

	DESCRIPTION	ROLL NO	ODOMETER
PARCEL NO. A-4-9	INGRAM, VIRGIE 249 N. COOK		
PARCEL NO. E-3-9	JACKSON, LEWIS 2632 N. KERBY		
PARCEL NO. R-9-1	JONES, LAURA ELIZABETH 3151 N. GANTENBEIN (DECEASED)		
PARCEL NO. A-4-14	JONES, OLLIE 3317 N. VANCOUVER		
PARCEL NO. A-4-7	JONES, ROOSEVELT (VEL) 3316 N. GANTENBEIN		
PARCEL NO. RS 4-9	JOHNSON, CLAUDE E. 7 N. RUSSELL		
PARCEL NO. E-4-8	JOHNSON, LUCILLE 321 N. RUSSELL		
PARCEL NO. A-2-4	JOHNSON, RETTA 3104 N. GANTENBEIN		
PARCEL NO. A-2-4	JOHNSON, SAM 3110 N. GANTENBEIN		
PARCEL NO. A-2-4	LAURENCE, ANN 3110 N. GANTENBEIN		
PARCEL NO. A-2-6	LAWRENCE, EDWARD 217 N. MONROE		
PARCEL NO. A-3-19	LEE, GEORGE 3213 N. VANCOUVER		
PARCEL NO. A-3-19	LEE, ROBERT 3213 N. VANCOUVER		
PARCEL NO. E-4-7	McALLISTER, RAY 423 N. RUSSELL		
PARCEL NO. A-4-4	MACKIE, DAVID C. 260 N. IVY		
PARCEL NO. A-3-13	MARSHALL, JERRY W. 247 N. FARGO		
PARCEL NO. A-3-13	MARSHALL, JOYCE 247 N. FARGO		
PARCEL NO. A-3-13	MARSHALL, L & J BROTHERS BUSINESS 247 N. FARGO		

*Demant*

*(i)*

RESIDENTIAL RELOCATION RECORD

RELOCATION WORKER \_\_\_\_\_

PROJECT NO. R-20

PARCEL RS 49

NAME Johnson, Claude E ADDRESS 7 N Russell APT NO. 3

PHONE \_\_\_\_\_ INITIAL INTERVIEW \_\_\_\_\_ SEX M W \_\_\_\_\_ NW R AGE \_\_\_\_\_

U.S. CITIZEN \_\_\_\_\_ ALIEN \_\_\_\_\_ VETERAN \_\_\_\_\_ SERVICEMAN \_\_\_\_\_ DATE ON SITE \_\_\_\_\_

FAMILY COMPOSITION

Name	Relation	Age

Employer: Name \_\_\_\_\_ \$ \_\_\_\_\_  
 Address \_\_\_\_\_  
 MCW Caseworker \_\_\_\_\_  
 Social Security \_\_\_\_\_  
 Va. Fed. Mult Co. \_\_\_\_\_  
 Pension: Name \_\_\_\_\_  
 Other: Name \_\_\_\_\_

TOTAL MONTHLY INCOME \_\_\_\_\_

Rent \_\_\_\_\_, Inc. Heat \_\_\_\_\_ Water \_\_\_\_\_ Gas \_\_\_\_\_ Gar \_\_\_\_\_ Elec \_\_\_\_\_ Unfurn \_\_\_\_\_ Furn \_\_\_\_\_ No. Rms \_\_\_\_\_

ELIGIBILITY FOR PUBLIC HOUSING: (yes or no)

Over 62 \_\_\_\_\_ Disabled (Soc. Sec. def.) \_\_\_\_\_ Income below limits \_\_\_\_\_ Assets below limits \_\_\_\_\_

221 CERTIFICATE OF ELIGIBILITY: Date delivered \_\_\_\_\_ by \_\_\_\_\_

Notify in case of accident:

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Information Statement given to \_\_\_\_\_ on \_\_\_\_\_ by \_\_\_\_\_

Notice to move given to \_\_\_\_\_ on \_\_\_\_\_ by \_\_\_\_\_

Payments: Amount \$ \_\_\_\_\_ Check No. \_\_\_\_\_ Date delivered \_\_\_\_\_ Moved by self \_\_\_\_\_ (or) moved by moving company \_\_\_\_\_ (Phone) \_\_\_\_\_

REMOVED FROM CASELOAD: (Date) \_\_\_\_\_

Refused assistance \_\_\_\_\_

Relocated in: \_\_\_\_\_

Low-rent public housing \_\_\_\_\_

Other perm. public housing \_\_\_\_\_

Standard priv. rent. hsg. \_\_\_\_\_

Sub-standard priv. rent hgs. with refusal of further aid \_\_\_\_\_

Standard sales housing \_\_\_\_\_

Sub-standard sales hsg. \_\_\_\_\_

Out-of-town \_\_\_\_\_

Address unknown, abandoned \_\_\_\_\_

Evicted, no further assistance \_\_\_\_\_

Other (explain) \_\_\_\_\_

REMAINING ON CASELOAD:

Address unknown, tracing \_\_\_\_\_

Evicted, further assistance contemplated \_\_\_\_\_

Temporarily relocated by LPA \_\_\_\_\_

within project: \_\_\_\_\_ address \_\_\_\_\_

outside project: \_\_\_\_\_ address \_\_\_\_\_

FAMILY REFUSED ADDITIONAL ASSISTANCE: Date \_\_\_\_\_ Worker \_\_\_\_\_

RELOCATION REFERRALS:

Address	Inspection Certified By	Date

NEW ADDRESS: \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

1/15/71 flyer delivered by Ted Parker

summary: managers would not let us talk to tenants.

HOUSING RESOURCES SURVEY

RELOCATION ASSISTANCE NEEDS OF RESIDENTS OF  
EMANUEL HOSPITAL PROJECT AREA

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

Analyst \_\_\_\_\_ Date of survey \_\_\_\_\_ Tabulator \_\_\_\_\_ Date tabulated \_\_\_\_\_  
 Dwelling Unit No. 2 Structure No. 3 Census Block No. 78 Census Tract No. 22A  
 Street Address 7 N Russell Apartment No. 3

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

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

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

	Name	Family relation	Age	Sex	Occupation
1.	Johnson, Claude E.	Head of household	40 est	M	
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					

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

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

Names of jobholders	Names of employers	Street address where jobs are located	to work
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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

Names of persons in this household who have income from any source	Amount of income per month	
	In month before this survey	In an average month during 1970
<u>1 job est</u>	\$ _____	\$ <u>150.00</u>
<b>Total family or household income per month</b>	\$ _____	\$ <u>150.00 est</u>

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

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

date on site: \_\_\_\_\_

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

Date \_\_\_\_\_

Analyst \_\_\_\_\_ Surveyed \_\_\_\_\_ Tabulator \_\_\_\_\_ Date \_\_\_\_\_

Dwelling Unit No. 8 Structure No. 3 Census Block No. 78 Census Tract No. 22A

Street Address 7 N. Russell Apartment No. 3

Legal Description \_\_\_\_\_

NAME OF OCCUPANT: Claude E. Johnson NAME & ADDRESS OF OWNER: Steven Mathieu NAME & ADDRESS OF PROP. MGR: \_\_\_\_\_

7 N. Russell #3 208 Pacific Bldg. \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ TELEPHONE: 222-5214 TELEPHONE: \_\_\_\_\_

INTERVIEWED? ( ) Yes ( ) No INTERVIEWED? ( ) Yes ( ) No INTERVIEWED? ( ) Yes ( ) No

**I. DESCRIPTION OF STRUCTURE**

<u>Kind of dwelling unit</u>	<u>No. of units in bldg.</u>
_____ One-family house	_____
_____ Apt. in a house	_____
_____ Apt. in apt. bldg.	_____
<input checked="" type="checkbox"/> Apt. in comm. bldg.	<u>9</u>
_____ Mobile home or trailer	_____

This structure has 2 stories (do not count basement)

**II. OCCUPANCY STATUS OF DWELLING UNIT**

\_\_\_\_\_ Owner occupied

Renter occupied

\_\_\_\_\_ Vacant

**III. SIZE OF DWELLING UNIT**

6565 Sq. ft. in first floor (county figure)

12120 Sq. ft. in dwelling unit (if more than 1 floor)

Total no. of rooms (include kitchen, dining, living and bedrooms, exclude bathrooms)

0 No. of bathrooms

0 No. of bedrooms (rooms used mainly for sleeping)

**IV. ASSESSOR'S MARKET VALUATION DATA**

A. Dates or period of time

1971 Period market value data applicable

3/30/67 Date of last appraisal

1894 Date structure was originally built

\_\_\_\_\_ Date of any major alterations

B. Market value data for one-family dwelling

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

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

	<u>Market value for entire structure</u>	<u>Computed value per sq. ft. for this dw. unit</u>
Land	\$ <u>10,400</u>	\$ _____
Improvements	<u>14,560</u>	_____
Total	<u>24,960</u>	_____

6565 Sq. ft. of all d. u. in this structure

\_\_\_\_\_ Sq. ft. of commercial space and value of commercial space: Land \$ \_\_\_\_\_, improvements \$ \_\_\_\_\_, total \$ \_\_\_\_\_.

**V. RENTAL RATE FOR THIS RENTED UNIT**

<u>Monthly average</u>	<u>Cash rent</u>	<u>Utilities</u>	<u>Total paid by renter</u>
Rent	\$ _____	_____	\$ _____
Electricity	_____	\$ _____	_____
Gas	_____	_____	_____
Water	_____	_____	_____
Heat (oil, or other)	_____	_____	_____
Total	\$ _____	\$ _____	\$ <u>54.00</u>

Deposits required of renter

Advance rent \$ \_\_\_\_\_, other \$ \_\_\_\_\_

Rental information obtained from

Tenant \_\_\_\_\_, owner \_\_\_\_\_, manager \_\_\_\_\_, or estimated from assessor's data X.

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

Listed with broker, yes \_\_\_\_\_, no \_\_\_\_\_

Advertised by owner, yes \_\_\_\_\_, no \_\_\_\_\_

Cash asking price \$ \_\_\_\_\_

Period house has been for sale, months \_\_\_\_\_

**VII. REMARKS**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

assessor's records filed in

apartment house file