PROJECT RELOCATION EMANUEL BUSINESS AND RESIDENTIAL RELOCATION PAGE 5 OF 5

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10 2 2	DESCRIPTION	·	ROLL NO	ODOMETER
AB 3-3	GLOVER, CEPHAS			
	2928 N. COMMERCIAL			
P 10 /	CODAN			
R 10-4	GODON, WOODROW		· · ·	
	3127 N. COMMERCIAL			1
E 3-6	GRANVILLE, VERTA			
	2653 N. COMMERCIAL COURT			
AB 3-8	CDONED TAMES I			
AD 3-0	GRONER, JAMES H. 2931 N. GANTENBEIN	1 1		
	2951 N. GANTENBEIN			
E 3-12	HALE, CORA LEE (MRS.)			1
	535 N. RUSSELL			
A 4-2	ESTATE OF ZENOBIA HARRIS			1
	222 N. IVY			
				1
R 9-2	HART, JOHN & ROSENA			
-	3141 N. GANTENBEIN			
A 2-6	HARVEY, KATHIE	1-		
	217 N. MONROE			
A 2-6	HAWKINS, ERNESTINE			1
	217 N. MONROE			- · · ·
	HALWANG ALLEG I			
RS 4-9	HAWKINS, JAMES L.			
	7 N. RUSSELL			
RS 4-9	HENDERSON, SANTEE			
	7 N. RUSSELL			
				1
E 4-5	HEPBURN, ELIZABETH			
	410-412 N. KNOTT			
	are the month			
R 14-4	HINES, WALTER			-
	3036 N. KERBY			
A 3-8	HOGGANS, COTTRELL			
	250-52 N. COOK			
A 4-13	HORSMAN, CHERRY ALICE			
	.3303 N. VANCOUVER			
R 15-3				
11-1	HULL, LYNN 3006 N. COMMERCIAL			
	SOUG N. COFFIERCIAL			

RESIDENTIAL RELOCA	ATION RECORD
Project Name Parcel Client's Name Manuel, James W.	No. <u>083-8</u> Advisor <u>VC</u> Phone
Address 2931 N. Jontembein	Phone Ethn Black Age
🖾 Male 🕼 Family 🍘 Married	A REAL PROPERTY AND A REAL
🛛 Female 🗂 Individual 🗍 Single	Owner/Occupant
Family Composition	Economic Data
Total Number in Family 2	Employer BPA. Vanc Lebsk. \$ 350
2 (wife, husband)	Address
Other: Relation Age Relation Age	Other Source of Income \$
	Total Monthly Income \$ (350)
Eligible for Public Housing YES NO	Presently Receiving Welfare 🔲 YES 🖾 N
Eligible for Welfare TYES NO	Other Assistance
Eligible for (Other) YES NO	
Claimant was displaced from real property withit inent contract for Federal assistance and/or d	late of HUD approval of budget for project:
Date of initial interview 2-9-71	Date of Info pamphlet delivery 2-9-71
Date Notice to Move given	
CLAIMANT'S INITIAL DATE OF OCCUPANCY	4-15-61
 (a) for owner-occupants - indicate initial occupancy and ownership 	al date of
Date of initiation of negotiations for purchase	e of property
Date of Acquisition	3-31-72
Date of letter of intent	
Date of move	1-24.72

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DWELLING UNIT FROM WHICH RELOCATED

Private Sales		Single Family	X Age of Housing Unit 1906
Private Rental	X	Duplex	Size of Habitable Area 1056
Other		Multiple Family	Furnished with claimant's furniture
Total Number of Ro	ooms		Rent Paid \$ 6006 Utilities
			Monthly Housing Payments \$ Taxes
			xplain)
			Amenities
			MENT DWELLING UNIT
Address <u>5629</u>	778	24th	LPA Referred Self Referred _X
Private Sales	K	Single Family	X Outside city D Outside state
Private Rental		Duplex	Age of Housing Unit 1485
Other		Multiple Family	Size of Habitable Area 100 CA
			No. of Rooms 6 No. of Bedrooms 3.
For Clai		ts Who Purchased	For Claimants May Destad
			\$ <u>20,110.00</u> Rent \$
Taxes \$			Utilities \$
RHP or TACO (inclu	Idin	g incidental cost	
			Amount of Annual Payment \$
No. of Housing Ref	err	als to: 0	Agency Referrals: 0
Standar	d S	ales	MCW HAP OTHER ()
Standar	d R	ent	Food StampLegal AidOther ()
Benefits Received			
Date		_Ck #	Amount \$
Date		_Ck #	Type Amount \$
Date		Ck #	Amount \$
all and the second second second			

RESIDENTIAL RELOCATION RECORD

CLIENT'S NAME GRONER, James H.	RELOCATION ADVISOR J Crolley
ADDRESS 2931 N. Gantenbein PHONE	PROJECT NAME Emanuel Ore. R-20
SEX M ETHN black VETERAN AGE	PARCEL NO. AB3-8
MARITAL STATUS married TENURE tenant	DATE ON SITE: April 15, 1961
DISABILITY INDIV FAMILY_ XX	
ELIGIBLE FOR: PUBLIC HOUSING FHA 235	DATE OF
RENT SUPPLEMENTOTHER	ACQUISITION: March 31, 1972
INITIAL INTERVIEW	DATE INFO PAMPHLET DELIVERED
NOTICE TO MOVE DATES EFFECTIVE NOTIFY IN CASE OF EMERGENCY	
ECONOMIC DATA	FAMILY COMPOSITION
Employer BPA- Vancouver, Wash. \$ 351 Address	Name Relation Age
	Gwendolyn wife
MCWSocial Security	
Pension	
0ther	
TOTAL MONTHLY INCOME \$	

DWELLING UNIT FROM WHICH RELOCATED

Subsidized Sales		Single Family	S	SS X
Subsidized Rental		Multiple Family		
Public Housing		Duplex		
Private Rental	X	Mobile Home		
Private Sales				

Size of Habitable Area_1056 sq. ft.

HOUSING REFERRALS

Bedrooms

Age of Structure 1906 No. Rooms 4 No. Bedrooms 7 Furn. Unfurn Utilities \$ Monthly Payments (Rent) \$ 60.00 Acquisition Price \$ Taxes \$ Equity \$ Liens \$

AGENCY REFERRALS

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

Appeals Witted Address Unter (death, etc.) TEMPORARY RELOCATION Image: Colspan="2">TEMPORARY RELOCATION Image: Colspan="2">Colspan="2">Temporary Relocation Image: Colspan="2">Temporary Temporary Temporar	AGENCY ACTION			REASONS:		
EVICTEd Address Address Unknown (tracing) Dither (death, etc.) TEMPORARY RELOCATION		•				
Refused Assistance						
Address Unknown (tracing)	and the second se	p				
Dther (death, etc.) Image: constraint of the state in the state	and the second se	and the second se				
IEHPORARY RELOCATION within Project Date Moved In	the second se					
Within Project Date Moved In	other (death, etc	:1				
Address			TEMPO	RARY RELOCA	ATION	
Address						
Outside Project Reason REPLACEMENT DWELLING UNIT Client Referred LPA Referred Address 5629 N. E. 24th Phone Date of Move_January 24, 1972 WHERE RELOCATED: \$ \$5\$ Same City X Subsidized Sales Single Family X Outside City X Subsidized Rental Multiple Family X Out of State Private Rental Mobile Home Mobile Home Furnished Unfurnished Number of Rooms & Number of Bedrooms 3 Habitable Area 200 Utilities \$Monthly Payments (Rent) \$Purchase Price \$ 20,110.00 Age of Structure: Areas \$Requity \$Distance Moved Away Name of Moving Company Name of Realtor Type Ck # Date Amount Purchase Price \$ 20,110.00 TACO (Rental) \$ S TACO (Rental) \$ S TACO (Rental) \$ Total Down \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Within Projec	t	-	Date Mo	oved In	
REPLACEMENT DWELLING UNIT Client Referred				Address	5	
REPLACEMENT DVELLING UNIT Client Referred LPA Referred	Outside Proje	<u>ct</u>		Keason		
Address 5629 N. E. 24th Phone Date of Move January 24, 1972 WHERE RELOCATED: \$ </td <td></td> <td></td> <td>REPLACEN</td> <td>IENT DWELLI</td> <td></td> <td></td>			REPLACEN	IENT DWELLI		
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Furnished		Name of Street, or other Designation of the Owner,	and the second	Concerning the second division of the local	- Houre Home	
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TOTAL BENEFITS RECEIVED \$_3,078.53					3	
	Interest			\$		
REALTOR: OFFICER	TOTAL BENEF	ITS RECEI	VED	\$_3,078.53	1	
	REALTOR:		ESCR	ow co.	OFFICER	
			•			

Jacy in Gran file

February 15, 1972

Mr. Ralph N. Duncanson Attorney at Law 107 Mohawk Galleries 730 S. W. Third Avenue Portland, Cregon 97204

Dear Mr. Duncanson:

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We refer to the February 14, 1972 meeting at the C-CAP office, at 106 N. E. Morris, between yourself and your client, Mr. and Mrs. James H. Groner; Mrs. Leo Warren of the Emenuel Displaced Persons Association; Mr. Robert Nelson of the American Friends Service Committee; and W. Stanley Jones, James Crolley and Benjamin Webb from the Portland Development Commission staff.

As you will remember, the purpose of the meeting was to discuss the relocation benefits due Nr. and Mrs. Groner under the provisions of Public Law 91-646, the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as a result of their displacement from their residence at 2931 N. Gentenbein by the Emenuel Project.

The Groners are tements and qualify for replacement housing benefits under the provisions of Sec. 20% of the Act. However, Mr. Groner disagreed with our reading of paragraph 2 of the Act, which says that the payment is:

"the amount necessary to enable such person to make a downpayment (including incidental expenses described in section 203(a)(i)(c) on the purchase of a decent, safe, and samitary dwelling of standards adequate to accommodate such person in areas not generally less desirable in regard to public utilities and public and commercial facilities, but not to exceed \$4,000, except that if such amount exceeds \$2,000, such person must equally metch any such amount in excess of \$2,000, in making the downpayment."

Mr. Gromer has indicated that he does not agree with our decision that the amount that we can pay is \$2,000, plus the amount of funds matched by him, but that the total payment cannot exceed the required downpayment. Please note that we feel bound by the language of paragraph (2) of Section 204, which limits the payment to "...the amount necessary to enable such person to make a downpayment...." Mr. Relph N. Duncanson

Page 2.

W RE- W. LOW

Mr. Groner has indicated that he wants to appeal. If that is still his feeling, please address the appeal to:

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

The letter should be to my ettention.

At your request we have enclosed a copy of Public Law 91-646, 91st Congress, S. 1, January 2, 1971, together with a copy of the applicable regulations, HUD Circular 1371.1 and a copy of chapter 6, section 4 of the Operating Procedures, HUD Circular 1371.1.

If we may be of further assistance in this matter, please let us know.

Very truly yours,

Benjamin C. Webb Chief of Relocation and Property Hanagement

BCW: ch Enclosures

cc: Oliver I. Morville, Attorney at Law 1600 S. W. Fourth Avenue Portland, Oregon

> W. Stanley Jones, Supervisor, Relocation Emenuel Mespital Project Site Office

URBAN REDEVELOPMENT FU	IND-PROJECT EXCENDITURES-EMANUEL	L HOSPITAL, ORE. R-20		Warn	rant Numbe
PORTLAN	DEVELOPMENT 1700 S.W. FOURTH AVENUE PORTLAND, OREGON 97201		N ?	457	EH
		DATE July	12		19 72
PAY TO James H. Gr	oner			\$ 37.50	
			_		DOLLARS
TO THE TREASURER O	THE			AUTHORIZED	SIGNATURE

CITY OF PORTLAND, OREGON - Se-28

NON-NEGOTIABLE

AUTHORIZED SIGNATURE

Portland Development Commission · 224-4800

DETACH BEFORE DEPOSITING CHECK

DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUNT
		Reimbursement for Incidental Costs per claim filed. Move from 2931 N. Gantenbein (Parcel AB3-8).	\$37.50

Account Distribution

TITLE

E 1501 **Relocation** Payment (Incidental Costs)

NO.

\$37.50

AMOUNT

Admes Alfred

YANS

	RELOCATION PAYMENT
Proj	ect: Emanuel ORE R-20 Parcel: AB3-8
Paya	able to: James H. Groner Amount
For	RHP for Homeowners
	RHP for Tenants & Certain Others: 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
Nam	e of client James H. Groner Less - \$
	e from 2931 N. Gantenbein Total \$ 37.50
	ounting: Indicate symbol & Acct. No.
	<u>E150</u> Relocation Payment; Project Cost *()

-2

Costs Incurred by						
	Owner)					
	PRO.	IECT NAME	(If applie	able)		
Portland Development Commission 1700 SW Fourth Avenue			Emanuel Hospital Project			
	PRO.	IECT NUMB		R-20		
Title 18, Sec. 1001, July falsifies or n	provides nakes an	: "Whoever y false, fict	, in any m itious or f	atter within raudulent st	the jurisdiction of atements or repre-	
ceeding)		5629	NE 24	th	97211	
on 97211				property eit resident or purpose of o business op	her as a for the arrying out	
	TOLO	AL AGENO	·v			
1					FOR LOCAL	
CHARGED TO CLAIMANT ON SETTLEMENT STATEMENT					AGENCY USE	
(b)		c)			(e)	
			-75.0		\$ (1/2)37.50	
			e		\$	
					g statement.	
, and complete, and t isification of any item my other claim for, or	hat I und n in this received ly reflect	erstand that claim or sub d, reimburse costs actua ATA	, apart fro mitted he ment or co	om the pena rewith may a ompensation	lties and provisions result in forfeiture	
	Title 18, Sec. 1001, Illy falsifies or r is the same to contain ars, or both." eeding) on 97211 ct dwelling) ERRING PROPERTY COSTS CHARGED TO CLAIMANT ON SETTLEMENT STATEMENT (b) \$ 75.00 \$ 75.00 S CHARGED TO CLAIMANT ON SETTLEMENT STATEMENT (b) \$ 75.00 S CHARGED TO CLAIMANT ON SETTLEMENT STATEMENT (b) \$ 75.00 S CHARGED TO S CHARGED TO CLAIMANT ON SETTLEMENT STATEMENT (b) \$ 75.00 S CHARGED TO S CHARGED TO CLAIMANT ON SETTLEMENT S S CHARGED TO S S CHARGED TO CLAIMANT ON SETTLEMENT S S CHARGED TO CLAIMANT ON SETTLEMENT S S CHARGED TO S S CHARGED TO S S CHARGED TO CLAIMANT ON S S CHARGED TO CLAIMANT ON S S C C C C C C C C C C C C C	PRO. tion in Block 5. Consult the II Title 18, Sec. 1001, provides illy falsifies or makes any a the same to contain any fals ars, or both.'' teeding) tereding) ERRING PROPERTY TO LOC COSTS INCURR CHARGED TO CLAIMANT ON SETTLEMENT STATEMENT (b) () \$ 75.00 \$ T National Title II IIS, Sec. 1001, and any other and and complete, and that I und sification of any item in this iny other claim for, or received and herewith accurately reflect Manney	PROJECT NUMB ition in Block 5. Consult the local agency Title 18, Sec. 1001, provides: "Whoever, ily falsifies or makes any false, fict it the same to contain any false, fictitious ars, or both." reeding) Address (I 5629 Port Don 97211 CharGED TO CLAIMANT ON SETTLEMENT (b) S 75.00 S 75.	PROJECT NUMBER ORE ion in Block 5. Consult the local agency as to dow Title 18, Sec. 1001, provides: "Whoever, in any m Ily falsifies or makes any false, fictitious or fraudu- ars, or both." reeding) Address (Include ZI 5629 NE 24 Portland, c. on 97211 ERRING PROPERTY TO LOCAL AGENCY COSTS INCURRED BY CLAIMANT CHARGED TO CLAIMANT ON SETTLEMENT (b) ST5.00 S 75.00 S 75.00	PROJECT NUMBER ORE R-20 Toon in Block 5. Consult the local agency as to documents to b Title 18, Sec. 1001, provides: "Whoever, in any matter within Ily falsifies or makes any false, fictitious or fraudulent statements is the same to contain any false, fictitious or fraudulent statements are contained by a co	

	FOR LOCAL AGENCY USE ONLY
DOES CLAIMANT MEET	ALL TIMING REQUIREMENTS FOR ELIGIBILITY?
X Yes No	
If "No," explain:	
see RHP-TACO	claim paid 2/16/72 in the amount of \$3,011.00 plus \$30.03 paid 3/2/72.
OF TITLE (Show basis vice charges paid by, or	VERING MORTGAGE PREPAYMENT PENALTY AND COSTS ALLOCABLE TO PERIOD SUBSEQUENT TO TRANSFE for, and amount of, reimbursement due claimant for (1) any mortgage prepayment penalty, or (2) any taxes or public ser- charged to, claimant for any period subsequent to vesting title or possession in the local agency, if the amount claime imant or if the computation is not shown on the settlement statement.)
Claimar	AY DIFFERENCE BETWEEN AMOUNT OF REIMBURSEMENT CLAIMED AND AMOUNT APPR OVED FOR PAYMENT Int required to match RHP funds in excess of \$2,000.00 tal claim \$3,078.53
Pa	id to date: 3,041.03
	lance due: \$ 37.50
	matching fund paid by Groner - \$1,078.53
Total	
Total r	
CERTIFICATION I CERTIFY that I have visions of Federal law	examined this claim, and the substantiating documentation, and have found it to be in accord with the applicable pro- and the Regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, this
CERTIFICATION I CERTIFY that I have visions of Federal law	a complete this claim, and the substantiating documentation, and have found it to be in accord with the applicable pro-
CERTIFICATION I CERTIFY that I have visions of Federal law	examined this claim, and the substantiating documentation, and have found it to be in accord with the applicable pro- and the Regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, this
CERTIFICATION I CERTIFY that I have visions of Federal law	examined this claim, and the substantiating documentation, and have found it to be in accord with the applicable pro- and the Regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, this
CERTIFICATION I CERTIFY that I have visions of Federal law	examined this claim, and the substantiating documentation, and have found it to be in accord with the applicable pro- and the Regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, this
CERTIFICATION I CERTIFY that I have visions of Federal law	e examined this claim, and the substantiating documentation, and have found it to be in accord with the applicable pro- and the Regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, this ared and payment is authorized in the total amount of 37.50 7-72 Date Date
D. CERTIFICATION I CERTIFY that I have visions of Federal law claim is hereby approv	e examined this claim, and the substantiating documentation, and have found it to be in accord with the applicable pro- and the Regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, this ared and payment is authorized in the total amount of 37.50 7-72 Date Date



FEDERAL SAVINGS AND LOAN ASSOCIATION PORTLAND, DREGON

> FRANKLIN BLDG. S.W. STH AT STARK PORTLAND, DREGON 97204

June 29, 1972

Portland Development Commission 235 North Monroe Portland, Oregon 97227

Att: Mr. James C. Crolley, Relocation Advisor

The Assumption Fee in the amount of \$75.00 charged to Mr. and Mrs. James H. Groner, 5629 N. E. 24th Street is a service charge, and not a cost which is a part of debt service or finance charge under Title I of the Truth and Lending Act, PL. 90-321 and Regulation 2, issued persuant thereto, by the Federal Reserve Board.

Cordially,

A21. Behavoort

H. W. Beksvoort Assistant Vice President

Pioneer National Title Insurance Company

Oregon Division • 421 S.W. Stark Street • Telephone 224-0550 • Portland, Oregon 97204 <u>East Multnomah County</u> Branch Telephone: <u>ext 213</u> Esc. No. 390200 EMC February 22 19 72 ESCROW STATEMENT

DESCRIPTION		Debit		Credit	
•	\$		5		
Deposit by Portland Development Commission				3,011	00
XXXXXXX Deposit to close				3,451	53
Title Insurance Policy No.					
Escrow Fee - One half share		(-35	50		
Taxes - Pro rata share of 1971-72 taxes from date of (2-22-72) to 7-1-72	closing	38	22		
City Liens					
Reconveyance RECORDING Deed Hollcraft Homes, Inc. to Groner		2	00		
Deed to		7	-		
Mortgage to					-
Trust Deed to					-
Release of Mortgage to					
Reconveyance					-
Contract between and		- JE			
Multnomah County Transfer Tax		(22	55		
Credit to Buyer for assuming Benj. Frankline Mtg. w	ith			14,088	00
interest paid to 1-30-72		£			
7.75% Interest Adjustment on \$14,088.00 from2-22-72 to	3-1-72	24	26		
Insurance pro rata on \$ from to					
Paid The Nolan Agency for 1st annual fire insurance		59	00		-
Paid for real estate commission					+
Paid Benj. Franklin for assumption fee		75	00		1
Paid Hollcraft H ^O mes Inc. for Deed		20,110			-
Paid Benj. Franklin for tax reserve (4 mo.)		184	00		
			1 11		1
Balance – Our Check Herewith					
Balance – Our Check Herewith Balance – Debit TOTAL		20,550		20,550	

Any papers to which you are entitled will follow later.

vs

RP

hitaken By Detty L. W

(MRS.) Betty L. Whitaker, Escrow Officer

	RELOCATION P		T		HUD-6147 (4-66)
	t Costs Incurred by				(4-00)
NAME AND ADDRESS OF LOCAL AGENCY (Include ZIP code)		PROJ	CT NAME (f applicable)	
Portland Development Commission				ospital Proj	lect
1700 S. W. Fourth Avenue Portland, Oregon 97201			ECT NUMBER		
NSTRUCTIONS: Complete all applicable items and sign certifica	No. 1. Black F. Co.	- 14 41- 1-			
whis claim. PENALTY FOR FALSE OR FRAUDULENT STATEMENT. U.S.C. any department or agency of the United States knowingly and willf sentations, or makes or uses any false writing or document knowin be fined not more than \$10,000 or imprisoned not more than five ye	. Title 18, Sec. 1001, fully falsifies or r	provides: makes any	"Whoever, i false, fictiti	n any matter within ous or fraudulent s	the jurisdiction of tatements or repre-
1. IDENTIFICATION OF CLAIMANT					
Name (as shown in deed to local agency or in condemnation pro	oceeding)		Address (Inc	lude ZIP code)	
GRONER, James H. and Gwendolyn			5629 N	N. E. 24th	
			Portla	and, Oregon	97211
a. Address or Legal Description				c. Did you oc	cupy this
5629 N. E. 24th, Portland, O		eplace	ement dw	business o	for the carrying out
b. Parcel Number(s) AB-3-8 (i	n project dwe	elling)		X Yes	No
3. SETTLEMENT COSTS INCURRED BY CLAIMANT IN TRANSI					0
		SINCURR	ED BY CLAI	MANT	FOR LOCAL AGENCY USE
ITEM	CHARGED TO CLAIMANT ON SETTLEMENT STATEMENT	BY CL	AIMANT	AMOUNT CLAIMED (Col. (b) + (c))	AMOUNT
(a)	(b) \$ 35,50	\$:)	(d) \$ 35.50	(e) \$ 17.75
1/2 escrow fee Recording fee	\$ 35.50	\$		2.00	1.00
Multhomah County Transfer Tax	22.55			22.55	11.28
	£ 60.0E			\$ 60.05	\$ 30.03
TOTAL 4. LISTING OF DOCUMENTS SUBMITTED HEREWITH IN SUPPO	\$ 60.05	S			1. 50.05
attached copy of Pioneer Nationa					
5. I CERTIFY under the penalties and provisions of U.S.C. Title mitted herewith have been examined by me and are true, corre of U.S.C. Title 18, Sec. 1001, and any other applicable law, f of the entire claim. I further certify that I have not submitted source for any item of this claim, and that any receipts submit	ct, and complete, and alsification of any ite any other claim for, a tted herewith accurate	that I und m in this or received ely reflect	erstand that, claim or subm d, reimbursem costs actual	apart from the pen nitted herewith may sent or compensation ly incurred.	result in forfeiture
3/2/72	-J.	ame	o Ar	honer	
Date	0	Si	gnature of cla	aimant	
	(Over)				

DOES CLAIMANT MEET ALL TIMING REQUIREMENTS FOR ELIGIBILITY? Difference Difference <		FOR LOCAL AGENCY USE ONLY
If "MM," * explain: See RMP-TACO claim paid 2-16-72 in the amount of \$3,011.00. PTALL OF COSTS COVERING MORTGAGE PREPAYMENT PENALTY AND COSTS ALLOCABLE TO PERIOD SUBSEQUENT TO TRANSFER OF TITLE (Show hair for, and amount di, reinhurssment due claiment for (1) any mortgage prepayment pendity. or (1) any trace or public service and the amount of the	. DOES CLA	MANT MEET ALL TIMING REQUIREMENTS FOR ELIGIBILITY?
See RHP-TACO claim paid 2-16-72 in the amount of \$3,011.00 Ital OF COSTS COVERING MORTGAGE PREPAYMENT PENALTY AND COSTS ALLOCABLE TO PERIOD SUBSEQUENT TO TRANSFER Of the observe is a claiment of any paired subsequent or varing vite preparesystem in the faced agency. (If the amount de later especial de later especia	X Yes	No
PETAIL OF COSTS COVERING MORTGACE PREPAYMENT PENALTY AND COSTS ALLOCABLE TO PERIOD SUBSEQUENT TO TRANSPER OF TITLE (Show basis for, and amount of, sinubursement due claimon for (1) any marging prepayment penalty, or (2) any taxes or public ser- vice charge paid directly by claimant or if the computation is not shown on the settlement statement. EXEMPLANATION OF ANY DIFFERENCE BETWEEN AMOUNT OF REIMBURSEMENT CLAIMED AND AMOUNT APPROVED FOR PAYMENT Claimant required to match RHP funds in excess of \$2,000.00 Total claim: \$3,041.03 Balance due: \$3,001.00 Balance due: \$3,001.00 Contrasting funds deposited in escrow account by Groner's - \$1,041.04 CertificATION CertificATION Method and the scalar and the substantisting decomentation, and have found it to be in occord with the applicable pre- visions of Payment out and the substantisting decomentation, and have found it to be in occord with the applicable pre- visions of Payment and the scalar and the substantisting decomentation, and have found it to be in occord with the applicable pre- visions of Payment and the claim is used by the Deprintent of the Stating and Usan Development payment payment with the applicable pre- duct of Payment is substantisting decomentation, and have found it to be in occord with the applicable pre- duct of Payment is substantisting decomentation, and have found it to be in occord with the applicable pre- duct of Payment is substantisting decomentation, and have found it to be in occord with the applicable pre- duct of Payment is substantisting decomentation, and have found it to be in occord with the applicable pre- duct of Payment Decomentation of the Regulations issued by the Deprintent of the Stating and Usan Development payment theree. Therefore, there are during the prevent and payment is substantisting decomentation, and have substantisting all usan Development payment theree. Therefore, there are during the prevent and payment is substantisting decomentation, and ha	If "No," e	xplain:
OF TITLE (Show basis for, and amount of, winbursement due claiment for (1) any mortages prepayment penalty, or (2) any taxes or public service charges paid divectly by claiment or claiment to vesting infer or passession in the local agency, if the amount claimes was paid directly by claiment or if the computation is not shown on the settlement statement.) C: EXPLANATION OF ANY DIFFERENCE BETWEEN AMOUNT OF REIMBURSEMENT CLAIMED AND AMOUNT APPR OVED FOR PAYMENT Claimant required to match RHP funds in excess of \$2,000.00 Total claim: \$ 3,041.03 Paid to date: 3,011.00 Balance due: \$ 30.03 Total matching funds deposited in escrow account by Groner's - \$ 1,041.04 Clearing funds deposited in escrow account by Groner's - \$ 1,041.04 Clearing funds deposited in total of \$ 30.03 Clearing funds deposited in total of \$ 30.03 Clearing funds deposited in total of \$ 30.03 Clearing funds deposited in escrow account by Groner's - \$ 1,041.04 CERTIFICATION LEERTIFICATION Claim is hereby approved and payment is authorized in the total of \$ 30.03 Claim is hereby approved and payment is authorized in the total of \$ 30.03 Claim is hereby approved and payment is authorized in the total of \$ 30.03 Clear is hereby approved and payment is authorized in the total of \$ 30.03 Clear is hereby approved and payment is authorized in the total of \$ 30.03 Clear is hereby approved and	see	RHP-TACO claim paid 2-16-72 in the amount of \$3,011.00.
Claimant required to match RHP funds in excess of \$2,000.00 Total claim: \$3,041.03 Paid to date: 3,011.00 Balance due: \$3,01.00 Total matching funds deposited in escrow account by Groner's - \$1,041.04 Dote Total matching funds deposited in escrow account by Groner's - \$1,041.04 CERTIFICATION ICERTIFICATION ICERTIFICATION ICERTIFICATION CLERTIFICATION ICERTIFICATION CL	OF TITLE vice charge	(Show basis for, and amount of, reimbursement due claimant for (1) any mortgage prepayment penalty, or (2) any taxes or public ser- es paid by, or charged to, claimant for any period subsequent to vesting title or possession in the local agency, if the amount claimed
Claimant required to match RHP funds in excess of \$2,000.00 Total claim: \$3,041.03 Paid to date: 3,011.00 Balance due: \$3,01.00 Total matching funds deposited in escrow account by Groner's - \$1,041.04 Dote Total matching funds deposited in escrow account by Groner's - \$1,041.04 CERTIFICATION ICERTIFICATION ICERTIFICATION ICERTIFICATION CLERTIFICATION ICERTIFICATION CL		
Total claim: \$ 3,041.03 Paid to date: <u>3,011.00</u> Balance due: \$ <u>3,01.00</u> Balance due: \$ <u>1,041.04</u> Total matching funds deposited in escrow account by Groner's - \$ 1,041.04 C. CERTIFICATION I CERTIFY that have examined this claim, and the substantiating documentation, and have found it to be in accord with the applicable pro- visions of Federal law and the Regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, this claim is hereby approved and payment is authorized in the total amount of \$ 30.03 <u>3 Mm</u> <u>Date</u> E. RECORD OF PAYMENT	C. EXPLANA	TION OF ANY DIFFERENCE BETWEEN AMOUNT OF REIMBURSEMENT CLAIMED AND AMOUNT APPROVED FOR PAYMENT
D. CERTIFICATION I CERTIFY that I have examined this claim, and the substantiating documentation, and have found it to be in accord with the applicable provisions of Federal law and the Regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, this claim is hereby approved and payment is authorized in the total amount of \$ 30.03	C	Total claim: \$ 3,041.03 Paid to date: 3,011.00
I CERTIFY that I have examined this claim, and the substantiating documentation, and have found it to be in accord with the applicable provisions of Federal law and the Regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, this claim is hereby approved and payment is authorized in the total amount of \$ 30.03 3/3/2 Date E. RECORD OF PAYMENT	т	otal matching funds deposited in escrow account by Groner's - \$ 1,041.04
visions of Federal law and the Regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, this claim is hereby approved and payment is authorized in the total amount of \$ 30.03 <u>3/3/12</u> Date E. RECORD OF PAYMENT	ere serenner en er	
E. RECORD OF PAYMENT	visions of	Federal law and the Regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, this
E. RECORD OF PAYMENT		3/3/m len 6.1
	E RECORD	Nette
· Claim paid: \$ by check No dated	L. RECORD	VF FAImLIT
Claim paid: \$ by check No dated		
	· Claim pai	d: \$ by check No dated

URBAN REDEVELOPMENT FUND-PR	OJECT E NDITURES-EMANUEL	HOSPITAL, ORE. R-20	•	Warra	int Number
	DEVELOPMENT 1700 S.W. FOURTH AVENUE PORTLAND, OREGON 97201	COMMISSIC	N?	322	EH
		DATE	March 8		19 72
PAY TO James N. Groner				\$ 30.03	
				0	OLLARS
TO THE TREASURER OF THE CITY OF PORTLAND, OREGON			N O N - N	E G O T I	
- Children and Chi				AUTHORIZED	SIGNATURE
Portland Development Commission	224-4800		DETACH	BEFORE DEPOSITIN	G CHECK

DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUNT
		Reinbursement for Settlement Costs per claim filed. From 5629 N.E. 24th (Parcel AB-3-8). 2931 N. Gante Lein	\$30.03
	1		-

Account Distribution

NO. TITLE

E 1501 Relocation Payment (Settlement Costs) (EH)

AMOUNT \$30.03

James Alymen

And

February 17, 1972

Pioneer National Title Insurance Co. 227 N. E. 122nd Avenue Portland, Oregon 37220

Attn: Escrow Dept.

RE: Escrow Account No. 390200 GRONER, James H. and Gwendolyn

Gentlemen:

Enclosed is our warrant, number 292 EH, in the sum of \$3,011.00 to be deposited to the above subject escrow account for the purchase of the house at 5629 N. E. 24th Avenue, Portland, Oregon.

Please send us a copy of the closing statement verifying that the above sum was applied to the downpayment on said house, and also verifying that Mr. and Mrs. Groner deposited an additional \$1,011.00 that was also applied on said down payment.

Thank you for your cooperation in this matter.

Very truly yours,

W. Stanley Jones Relocation Supervisor

WSJ:slc

enclosure

February 9, 1972

2.2

of the second se

Portland Development Commission 235 N. Monroe Portland, Oregon 97227

Attention: Jim Crolley

Gentlemen:

This is to authorize you to make my check for a Replacement Housing Payment for Tenants and Certain Others, in the sum of \$3,011.00, payable to PIONEER NATIONAL TITLE INSURANCE CO., and to deposit said check in escrow account no. 390200 at the Pioneer National Title Insurance Co. office, N. E. 122nd Avenue Branch Office for the purchase of the house at 5629 N. E. 24th, Portland, Oregon.

Stevendolyn Groner

•		PROJECT EXPENDITURES-EMANUEL HOSPITAL, O	RE. R-20	Warrant Numbe
, P	ORTLAND	DEVELOPMENT COMM 1700 S.W. FOURTH AVENUE PORTLAND, OREGON 97201		92 EH
			DATE February 16	. 19 72
PAY TO	Ploneer Nationa	1 Title Insurance Company	\$ 3,0	011.00
				DOLLARS
	TO THE TREASURER OF THE TY OF PORTLAND, OREGON		NON-NEGO	RIZED SIGNATURE
Portland De	velopment Commission •	224-4800	AUTHO DETACH BEFORE DEP	RIZED SIGNATURE
Portland De DATE	velopment Commission · INVOICE OR CONTRACT NOS.	224-4800 DESCRIPTION		
	INVOICE OR		DETACH BEFORE DEP	OSITING CHECK

Account Distribution

E 1501 Relocation Payment (RHP)

(EH)

AMOUNT \$3,011.00

Hus



CLAIM FOR REPLACEMENT HOUSING PAYMENT FOR TENANTS AND CERTAIN OTHERS

10

FOR TENANTS AND CERT	AIN OTHERS
NAME, ADDRESS, AND ZIP CODE OF DISPLACING AGENCY	: PROJECT NAME (if applicable)
Portland Development Commission 1700 SW Fourth Avenue	Emanuel Hospital Project
Portland, Oregon 97201	PROJECT NUMBER: ORE R-20
INSTRUCTIONS: Complete all applicable items and sult the displacing agency as to whether you nee of Replacement Dwelling to complete and submit w have moved into a rental unit. Omit Block 3 if dwelling unit. Complete only Blocks 1 and 5 if placed because of code enforcement or voluntary PENALTY FOR FALSE OR FRAUDULENT STATEMENT. U.S. "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, or entry, shall be fined not more than \$10,000 or protect.	sign certification in Block 6. Con- d a Claimant's Report of Self-Inspection ith this claim. Omit Block 4 if you you have purchased and occupied a you are a homeowner temporarily dis- rehabilitation. C. Title 18, Sec. 1001, provides: of any department or agency of the or makes any false, fictitious makes or uses any false writing or fictitious or fraudulent statement
or both." 1. FULL NAME OF CLAIMANT	
	FamilyIndividual
GRONER, James H. 2. DWELLING UNIT FROM WHICH YOU MOVED P	ARCEL NO. AB-3-8
a. Address:	d. Monthly rental: \$ 60.00
2931 N. Gantenbein, Portland, Oregon	e. Date you moved out of this
<pre>b. Apartment or room number: <u>''upper''</u> c. Number of bedrooms: <u>2</u></pre>	dwelling: <u>2-1-72</u> Month-Day-Year
3. DWELLING UNIT TO WHICH YOU MOVED (RENTAL)	
a. Address (include ZIP Code):	
b. Apartment or room number:	e. Date you moved into this
c. Number of bedrooms:	dwelling: Month-Day-Year
4. DWELLING UNIT TO WHICH YOU MOVED (PURCHASE)	
a. Address (include ZIP Code):	d. Incidental expenses (total from
5629 N. E. 24th, Portland, Oregon 97211	table on next page): \$
b. Number of bedrooms: 3	e. Date you purchased this dwelling:
c. Downpayment: \$ 3,011.00	Month-Day-Year
 INFORMATION IN SUPPORT OF CLAIM OF HOMEOWNER ENFORCEMENT OR VOLUNTARY REHABILITATION a. Address of dwelling unit from which you 	
moved:	d. Monthly rental for temporary unit: \$
b. Address of dwelling unit to which you	e. Will you require temporary
moved (include ZIP Code):	housing for more than 3 months? YesNo
c. Date of move:	If "Yes," total number of month
Month-Day-Year	you will require temporary housing:months
TCO-1 Page 1.	nousing.

State and the state of the stat

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

January	31,	1972	
D	ate		

Almes H france Dignature of Claimant (s)

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

	FOR LOCAL AGENCY USE			
ltem (a)	Charged to Claim- ant on Closing Statement (b)	Paid Directly by Claimant (c)	Amount Claimed (Col.(b) + (c) (d)	Amount Approved (e)
	\$	\$	\$	\$
TAL			1/	

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

Listing of enclosed documents in support of amounts entered in Column (d) above: (Documentation must be provided to support any claim for incurred costs.) A. COMPUTATION OF DOWNPAYMENT ASSISTANCE FOR CLAIMANT MOVED TO UNIT PURCHASED 016

Required Information

- 1. Amount necessary for downpayment
- 2. Costs incidental to purchase (Total amount approved by agency, from table on claim form, Column (e)

Computation

- 3. Base amount (Sum of Lines 1 and 2)
- NOTE: If Line 3 is \$2,000 or less, skip Lines 4, 5, and 6 and enter the amount of Line 3 on Line 8a.
- 4. Amount on Line 3 in excess of \$2,000

Line 3

2,000.00

\$2022

4022.00

1011

2,000.00

20,110.00 (402200)

\$ 4022 00

n

3011

2011.00

5. Amount on Line 4 divided by 2

Line 4

- 6. Matching amount (If amount on Line 5 exceeds \$2,000, enter \$2,000. Otherwise, enter the amount on Line 5.)
- 7. Base amount (Sum of amount on Line 6 and \$2,000)

Line 6

- 8. Amount of downpayment assistance
 - a. Amount on Line 3 or Line 7
 - b. Minus adjustments (Attach explanation; e.g., amount previously received for rental assistance payment)

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

Computation prepared by: Date

Page 3.

TC0-3

DETERMINATION OF ELIGIBILITY FOR REPLACEMENT HOUSING PAYMENT FOR TENANTS AND CERTAIN OTHERS

0.02	E OF CLAIMANT James H. Groner		Parc	cel No	
NAM	E OF LOCAL AGENCY Portland Develop	ment Commission			
1.	Did the claimant rent or own the o		me of acquisitio	on? <u>x</u> Yes No	
	Tenant's initial date of rental:	April 15, 1901			
	Date of Acquisition:				
	Owner-Occupant's initial date of	ownership:			
2.	Did the claimant rent or own the of negotiations? Yes		90 days prior to	o the initiation	
	Date of Rental or Purchase:A	April 15, 1961	_		
	Date of Initiation of Negotiation	s:			
3.	Has the replacement housing been i copy of dwelling inspection record attach the report obtained from th Date previously substandard dwelli	or, if the claima e claimant.) <u>x</u> ng was inspected a	No	e the locality,	
	Month-Day-Year				
4.	CERTIFICATION OF LOCAL AGENCY				
)	This is to certify that, where requires been inspected. I further certify it to be in accord with the applic issued by the Department of Housin fore, this claim is hereby approve authorized. 2 - 10 - 72 - Date	that I have examinable provisions of and Urban Develo and payment in t	ined this claim f Federal Law an opment pursuant	and have found d the regulations thereto. There- 3,011.00 is	
)	been inspected. I further certify it to be in accord with the applic issued by the Department of Housin fore, this claim is hereby approve authorized. 2-10-72Date	that I have examinable provisions of and Urban Develo and payment in the	ined this claim f Federal Law an opment pursuant the amount of \$ uthorized Signat	and have found d the regulations thereto. There- 3,011.00 is	
) 5.	been inspected. I further certify it to be in accord with the applic issued by the Department of Housin fore, this claim is hereby approve authorized. <u>Date</u> RECORD OF PAYMENTS a. Claimant moved to rental unit (1) Lump-sum payment 30//	that I have examinable provisions of and Urban Develo and payment in t	ined this claim f Federal Law an opment pursuant the amount of \$ uthorized Signat	and have found d the regulations thereto. There- 3,011.00 is	
) 5.	been inspected. I further certify it to be in accord with the applic issued by the Department of Housin fore, this claim is hereby approve authorized. <u>2-10-72</u> Date RECORD OF PAYMENTS a. Claimant moved to rental unit	that I have examinable provisions of and Urban Develo and payment in the Date of Payment	ined this claim f Federal Law an opment pursuant the amount of \$ uthorized Signat <u>Check Number</u>	and have found d the regulations thereto. There- <u>3,011.00</u> is ure <u>Amount</u>	
) 5.	been inspected. I further certify it to be in accord with the applic issued by the Department of Housin fore, this claim is hereby approve authorized. <u>2-10-72</u> Date RECORD OF PAYMENTS a. Claimant moved to rental unit (1) Lump-sum payment 30// (2) Annual payment	that I have examinable provisions of and Urban Develo and payment in the Date of Payment	ined this claim f Federal Law an opment pursuant the amount of \$ uthorized Signat <u>Check Number</u>	and have found d the regulations thereto. There- <u>3,011.00</u> is ure <u>Amount</u>	
) 5.	been inspected. I further certify it to be in accord with the applic issued by the Department of Housin fore, this claim is hereby approve authorized. <u>2-10-72</u> Date RECORD OF PAYMENTS a. Claimant moved to rental unit (1) Lump-sum payment 30// (2) Annual payment Ist Year 2nd Year 3rd Year	that I have examinable provisions of and Urban Develo and payment in the Date of Payment	ined this claim f Federal Law an opment pursuant the amount of \$ uthorized Signat <u>Check Number</u>	and have found d the regulations thereto. There- <u>3,011.00</u> is ure <u>Amount</u>	
) 5.	been inspected. I further certify it to be in accord with the applic issued by the Department of Housin fore, this claim is hereby approve authorized. <u>Date</u> RECORD OF PAYMENTS a. Claimant moved to rental unit (1) Lump-sum payment Ist Year 2nd Year	that I have examinable provisions of and Urban Develo and payment in the Date of Payment	ined this claim f Federal Law an opment pursuant the amount of \$ uthorized Signat <u>Check Number</u>	and have found d the regulations thereto. There- <u>3,011.00</u> is ure <u>Amount</u>	
) 5.	been inspected. I further certify it to be in accord with the applic issued by the Department of Housin fore, this claim is hereby approve authorized. <u>2-10-72</u> Date RECORD OF PAYMENTS a. Claimant moved to rental unit (1) Lump-sum payment 30// (2) Annual payment Ist Year 2nd Year 3rd Year	that I have examinable provisions of and Urban Develo and payment in the Date of Payment	ined this claim f Federal Law an opment pursuant the amount of \$ uthorized Signat <u>Check Number</u>	and have found d the regulations thereto. There- <u>3,011.00</u> is ure <u>Amount</u>	
\$) 5.	been inspected. I further certify it to be in accord with the applic issued by the Department of Housin fore, this claim is hereby approve authorized. <u>2-10-72</u> Date RECORD OF PAYMENTS a. Claimant moved to rental unit (1) Lump-sum payment 1st Year 2nd Year 3rd Year 4th Year b. Claimant moved to unit he	that I have examinable provisions of and Urban Develo and payment in the Date of Payment	ined this claim f Federal Law an opment pursuant the amount of \$ uthorized Signat <u>Check Number</u>	and have found d the regulations thereto. There- <u>3,011.00</u> is ure <u>Amount</u>	

Page 6.

TC0-6

WORKSHEET FOR ALL TCO CLAIMS

 3. Dwelling unit to which you moved (RENTAL) a. Address b. Apartment or room number c. Number of bedrooms d. Monthly rental \$ e. Date moved in 4. Dwelling unit to which you moved (PURCHASE) a. Address a. Address 5. For Code Enforcement or Voluntary Rehabilitation (include ZIP) a. Address to which you moved b. Address to which you moved c. Date of move d. Monthly rental for temporary unit: \$ e. Require temporary housing for more than 3 months? Yes No Incidental expenses. 	NAM	E AND ADDRESS OF DISPLACING AGENCY	PROJECT NAME
Address <u>1931</u> <u>M</u> . <u>Manufacture</u> <u>C</u> . Number of bedrooms <u>2</u> . Address <u>1931</u> <u>M</u> . <u>Manufacture</u> <u>C</u> . Number of bedrooms <u>2</u> . Apartment or room number <u>Mype</u> <u>e</u> . Date displaced <u>3</u> . Dwelling unit <u>to</u> which you moved (RENTAL) a. Address <u>6</u> . <u>Address</u> <u>c</u> . Number of bedrooms <u>4</u> . Monthly rental <u>\$</u> . <u>6</u> . Date moved in <u>6</u> . Date moved in <u>6</u> . Date moved in <u>6</u> . Date moved in <u>6</u> . Date moved in <u>6</u> . Date of purchase <u>5</u> . Sore <u>6</u> . Sore <u>5</u> . S			PROJECT NO. AB-38
 2. Owelling unit from which you moved: Parcel No	۱.	Full name of claimant: X	FamilyIndividual
a. Address 2931 M. Manufacherin c. Number of bedrooms A b. Apartment or room number (MAME) e. Date displaced G G 3. Dwelling unit to which you moved (RENTAL) a. Address G Monthly rental \$ G a. Address		James H. GRONE	
a. Address 2931 M. Manufachierie c. Number of bedrooms A b. Apartment or room number (Mpfe) e. Date displaced a c. Number of bedrooms d. Monthly rental \$ c. a. Address c. Number of bedrooms d. Monthly rental \$ b. Apartment or room number c. Number of bedrooms d. Monthly rental \$ b. Apartment or room number e. Date moved in d. Monthly rental \$ c. Number of bedrooms d. Monthly rental \$ d. Monthly rental \$ a. Address 5629 M.E. c. Downpayment \$ 301000 d. Incidental expenses \$ e. Date of purchase d. Incidental expenses \$ b. Number of bedrooms 3 e. Date of purchase d. Incidental expenses \$ c. Date of moves d. e. Date of purchase d. Incidental expenses \$ b. Address from which you moved c. Date of move d. Monthly rental for temporary unit: \$ d. Monthly rental for temporary unit: \$ months? Yes	2.	Dwelling unit from which you moved: Parc	el No.
 b. Apartment or room number <u>(4444</u>) a. Address			
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a. Address c. Number of bedrooms b. Apartment or room number e. Date moved in 4. Dwelling unit to which you moved (PURCHASE) a. Address 5629 M.C. 100 d. Incidental expenses \$ b. Number of bedrooms 3 e. Date of purchase b. Number of bedrooms 3 e. Date of purchase c. Date of move d. Monthly rental for temporary unit: \$ e. Require temporary housing for more than 3 months?YesNo If yes, total number of months in temporary housingmonths incidental expenses. Item Charged to claimant Paid by Claimant Claimed Approves List of documents submitted (attached) in support of above: Deteorination 1. Did claimant fent or own at time of acquisition?No Tenant's initial date of rentalNo Date of acquisition	3.	Dwelling unit to which you moved (RENTAL)	
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Date of initiation of negotiations	2	· · · · · · · · · · · · · · · · · · ·	
Date of initiation of negotiations	2.		
	3		
If previously substandard, date found standard	5.		
4. Certification:	4		
(Amount of this claim \$ 3011.00)		(Amount of this claim \$ 2011.92)	
TC0-7	TCO	0-7	

CONNIE MCCREADY COMMISSIONER DEPARTMENT OF PUBLIC UTILITIES

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CITY OF PORTLAND OREGON 97204 February 4, 1972

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

Re: 5629 N. E. 24 Avenue

Attn: Mr. Jim Crolley

Gentlemen:

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

Our inspector reports the structure complies with City Housing Regulations at this time.

Yours truly,

C. N. CHRISTIANSEN BUILDING INSPECTIONS DIRECTOR

hegurddes

S. J. Chegwidden Chief Housing Inspector

CHF:ms

cc: Hollcraft Homes, Inc. 3354 S. E. Hawthorne Blvd.

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

STEVENS-NESS LAW PUB CO., PORTLAND OWNER'S EARNEST MONEY RECEIPT RECEIVED OF James H. Groner and Guendolyn January 24, 1972 A. Grener, husband and wife ... hereinafter mentioned as the purchaser, the sum of it mote for Two Hundred & too ---- (\$ 200,00) Dollars as carnest money and in part payment for the purchase of the following described real estate situated in the City of Partland, County of Multhomah, State of Oregon and more particularly described as follows, to-wit: Lots 18,20, Black 14, Irvington Park Hid; tion otherwise Known as 5629 NE 24th of which we have this day sold to the said purchaser for the sum of Twenty Thousand one Hundred ten y co 100 - Dollars \$20, 110,00; on the following terms, to-wit: The earnest money hereinabove receipted for \$ 200.00 ; - 6,022,00 upon acceptance of title and delivery of deed or delivery of contract . . \$5,822.00; \$19,00; balance of Fourteen Thousand eighty eight 700 Dollars \$14,088.00; payable as follows Buyer to assume Existing mortgoge; Portland Development commission to pay 4000.00 of the down payment. It is understood that Benjamin Franklin down to 140,088.00 From Escrow. This difference is #1,072.00 A title insurance policy from a reliable company insuring marketable title in the seller is to be furnished the purchaser forthwith seller's expense; preliminary to closing, seller may furnish a title insurance company's title report showing its willingness to issue title insurance, and such report shall be conclusive evidence as to status of seller's title. It is agreed that if the title to the said premises is not marketable, or cannot be made so within thirty days after notice, with a written statement of defects, is delivered to seller, the earnest money herein receipted for shall be refunded. But if the title to the said premises is marketable, and the purchaser neglects or refuses to comply with any of the conditions of this sale within .30 days and to make payments promptly, as hereinabove set forth, then the earnest money herein receipted for shall be forfeited to the seller as liquidated damages, and this contract shall thereupon be of no further binding effect. The property is to be conveyed by good and sufficient deed free and clear of all liens and encumbrances to date except Zoning Ordinances, building restrictions, taxes due and payable for the current fiscal year and Seller and purchaser agree to pro rate the taxes which become due and payable for the current fiscal year on a fiscal year basis. Rents, interests and premiums for existing insurance shall be pro rated on a calendar year basis. Adjustments are to be made as of the date of the consummation of the sale herein or delivery of possession, whichever first occurs. Possession of said premises is to be delivered to purchaser on $\frac{1}{2}$ before $\frac{1}{2}$, $\frac{19}{12}$. Time is of the essence hereof. This contract is binding upon the heirs, executors, administrators and assigns of the purchaser and seller. However, the purchaser's rights herein are not assignable without written consent of seller. In any suit or action brought on this contract, the prevailing party shall be entitled to recover reasonable attorney's fees to be fixed by the court, and if an appeal is taken from any judgment or decree entered therein, the prevailing party shall be entitled to recover such sum as the appellate court shall adjudge as reasonable attorney's

special conditions: Buyer to receive refrigerator and other improvements Costing approx, #1160.00 (see Attached list) × Hollevaft Homes Thomas Helleraft, Pres. Owners I hereby agree to purchase the above property and to pay the price of Fiventy Thousand Enc diel ten 4/00 (\$ 20,110) Dollars as specified above. Gautenbein Address 2931 N. Purchaser X ~ Sweddelyn a Graner Phone 287-2017



RP



FEDERAL SAVINGS AND LOAN ASSOCIATION

FRANKLIN BLOG. S.W. STH AT STARK PORTLAND, OREGON 97204

June 29, 1972

Portland Development Commission 235 North Monroe Portland, Oregon 97227

Att: Mr. James C. Crolley, Relocation Advisor

The Assumption Fee in the amount of \$75.00 charged to Mr. and Mrs. James H. Groner, 5629 N. E. 24th Street is a service charge, and not a cost which is a part of debt service or finance charge under Title I of the Truth and Lending Act, PL. 90-321 and Regulation 2, issued persuant thereto, by the Federal Reserve Board.

Cordially,

A21. Behavoort

H. W. Beksvoort Assistant Vice President •

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The Assumption Fee in the amount of \$75.00 charged to Mr. & Mrs. James H. Groner, 5629 N.E. 24th St. is a service charge, and not a cost which is a part of debt service or finance charge under Title I of the Truth & Lending Act, PL. 90-321 and Regulation 2, issued pursuant thereto, by the Federal Reserve Board.

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE PORTLAND, OREGON 97201

Nº

PAY TO THE ORDER OF

James H. Groner

\$ 480.00

29527

DOLLARS

Ans

G

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

C100000028

Portland, Oregon

Portland Development Commission · 224-4800

DETACH BEFORE DEPOSITING CHECK

NON-NEGOTIABLE

DATE	INVOICE OR DESCRIPTION DESCRIPTION		AMOUNT	
		Reimbursement for Relocation Payment for Tenants per claim filed. Nove from 2931 N. Gantenbein (AB-3-8). Dislocation Allowance \$200.00 Fixed payment - own furniture 220.00	\$420.00	

Account Distribution

E 1501 Relocation Payment (Fixed payment - family)

(EH)

\$420.00

James & Fronen.



CLAIM FOR RELOCATION PAYMENT FOR FIXED PAYMENT (FAMILIES AND INDIVIDUALS) PROJECT NAME (if applicable) NAME, ADDRESS AND ZIP CODE OF LOCAL AGENCY Portland Development Commission Emanuel Hospital Project 1700 SW Fourth Avenue Project Number: ORE R-20 Portland, Oregon 97201 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 statment or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both." 1. FULL NAME OF CLAIMANT × Family Individual GRONER, James H. 2. DATE(S) OF MOVE Mar. 1, 1972 AB-3-8 DWELLING UNIT FROM WHICH YOU MOVED PARCEL NO. 3. a. Address d. Number of rooms occupied (ex-2931 N. Gantenbein, Portland, Oregon cluding bathrooms, hallways, b. Apartment, Floor, or Room Number "upper" and closets: 5 c. Was it furnished with your own furniture? e. Date you moved into this address: April 15, 1961 × Yes No DWELLING UNIT TO WHICH YOU MOVED 4. a. Address (include ZIP Code) c. Were household goods moved to 5629 N. E. 24th, Portland, Oregon 97211 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 220.00 (Consult local agency)

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

Total \$

January 31, 1972 Date

James Afroner Signature of Claimant

420.00

Page 1.

(For Local Agency Use Only)

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

NAM	<pre>AND ADDRESS OF CLAIMANT: James H. Groner 5629 N. E. 24th Portland, Oregon 97211</pre>	NAME OF LOCAL AGENCY: Portland Development Commission 1700 S. W. Fourth Avenue Portland, Oregon 97201
1NS an	STRUCTIONS: Attach this form to the pert explanation of any difference between am	inent claim form filed by claimant. Attach ounts claimed and amounts approved.
1.	Does claimant meet basic eligibility really for the second	quirements? <u>x</u> Yes <u>No</u>
2.	Complete if claim is for a fixed payment located in household storage space: Date items inspected: Month-Day-Year	t including an amount for moving articles
3.	If claim is for a self-move, does appro- accomplishing the move through services	
	If "Yes," explain basis for approved amo	
4.	CERTIFICATION	

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

Page 3

(For Local Agency Use Only)

(Complete either A or B:) Date Authorized Signature Amount 1/ ltem A. Fixed Payment and Dislocation \$ Allowance \$ 220.00 1. Fixed payment 2. Dislocation \$ 200.00 allowance 420.00 3. Total \$ 420.00 B. Actual Moving and Related \$ Expenses 1. Initial payment including, if applicable, storage and related costs in the amount of \$ 2. Supplementary payment (s) for storage costs: 3. Final payment for moving expenses covering storage and related costs

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

5. RECORD OF PAYMENTS MADE

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

Page 4.

M-7

WORKSHEET FOR ALL MOVING CLAIMS

1	Name Grancy June H Project
2.	Date(s) of move Parcel No.
3.	Dwelling unit from which you moved: Address_293/ M. Mandelling No. of rooms_444 FurnishedUnfurnished Date you moved into this unit444
	Dwelling unit to which you moved: Address Were goods moved to or from storage?YesNo
F 1)	Total claim $\frac{420.9}{1200} = \frac{420.9}{1200}$ KED PAYMENT: $\frac{200}{1200} + \frac{2220}{1200} = \frac{420.9}{1200}$ TUAL MOVING COSTS
6.	Name of moving company (or person)
7. 9.	Mover's telephone 8. Mover's address
-	Amount actual costs a. Moving costs (attach receipt or voucher b. Cost of insurance (attach invoice) c. Storage cost (attach receipt or voucher VORAGE COSTS Name, address and ZIP code of storage company
A	. Type of claim
В	. Storage period 1. Total period:months. Check one:ActualEstimated 2. Date property moved to storage: 3. Date property moved from storage:Approved
C	Storage Costs \$
(D. Description of Property Stored: please list on back of this sheet.
1	E. Method of Payment reimburse client (attach receipt or paid bill) pay storage company directly (attach bill)

M-8

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Pioneer National Title Insurance Company

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

February 23, 1972

OREGON DIVISION

Portland Development Commission Emanuel Hospital Project 235 N. Monroe Street Portland, Oregon 97227

Attn: W. Stanley Jones Relocation Supervisor ESCROW NO. 390200 EMC RE: Hollcraft Homes - Groner 5629 NE 24th

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

(XX) Statement of Receipts and Disbursements Photo copy of Buyer's statement () Our check # in the sum of \$

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

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

Yours very truly. Pioneer National Title Insurance Company

By Setty L. Whitaken

(MRS.) Betty L. Whitaker, Escrow Officer

Ø,

Grow File

February 15, 1972

Mr. Ralph N. Duncanson Attorney at Law 107 Mohawk Galleries 730 S. W. Third Avenue Portland, Oregon 97204

Dear Mr. Duncanson:

Stan Jones

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We refer to the February 14, 1972 meeting at the C-CAP office, at 106 N. E. Morris, between yourself and your client, Mr. and Mrs. James H. Groner; Mrs. Leo Warren of the Emanuel Displaced Persons Association; Mr. Robert Nelson of the American Friends Service Committee; and W. Stanley Jones, James Crolley and Benjamin Webb from the Portland Development Commission staff.

As you will remember, the purpose of the meeting was to discuss the relocation benefits due Mr. and Mrs. Groner under the provisions of Public Law 91-646, the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as a result of their displacement from their residence at 2931 N. Gentenbein by the Emanuel Project.

The Groners are temants and qualify for replacement housing benefits under the provisions of Sec. 20% of the Act. However, Mr. Groner disagreed with our reading of paragraph 2 of the Act, which says that the payment is:

"the amount necessary to enable such person to make a downpayment (including incidental expanses described in section 203(a)(1)(C) on the purchase of a decent, safe, and sanitary dwelling of standards adequate to accommodate such person in areas not generally less desirable in regard to publis utilities and public and commercial facilities, but not to exceed \$4,000, except that if such amount exceeds \$2,000, such person must equally match any such amount in excess of \$2,000, in making the downpayment."

Mr. Groner has indicated that he does not agree with our decision that the amount that we can pay is \$2,000, plus the amount of funds metched by him, but that the total payment cannot exceed the required downpayment. Please note that we feel bound by the language of paragraph (2) of Section 204, which limits the payment to "...the amount necessary to enable such person to make a downpayment...." Mr. Ralph N. Duncanson

Page 2.

Mr. Groner has indicated that he wants to appeal. If that is still his feeling, please address the appeal to:

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

The letter should be to my attention.

At your request we have enclosed a copy of Public Law 91-646, 91st Congress, S. 1, January 2, 1971, together with a copy of the applicable regulations, HUD Circular 1371.1 and a copy of chapter 6, section 4 of the Operating Procedures, HUD Circular 1371.1.

If we may be of further assistance in this matter, please let us know.

Very truly yours,

Senjamin C. Webb Chief of Relocation and Property Managament

BCW: ch Enclosures

cc: Oliver I. Horville, Attorney at Law 1600 S. W. Fourth Avenue Portland, Oregon

> W. Stanley Jones, Supervisor, Relocation Emonual Hospital Project Site Office

February 9, 1972

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Statement - Statement - State

Portland Development Commission 235 N. Monroe Portland, Oregon 97227

Attention: Jim Crolley

Gentlemen:

This is to authorize you to make my check for a Replacement Housing Payment for Tenants and Certain Others, in the sum of \$3,011.00, pyable to PIONEER NATIONAL TITLE INSURANCE CO., and to deposit said check in escrow account no. 390200 at the Pioneer National Title Insurance Co. office, N. E. 122nd Avenue Branch Office for the purchase of the house at 5629 N. E. 24th, Portland, Oregon. CONNIE MCCREADY COMMISSIONER DEPARTMENT OF PUBLIC UTILITIES

Subles .



CITY OF PORTLAND OREGON 97204 February 4, 1972

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

Re: 5629 N. E. 24 Avenue

Attn: Mr. Jim Crolley

Gentlemen:

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

Our inspector reports the structure complies with City Housing Regulations at this time.

COP

Yours truly,

C. N. CHRISTIANSEN BUILDING INSPECTIONS DIRECTOR

havides

S. J. Chegwidden Chief Housing Inspector

CHF:ms

cc: Hollcraft Homes, Inc. 3354 S. E. Hawthorne Blvd. 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

OWNER'S EARNEST MONEY RECEIPT

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A CONTRACTOR

RECEIVED OF JAMES H. Groner and Gwendelyn A. Groner, hasband and wife hereinater mentioned as the purchaser, the sum of a note to for Two Hundred & goo (\$200.00) Dollars as earnest money and in part payment for the purchase of the following described real estate situated in the City of Partland County of Multimoma h. State of Oregon, and more particularly described as follows, to wit: Lots 18,20, Block 14, Tryington Park Addition other wise Known as 5429 NE 2442 which we have this day sold to the said purchaser for the sum of Twenty Thousand one Hundred ten 4 9 % to Dollars \$20,11000; on the following terms, to wit: The earnest money hereinabove receipted for \$200,00; + 0,022,00 upon acceptance of title and telivery of deed or delivery of contract \$5,822.00; \$17,92 journess of the mut to make the state of the sold purchaser journe for the sum of Twenty Thousand englity eight 7 % to Dollars \$20,11000; upon acceptance of title and delivery of deed or delivery of contract \$5,822.00; \$17,92 journess to with thousand eighty eight 7 % to Dollars \$14,088.00; payable as follows Buyer to assume existing mortgage; Portland Development commission te pay 400000 of the sold with pay with
for the sum of Twenty Thousand one Hundred ten + 00100 Dollars \$20, 110,00; on the following terms, to-wit: The earnest money hereinabove receipted for \$200,00; -6,022,00; upon acceptance of title and delivery of deed or delivery of contract\$5,822.00; \$17,00; balance of Fourteen Thousand eighty eight 7.00 Dollars \$14,088.00; payable as follows Buyer to assume Existing mortgage; Portland Development commission to pay 4000.00 of the down payment. It is understood that Seller will pay existing mortgage of 15,160.00 with
Benjamin Frenklin down to work and the Econo with
A title insurance policy from a reliable company insuring marketable title in the seller is to be furnished the purchaser forthwith at seller's expense; preliminary to closing, seller may furnish a title insurance company's title report showing its willingness to issue title insurance, and such report shall be conclusive evidence as to status of seller's title.
It is agreed that if the title to the said premises is not marketable, or cannot be made so within thirty days after notice, with a written statement of defects, is delivered to seller, the earnest money herein receipted for shall be refunded. But if the title to the said premises is marketable, and the purchaser neglects or refuses to comply with any of the conditions of this sale within <u>30</u> days and to make payments promptly, as hereinabove set forth, then the earnest money herein receipted for shall be forfeited to the seller as liquidated damages, and this contract shall thereupon be of no further binding effect. The property is to be conveyed by good and sufficient deed free and clear of all liens and encumbrances to date except Zoning Ordinances, building restrictions, taxes due and payable for the current fiscal year and
Seller and purchaser agree to pro rate the taxes which become due and payable for the current fiscal year on a fiscal year basis. Rents, interests and premiums for existing insurance shall be pro rated on a calendar year basis. Adjustments are to be made as of the date of the consummation of the sale herein or delivery of possession, whichever first occurs. Possession of said premises is to be delivered to purchaser on <u>or basisere (105)'H9</u> . Time is of the essence hereof. This contract is binding upon the heirs, executors, administrators and assigns of the purchaser and seller. However, the purchaser's rights herein are not assignable without written consent of seller. In any suit or action brought on this contract, the prevailing party shall be entitled to recover reasonable attorney's fees to be fixed by the court, and if an appeal is taken from any judgment or decree entered therein, the prevailing party shall be entitled to recover such sum as the appellate court shall adjudge as reasonable attorney's fees. Special conditions: Buyer to receive refrige the first or and other, imbor further for
Special conditions: Buyer to receive refrigerotor and other improvements Costing approx, #1160.00 (see Attached list) X Hollevaft Homes Inc Thomas Helleroft, Pores Owners
I hereby agree to purchase the above property and to pay the price of Fiventy Thousand One Hundred ten 900 (\$20,110,") Dollars as specified above. Address 2931 N. Goutenbein Purchaser & James H. Junn Phone 287-2017 Submitting a June Marchen

Pioneer National Title Insurance Company

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

OREGON DIVISION

	A consolidated statement of all charges and advances in connection with this order will be provided at closing.		
Escrow Department	OP \$	Prem. \$	
ATTN: Betty Whitaker	M.P. \$	Prem. \$	

Gentlemen:

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

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

Dated as of

January 21 , 19 72 at 8:00 a.m.

cc: Hollcraft Homes Inc. cc: James C. Crolley Pioneer National Title Insurance Company

Dick Frace

Dick Grace

Subject to the usual printed exceptions and stipulations,

Note: 1971-72 taxes, \$107.50; paid. (Account No. 42130-3770, Code 001)

1. Conditions and restrictions in deed from Investment Company, an Oregon corporation, to A. C. McClanahan, dated December 3, 1891, recorded December 5, 1891 in Book 169 page 336, Deed Records, as modified by instrument recorded December 5, 1922 in Book 909 page 98, Deed Records, removing the reversionary clause contained in said conditions, to which reference is hereby made.

2. Mortgage, including the terms and provisions thereof, executed by Hollcraft Homes, Inc., an Oregon corporation, to Benj. Franklin Federal Savings and Loan Association of Portland, a corporation, dated September 22, 1971, recorded October 15, 1971 in Book 818 page 2002, Mortgage Records, given to secure the payment of a note for \$18,000.00.

Report No. 390200 DG:j1h -- UNIT 4 (continued)

PRELIMINARY REPORT ONLY

Pioneer National Title Insurance Company OREGON DIVISION

-2-

Note: We find no unsatisfied judgments of record against James H. Groner or Gwendolyn A. Groner, as of the date hereof.

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



DESCRIPTION SHEET

See page 1 for vesting and encumbrances, if any.

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

Lots 18 and 20, Block 14, IRVINGTON PARK, in the City of Portland, County of Multnomah and State of Oregon.

Report No.

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

Pioneer National Title Insurance Company Title and Trust Division

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N.E. JARGETT

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

James H Fronen

1-28-72 date

RESIDENTIAL RELOCATION RECORD

Stoken (

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Jenant

AND A REAL

Statistics -

RELOCATION WORKER	PROJECT NO. 20 PARCEL 28-8
NAME Grones Dames A. ADI	RESS 2931 - Martindecie APT NO. 40000
PHONE INITIAL INTERVIEW _	SEX NW AGE
U.S. CITIZEN ALIEN VETERA	N SERVICEMAN DATE ON SITE
FAMILY COMPOSITION	404
Name Relation Age	Employer: Name 206-693-5201 \$ ExT20 Address VAAC COL MCW_Caseworker Social Security
	VaFedMult Co Pension: Name Other: Name
	TOTAL MONTHLY INCOME
ELIGIBILITY FOR PUBLIC HOUSING: (yes Over 62 Disabled(Soc.Sec.def.) 221 CERTIFICATE OF ELIGIBILITY: Dat	_GarElec Unfurn_X_FurnNo.Rms or no) Income below limitsAssets below limits e deliveredby
Notify in case of accident:	
Information Statement given to	ress Phone on by
Notice to move given to	on by
Payments: Amount \$ Check No. moved by moving company	on by Date delivered Moved by self(or) (Phone)
REMOVED FROM CASELOAD: (Dat Refused assistance	
Relocated in:	Evicted, further assistance
Low-rent public housing	
Other perm. public housing Standard priv. rent. hsg	100
Sub-standard priv. rent	within project:
hgs, with refusal of	address
further aid	outside project:
Standard sales housing Sub-standard sales hsg. Out-of-town Address unknown,abandoned	address
Evicted, no further	FAMILY REFUSED ADDITIONAL ASSISTANCE:
assistance	Date Worker
Other (explain)	
RELOCATION REFERRALS:	
Address	
NEV ADDRESS:	
	Zip Phone

NOTES	
Survey: owner refused to let us talk to tenant.	
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-	-

HOUSING RESOURCES SURVEY

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2

RELOCATION ASSISTANCE NEEDS OF RESIDENTS OF EMANUEL HOSPITAL PROJECT AREA

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

Analyst Date of survey 2/9/7/ Tabulator Date tabulated
Dwelling Unit No. 2 Structure No. 1 Census Block No. 46 Census Tract No. 22 A
Street Address 2931 N Gontenpein Apartment No.0412
 A. Status Of Relocation Assistance Needs At This Dwelling Unit: 1. Assistance may be needed, yes X, 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 Name 1. Jannes H. Groner Head of household 50 + 66 Ne. 3
4
C. Family Income And Extent Of Travel To Locations Of Employment:
1. Jobholders in this household, employers and location of jobs: Distance Names of jobholders Names of employers Street address where jobs are located to work
2. Monthly income from jobs and from all other sources received by persons in this household: Names of persons in this household who have income from any source Elevator Operator S 350, 00 S 350, 00 S S S S S S S S S S S S S
Total family or household income per month \$ \$ 350,00 Es X
 D. Characteristics Of Replacement Housing Needs Expected To Be Sought: Location (indicate approximate cross streets) Transportation, number of autos owned, use bus, walk
PDC-HRS-3 date presite:

HOUSING RESOURCES SURVEY

3 . .

To be Filled in For Each Dwelling Unit in All Survey Areas

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	Date	Tabulatan	Data
Analyst Su Dwelling Unit No2_ Structu	rveyed	_ Tabulator	Date
Street Address 20.5	re No ce	ISUS BIOCK NO. 46 C	Apartment No. Other
Street Address 293 N Legal Description	Gentenbeill.		Apartment No. <u>ATTLE</u>
NAME OF OCCUPANT:	NAME & ADDRESS		ADDRESS OF PROP. MGR:
James Groner	James Stoke		Abbress of Thor. Han.
James Grova	Name of Concession, Name of Street, or other Division of Street, or other Division of Street, or St	itenbein	and a second
TELEPHONE: 287-2017	TELEPHONE:		ONE .
INTERVIEWED? () Yes (>) No	INTERVIENED2 () Yes () No INTERV	
INTERVIEWED: () Tes () NO	INICKVIEWED: () tes () NO INIERV	TEWED: () Tes () NO
	CALL OF THE OWNER OF		CONTRACTOR OF THE OWNER
I. DESCRIPTION OF STRUCTURE			
		C. Market value dat	a for dwelling unit in a
Kind of dwelling unit No. of	units in bldg.		structure or commercial bldg.
One-family house			arket value Computed value
Apt. in a house			
Apt. in apt. bldg. or plex			r entire per sq. ft. for
Apt. in comm. bldg.			ructure this dw. unit
		Land \$_	5610 \$
Mobile home or trailer	1	Improvements	140
This structure has e attstories (d	o not	Total	0740
count basement)		the second s	
			all d. u. in this structure
Π. OCCUPANCY STATUS OF DWEL	LING UNIT	Sq. ft. of	commercial space and value
Owner occupied		of commercial spa	ce: Land \$,
Renter occupied			, total \$.
Vacant			
vacant		V. RENTAL RATE F	FOR THIS RENTED UNIT
III. SIZE OF DWELLING UNIT		Monthly Cash	Utilities Total paid
	fimirel	average rent	by renter
1 Martine Contraction of the second s		Rent \$	by renter
<u>Soo</u> Sq. ft. in dwelling unit (if m	1		•
4 'fotal no. of rooms (include			\$
living and bedrooms, exclud	e bathrooms)	Gas	
No. of bathrooms		Water Estim	
No. of bedrooms (rooms use	ad mainly	Heat (oil, or other)	
for sleeping)		Total \$ 45.00	\$ 1200 \$ 5700
IV. ASSESSOR'S MARKET VALUAT	ION DATA	Deposits required	
A. Dates or period of time		Advance rent \$, other \$
1971 Period market value data	applicable	Rental information	obtained from
SIRIGI Date of last appraisal			, manager , or
	authy built		
1906 Date structure was origin	larly built	estimated from as	sessor's data
		VI. FOR SALE INFO	RMATION FOR THIS HOUSE
B. Market value data for one-family	vdwelling		
and and a state of the state of	mputed value		PIED BY OWNER OR RENTER
	-	Listed with broker	
	r sq. ft.	Advertised by owne	er, yes, no
Land \$\$		Cash asking price	
Improvements			been for sale, months
Total			
		VII. REMARKS	
PDC-HRS-1			
Rev. 1/21/71			
Net. 1/21//1	A State of the second se		