, or if the FHA insurance is in force for 10 years or longer.	OPERATING EXPENSES- In the heading a costs of taxes, heat and utilities, fire inspairs. The estimated figures will probably ou receive the actual bills. BEAR IN AMUNITIES TAXES AND OTHER OPERATING. The estimates should give some in the costs to be at the beginning. In son taxes may also include local charges such collection fees, water rates, etc.	surance, maintenance and re- ily have to be adjusted when MIND THAT IN MOST COM- TING COSTS ARE INCREAS- idea of what you can expect me areas FHA's estimate of the as sewer charges, garbage
AXES, ASSESMENTS, AND INSURANCE - Send your lender bills or taxes, special assessments, or fire insurance that come to you, he fire insurance the lender requires you to carry usually covers may the balance of the lean. Check this with your lender. You may ish to take out additional insurance so that if the house is damaged our less will be covered as well as the lender's. If your home is amaged by fire, windstorm, or other cause, write your lender at once, as as for the commit year can't be known until the bills are received, they exceed the amount accumulated from your payments, you will be asked to pay the difference. If they are less, the difference will be credited to your account. The same is true of fire insurance. Some lates allow homestead or veterin's tax exemptions. Apply for any	IF YOU SELL If you sell while the mortinance several ways. Understand how the you. Consult your lender. 1. You may sell for all cash and pay of your liability. 2. The buyer can assume the mortgage tween the unpaid balance and the sell. Fill and the lender are willing to pager, you can be released from fur the specific approval of the lender (EITHER OF THE ABOVE TWO METHO METHOD NUMBER 3.)	off your mortgage. This ends to and pay the difference beselling price in cash. If the accept the buyer as a mort-rther liability. This requires and the FIIA. ODS IS PREFERABLE TO
comption to which you may be entitled. When it is approved, notify our lender. LOSING COSTS - In the heading is FHA's estimate of anticipated losing costs, such as fees for preparation of mortgage instruments, trorneys' fees, title insurance, origination fees and documentary	3. The buyer can pay the difference in to the unpaid mortgage balance. FI necessary BUT YOU REMAIN LIA! THE BUYER DEFAULTS, IT COL CIENCY JUDGMENT AND IMPAIR	BLE FOR THE DEBT. IF
THE COST OF	F BORROWING	

When you berrow to buy a home, you pay interest and other charges which add to your coat. A larger downpartment will result in a smaller markeage. Horse was little as you need and repay in the shortest time. If you berrow \$10,000 at 7175 the menthly payment to principal and interest in \$10,000 less for a 30-year mortgage than it would be neglected to shown in the tables, although they are included in your monthly to remeat.

p-cyments.

MONTHLY PAYMENTS, PRINCIPAL & INTEREST, MORT. INS. PREMIUM, TOTAL INTEREST & MORT. INS. PREMIUMS PAID - 7195

	\$16,000 H -816,VGE		\$16,500-8 RTGAGE \$15,000-80RTGAGE			\$20,000-MORTGAGE .						
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	1111			\$21 M	1			A company	1.09,00	Languages!		2003.000

(Rev. 4-16-71) Mortgagee to submit satisfactory evidence that all mechanical equipment is in operating condition at the time of insurance endorsement. VC-114 Mortgagee to submit satisfactory evidence that is/are in satisfactory condition. VC-114A That a reinspection be requested for the inspection of the _____ to determine condition prior to closing. VC-115 Certification be submitted by the local governing body that this property is in compliance with the Housing Code applicable to this particular district. Certification on the enclosed form letters be completed on the A roof, VC-116 B Heating, C Plumbing, D Electrical. One copy of the certification is to be delivered to the purchaser of the property and one copy is to be submitted to FHA/HUD with the closing documents. VC-117) This commitment is issued on the condition that if the mortgage is to be insured under Section 235, the seller will execute an agreement to reimburse HUD for expenses incurred in repairing structural or other defect with respect to the property being sold in the form prescribed by the Secretary and that a seller who is not the occupant of the property will deposit 5 percent of the sales price in escrow with the mortgagee in accordance with the terms of the agreement. VC-118 Provide one operable window in each habitable room. 6-21-71

107660

D. & F. PLUMBING CO.

4636 NORTH ALBINA AVENUE, PORTLAND, OREGON 97217

TELEPHONE 282-0993

Sept. 21, 1972

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

Attention: Ernest R. Wiley, Property Management & Relocation.

Subject: 3965 N.E. 15th Ave., Portland, Oregon.

Gentlemen:

At the above subject we propose to furnish all plumbing and excavations necessary to furnish and install a 4" gate valve, and check valve in the sanitary sewer. We propose also the break and patch the concrete floor as required although we do not include patching of wall or tile replacement, the above for the sum of:

Six hundred ninety-eight and no/100

(\$698.00)

Cordially,

D & F PLUMBING CO. Le Ceowan

G. C. Cowan

APPROVED: _		
_		
	Date	. 1972

REX L. WALKER Plumbing & Hearing Co.

ESTABLISHED 1908 =

2038 N. E. ALBERTA STREET

PORTLAND 11, OREGON POC m. Willy



AGREEMENT			0	
you to furnish all ne	cessary materials, labor a	nd workmanship, to insta	all, construct and pla	mbing & Heating Co., and authorizace the improvements according
Owner's Name	cations, terms and condition	ms, on premises below d	lescribed:	
Job Address 396	GT NR -Th			Phone
Owner's Address	City		Co	State
MR. WILE	7 286-8169	9 SPECIFICATION	S	
fur N	ish + INS	TALL 1	Double	(Check & SATE
VALVa)	DREAK . R.	Epsie Lonce	ETE FLO	OR
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Market Hills				
In consideration	of said work and services	to be done by the Contra	actor, the Owner agr	ees to pay the Contractor the sui
of \$	plus interest as stip	oulated under A.B.C. or	BANK plans, to be pa	uid as follows: \$
Deposit, \$	on completion,	and Balance of \$, in	equal monthly payments
secured by note, com			/	f \$ monthly
	for said extended payments		protection at the pare of	· v mounty
This contract sh	all not be binding upon the	Contractor until accepted	d by an officer of the	e company. Upon such acceptance
It is further agree		have the right at any time	e to sell, transfer or	assign this contract. All Surplu
	of Walker Plbg. & Htg and ed by them without legal re		option, reserves the	right of complete repossession o
Owner agrees th	at in event of breach by ow	wner of this contract bef	fore work is started,	owner shall pay to Contractor o Should the Company bring suit i
court to enforce any	of the terms or conditions	hereof, the owner hereb	y agrees to pay cour	t costs and reasonable attorney'
			ne above-mentioned	premises and that the legal titl
	ord in his (or their) name(s acknowledges peccipt of a		ct, acknowledges tha	t he has read and knows the con
tents thereof, and und same contains the en	derstands that no other agre	eements, verbal or other	rwise, is binding upo	n the parties thereto, and that th
The contractor s	shall not be responsible for	damage or delay due to	strikes, fires, accid	ents, leakage or other causes be
yond his reasonable o				
COMPANY'S GUARA	NTEE: The Company guar ship free of charge	rantees its workmanship	and will replace fa	ulty material or faulty workman
IN WITNESS WH			nis day o	f, 19
	and the same has			, 10
REX L. WALKER PLUMBING & HEATI	NG CO.	Husban	ıd	Owner
Company acceptance By	15-15-17	Wife	BEN AND	
DESCRIPTION OF THE PARTY OF THE				Owner

Respectfully Submitted

Sales Engineer

Portland, Oregon 97209 0v. 1, 1972

DETEMPLE COMPANY



615 N.W. COUCH STREET, NEAR BROADWAY

Phone: 227-2641

Portland Development 235 N. Monroe St. Portland, Oregon

TERMS: NET CASH

To Balance

Oct. 23

849.00

DETEMPLE COMPANY

OUR SERVICE CARS
"Completely Equipped at
Your Door"



227-2641
615 N. W. COUCH STREET
NEAR BROADWAY

Sold to

Portland, Oregon 97209

Oct. 23 19 72

Portland Bevelopment Comm. 235 N. Monroe St. Portland, Oregon

Re: 3965 N. E. 15th Ave.		
Req: Mr. Ernie Wiley		
Install back water valve as quoted Change sink waste as quoted	507 00 342 00	849 00

URRAN CEDEVELOPMENT FUND-PROJECT EXPENDITURES-EMANUEL HOSPITAL, ORE. R-20

Warrant Number

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE PORTLAND, OREGON 97201

147

EH

DATE November 12

19.71

PAY TO Lillian L. Glass

\$ 509.95

DOLLARS

TO THE TREASURER OF THE CITY OF PORTLAND, OREGON colombes 28

AUTHORIZED SIGNATURE

NON-NEGOTIABLE

AUTHORIZED SIGNATURE

Portland Development Commission · 224-4800

DETACH BEFORE DEPOSITING CHECK

	T				
DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUNT		
		Reimbursement per Claims for Relocation Payment filed. Move from 2728 N. Vancouver (RS-3-6) to 3965 N.E. 15th Ave. Dislocation Allowance \$200.00 Fixed Payment - Own furniture 260.00 \$460.00 \$460.00	\$509.95		

Account Distribution

TITLE

AMOUNT

E 1501

Relocation Payments (Fixed - Individual \$460.00) (Settlement Costs 49.95)

\$509.95

Lillian L. Glass 11/19/71

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

Portland Development Commission 1700 S. W. Fourth Avenue Portland, Oregon 97201 PROJECT NAMBER: ORE R-20 PROJECT NAMBER: OR R-20 PROJECT NAMBER: OR R-20 PROJECT NAMBER: OR R-20 PROJECT NAMBER: OF LIST NAMB	NAME, ADDRESS AND ZIP CODE OF LOCAL AGENCY	PROJECT NAME (If applicable)
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 2. DATE(S) OF MOVE 10-27-71 3. DWELLING UNIT FROM WHICH YOU MOVED PARCEL NO. RS-3-6 a. Address 2728 N. Vancouver, Portland, Oregon		Emanuel Project
"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 2. DATE(S) OF MOVE 10-27-71 3. DWELLING UNIT FROM WHICH YOU MOVED a. Address 2728 N. Vancouver, Portland, Oregon b. Apartment, Floor, or Room Number c. Was it furnished with your own furniture? a. Address include ZIP Code) a. Address (include ZIP Code) a. Address (include ZIP Code) b. Apartment, Floor, or Room Number c. Ware household goods moved to or from storage? yes _ No If "Yes", complete table, "Statement of Claim for Storage Costs" 5. TOTAL CLAIM (if 5 b. marked above) Dislocation Allowance	Portland, Oregon 97201	OPE P-20
2. DATE(S) OF MOVE 10-27-71 3. DWELLING UNIT FROM WHICH YOU MOVED a. Address 2728 N. Vancouver, Portland, Oregon b. Apartment, Floor, or Room Number c. Was it furnished with your own furniture? x. Yes No DWELLING UNIT TO WHICH YOU MOVED a. Address (include ZIP Code) 3965 NE 15th, Portland, Oregon 97212 b. Apartment, Floor, or Room Number b. Apartment, Floor, or Room Number c. Were household goods moved to or from storage? b. Apartment, Floor, or Room Number c. Were household goods moved to or from storage? b. Apartment, Floor, or Room Number c. Were household goods moved to or from storage? yes x No If "Yes", complete table, "Statement of Claim for Storage Costs" 5. TOTAL CLAIM (if 5 b. marked above) Dislocation Allowance fixed Moving Payment (consult local agency) 6. I CERTIFY under the penalties and provisions of U.S.C. Title 18, Sec. 1001, and are 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, applicable law, falsification of any item in this chaim or submitted herewith may result in forfeiture of the entire claim. I further certify that I have not submitted at 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	"Whoever, in any matter within the jurisdiction United States knowingly and willfully falsifies or fraudulent statements or representations, or document knowing the same to contain any false, entry, shall be fined not more than \$10,000 or	of any department or agency of the or makes any false, fictitious makes or uses any false writing or fictitious or fraudulent statement or
a. Address 2728 N. Vancouver, Portland, Oregon b. Apartment, Floor, or Room Number c. Was it furnished with your own furniture? c. Was it furnished with your own furniture? e. Address (include ZIP Code) 3965 NE 15th, Portland, Oregon 97212 c. Were household goods moved to or from storage? b. Apartment, Floor, or Room Number Yes X No If "Yes", complete table, "Statement of Claim for Storage Costs" 5. TOTAL CLAIM (if 5 b. marked above) Dislocation Allowance \$200.00 Fixed Moving Payment 260.00 (consult local agency) Total \$460.00 6. I CERTIFY under the penalties and provisions of U.S.C. Title 18, Sec. 1001, and are 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, applicable law, falsification of any item in this chaim or submitted herewith may result in forfeiture of the entire claim. I further certify that I have not submitted 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	1. FULL NAME OF CLAIMANT GLASS, Lillian L.	(;)
d. Number of rooms occupied (excluding bathrooms, hallways, and closes: 6 c. Was it furnished with your own furniture? c. Was it furnished with your own furniture? a. Address (include ZIP Code) 3965 NE 15th, Portland, Oregon 97212 b. Apartment, Floor, or Room Number Dislocation Allowance \$200.00 Fixed Moving Payment 260.00 (consult local agency) 6. I CERTIFY under the penalties and provisions of U.S.C. Title 18, Sec. 1001, and are 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, 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 are 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	2. DATE(S) OF MOVE 10-27-71	
a. Address (include ZIP Code) 3965 NE 15th, Portland, Oregon 97212 b. Apartment, Floor, or Room Number b. Apartment, Floor, or Room Number Total CLAIM (if 5 b. marked above) Dislocation Allowance Fixed Moving Payment (consult local agency) 6. I CERTIFY under the penalties and provisions of U.S.C. Title 18, Sec. 1001, and an 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, applicable law, falsification of any item in this chaim or submitted herewith may result in forfeiture of the entire claim. I further certify that I have not submitted and 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 of receipts submitted herewith accurately reflect moving services actually performed	a. Address 2728 N. Vancouver, Portland, Oregon b. Apartment, Floor, or Room Number c. Was it furnished with your own furniture	d. Number of rooms occupied (excluding bathrooms, hallways, and closes: 6 e. Date you moved into this
5. TOTAL CLAIM (if 5 b. marked above) Dislocation Allowance \$200.00 Fixed Moving Payment 260.00 (consult local agency) Total \$460.00 6. I CERTIFY under the penalties and provisions of U.S.C. Title 18, Sec. 1001, and an 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, applicable law, falsification of any item in this chaim or submitted herewith may result in forfeiture of the entire claim. I further certify that I have not submitted and 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	a. Address (include ZIP Code) 3965 NE 15th, Portland, Oregon 97212	or from storage? YesNo If ''Yes'', complete table, ''Statement of Claim for Storage
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, applicable law, falsification of any item in this chaim or submitted herewith may result in forfeiture of the entire claim. I further certify that I have not submitted and 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 of receipts submitted herewith accurately reflect moving services actually performed	Dislocation Allowance \$200.00 Fixed Moving Payment 260.00	
10/27/71 11/1/1/20 11/1/1/20 11/20 1	other applicable law, that this claim and i examined by me and are true, correct and confrom the penalties and provisions of U.S.C. cable law, falsification of any item in this in forfeiture of the entire claim. I furth other claim for, or received, reimbursement for any item of loss or expense paid pursua receipts submitted herewith accurately refland/or storage costs actually incurred.	information submitted herewith have been omplete, and that I understand that, apart. Title 18, Sec. 1001, and any other applies chaim or submitted herewith may result her certify that I have not submitted any to compensation from any other source ant to this claim, and that any bills or
Date Signature of Claimant		Signature of Claimant

M-1

(For Local Agency Use Only)
DETERMINATION OF ELIGIBILITY FOR RELOCATION PAYMENT
FOR MOVING EXPENSES (FAMILIES AND INDIVIDUALS)

NAM	ME AND ADDRESS OF CLAIMANT:	NAME OF LOCAL AGENCY:					
L 3	Lillian L. Glass 3965 NE 15th, Portland, Oregon 97212 Portland, Oregon 97201 Portland, Oregon 97201						
	STRUCTIONS: Attach this form to the per explanation of any difference between a	rtinent claim form filed by claimant. Attach amounts claimed and amounts approved.					
1.	Does claimant meet basic eligibility r	requirements?No					
2.	Complete if claim if for a fixed payme located in household storage space: Date items inspected: Month-Day-Ye	ent including an amount for moving articles					
3.	plishing the move through services ofYes	× No					
	If "Yes," explain basis for approved a	mount:					
4.	CARTIFICATION						
	have found it to be in accord with the regulations issued by the Department of	aim, and the substantiating documentation, and applicable provisions of Federal law and the of Housing and Urban Development pursuant aby approved and payment is authorized as					
	(form continued on next page)						

(For Local Agency Use Only)

(Complete either A or B:)

	lt em	Amount 1/	Authorized Signature	Date
Α.	Fixed Payment and Dislocation Allowance 1. Fixed payment \$ 260.00	\$		
	2. Dislocation allowance \$ 200.00 3. Total \$ 460.00	460.00	BUL	11-11-
В.	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	
11/12/11	147 EH	\$ 460,00	80		\$	

Dwelling Unit Inventory

	QUANTITY			QUANTITY
3	_ Beds & Springs		1111	Night Stand
	_ Bedroom Chair			Occasional Chair
1	_ Breakfast Table		_// .	Overstuffed Chair
4	_ Breakfast Table Chairs		/	Overstuffed Rocker
	_ Bridge Lamp & Shade		1	Range
/	Buffet		_/	Refrigerator: Brand Holpoch
2	_ Chest of Drawers		11	Rocker
2	_ Coffee Table		2	Rug & Pad: Size <u>9×12</u>
1	Couch		_//	Stool
	_ Davenport		1741 144 /	Table Lamp & Shade
1	Desk of chair		11	Table, small
/	_ Dining Table		3	Vanity & Bench
6	_ Dining Chairs		1111	Suitcases
13	Dresser			Trunks
4	_ End Table			Cartons, Boxes, Etc.
3	_ Floor Lamp & Shade			Clothes
2	_ Mirror			Bedding & Linens
7	Ideater -			- Telephone
1	Stov2 Miscellaneous	(List It	ems) 311	Caheret
ad	io	2	1 Chin	a Cabinets
TU	+ Tables	6	Laws	1 Furniture
edw	enej	,	Barked	ene - Grill .
lace	um	,	Utility	y Cabinet
Vast	heing Machine	/	Silve	h chest
book	Case	1	maga	zine Raek
MENTS:			+05	1 (0)
				Kome 200
-	2 1 1 1 1 6 3 2 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Beds & Springs Bedroom Chair Breakfast Table Breakfast Table Chairs Bridge Lamp & Shade Buffet Chest of Drawers Coffee Table Couch Davenport Desk + Chair Dining Table Dining Chairs The End Table The Table The Store Miscellaneous Padio Table Cashing Machine Dashing Machine Dashing Machine Dashing Machine Dashing Machine Dashing Machine	Beds & Springs Bedroom Chair Breakfast Table Breakfast Table Chairs Bridge Lamp & Shade Buffet Chest of Drawers Coffee Table Couch Davenport Desk + Chair Dining Table Dining Chairs Dresser End Table Floor Lamp & Shade Mirror Heater Store Miscellaneous (List It	Beds & Springs Bedroom Chair Breakfast Table Breakfast Table Chairs Bridge Lamp & Shade Chest of Drawers Coffee Table Couch Davenport Desk + Chair Floor Lamp & Shade Mirror Heater Miscellaneous (List Items) 311 Cashing Machine Dark Case Miraga Maraga Lither L

CLAIM FOR RELOCATION PAYMENT

		s Incurred by	Owner)					
NAME AND ADDRESS OF LOCAL AGENCY (Include ZIP code)		PROJECT NAME (If applicable						F-1275
Portland Development Commission				Emanuel Project				
1700 S. W. Fourth Avenue		PROJECT NUMBER						
Portland, Oregon 97201 ORE R-20								
INSTRUCTIONS: Complete all applicable items and sign certific this claim.	cation in	Block 5. Con	sult the l	ocal agency	as to	documents to l	be s	submitted with
PENALTY FOR FALSE OR FRAUDULENT STATEMENT. U.S. any department or agency of the United States knowingly and will sentations, or makes or uses any false writing or document know be fined not more than \$10,000 or imprisoned not more than five	Ifully fal	sifies or	makes any	false, fict	itious	or fraudulent s	tate	ments or repre-
1. IDENTIFICATION OF CLAIMANT								
Name (as shown in deed to local agency or in condemnation p	roceeding	g)				e ZIP code)		
GLASS, Lillian Lucille	GLASS, Lillian Lucille 3965 N. E. 15th Portland, Oregon				9	97212		
2. IDENTIFICATION OF PROPERTY								
						property eit		99 9
3965 N. E. 15th, Portland, Ore (replacement b. Parcel Number(s)						resident or purpose of business or	for	the ying out
(replacement b. Parcel Number(s) replaced from RS-3-6	dwe l l	ing)				resident or purpose of business op	for	the ying out tions?
(replacement	dwe l l	ing)				resident or purpose of business op X Yes	for	the ying out tions?
(replacement b. Parcel Number(s) replaced from RS-3-6	dwell	ing) NG PROPERTY COSTS		AL AGENC		resident or purpose of business op X Yes	for	the ying out tions? No FOR LOCAL
(replacement b. Parcel Number(s) replaced from RS-3-6 3. SETTLEMENT COSTS INCURRED BY CLAIMANT IN TRANS	dwell SFERRIN CH CL SE	ing) IG PROPERTY COSTS HARGED TO LAIMANT ON ETTLEMENT TATEMENT	PAID D BY CI	ED BY CLA	AMO	resident or purpose of business op X Yes UNT CLAIMED (b) + (c))	for	the ying out tions? No FOR LOCAL AGENCY USE AMOUNT APPROVED
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attached escrow closing statement

I CERTIFY under the penalties and provisions of U.S.C. Little 18, Sec. 1001, and any other applicable law, that this claim and information sub-
mitted 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 this claim, and that any receipts submitted herewith accurately reflect costs actually incurred.

Lillian Lucille Glass
Signature of claimant

CERTIFICATION I CERTIFY that I have examined this claim, and the substantiating documentation, and have found i visions of Federal law and the Regulations issued by the Department of Housing and Urban Develop claim is hereby approved and payment is authorized in the total amount of \$ 49.95	
See RHP claim filed 10/5/71 - 10/19/71 DETAIL OF COSTS COVERING MORTGAGE PREPAYMENT PENALTY AND COSTS ALLOCABLE OF TITLE (Show basis for, and amount of, reimbursement due claimant for (1) any mortgage prepaym vice charges poid by, or charged to, claimant for any period subsequent to vesting title or possessio was poid directly by claimant or if the computation is not shown on the settlement statement.) EXPLANATION OF ANY DIFFERENCE BETWEEN AMOUNT OF REIMBURSEMENT CLAIMED AND INCREMENTAL CLAIMED AND INCR	
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I CERTIFY that I have examined this claim, and the substantiating documentation, and have found i visions of Federal law and the Regulations issued by the Department of Housing and Urban Develop claim is hereby approved and payment is authorized in the total amount of 49.95 11/3/71 Date Author	
claim is hereby approved and payment is authorized in the total amount of \$\frac{49.95}{236.00}\$. Date	
claim is hereby approved and payment is authorized in the total amount of \$\frac{49.95}{236.00}\$. Date	t to be in accord with the applicable pro-
11/3/71 Date Author	ment pursuant thereto. Therefore, this
11/3/71 Date Author	
Date X3 gett Author	Start and the second second second second
Date X3 gett Author	(
Date X3 gett Author	10 0
DECORD OF PAYMENT	ized signature
. RECORD OF PAIMER!	



Title Insurance Company of Oregon

425 S. W. Fourth Avenue / Portland, Oregon 97204

Phone 222-3651

escrows ESCROW NO. 268845

LILLIAN LUCILLE GLASS

ESCROW DEPARTMENT STATEMENT

AMENDED

WASHINGTON COUNTY OFFICE 12012 S. W. CANYON ROAD BEAVERTON, OREGON 97005

646-8181

CLACKAMAS COUNTY OFFICE

112 - 11TH STREET OREGON CITY, OREGON 97045 656-5243

EAST SIDE OFFICE

1350 S. E. 122ND AVENUE PORTLAND, OREGON 97233

October 19, 19 71 Marie McCanna DEBITS CREDITS DESCRIPTION 3965 N.E. 15th Avenue Deposit 14,500 00 Demand Title Insurance Policy Broker's Commission 1/2 Escrow Fee 32 50 Taxes RECORDING McCanna Glass 50 Deed Multnomah County Transfer Tax 13 95 Mortgage to Release of 119 08 (\$345.69) 7-1-71 to 11-8-71 Taxes Prorated Insurance Prorated Approx. 3/4 275 gal tank @ 19¢ per gal 30 00 Fuel Prorated Rents Prorated Funds transferred from PNTI for sale of property at 2728 N. Vancouver Funds transferred from PNTI for sale of property at 2728 N. Vancouver and Portland Development 8,200 00 Commission Balance Due 15 25 Balance-Our Check Herewith 14,595 20 14,595 20 TOTAL

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

Title Insurance Company of Oregon By Britain Daker

October 19, 1971 rioneer National Title Insurance Co. 421 S. W. Stark Street Portland, Oregon 97204 ATTENTION: Jean Egberg Escrow Officer Re: Escrow No. 386760 Parcel No. RS-3-6 GLASS, Lillian L. Gentlemen: You have in the above-identified escrow account the sum of \$8,000 as a replacement housing payment in accordance with our instructions of October 8, 1971. This is to certify that Mrs. Glass is purchasing a standard structure which complies with City Housing Regulations at 3965 N. E. 15th Avenue. You are hereby authorized to release said replacement housing payment and disburse it in such manner as directed by Mrs. Glass. Yours very truly, John B. Kenward Executive Director JBK:d1

MEMORANDUM

Date: October 18, 1971

TO:

Ben Webb

FROM:

Emanuel Site Office

SUBJECT:

Release of RHP from Escrow

Escrow Company:

Pioneer National Title Insurance Co.

Escrow No.

Parcel No.

RS 3-6

Name:

Lillian Luci le Glass

Moving Date:

October 27, 1971

The above client will relocate and will occupy the property which she is purchasing at 3965 N. E. 15th Avenue on October 27th, 1971. The City Bureau of Buildings reports that the structure complys with City Housing Regulations.

Please authorize the release of the Replacement Housing Payment, in the amount of \$8,000.00 on October 20th, 1971 upon recording of the deed for the purchase of said property.

Relocation Worker

15 October, 1971 Portland Development Commission 235 N. Monroe Portland, Oregon 97227 Attention: Mr. Stan Jones Gentlemen: I hereby agree to have the Replacement Housing Payment for the purchase of my replacement housing to be released to the escrow account of Marie M. McCanna, 3965 N. E. 15th upon recording of the deed per agreement of the contract of sale for the property at 3965 N. E. 15th. We will take possession from the seller on October 24th, 1971 and occupy said premises no later than three (3) days thereafter. Marie M. McCenna

15 October, 1971 Portland Development Commission 235 N. Monroe Portland, Oregon 97227 Attention: Mr. Stan Jones Gentlemen: Request Is hereby made for the release of the Replacement Housing Payment of Lillian Glass, 2728 N. Vancouver, to the escrow account of Marie M. McCanna, 3965 N. E. 15th, Portland, Oregon upon recording of a deed from me. I need the funds on October 20th to complete the transaction for the purchase of a mobile home so that I can vacate 3965 N. E. 15th on or about October 24th, 1971 at which time | will give possession to the purchaser (Glass). cc: Lillian Glass

October 8, 1971 Pioneer National Title Insurance Co. 421 S. W. Stark Street Portland, Oregon 97204 ATTENTION: Jean Egberg Escrow Officer Re: Escrow No. 386760 Parcel No. RS-3-6 (Glass) Gentlemen: Enclosed is Warrant No. 82 EH in the amount of \$8,000 representing a replacement housing payment to be deposited to subject escrow for disbursement to Title Insurance Company with instructions to disburse said payment to Mrs. Glass upon written authorization by the Commission that she has purchased and does occupy standard housing. Yours very truly, John B. Kenward Executive Director JBK:dl Enclosure

15 October, 1971 Portland Development Commission 235 N. Monroe Portland, Oregon 97227 Attention: Mr. Stan Jones Gentlemen: I hereby agree to have the Replacement Housing Payment for the purchase of my replacement housing to be released to the escrow account of Marie M. McCanna, 3965 N. E. 15th upon recording of the deed per agreement of the contract of sale for the property at 3965 N. E. 15th. We will take possession from the seller on October 24th, 1971 and occupy said premises no later than three (3) days thereafter. Eillian Lucille Glass cc: Marie M. McCanna

15 October, 1971 Portland Development Commission 235 N. Monroe Portland, Oregon 97227 Attention: Mr. Stan Jones Gentlemen: Request is hereby made for the release of the Replacement Housing Payment of Lillian Glass, 2728 N. Vancouver, to the escrow account of Marie M. McCanna, 3965 N. E. 15th, Portland, Oregon upon recording of a deed from me. I need the funds on October 20th to complete the transaction for the purchase of a mobile home so that I can vacate 3965 N. E. 15th on or about October 24th, 1971 at which time I will give possession to the purchaser (Glass). Marie Manna cc: Lillian Glass



title insurance

Title Insurance Company of Gregon

425 S. W. Fourth Avenue / Portland, Oregon 97204 Phone 222-3651 CLACKAMAS COUNTY OFFICE

112 - 11TH STREET OREGON CITY, OREGON 97045 656-5243

WASHINGTON COUNTY OFFICE

12012 S. W. CANYON ROAD BEAVERTON, OREGON 97005 646-8181

EAST SIDE OFFICE

1350 S. E. 122ND AVENUE PORTLAND, OREGON 97233 255-9103

ESCROW DEPARTMENT STATEMENT

ESCROW NO. 268845 MARIE MC CANNA

Lillian Lucille Glass

October 8

71

Deposit Demand Title Insurance Policy Broker's Commission Secrow Fee	\$		CREDITS	
Demand Citle Insurance Policy Broker's Commission Scrow Fee L/2 Faxes BECORDING Deed to Frust Deed to Mortgage to Release of Mortgage Commerce to McCanna Faxes Prorated Fa			s	
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surance Prorated all Prorated Approx. 3/4 275 gal tank © 19¢ per gal. Pay: Commerce Mortgage Company Loan Payoff				
Pay: Commerce Mortgage Company Loan Payoff	119	80		
Pay: Commerce Mortgage Company Loan Payoff lance Due				
Pay: Commerce Mortgage Company Loan Payoff			30	00
Loan Payoff				-
Loan Payoff				-
alance Due	4,101	83		
	-,,	0.0		
· ·				
Balance-Our Check Herewith		09		
TOTAL	9,165	93		_

This covers money settlement only. Any papers to which you are entitled will follow later. 7ille Insurance Company of Oregon

By Dufair Daku



title insurance escrows

7itle Insurance Company of Oregon 425 S. W. Fourth Avenue / Portland, Oregon 97204 Phone 222-3651

WASHINGTON COUNTY OFFICE 12012 5 W CANYON ROAD BEAVERTON, OREGON

646-8181

EAST SIDE OFFICE 29 N. E. 122ND AVENUE 255-9103 CLACKAMAS COUNTY OFFICE 112 - 11TH STREET OREGON CITY, OREGON 656-5243

October 29, 1971

Mr. Jim Crawley
Portland Development Commission
235 N. Monroe
Portland, Oregon 97227

Re: Escrow No. 268845
McCanna/Glass
3965 N.E. 15th Avenue
Portland, Oregon

Dear Mr. Crawley:

In connection with the above escrow, enclosed are the copies of the closing statements for the buyer and seller.

Many thanks for your kind cooperation in this matter.

If we can be of any service to you, please do not hesitate to call.

Yours very truly,

Barbara Baker

Barbara Baker Escrow Officer

bb Enc. MEMORANDUM

Date (c) 7.1971

TO:

Ben Webb

FROM:

Emanuel Site Office

SUBJECT:

Release of RHP from Escrow

Escrow	Company Reoneer National
	No
Parcel	No. RS-3-6
Name _	Lillian Lucile Glass
Moving	Date

The above client has relocated and does occupy the property which they purchased at 3965 N E. 154k. The City Bureau of Buildings reports that the structure complys with City Housing Regulations.

Please authorize the release of the Replacement Housing Payment in the amount of \$ 8000.00

ames 6. Cracley
Relocation Worker



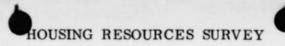
RELOCATIO	N MORKER	JC	PROJECT NO. Ore. R-20 PARCELRS-	3-6
NAME GLASS, L	illian (Conle	y) ADD	ORESS 2728 N. Vancouver APT NO	
PHONE 284-3515	_ INITIAL IN	TERVIEW	SEX F W NW B AGE 62	
U.S. CITIZEN_	ALIEN	VETERAN	SERVICEMAN DATE ON SITE 23 yrs.	
FAMIL	Y COMPOSITION			
Name	Relation		Employer: Name \$ Address MCW Caseworker Social Security 51.0 VA. Fed. Mult Co.	
			VAFedMult Co Pension: Name Other: Name	
			TOTAL MONTHLY INCOME 51.00)
Over 62 221 CERTIFICAT Notify in case	OR PUBLIC HOUS Disabled(Soc. FE OF ELIGIBIL of accident:	ING: (yes) of Sec.del	Income below limits Assets below limits_ delivered by	_
Name		Addr	ress Phone	
Information St	tatement giver	to	on by	
Notice to move	given to		on by Moved by self	1
Payments: Amo	ount \$ ving company	Check No.	Date delivered Moved by self (Phone)	(or
REMOVED FROM C Refused assi Relocated in Low-rent p Other perm Standard	CASELOAD:	(Date)	REMAINING ON CASELOAD: Address unknown, tracing Evicted, further assistance contemplated Temporarily relocated by LPA within project:	
	n refusal of		Address	
further			outside project:	
Sub-stande Out-of-to			A 4 4	
	nknown,abando no further	ned	FAMILY REFUSED ADDITIONAL ASSISTANCE.	
!.			D. L.	
Other (ex	plain)			
RELOCATION RE	FERRALS:			
	Addres	5	Inspection Certified By Date	
NEW ADDRESS:			Zip Phone	

DATE	NOTES	c/
1/15/71	Flyer delivered by James Crolley	
2/12/71	Survey: Will buy comparable housing N. area	
		A Description

JC

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

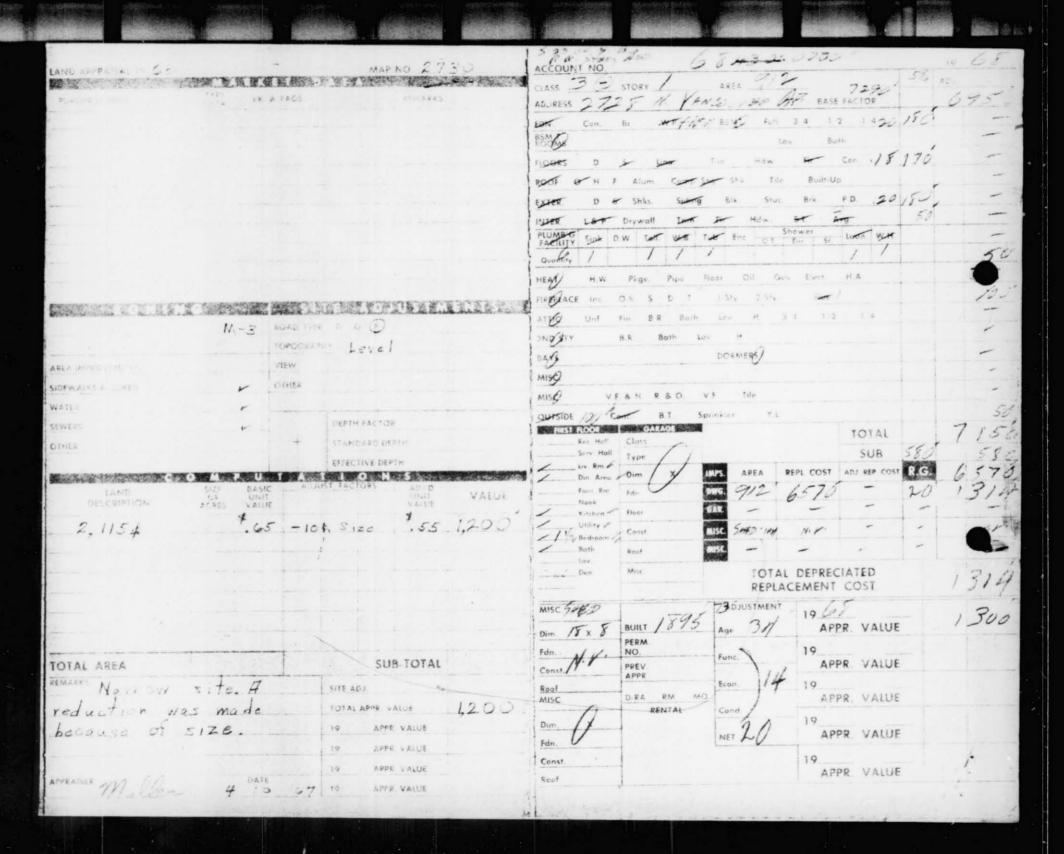
Analyst OC Surveyer	d 3 /2 11 Tabulator Date
Dwelling Unit No Structure No.	Census Block No Census Tract No. 22 A
Legal Description	Apartment No
	S ADDRESS OF OWNER NAME & ADDRESS OF PROP. MGR:
TELEPHONE: 284 3515 TELEPH	HONE: 284-3515 TELEPHONE: VIEWED? () Yes () No INTERVIEWED? () Yes () No
I. DESCRIPTION OF STRUCTURE Kind of dwelling unit No. of units One-family house Apt. in a house Apt. in apt. bldg. or plex Apt. in comm. bldg. Mobile home or trailer This structure has stories (do not count basement)	C. Market value data for dwelling unit in a multiple-family structure or commercial bldg. Market value Computed value for entire per sq. ft. for structure this dw. unit Land \$
Π. OCCUPANCY STATUS OF DWELLING Owner occupied Renter occupied Vacant	Sq. ft. of commercial space and value of commercial space: Land \$, improvements \$, total \$
III. SIZE OF DWELLING UNIT 9 2 Sq. ft. in first floor (county figure for sleeping) Size OF DWELLING UNIT Sq. ft. in first floor (county figure figure figure figure) Sq. ft. in dwelling unit (if more than figure figure) Sq. ft. in first floor (county figure figure) Sq. ft. in dwelling unit (if more than figure) Sq. ft	an 1 floor Rent \$ \$
IV. ASSESSOR'S MARKET VALUATION D. A. Dates or period of time 971 Period market value data applied 1895 Date of last appraisal Date structure was originally be	Advance rent \$, other \$ Rental information obtained from Tenant, owner, manager, or
B. Market value data for one-family dwell Market Computed value per sq. f Land \$_1240 \$ Improvements	VI. FOR SALE INFORMATION FOR THIS HOUSE THAT IS OCCUPIED BY OWNER OR RENTER VI. SALE INFORMATION FOR THIS HOUSE THAT IS OCCUPIED BY OWNER OR RENTER VI. SALE INFORMATION FOR THIS HOUSE THAT IS OCCUPIED BY OWNER OR RENTER VI. SALE INFORMATION FOR THIS HOUSE THAT IS OCCUPIED BY OWNER OR RENTER VI. SALE INFORMATION FOR THIS HOUSE THAT IS OCCUPIED BY OWNER OR RENTER VI. SALE INFORMATION FOR THIS HOUSE THAT IS OCCUPIED BY OWNER OR RENTER VI. SALE INFORMATION FOR THIS HOUSE THAT IS OCCUPIED BY OWNER OR RENTER VI. SALE INFORMATION FOR THIS HOUSE THAT IS OCCUPIED BY OWNER OR RENTER VI. SALE INFORMATION FOR THIS HOUSE THAT IS OCCUPIED BY OWNER OR RENTER VI. SALE INFORMATION FOR THIS HOUSE THAT IS OCCUPIED BY OWNER OR RENTER VI. SALE INFORMATION FOR THIS HOUSE VI. SALE INFORMATION FOR T
Total 2590	VII. REMARKS
PDC-HRS-1 Rew. 1/21/71	

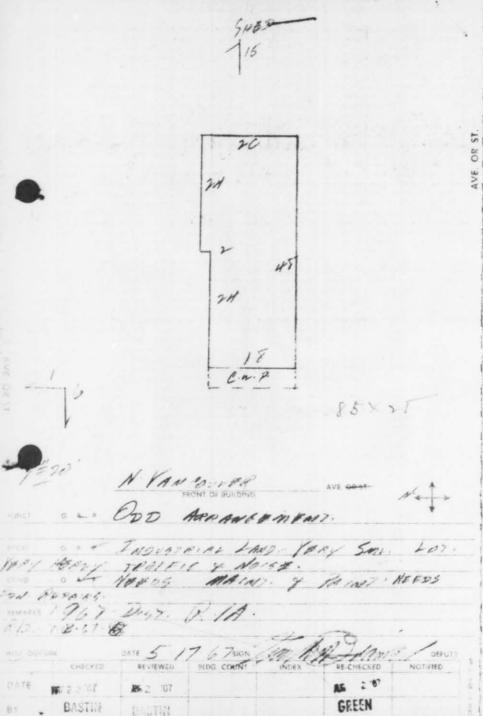


RELOCATION ASSISTANCE NEEDS OF RESIDENTS OF EMANUEL HOSPITAL PROJECT AREA

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

Date of survey The property of	Block No Census Tract No	pate tabulated
A. Status Of Relocation Assistance Needs At This 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:	
Name 1. Colors Family relation Head of household Pamily relation Pamily relation Head of household Pamily relation Pamily relation	Age Sex Occupa	
3. 4. 5.		
6. 7. 8.		
9.		
1. Jobholders in this household, employers and Names of jobholders Names of employers	Street address where jobs a	
2. Monthly income from jobs and from all other		this household:
Names of persons in this household who have income from any source	Amount of income per month In month before In an average this survey month during I	1970
2,2,	\$ 51.00 \$	
Total family or household income per month	\$ 51.00 \$	
 D. Characteristics Of Replacement Housing Needs 1. Location (indicate approximate cross streets 2. Transportation, number of autos owned 	s) North orea	
3. Will rent house, apartment, expect (Furniture is owned, yes, no, stove	to pay rent, including utilities, as e and refrigerator owned, yes_	, no
 4. Will buy house in price range \$	ments on contract or mortgage mor	nthly \$
7. Other characteristics w 0 B I M	total sq. ft. in dwelling unit	
	site: 23 yas	





1 1-68430-0700 CONLEY, LILLIAN L MAP: ~2730 ZONE: M3 RATIO: 1301 2728 N VANCOUVER AVE PORTLAND, OREGON LVY C:001 LOT BLOCK RAILROAD SHOPS ADD 3 3 5 23.51 OF PROPERTY ADDRESS: 2728 N VANCOUVER AVE PORTLAND APPEALS: SUMMARY ASSESSED VALUATION RESERVED IN TOMBER (ATM) YEAR 200 330 530 67 68 1200 1300 4,500 1240 1350 2590 00 71

97227

17/01