

	DESCRIPTION	ROLL NO	ODOMETER
PARCEL NO. RS-3-4	MARSHALL, LAVERNE 2740 N. VANCOUVER		
PARCEL NO. A-3-13	MARSHALL, LOUIS 247 N. FARGO		
PARCEL NO. R-14-8	MERCER, EMILIE 511 N. MORRIS		
PARCEL NO. R-10-15	MINNEWEATHER, STEWART 3117 N. COMMERCIAL		
PARCEL NO. A-3-17	MITCHELL, JAMES HENRY 217 N. FARGO		
PARCEL NO. A-8-10	MONTAGUE, CHARLES 319 N. FARGO		
PARCEL NO. A-3-19	MORGAN, EUGENE 3213 N. VANCOUVER		
PARCEL NO. A-3-19	MORGAN, RONNIE 3213 N. VANCOUVER		
PARCEL NO. A-2-4	NAILEN, ERMA ELAINE 3100 N. GANTENBEIN		
PARCEL NO. R-14-7	NICHOLS, RENA ELISESE 527 N. MORRIS		
PARCEL NO. A-4-10	NOLAND, FRANK & ETHEL 241 N. COOK		
PARCEL NO. A-2-11	OVERHOLTS, ANNA 3129 N. VANCOUVER		
PARCEL NO. A-3-20	PACE, THEODORE P. 3217 N. VANCOUVER		
PARCEL NO. R-4-7	PARASHOS, GEORGE 423 N. RUSSELL #4		
PARCEL NO. R-14-7	PARKS, DORINA 527 N. MORRIS		
PARCEL NO. E-3-6	PARRISH, BEVERLY 2653 N. COMMERCIAL		
PARCEL NO. A-2-5	PATTERSON, BILLY 227 N. MONROE		
PARCEL NO. E-3-12	LEWIS, MATTIE (PATTERSON) 531 N. RUSSELL		

RESIDENTIAL RELOCATION RECORD

Project Name _____ Parcel No. B-8-10 Advisor JCC
 Client's Name Montague, Charles Phone _____
 Address 319 N. Fargo Ethn W Age 75
 Male Family Married Renter/Occupant
 Female Individual Single Owner/Occupant

Family Composition

Total Number in Family _____

 wife, husband

Other: Relation Age Relation Age

Relation	Age	Relation	Age

Economic Data

Employer \$ _____

Address _____

Other Source of Income

S.S. \$ 171.40

Total Monthly Income \$ (171.40)

Eligible for Public Housing YES NO

Eligible for Welfare YES NO

Eligible for (Other) YES NO

Presently Receiving Welfare YES NO

Other Assistance _____

Claimant was displaced from real property within the project area on or after date of pertinent contract for Federal assistance and/or date of HUD approval of budget for project:

YES NO

Date of initial interview 5-1-26-71 Date of Info pamphlet delivery _____

Date Notice to Move given _____ Date Effective _____ Expires _____

CLAIMANT'S INITIAL DATE OF OCCUPANCY 1961

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

Date of initiation of negotiations for purchase of property 5-11-71

Date of Acquisition 7-7-71

Date of letter of intent _____

Date of move 8-10-71

DWELLING UNIT FROM WHICH RELOCATED

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

Age of Housing Unit 1905

Size of Habitable Area 1481

Furnished with claimant's furniture
 YES NO

Total Number of Rooms 8 Rent Paid \$ _____ Utilities _____

Number of Bedrooms 5 Monthly Housing Payments \$ _____ Taxes _____

Liens \$ _____ (please explain) _____

Acquisition Price \$ 6,500 Amenities _____

REPLACEMENT DWELLING UNIT

Address 3956 NE 10th

LPA Referred Self Referred

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

Outside city Outside state

Age of Housing Unit 1912

Size of Habitable Area 816

No. of Rooms 4 No. of Bedrooms 1

For Claimants Who Purchased

For Claimants Who Rented

Purchase Price of Replacement Dwelling \$ 6,750

Rent \$ _____

Taxes \$ _____

Utilities \$ _____

RHP or TACO (including incidental costs) \$ 2,454

Total Rent Assistance \$ _____

2,546
 total \$ 5,000

Amount of Annual Payment \$ _____

No. of Housing Referrals to:

Agency Referrals:

0 Standard Sales

0 MCV

0 HAP

0 OTHER (_____)

0 Standard Rent

0 Food Stamp

0 Legal Aid

0 Other (_____)

Benefits Received

Date _____ Ck # _____ Type _____ Amount \$ _____

Date _____ Ck # _____ Type _____ Amount \$ _____

Date _____ Ck # _____ Type _____ Amount \$ _____

RESIDENTIAL RELOCATION RECORD

CLIENT'S NAME MONTAGUE, Charles RELOCATION ADVISOR JC
 ADDRESS 319 N. Fargo PHONE 287-6764 PROJECT NAME Emanuel ORE. R-20
 SEX M ETHN white VETERAN _____ AGE 75 PARCEL NO. R-8-10
 MARITAL STATUS single (divorced) TENURE owner
 DISABILITY _____ INDIV X FAMILY _____
 ELIGIBLE FOR: PUBLIC HOUSING _____ FHA 235 _____
 RENT SUPPLEMENT _____ OTHER _____
 INITIAL INTERVIEW _____ DATE INFO PAMPHLET DELIVERED _____
 NOTICE TO MOVE _____ DATES EFFECTIVE _____ EXPIRATION DATE _____
 NOTIFY IN CASE OF EMERGENCY _____

DATE ON SITE: <u>1961</u>
INITIATION OF NEGOTIATIONS: _____
DATE OF ACQUISITION: <u>July 7 1971</u>

ECONOMIC DATA

Employer _____ \$ _____
 Address _____
 MCW _____
 Social Security _____ 171.40
 Pension _____
 Other _____
 TOTAL MONTHLY INCOME \$ 171.40

FAMILY COMPOSITION

Name	Relation	Age

DWELLING UNIT FROM WHICH RELOCATED

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

Age of Structure 1905 No. Rooms 8
 No. Bedrooms 5 Furn. _____ Unfurn. _____
 Utilities \$ _____
 Monthly Payments (Rent) \$ _____
 Acquisition Price \$ 6,500.00
 Taxes \$ _____ Equity \$ _____
 Liens \$ _____

Size of Habitable Area 1481 sq. ft.

HOUSING REFERRALS

Address	Bedrooms

AGENCY REFERRALS

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

AGENCY ACTION:

REASONS:

Appeals		
Evicted		
Refused Assistance		
Address Unknown (tracing)		
Other (death, etc.)		

TEMPORARY RELOCATION

Within Project	
Outside Project	

Date Moved In _____
 Address _____
 Reason _____

REPLACEMENT DWELLING UNIT

Client Referred _____ LPA Referred _____

Address 3956 N. E. 10th Phone _____ Date of Move 8-10-71

WHERE RELOCATED:

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

Furnished ___ Unfurnished ___ Number of Rooms 4 Number of Bedrooms 1 Habitable Area _____

Utilities \$ _____ Monthly Payments (Rent) \$ _____ Purchase Price \$ 6750

Age of Structure: 1912 Taxes \$ _____ Equity \$ _____ Distance Moved Away _____

Name of Moving Company _____ Name of Realtor _____

BENEFITS RECEIVED

Type	Ck #	Date	Amount
RHP	856 G	6/10/71	\$ 2,546.00
TACO (Rental) RHP	33 EH	9-9-71	\$ 2,454.00
TACO (Rental)			\$
TACO (Rental)			\$
TACO (Rental)			\$
TACO (Sales)			\$
Fixed Moving			\$
Actual Move	26615 G	8/26/71	\$ 420.00
Storage			\$
Incidental			\$
Interest			\$

Purchase Price \$ _____
 Down Payment \$ _____
 RHP \$ _____
 Total Down - \$ _____
 Total Mortgage \$ _____

TOTAL BENEFITS RECEIVED \$ 2,966.00

REALTOR: _____ ESCROW CO. _____ OFFICER _____

INTERVIEW REGISTER

Date		Relocation Worker
1/15/71	<u>FLYER</u> : Delivered by Wilson Smith. Very receptive. He wants to sell.	
1/26/71	Came into our office to inquire about project. He would like to sell present house and move as soon as possible. He knows project has been delayed, but hopes, however, that money and project approval will come before very long. He apparently does not approve of EDPA group. He said he didn't think it was fair that a few "dummies" could hold up the project and delay his money. He was moved once before he said (possible from South Auditorium) but felt he was treated fairly so he expects the same again. Has "kind of option" on another piece of property.	WSJ
2/10/71	Survey: Wants to move soon as possible. He will buy two bedroom house, about \$8,000. The house on N.E. 10th and Shaver.	
5/6/71	In office. Stops by at least once a week to see if we have on "when".	SC
5/10/71	In office. Received a letter Saturday from real estate. Told him to call them.	SC
5/18/71	10:00 a.m. visited house on 10th St., from outside. Got a copy of Earnest money receipt from Joe Reid for \$1.00 to purchase a house at 3956 N. E. 10th for \$6,750. Signed info letter.	JC
6/2/71	Had Mr. Montague come in and sign claim for replacement housing...it is filled in as much as possible at this time...sent to Dorothy Lyon for filing with Escrow Co. They will fill in balance of information when he is relocated - then when certification is made that he is occupying decent, safe, and sanitary housing, etc. this amount \$2,546.00 can be paid to Mr. Montague. This claim is being filed under the old regulations which we are still working under at this time: Mr. Montague will receive the \$6,500 for his house in the project, plus the \$2,546.00 - he is paying \$6,750.00 for his new house.	SLC
6/7/71	Received letter from city inspector. Notified Mr. Reed and Mr. Montague of two minor exceptions listed. Mr. Montague contacted Title Insurance Company handling escrow of sale to PDC. Appears to be some problem regarding serving of summons to ex-wife in 1957 when they were divorced. Advised him to contact the attorney that handled the divorce.	SC

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
 PORTLAND, OREGON 97201

N^o 33 EH

DATE September 9, 1971

PAY TO **Charles Montague**

\$ **2,454.00**

DOLLARS

TO THE TREASURER OF THE
 CITY OF PORTLAND, OREGON

AUTHORIZED SIGNATURE
NON-NEGOTIABLE

AUTHORIZED SIGNATURE

Portland Development Commission • 224-4800

DETACH BEFORE DEPOSITING CHECK

DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUNT
		To finance replacement housing for claimant displaced from 319 N Farge (Parcel R-8-10) to 3956 NE 10th - per claim filed... Maximum available \$5,000.00 LESS pd 6/10/71 - #8568 <u>(2,546.00)</u>	\$2,454.00

Account Distribution

NO.	TITLE		AMOUNT
E1501	Relo Payments (Repl.Housing)	EH	\$2,454.00

Charles Montague

9-10-71

AC

pd

Warrant
Pay to

COMPUTATION OF REPLACEMENT HOUSING PAYMENT

1. Average sales price for a standard dwelling suitable for the claimant. <i>(From approved Form HUD-6155)</i>	2 Bedrooms	\$ 14,639
2. Acquisition payment received by the claimant for his single- or two-family dwelling.		\$ 6,500
3. Line 1 minus line 2.		\$ 8,139
4. Amount of Replacement Housing Payment <i>(If amount on Line 3 is \$5,000 or more, enter \$5,000; if amount on Line 3 is less than \$5,000, enter amount on Line 3.)</i>		\$ 5,000
5. Amount of any Additional Relocation Payment,* previously paid. **Replacement housing payment previously placed in escrow <i>*Include Relocation Adjustment Payment made in accordance with interim instructions (See Circular 1370.3, paragraph 8).</i>		\$ 2,546
6. Amount of any payment received under State law of eminent domain, determined to have the same purpose and effect as the Replacement Housing Payment.		\$
7. Total <i>(line 5 and 6)</i>		\$ 2,546
8. Amount of Replacement Housing Payment. <i>(Line 4 minus line 7)</i>		\$ 2,454

REMARKS: *(If the claimant was unable to occupy the replacement housing within the required one year period, use this space to provide explanation.)* ** New HUD approved schedule for average sales price adopted before above payment was made.

CERTIFICATION OF THE DISPLACING AGENCY

This is to certify that the property purchased by the claimant has been inspected and the property was occupied by the claimant within one year following his displacement.

Date of Displacement:

Date Occupancy Established:

8/10/71

Month-Day-Year

8/10/71

Month-Day-Year

I further certify that I have examined this claim 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 of the amount shown on Line 8 above is authorized.

9-2-71
Date

[Handwritten Signature]
Authorized Signature

WARRANT

RECORD OF PAYMENT	DATE	CHECK NO.	AMOUNT
	9/9/71	33EH	\$ 2,454.00 10

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
CLAIM FOR REPLACEMENT HOUSING PAYMENT

NAME, ADDRESS, AND ZIP CODE OF DISPLACING AGENCY Portland Development Commission 1700 S. W. Fourth Avenue Portland, Oregon 97201	PROJECT NAME (If Applicable) EMANUEL HOSPITAL PROJECT
	PROJECT NUMBER OREGON R-20

INSTRUCTIONS: Complete all applicable items and sign certification in Block 6. Consult the displacing agency as to whether 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. 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 OWNER-OCCUPANT CLAIMANT. <i>(as shown in deed to displacing agency or in condemnation proceeding)</i> MONTAGUE, Charles	3. DATE OF DISPLACEMENT 8-10-71
---	--

2. Family Individual

4. DWELLING UNIT FROM WHICH YOU MOVED *R-4-10*

a. Address: 319 N. Fargo
Portland, Oregon 97227

b. Date you first occupied this dwelling unit as the owner:
May 1961
Month-Day-Year

c. Check one:
 Single-family dwelling unit
 Two-family dwelling unit

d. Did you occupy this dwelling for at least one year prior to initiation of negotiations?
 Yes No

5. DWELLING UNIT TO WHICH YOU MOVED

a. Address (Include ZIP Code): 3956 N.E. 10th
Portland, Oregon

b. Number of bedrooms: 2

c. Purchase price: \$ 6,750.00

d. If you have purchased and occupied this dwelling

(1) Date you signed purchase contract: 6/10/70
Month-Day-Year

(2) Date you moved into this dwelling: 8/10/71
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

6. 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 forfeiture of the entire claim.

8-10-71
Date

Charles Montague
Signature of Owner-Occupant

MEMORANDUM

Date September 2, 1971

TO: The File
FROM: Benjamin C. Webb
SUBJECT: RHP - Charles Montague

Please see the August 31, 1971 memo from the Emanuel Site Office and note that the schedule in question was approved on June 8, 1971 but had not been received by us at the time the payment was made on June 10, 1971 (Warrant #856 G).

Inasmuch as the payment was made under the provisions of Circular 1370.13, page 6, paragraph 10 b., the client is entitled to a \$5,000 payment. This adjustment is to make the maximum payment.

BCW:ch

MEMORANDUM

August 31, 1971

TO: Ben Webb
FROM: Emanuel Site Office
SUBJECT: RHP - Charles Montague

~~The~~ ^{The} new HUD approved schedule for average sales price ^{was} adopted before attached payment was made. Claim is made for \$5,000.00, less payment of \$2,546.00 previously placed in escrow. Amount now due \$2,454.00.

Claimant has relocated in standard housing with two bedrooms.

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
**DETERMINATION OF ELIGIBILITY AND COMPUTATION OF
REPLACEMENT HOUSING PAYMENT**

NAME OF CLAIMANT R-8-10

MONTAGUE, Charles

NAME OF DISPLACING AGENCY

PORTLAND DEVELOPMENT COMMISSION

INSTRUCTIONS: Attach completed Form HUD-6154 to claimant's copy of Form HUD-6153 and, if applicable, Form HUD-6141.2.

DETERMINATION OF ELIGIBILITY. (Attach an explanation of any entries which differ from claimant's entries on Form HUD-6153.)

1. Did the claimant own the single- or two-family dwelling at the time of acquisition?

YES	NO
X	

Initial Date of Ownership:

Date of Acquisition:

May 1961
Month-Day-Year

Month-Day-Year

2. Did the claimant own and occupy the single- or two-family dwelling at least one year prior to the initiation of negotiations?

X	
---	--

Initial Date of Ownership:

Date of Initiation of Negotiations:

May 1961
Month-Day-Year

Month-Day-Year

3. If the claimant moved prior to acquisition, did the claimant own and occupy the single- or two-family dwelling at least 18 months prior to the date of HUD approval of the project and own the property on the date of initiation of negotiations?

n/a	
-----	--

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?

X	
---	--

Date of Displacement:

Date of Purchase of Replacement Housing:

Date of Occupancy of Replacement Housing:

8/10/71
Month-Day-Year

6/10/70
Month-Day-Year

8/10/71
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 outside the locality, attach the report obtained from the claimant (Form HUD-6141.2).)

X	
---	--

Date previously substandard dwelling was inspected and found to be standard:

Month-Day-Year

NOTE: The claimant who purchases and occupies a substandard dwelling may become eligible for the payment if, within one year following displacement, he brings the substandard dwelling into conformance with the applicable codes or purchases and occupies a standard dwelling.

COMPUTATION OF REPLACEMENT HOUSING PAYMENT

1. Average sales price for a standard dwelling suitable for the claimant. <i>(From approved Form HUD-6155)</i>	\$ <u>9,046.00</u>
2. Acquisition payment received by the claimant for his single- or two-family dwelling.	\$ <u>6,500.00</u>
3. Line 1 minus line 2.	\$ <u>2,546.00</u>
4. Amount of Replacement Housing Payment <i>(If amount on Line 3 is \$5,000 or more, enter \$5,000; if amount on Line 3 is less than \$5,000, enter amount on Line 3.)</i>	\$ _____
5. Amount of any Additional Relocation Payment,* previously paid. <i>*Include Relocation Adjustment Payment made in accordance with interim instructions (See Circular 1370.3, paragraph 8).</i>	\$ _____
6. Amount of any payment received under State law of eminent domain, determined to have the same purpose and effect as the Replacement Housing Payment.	\$ _____
7. Total <i>(line 5 and 6)</i>	\$ _____
8. Amount of Replacement Housing Payment. <i>(Line 4 minus line 7)</i>	\$ <u>2,546.00</u>

REMARKS: *(If the claimant was unable to occupy the replacement housing within the required one year period, use this space to provide explanation.)*

CERTIFICATION OF THE DISPLACING AGENCY

This is to certify that the property purchased by the claimant has been inspected and the property was occupied by the claimant within one year following his displacement.

Date of Displacement:

8/10/71
Month-Day-Year

Date Occupancy Established:

8/10/71
Month-Day-Year

I further certify that I have examined this claim 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 of the amount shown on Line 8 above is authorized.

6-4-71
Date

B.I.C.
Authorized Signature

	DATE	WARRANT CHECK NO.	AMOUNT
RECORD OF PAYMENT	6/10/71	8566	2,546.00

September 1, 1971

Pioneer National Title Insurance Co.
421 S. W. Stark Street
Portland, Oregon 97204

ATTENTION: Jean Egberg
Escrow Officer

Re: Escrow No. 382725
MONTAGUE, Charles

Gentlemen:

You have in the above-identified escrow account a \$2,546 Replacement Housing Payment in accordance with our instructions of June 14, 1971.

This is to certify that Mr. Montague has acquired and moved into a standard structure located at 3956 N. E. 10th Avenue. You are hereby authorized to release the Replacement Housing Payment and disburse it in such manner as directed by Mr. Montague.

Yours very truly,

John B. Konward
Executive Director

JBK:dl

MEMORANDUM

Date September 1, 1971

TO: Don Webb
FROM: Escrow Site Office
SUBJECT: Release of BNP from Escrow

Escrow Company Pioneer National Title Ins. Co.

Escrow No. 38373

Parcel No. B-2-12

Name Charles R. ...

Moving Date 8/18/71

The above client has indicated and does warrant the property which
they purchased at ...
of ...
...

Please ...
...

2c

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
PORTLAND, OREGON 97201

N^o 26615 G

DATE August 26, 19 71

PAY TO THE
ORDER OF **Charles Montague**

\$ **420.00**

DOLLARS

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

NON-NEGOTIABLE

Portland Development Commission · 224-4800

DETACH BEFORE DEPOSITING CHECK

DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUNT
		Relocation payment per claims filed. Move from 319 N. Fargo (R-8-10) to 3956 N.E. 10th.	
		Fixed Payment - own furniture	\$220.00
		Dislocation Allowance	<u>200.00</u>
			<u>\$420.00</u>

Account Distribution

NO.	TITLE	AMOUNT
E 1501	Relocation Payments (EH) (Fixed - Individual)	\$420.00

Charles Montague
8/30/71

BT

APM

OR LOCAL AGENCY USE ONLY

U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

CLAIM FOR RELOCATION PAYMENT

(Certification of Eligibility and Record of Payments -- Families and Individuals)

NAME AND ADDRESS OF CLAIMANT (Include ZIP code)

Charles Montague
3956 N.E. 10th
Portland, Oregon

NAME OF LOCAL AGENCY

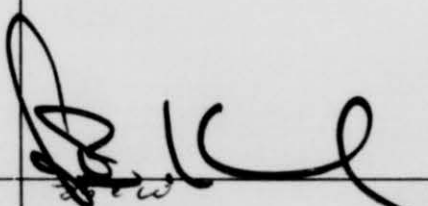
Portland Development Commission

INSTRUCTIONS: Attach completed Form HUD-6140.2 to completed Form(s) HUD-6140.1 filed by claimant.

A. Does claimant meet all timing requirements for eligibility? YES NO
If "No," explain:

B. 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:

ITEM	AMOUNT	AUTHORIZED SIGNATURE	DATE
1. Initial claim, moving expenses and direct loss of property a. Reimbursement for moving expenses, including, if applicable, storage and related costs in the amount of \$ _____	\$ 220.00		8-25-71
b. Reimbursement for actual direct loss of property	\$		
2. Supplementary claim(s) for storage costs:			
3. Final claim, reimbursement for moving expenses covering storage and related costs	\$		

C. RECORD OF PAYMENTS MADE (Total payments may not exceed \$200)

DATE	CHECK NUMBER	AMOUNT	DATE	CHECK NUMBER	AMOUNT
8/26/71	266156	\$ 220.00			\$

D. EXPLANATION OF ANY DIFFERENCE BETWEEN AMOUNTS CLAIMED AND AMOUNTS APPROVED

CLAIM FOR RELOCATION PAYMENT (Families and Individuals)

 HUD-6140.1
(4-66)

NAME AND ADDRESS OF LOCAL AGENCY (Include ZIP code) Portland Development Commission 1700 S.W. Fourth Avenue Portland, Oregon 97201	PROJECT NAME (If applicable) <p style="text-align: center;">Emanuel Project</p>
	PROJECT NUMBER <p style="text-align: center;">Ore. R-20</p>

INSTRUCTIONS: If this claim is for a **FIXED PAYMENT**, complete Items 1 through 6 and Item 12. If this claim is for reimbursement for actual moving expenses (including storage costs, if applicable) and/or direct loss of property, complete Items 1 through 12. If an item does not apply, write "None" in the space. If a Relocation Adjustment Payment will also be claimed, complete Form HUD-6141.1, Claim for Relocation Adjustment Payment, and attach it to this form.

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 <p style="text-align: center;">Charles Montague (1)</p>	2. DATE(S) OF MOVE <p style="text-align: center;">August 10, 1971</p>
3. ADDRESS FROM WHICH YOU HAVE MOVED a. Address <p style="text-align: center;">319 N. Fargo</p> b. Apt., Floor, or Room No. <u>House</u> c. Was it furnished with your own furniture? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No d. Number of rooms occupied (excluding bathrooms, hallways, and closets): <u>8</u> e. Date you moved into this address: <u>May 1961</u>	4. ADDRESS TO WHICH YOU HAVE MOVED a. Address (include ZIP code) <p style="text-align: center;">3956 N.E. 10th</p> b. Apt., Floor, or Room No. <u>House</u> c. Were household goods moved to or from storage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," complete Block B on reverse side of this form.

5. TYPE OF PAYMENT CLAIMED

Check a or b after consulting local agency:

a. Reimbursement for actual moving expenses (including storage costs, if applicable) and/or direct loss of property

b. Fixed Payment (May not be made if storage costs are involved) 5 rooms

Check c if applicable:

c. Supplementary claim for reimbursement of storage costs

6. TOTAL CLAIM (If claim is for Fixed Payment, consult local agency. If claim is for reimbursement of actual moving expenses, direct loss of property, and/or storage costs, enter sum of Lines 11a, 11b, and 11c below.)

\$ 220.00

DO NOT COMPLETE ITEMS 7 THROUGH 11 IF THIS IS A CLAIM FOR FIXED PAYMENT

7. NAME OF MOVING COMPANY (OR PERSON)	8. MOVER'S TELEPHONE NO.	9. ADDRESS OF MOVING COMPANY (OR PERSON)
---------------------------------------	--------------------------	--

10. METHOD OF PAYMENT, MOVING BILL (Check one)

a. I have paid the moving charges, as evidenced by the attached itemized receipt or paid bill from the mover, and I therefore request reimbursement.

b. I have not paid the moving charges, and I therefore request that the attached itemized moving bill be paid directly to the mover, in accordance with arrangements made in advance, and with my consent, between the local agency and the mover.

11. AMOUNT OF ACTUAL COSTS AND/OR LOSS

a. MOVING COST (Must be supported by attached receipt(s) or unpaid voucher from mover if local agency is to pay mover directly.)	\$
b. STORAGE COST (Must be supported by attached receipt(s) or unpaid voucher from storage company if local agency is to pay storage company directly.)	\$
c. DIRECT LOSS OF PROPERTY CLAIMED (If any claim is made here, the Statement of Claim on reverse side of this form must be completed.)	\$

12. 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.

8-14-71
Date

Charles Montague
Signature of Claimant

FOR LOCAL AGENCY USE ONLY

U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

CLAIM FOR RELOCATION PAYMENT

(Certification of Eligibility and Record of Payments -- Families and Individuals)

NAME AND ADDRESS OF CLAIMANT (Include ZIP code)

Charles Montague
3956 N.E. 10th
Portland, Oregon

NAME OF LOCAL AGENCY

Portland Development Commission

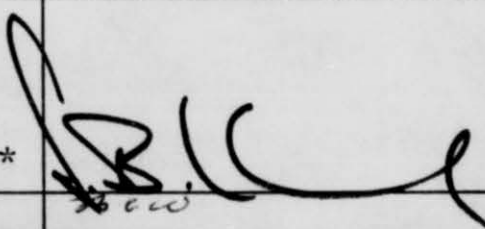
INSTRUCTIONS: Attach completed Form HUD-6140.2 to completed Form(s) HUD-6140.1 filed by claimant.

A. Does claimant meet all timing requirements for eligibility? YES NO

If "No," explain:

B. 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:

ITEM	AMOUNT	AUTHORIZED SIGNATURE	DATE
1. Initial claim, moving expenses and direct loss of property			
a. Reimbursement for moving expenses, including, if applicable, storage and related costs in the amount of \$ _____	\$ 200.00 **		
b. Reimbursement for actual direct loss of property	\$		
2. Supplementary claim(s) for storage costs:			
3. Final claim, reimbursement for moving expenses covering storage and related costs	\$		

C. RECORD OF PAYMENTS MADE (Total payments may not exceed \$200)

DATE	CHECK NUMBER	AMOUNT	DATE	CHECK NUMBER	AMOUNT
8/26/71	266156	\$ 200.00	7/8		\$

D. EXPLANATION OF ANY DIFFERENCE BETWEEN AMOUNTS CLAIMED AND AMOUNTS APPROVED

** DISLOCATION ALLOWANCE

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
CLAIM FOR RELOCATION PAYMENT
 (Families and Individuals)

HUD-6140.1
(4-66)

NAME AND ADDRESS OF LOCAL AGENCY (Include ZIP code) Portland Development Commission 1700 S.W. Fourth Avenue Portland, Oregon 97201	PROJECT NAME (If applicable) Emanuel Project
	PROJECT NUMBER Ore. R-20

INSTRUCTIONS: If this claim is for a **FIXED PAYMENT**, complete Items 1 through 6 and Item 12. If this claim is for reimbursement for actual moving expenses (including storage costs, if applicable) and/or direct loss of property, complete Items 1 through 12. If an item does not apply, write "None" in the space. If a Relocation Adjustment Payment will also be claimed, complete Form HUD-6141.1, Claim for Relocation Adjustment Payment, and attach it to this form.

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 (1) Charles Montague	2. DATE(S) OF MOVE August 10, 1971
3. ADDRESS FROM WHICH YOU HAVE MOVED a. Address R-8-10 319 N. Fargo b. Apt., Floor, or Room No. <u>House</u> c. Was it furnished with your own furniture? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No d. Number of rooms occupied (excluding bathrooms, hallways, and closets): <u>8</u> e. Date you moved into this address: <u>May 1961</u>	4. ADDRESS TO WHICH YOU HAVE MOVED a. Address (include ZIP code) 3956 N.E. 10th b. Apt., Floor, or Room No. <u>House</u> c. Were household goods moved to or from storage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," complete Block B on reverse side of this form.

5. TYPE OF PAYMENT CLAIMED

Check a or b after consulting local agency:

a. Reimbursement for actual moving expenses (including storage costs, if applicable) and/or direct loss of property

b. Fixed Payment (May not be made if storage costs are involved)

Check c if applicable:

c. Supplementary claim for reimbursement of storage costs

DISLOCATION ALLOWANCE

6. TOTAL CLAIM (If claim is for Fixed Payment, consult local agency. If claim is for reimbursement of actual moving expenses, direct loss of property, and/or storage costs, enter sum of Lines 11a, 11b, and 11c below.)

\$ 200.00

DO NOT COMPLETE ITEMS 7 THROUGH 11 IF THIS IS A CLAIM FOR FIXED PAYMENT

7. NAME OF MOVING COMPANY (OR PERSON)	8. MOVER'S TELEPHONE NO.	9. ADDRESS OF MOVING COMPANY (OR PERSON)
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10. METHOD OF PAYMENT, MOVING BILL (Check one)

a. I have paid the moving charges, as evidenced by the attached itemized receipt or paid bill from the mover, and I therefore request reimbursement.

b. I have not paid the moving charges, and I therefore request that the attached itemized moving bill be paid directly to the mover, in accordance with arrangements made in advance, and with my consent, between the local agency and the mover.

11. AMOUNT OF ACTUAL COSTS AND/OR LOSS

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b. STORAGE COST (Must be supported by attached receipt(s) or unpaid voucher from storage company if local agency is to pay storage company directly.)	\$
c. DIRECT LOSS OF PROPERTY CLAIMED (If any claim is made here, the Statement of Claim on reverse side of this form must be completed.)	\$

12. 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.

8-19-71 Date
Charles Montague Signature of claimant

DATED this 19 day of Aug 1971.

The undersigned does hereby consent and agree that all personal property left by me in the premises at _____
319 N. Fargo., Portland, Oregon may be considered and treated by the PORTLAND DEVELOPMENT COMMISSION as abandoned property and disposed of without incurring any obligation or liability to account to me therefore.

Charles Montague
(firm name)

by: _____

MEMORANDUM

Date August 12, 1971

TO: Ben Webb
FROM: Anne Cathcart
SUBJECT: Charles Montague

- (1) There is no indication in the file as to whether or not Mr. Montague has in fact physically moved himself and his effects from 319 N. Fargo to 3956 N.E. 10th. No record of moving costs or a dislocation allowance paid to him is in his file. However, notes from 6/7/71 and the fact that the \$2,546 replacement housing cost was made out on 6/10/71 lead me to believe that the move was or will be after June 8, 1971.
- (2) One computation is that Mr. Montague should have been paid according to the HUD 6155 as of 6/8/71, in which all persons are entitled to a 2-bedroom house AND under the assumption this LPA is still legally able to pay a replacement housing cost of \$5,000 if the acquisition payment to Mr. Montague is less than the average price for suitable standard housing based on the latest HUD Form 6155.

HUD Form 6155 for 2-bedroom:	\$14,639
Less acquisition of 319 N. Fargo:	<u>6,500</u>
	\$ 8,139 exceeds

\$5,000. Therefore, Mr. Montague would at least be eligible for the \$5,000 payment.

\$6,500 sales price 319 N. Fargo
5,000 replacement housing allowance
<u>179</u> moving costs (from an 8-bedroom house)

\$11,679 Total to be paid to Mr. Montague

The only hang-up that I see in this computation is that while this LPA has as HUD authority to operate under the rules and regulations of May 13, 1971, the Commission did state that we were only authorized to implement what we knew the payment schedule would be under the 1970 Relocation Act. Since payment to Mr. Montague came after May 13th, I think that even in paying under the July 15, 1970 HUD 6155 schedule was stretching it a bit.

- (3) Another computation is that this LPA knew what the rules and regulations would be. That is, Section 42.90 (1) states that a displaced person is eligible for replacement housing payment not to exceed \$15,000 provided that such amount shall not exceed the difference between the acquisition

August 12, 1971

price of the acquired dwelling and the cost of the replacement dwelling.

\$6,500 sales price for 319 N. Fargo
250 replacement housing allowance
300 moving costs (from an 8-room house)

\$7,050 Total to be paid to Mr. Montague

- (4) PDC gave the go ahead on operating under Section 203 of the 1970 Act on February 9, 1971. However, I do not know when HUD "concurred" with PDC to begin operating under the Act. In fact, I believe you stated that HUD encouraged you to operate under the old Act, assuming you still were within your budget. I can't make this decision since I have no memos to operate from.
- (5) Conclusion: Since it was to Mr. Montague's benefit to be paid under the old regulations and you were duly authorized to do so, I would pay Mr. Montague as per #2 above. However, I do not know what was said by PDC about "maximum benefit" or "lowest cost to the budget", etc. It would certainly appear that the Mr. Montagues are the exception to the rule; most families will gain by the 1970 Act.

Therefore, we owe Mr. Montague :

\$2,454 Additional replacement housing payment
300 Moving costs (from an 8-room house)

\$2,754 Total owing Mr. Montague

AC:ch

CONNIE McCREADY
COMMISSIONER
DEPARTMENT OF PUBLIC UTILITIES



CITY OF PORTLAND
OREGON

97204

July 18, 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

Re: 3956 N.E. 10 Avenue *Montague*

Attn: Mr. Crowley

Gentlemen:

A reinspection was made by the Housing Division of the one-story and attic, wood frame, one bedroom, single-family dwelling at the above address.

Our inspector reports the substandard conditions have been corrected and the structure complies with City regulations at this time.

Yours truly,

C. N. CHRISTIANSEN
BUILDING INSPECTIONS DIRECTOR

S. J. Chegwidden
Chief Housing Inspector

CHF:mfm

*Recd
6.22.71*

June 14, 1971

Pioneer National Title Insurance Co.
421 S. W. Stark Street
Portland, Oregon 97204

ATTENTION: Jean Egberg
Escrow Officer

Re: Escrow No. 382725
MONTAGUE, Charles, Seller

Gentlemen:

Enclosed is Warrant No. 856 G in the amount of \$2,546.00 representing a replacement housing payment, to be deposited to subject escrow for disbursement to the Seller upon written authorization by the Commission that the Seller has purchased and does occupy standard housing.

Yours very truly,

John B. Kenward
Executive Director

JBK:d1
Enclosure

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
PORTLAND, OREGON 97201

N^o 856 G

DATE June 18, 19 71

PAY TO **Charles Montague**

\$2,546.00

DOLLARS

TO THE TREASURER OF THE
CITY OF PORTLAND, OREGON

AUTHORIZED SIGNATURE
NON-NEGOTIABLE
AUTHORIZED SIGNATURE

Portland Development Commission • 234-4800

DETACH BEFORE DEPOSITING CHECK

DATE	INVOICE OR CONTRACT NO.	DESCRIPTION	AMOUNT
		To finance replacement housing for claimant displaced from 319 N. Forge (Parcel R-8-10) to 3956 NE 10th - per claim for replacement housing payment filed	\$2,546.00

Account Distribution

DATE	DESCRIPTION	AMOUNT
6/1	Cash Payment (Replacement Housing)	\$2,546.00

CRM

CONNIE McCREADY
COMMISSIONER
DEPARTMENT OF PUBLIC UTILITIES



CITY OF PORTLAND
OREGON

97204

BUREAU OF BUILDINGS
CITY HALL

C. N. CHRISTIANSEN, Director
Building Division
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Plumbing Division
George W. Wallace, Chief
Permit Division
Albert Clerc, Chief
Housing Division
S. J. Chegwidan, Chief

June 1, 1971

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

Attn: Mr. Crowley

Henry Berger
Re: 3956 N.E. 10 Avenue

Gentlemen:

At your request an inspection was made by the Housing Division of the one-story and attic, wood frame, one bedroom, single-family dwelling at the above address.

Our inspection indicates compliance with City of Portland Housing regulations except for the following substandard conditions:

1. Cellar stairway and stairway to the second story lack a safety handrail.
2. The hot water tank lacks an A.S.M.E. approved pressure relief valve and drainpipe.

Please notify the Housing Division of the Bureau of Buildings, 2200 N.E. 24 Avenue, Telephone 288-6077, when the corrections have been completed, under proper permit where required, and a reinspection can be scheduled.

Yours truly,

C. N. CHRISTIANSEN
BUILDING INSPECTIONS DIRECTOR

S. J. Chegwidan
S. J. Chegwidan
Chief Housing Inspector

CHF:mfm
cc: Plumbing Division

*Rec'd
6-3-71*

MONTAGE

MEMORANDUM

May 27, 1971

TO: CET & BW
FROM: WSJ
SUBJECT: Emanuel Hospital Project - Summary of Relocation
Situation in Each Parcel With Signed Option to Date

VACANT PARCELS

RS-4-1 2629-39 N. Williams Avenue
A-3-14 241 N. Fargo

BUSINESSES

Wallace Building Wreckers
Parcel # RS-3-9
(Tenant)

This company, a demolition contractor, maintains an office outside the project area and uses the building in the project as a warehouse and retail outlet for material salvaged from its wrecking operations. The owner of the business, Mr. D. E. Wallace, has indicated that this operation in the project is not of major concern to him and seems unworried about the prospects of moving. This company has low requirements for a replacement building, being interested mainly in just a place to keep used materials and should present no real difficulty in relocating.

Wallace Building Wreckers is currently on PDC's bid mailing list for demolition jobs.

Western Food Equipment Company
Parcel # A-4-1
(Tenant)

This company is a warehousing wholesale distributor and manufacturer's representative for food and dairy equipment. WSJ has been in close contact with this business since January 1970. The company recently purchased land at 181st and N.E. San Rafael in the Rockwood Industrial area across the street from the present John Deere Tractor plant.

Western Food Equipment Co. (continued)

A new building, of possibly twice the size of present facilities, will be constructed on this site. The company has been placed in contact with Mr. Clyde Sanders of SBA and will most likely be receiving assistance through a displaced business loan. The relocation of this company will mainly be dependent on the construction schedule of the new building.

HOUSEHOLDS - (Assigned to Jim Crolley)

HART, John H.
3141 N. Gantenbein
Parcel # R-9-2

Mr. and Mrs. John Hart, black, is retired and on disability. They have lived in this house for three years. Mr. Hart is 59 and Mrs. Hart is 51. They have six children, ages 17 - 6. Their income includes Social Security, Disability, Social Security for minor dependents and Welfare.

The Hart's have purchased a home at 3318 N. Missouri, part of the family lives there and part lives in the other house. The house they purchased has not been inspected by the City. If it does not pass inspection there is a possibility they will purchase another house. They are to receive \$5,500.00 for their home plus RHP. Relocation benefits will cover their moving expense in full. It appears that all details can be worked out as soon as they are ready to proceed

PACE, Theodore P.
3217 N. Vancouver Avenue
Parcel # A-3-20

Mr. and Mrs. Pace are black and have lived in this house for nineteen years. Mr. Pace is 71, Mrs. Pace around 68. He is retired and receives Social Security and she does occasional domestic work. They are foster parents for two teenage boys, Alfred Anthony 18 and Robert E. Lee 16, both white and attend public school.

Mr. and Mrs. Pace plan to purchase a house at 3416 N.E. 14th. An inspection by the City has been made. There are three minor sub-standard conditions to be corrected. They are; safety handrail to second story, approved pressure relief valve and drainpipe, and heating facilities to fourth bedroom on second story. They are receiving \$6,500.00 for their home plus have applied for an additional \$600.00 because of reappraisal due to some improvements. Relocation benefits will cover their moving expense in full and they will be able to pay cash for their new home, which is \$9,500.00, as he will receive \$5,000.00 on RHP.

HOUSEHOLDS - Assigned to Jim Crolley (continued)

MALONE, Cherry A.
3303 N. Vancouver
Parcel #A-4-13

Cherry Malone is single, 40 years old, black, mother of two children. She does sewing and odd jobs and states her income is approximately \$200.00 per month. She has about \$3,000.00 equity in her home in the project.

Mrs. Malone is presently in the hospital and will be unable to move immediately. She has signed an earnest money agreement for a \$16,300 house at N.E. 12th and Felling. Under the old regulations Mrs. Malone would receive a \$5,000 Replacement Housing Payment, however, by the time she is ready to move we should be operating under the new regulations and that payment could be increased to \$9,171.00. She may be able to use the balance of the purchase price on a FHA 235 Loan. Mrs. Malone's moving costs will be covered by the relocation benefits for moving expenses.

MONTAGUE, Charles

319 N. Fargo
Parcel #R-8-10

Mr. Montague is a single, white, 75 year old home owner. He moved into his home in the project area 10 years ago after being displaced from the South Auditorium Urban Renewal Project. He receives \$171.40 per month from Social Security.

Mr. Montague is purchasing a home at N.E. 10th and Shaver which appears to be standard. (A City Inspection has been ordered but not completed). He is receiving \$6,500.00 for his house in the project, and is paying \$6,750.00 for his new home. Relocation benefits will cover his moving costs in full and he will be able to pay cash for his new home as he will receive a \$9,046.00 RHP. There appears to be no problems with this case. Mr. Montague is satisfied with his new home and will suffer no financial loss because of his displacement.

HOUSEHOLDS - (Assigned to Chet Daniels)

TURNER, Queen E.
260 N. Ivy
Parcel #A-4-4

Mrs. Turner, age 45, black, is a tenant. She has lived at this address for two years. She would like to buy if possible. Has a roomer, one man, 56 years old. Mrs. Turner has an income of about \$300.00, the roomer earns about \$500.00. They are both friendly and receptive.

HOUSEHOLDS - (Assigned to Chat Daniels) - continued

PRUITT, Laverne
248 N. Ivy
Parcel #A-4-4

We have very little information on Mrs. Pruitt. She was a member of EDPA and refused to give information during the survey. A hostile person.

YARBOROUGH, Bobbie M.
252 N. Ivy
Parcel #A-4-4

Mrs. Yarborough is a tenant and has lived on site for 12 years. Income consists of old age pension, \$105.00 per month. She would like to get a two bedroom house. Her present rent is \$47.50 per month. Very much against small apartment, wants to keep her furniture. She has been brainwashed by landlord into believing nothing will happen and that no sale is forthcoming. She has consented to go out and look for new place.

FISCHMAN, Steven
553 N. Knott
Parcel #E-2-7

Mr. and Mrs. Fischman are tenants at this address. He is a student and she works for Bonneville. She earns about \$500.00 per month. They would like to buy a house if possible.

BATES, Billy
3320 N. Gantenbein
Parcel #A-4-6

Mr. Bates a 36 year old black man with two teenage sons. He would like to buy a house if possible, but would take a two bedroom apartment. He has lived in the area less than one year and when relocated would prefer to move closer to Pendleton Woolen Mills, his place of employment.

YOUNG, Dave
248 N. Cook
Parcel #A-3-7

Mr. Young, a single 62 year old black man, is presently employed earning \$640.00 per month. He plans to retire after his home is purchased by PDC and move into an apartment. He is presently making application for a one bedroom "rent supplement" apartment. This will enable him to pay rent based on 25% of his income when he retires and to retain the \$5,000.00 price paid for his home in the project. His moving costs will be covered by relocation payments.

HOUSEHOLDS - (Assigned to Chet Daniels) - continued

CLARK, Ray E.
2649 N. Commercial Ct.
Parcel #E-3-6

Mr. Clark is 22 years old. Moved on site April 24th. He is working and earning about \$85.00 per week from Bob Pederson of Pick-Up Parts on N.E. Cully. The living condition and housekeeping of their present apartment is very bad. Need two bedroom apartment. Will qualify for public housing or low income rental.

GRANVILLE, Verta
2653 N. Commercial Ct.

Has lived on site since March 1971. Mrs. Granville has two children. They live in four room apartment with bath. She is expecting another baby soon. She is on Welfare and receives \$165.00 per month. Wants to move to HAP housing.

Dwelling Unit Inventory

QUANTITY

2 Beds & Springs
 _____ Bedroom Chair
1 Breakfast Table
4 Breakfast Table Chairs
 _____ Bridge Lamp & Shade
1 Buffet
2 Chest of Drawers
 _____ Coffee Table
1 Couch
 _____ Davenport
 _____ Desk
1 Dining Table
4 Dining Chairs
 _____ Dresser
1 End Table
 _____ Floor Lamp & Shade
11 Mirror

QUANTITY

1 Night Stand
 _____ Occasional Chair
 _____ Overstuffed Chair
1 Overstuffed Rocker
1 Range
1 Refrigerator: Brand Leonard
 _____ Rocker
 _____ Rug & Pad: Size _____
 _____ Stool
1 Table Lamp & Shade
 _____ Table, small
 _____ Vanity & Bench
1 Suitcases
1 Trunks
15 Cartons, Boxes, Etc.
2 Clothes
 _____ Bedding & Linens

L
D
K
2
5

Miscellaneous (List Items)

Washing
Wood Stairs
1 T.V.
1 Radio

Garbage
Lawn mower
Ladder

COMMENTS:

CITY OF PORTLAND, OREGON
PORTLAND DEVELOPMENT COMMISSION
REAL ESTATE OPTION

70 Escrow
6-3-71

MONTAGUE

GRANTOR CHARLES MONTAGUE MAIL ADDRESS 319 N. Fargo Street
GRANTOR _____ MAIL ADDRESS Portland, Oregon 97227
_____ MAIL ADDRESS _____
AGENT OF GRANTOR _____ MAIL ADDRESS _____

IN CONSIDERATION of the payment of one dollar (\$1.00) by the PORTLAND DEVELOPMENT COMMISSION, the duly designated Urban Renewal Agency of the City of Portland, hereinafter referred to as "Commission", to the undersigned, the receipt of which is hereby acknowledged by the undersigned, and in consideration of the plans and purpose of the Commission to use, develop, operate and sell the real property hereinafter described for private or public purposes, and in consideration of the hereby acknowledged benefit that will inure thereby to the undersigned or to the public, whether tangible or not, we the undersigned, jointly and severally, for ourselves and our heirs, executors, administrators, successors and assigns, hereby give and grant to the Commission, upon the terms and conditions hereinafter stated, the option to buy the following described real property in the City of Portland, County of Multnomah and State of Oregon, to-wit:

Lot 12, Block 8, RIVERVIEW SUBDIVISION, in the City of Portland, County of Multnomah and State of Oregon (PDC Parcel No. R-8-10),

for the sum of SIX THOUSAND FIVE HUNDRED and NO/100 - - - Dollars (\$ 6,500.00)

to be paid as follows: SIX THOUSAND FIVE HUNDRED and NO/100 - - - Dollars (\$ 6,500.00)

upon conveyance of marketable title and delivery of a title insurance policy to the Commission as hereinafter provided; and _____ Dollars (\$ _____) upon delivery of possession to and acceptance by the Commission as hereinafter provided.

The Commission shall have the irrevocable right at any time within sixty (60) days from date hereof to elect to purchase under this option. Such election to purchase shall be made by the Commission by delivering to the undersigned, or by mailing by registered mail at any United States post office to the undersigned, addressed as follows:

written notice of such election. Such notice shall be deemed to have been given the day of such delivery, or the day following such mailing by registered mail. Upon the giving by the Commission of such notice, the undersigned agree AT OUR OWN EXPENSE AND WITHIN TEN (10) DAYS OF THE GIVING OF SUCH NOTICE TO:

(1) Convey said property with appurtenances, hereditaments and tenements to the Commission by Warranty Deed in such name as it may prescribe, with proper documentary stamps affixed thereto, free and clear of all liens and encumbrances, rights of possession, claims to rights of possession, and recorded and/or unrecorded leasehold interests, except building restrictions of record and zoning ordinances, and quitclaim all right, title and interest which the undersigned may have in any alleys, roads, streets, ways, strips, easements, gores or rights of way abutting or adjoining said property and in any means of ingress or egress appurtenant to said property.

(2) Furnish ^{at Commission expense} to the Commission an owner's policy of title insurance in the amount of said purchase price prepared by Power National Title Insurance Co. insuring the Commission as fee simple owner of said property free and clear of all liens and encumbrances except said building restrictions of record and zoning ordinances.

(3) Pay all delinquent taxes and assessments against said property for the preceding tax years, and pay proportional part of current real property taxes prorated as of date of closing of escrow.

(4) Pay all water bills charged to the property as of date of closing of escrow.

(5) Deliver to the Commission possession of said property at the closing of escrow, provided that with respect to property or portion thereof which the undersigned occupies for his own use, possession of such occupied property or portion shall be delivered to the Commission within sixty (60) days of closing of escrow.

(6) Deliver to the Commission or its order a full set of keys for property, including outside keys and separate keys for each apartment or compartment, if applicable, and furnish the Commission complete list of tenants, amounts of rents paid by each, dates rents are due, amounts paid in advance, all advance rents to be prorated as of date of closing of escrow.

The purchase hereunder will be closed in an escrow, and the escrow fee shall be paid by the purchaser. The undersigned hereby authorize _____ to sign the escrow instructions or amendments thereto, or any other statements required by the Commission other than Warranty Deed on behalf of all sellers in this transaction.

In the event that any portion of this property is vacant at the date of notification of the purchasers of this option by the Commission, or becomes vacant subsequent thereto, the undersigned agrees not to rent or re-lease such vacated or vacant property.

It is specifically understood and agreed that the real property herein agreed to be conveyed, unless stated to the contrary herein, includes all structures, buildings, fixtures, trees, shrubbery and all other real property improvements of every nature whatsoever which are on the said property, and the undersigned agree to keep the same in good condition without waste, damage or destruction prior to delivery of possession thereof to the Commission.

It is understood and agreed that Grantor shall deposit, until the Commission authorizes in writing the release of said deposit, the sum of \$200 to the escrow established for purpose of closing subject transaction for the benefit of the Commission to insure payment of unliquidated obligations against subject property which may occur and shall be payable to or by the Commission subsequent to conveyance of said property to the Commission.

Under the provisions of Public Law 91-646 It is understood that the price stated herein is the estimated just compensation for the fee title based upon two independent fee appraisals.

The Commission shall deposit into subject escrow the additional sum of \$2,546.00 representing a replacement housing payment payable to the Grantor upon acquiring and occupying a standard structure within one year. A building inspector from the Building of Bureaus shall attest to the structure being standard.

The undersigned agree that loss or damage to the property by fire or other casualty shall be at the risk of the undersigned until the title to the land and deed to the Commission shall have been accepted by the Commission; and in the event that such loss or damage occurs, the Commission may, without liability, refuse to accept conveyance of title. Or, in the event of loss or damage to said property from fire, which property is covered by insurance held by or on behalf of the undersigned or in which the undersigned may have rights, the Commission may elect to take the proceeds from said insurance upon exercise of this option, and the undersigned shall assign such proceeds to the Commission, which proceeds shall be applied to reduce the sale price of the property by amount of such proceeds.

In the event the Commission does not deposit the purchase price with the escrow holder within a period of sixty (60) days from date hereof, this option shall remain in force thereafter until the undersigned shall terminate this option by giving thirty (30) days prior written notice to the Commission of such termination.

The undersigned agree that the Commission may, at its election, and notwithstanding the Commission's prior election to purchase under this option, acquire title to said land or any portion thereof or any interest therein, by condemnation or other judicial proceedings, in which event the undersigned agree to cooperate with the Commission in the prosecution of such proceedings and also agree that the said purchase price shall be the full amount of the award of just compensation, including interest, for the taking of said property, and that any and all awards of just compensation that may be made in the proceedings to any defendant shall be payable and deductible from the said purchase price.

Entry by the Commission, its employees or agents, upon said property for the purpose of inspection or survey or any slight or inadvertent entry without material damage or injury to the reality, or without the exercise of dominion thereover to the exclusion of the undersigned, shall not be construed as a final election to close this option.

It is further agreed that no statements, expressions of opinion, representations or agreements of any nature whatsoever, not herein expressly stated, made by any representative or agent of the Commission shall be binding on, or of any effect against, the Commission.

The undersigned expressly acknowledge that all items of damages, all sums of money to be paid, and all things to be done by the Commission are included in this option. All claims for damages, injury, or loss on account of failure to close this option are, hereby, expressly waived by the undersigned. The undersigned agree that they shall have no claim or cause of action against the Commission or any of its employees except such as may arise by reason of this agreement.

If the undersigned shall fail, due to fault or neglect of the undersigned, to comply with the provisions of this option, and suit or action is instituted by the Commission to enforce the same or to continue the property, the undersigned agree to pay, in addition to the costs and disbursements provided by statute, such additional sum as the Court may adjudge reasonable for attorney's fees to be allowed in said suit or action.

Dated this 11th day of May, 1977

WITNESSES:



(SEAL)

(SEAL)

(SEAL)

(SEAL)

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
CLAIM FOR REPLACEMENT HOUSING PAYMENT

NAME, ADDRESS, AND ZIP CODE OF DISPLACING AGENCY Portland Development Commission 1700 S.W. Fourth Portland, Oregon 97201	PROJECT NAME (If Applicable) Emanuel Hospital Project PROJECT NUMBER RE R-20
---	---

INSTRUCTIONS: Complete all applicable items and sign certification in Block 6. Consult the displacing agency as to whether 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. 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 OWNER-OCCUPANT CLAIMANT. (as shown in deed to displacing agency or in condemnation proceeding) Montague, Charles	3. DATE OF DISPLACEMENT
2. Family <input type="checkbox"/> Individual <input checked="" type="checkbox"/>	

4. DWELLING UNIT FROM WHICH YOU MOVED

a. Address: 319 N. Fargo
Portland, Oregon 97227

b. Date you first occupied this dwelling unit as the owner:
 May 1961
 Month-Day-Year

c. Check one:
 Single-family dwelling unit
 Two-family dwelling unit

d. Did you occupy this dwelling for at least one year prior to initiation of negotiations?
 Yes No

5. DWELLING UNIT TO WHICH YOU MOVED

a. Address (Include ZIP Code): 3956 NE 10th
Portland, Oregon

b. Number of bedrooms: 2

c. Purchase price: \$6,750.00

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

Jo: Dorothy
6-2-71

6. 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 forfeiture of the entire claim.

_____ Date *X signed 6/2/71*
 Signature of Owner-Occupant

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

DETERMINATION OF ELIGIBILITY AND COMPUTATION OF REPLACEMENT HOUSING PAYMENT

NAME OF CLAIMANT

Montague, Charles

NAME OF DISPLACING AGENCY

Portland Development Commission

INSTRUCTIONS: Attach completed Form HUD-6154 to claimant's copy of Form HUD-6153 and, if applicable, Form HUD-6141.2.

DETERMINATION OF ELIGIBILITY. (Attach an explanation of any entries which differ from claimant's entries on Form HUD-6153.)

1. Did the claimant own the single- or two-family dwelling at the time of acquisition?

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Initial Date of Ownership:

Date of Acquisition:

May 1961
Month-Day-Year

Month-Day-Year

2. Did the claimant own and occupy the single- or two-family dwelling at least one year prior to the initiation of negotiations?

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Initial Date of Ownership:

Date of Initiation of Negotiations:

May 1961
Month-Day-Year

Month-Day-Year

3. If the claimant moved prior to acquisition, did the claimant own and occupy the single- or two-family dwelling at least 18 months prior to the date of HUD approval of the project and own the property on the date of initiation of negotiations?

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

Initial Date of Ownership:

Date of HUD Approval of the Project:

na

Month-Day-Year

Month-Day-Year

4. Did the claimant purchase and occupy the replacement housing within one year from the date of displacement?

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

Date of Displacement:

Date of Purchase of Replacement Housing:

Date of Occupancy of Replacement 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 outside the locality, attach the report obtained from the claimant (Form HUD-6141.2).)

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

Date previously substandard dwelling was inspected and found to be standard:

Month-Day-Year

NOTE: The claimant who purchases and occupies a substandard dwelling may become eligible for the payment if, within one year following displacement, he brings the substandard dwelling into conformance with the applicable codes or purchases and occupies a standard dwelling.

COMPUTATION OF REPLACEMENT HOUSING PAYMENT

1. Average sales price for a standard dwelling suitable for the claimant. <i>(From approved Form HUD-6155)</i>	\$ <u>9,046.00</u>
2. Acquisition payment received by the claimant for his single- or two-family dwelling.	\$ <u>6,500.00</u>
3. Line 1 minus line 2.	\$ <u>2,546.00</u>
4. Amount of Replacement Housing Payment <i>(If amount on Line 3 is \$5,000 or more, enter \$5,000; if amount on Line 3 is less than \$5,000, enter amount on Line 3.)</i>	\$ <u>2,546.00</u>
5. Amount of any Additional Relocation Payment,* previously paid. *Include Relocation Adjustment Payment made in accordance with interim instructions <i>(See Circular 1370.3, paragraph 8).</i>	\$ _____
6. Amount of any payment received under State law of eminent domain, determined to have the same purpose and effect as the Replacement Housing Payment.	\$ _____
7. Total <i>(line 5 and 6)</i>	\$ _____
8. Amount of Replacement Housing Payment. <i>(Line 4 minus line 7)</i>	\$ <u>2,546.00</u>

REMARKS: *(If the claimant was unable to occupy the replacement housing within the required one year period, use this space to provide explanation.)*

CERTIFICATION OF THE DISPLACING AGENCY

This is to certify that the property purchased by the claimant has been inspected and the property was occupied by the claimant within one year following his displacement.

Date of Displacement:

Date Occupancy Established:

Month-Day-Year

Month-Day-Year

I further certify that I have examined this claim 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 of the amount shown on Line 8 above is authorized.

Date

Authorized Signature

RECORD OF PAYMENT	DATE	CHECK NO.	AMOUNT

R E C E I P T

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

Chas Montague

3-18-71
date

MONTAQUE

FROM



319 N. FARGO ST

TO



3956 N.E. 10th AVENUE

\$6,756.00

2 APR 1911

OWNER'S EARNEST MONEY RECEIPT

RECEIVED OF *Charles Montague* *Portland Ore.* June 10, 1970

the sum of *One 00/100* hereinafter mentioned as the Purchaser, (\$1⁰⁰) Dollars as earnest money, and in part payment for the purchase of the following described real estate situated in the City of *Portland*, County of *Multnomah*, State of *OR* and more particularly described as follows, to-wit:

3956 NE 10th

for the sum of *Fifty Seven Hundred Fifty 00/100* which we have this day sold to the said Purchaser (\$6,750⁰⁰) Dollars on the following terms, to-wit: The sum of (\$) Dollars, as hereinabove received for; and (\$) Dollars

upon acceptance of title and delivery of deed or delivery of contract; balance of (\$6749) Dollars payable

upon closing sale to P.D.C. for 6,750.00 more for 319 N. George. (F.H.A. 8/75)

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. *No exception*

It is agreed that if the title to the said premises is not marketable, or cannot be made so within thirty days after closing, with a written statement of defects, is delivered to seller, the earnest money herein assigned for shall be returned. If the title to the said premises is marketable, and the purchaser refuses to comply with any of the conditions of this sale within 30 days and to make payment promptly, in accordance hereto, then the earnest money herein assigned for shall be retained to the owner 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 first and then if of record and appropriate to date current zoning Ordinance, building restrictions, taxes due and payable for the current fiscal year and all other matters.

possession and possession to closing, including all improvements on a standard real estate contract, shall be delivered to the purchaser at the consummation of the sale hereof or delivery of possession, whichever first occurs.

Possession of said premises is to be delivered to buyer on or before *6/10/70*. This contract is binding upon the seller, buyer, assignees and heirs of the seller and seller, assignees and heirs of the buyer. This contract is not assignable without written consent of both parties. In any suit or action brought on this contract, the prevailing party shall be entitled to recover reasonable attorney's fees as fixed by the state.

Special conditions:

644-7300

Joe M. Reil

I hereby agree to purchase the above property and to pay the price of *Fifty Seven Hundred Fifty 00/100* Dollars as specified above. Address *319 N. George* Purchaser *Charles Montague* Phone *287-6764*

Notice to: Portland Development Commission

I (we) have read your letter describing the relocation benefits that may be available under the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, to those displaced on or after January 2, 1971. I (we)

(check one)

- Request that you process my (our) claim for an interim relocation payment. I (we) understand that you will advise me (us) promptly when and if a revised claim may be submitted for adjustments on the basis of the new Act and in accordance with the implementing regulations.
- Will defer filing a claim until you are able to make the full payments authorized by the new Act. I understand that you will advise me (us) promptly when you are authorized to make full payments authorized by such Act.

3-18-71

Date

Charles Montague

Signature of Claimant

(If more than one claimant, each should sign)

(Return this form to PDC)

RP 2

On January 2, 1971, the President signed the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970. This Act makes significant changes in the relocation payments and assistance that may be provided to persons and business concerns displaced by activities assisted in whole or in part with Federal funds. As you know, the Emanuel Hospital Project is being carried out with assistance from the U. S. Department of Housing and Urban Development (HUD).

In general, the new Act improves and increases relocation payments and assistance that may be made to persons and business concerns displaced on or after January 2, 1971.

Displaced families and individuals may be eligible for either (1) a payment to cover actual reasonable moving expenses or (2) a fixed moving expense allowance not to exceed \$300 plus a displacement allowance of \$200. In addition, a payment not to exceed \$15,000 is available to assist displaced homeowners in the purchase of a replacement dwelling unit and a payment not to exceed \$4,000 is available to displaced tenants and certain homeowners to assist in the rental of a replacement dwelling unit or, in some cases, for use as a downpayment on the purchase of a replacement dwelling unit. Your special attention is called to the fact that the amounts of payments described above are maximum. The actual amount which you will receive will depend upon your individual circumstances.

Displaced business concerns may be eligible for either (1) a payment to cover actual reasonable moving expenses, direct loss of tangible personal property, and reasonable expenses in searching for a replacement business; or (2) in certain cases, a fixed payment equal to the business concern's average annual net earnings, but not less than \$2,500 nor more than \$10,000.

In addition to these relocation payments, the Act provides for relocation assistance to be provided for those displaced. The objective is to minimize hardships to persons required to relocate and to assure that suitable relocation resources will be available before displacement takes place.

Before any payments may be made under the new Act, HUD must issue the necessary regulations and procedures for making payments. We will continue to make relocation payments and provide relocation assistance in accordance with laws and regulations existing prior to January 2, 1971, until such time as the new regulations and procedures are received.

In the meantime, we have been authorized to make certain payments on an interim basis. Therefore you have the option of either:

1. Accepting an interim relocation payment and filing a revised claim later for any additional amount to which you may be entitled; or
2. Deferring the filing of your claim until the regulations are received which will permit payments to be made.

Please let us know, by checking the appropriate box on the form provided and returning the form to us, the action you wish us to take. We have furnished you with two copies of this form so that you may keep one for your records.

We will be in touch with you again as soon as we have more information regarding our ability to make payment under the new Act. If you have any questions regarding this matter, please get in touch with our Relocation Office. The telephone number is 288-8169.

Sincerely,

Chief of Relocation and
Property Management

DATE	NOTES	C/W
1/15/71	Flyer delivered by Wilson Smith. Very receptive. Wants to sell.	
1/26/71	Came into office to inquire about project. He would like to sell present house and move as soon as possible. He knows project has been delayed, but hopes, however, that money and project approval will come before very long. He apparently does not approve of EDPA group. He said he didn't think it was fair that a few "dummies" could hold up the project and delay his money. He was moved once before he said (possibly from South Auditorium) but felt he was treated fairly so expects the same again. Has "kind of option" on another piece of property	WSJ
2/10/71	Survey: Wants to move soon as possible. Will buy 2 bedroom house, about \$8,000. N.E. 10 & Shaver area	WSJ
5/6/71	In office. Stops by at least once a week to see if we have word on "when"	SC
5/10/71	In office. Received letter Saturday from real estate. Told him to call them.	SC
5/18/71	10:00 a.m. visited house on 10th St., from outside. Got copy of Earnest money receipt from Joe Reid for \$1.00 to purchase a house at 3956 N.E. 10th for \$6,750. Signed info letter	JC
6/2/71	Had Mr. Montague come in and sign claim for replacement housing ... it is filled in as much as possible at this time ... sent to Dorothy Lyon for filing with Escrow Co. They will fill in balance of information when he is relocated - then when certification is made that he is occupying decent safe and sanitary housing, etc. this amount \$2,546.00 can be paid to Mr. Montague. This claim is being filed under the old regulations which we are still working under at this time: Mr. Montague will receive the \$6,500 for his house in the project, plus the \$2,546.00 - he is paying \$6,750.00 for his new house.	SLC
6/7/71	Received letter from city inspector. Notified Mr. Reed and Mr. Montague of two minor exceptions listed. Mr. Montague contacted Title Insurance company handling escrow of sale to PDC. Appears to be some problem regarding serving of summons to ex-wife in 1957 when they were divorced. Advised him to contact the attorney that handled the divorce.	SC

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 WSD Date of survey 2/10/71 Tabulator _____ Date tabulated _____
 Dwelling Unit No. 7 Structure No. 6 Census Block No. 22 Census Tract No. 22 A
 Street Address 319 N Fargo Apartment No. -

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

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

Wants to move soon - has told Mrs. Waver that they are just doing what they for "opite"

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

Name	Family relation	Age	Sex	Occupation
1. <u>Montague, Charles</u>	<u>Head of household</u>	<u>75</u>	<u>M</u>	<u>retired</u>
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:

Names of jobholders	Names of employers	Street address where jobs are located	Distance 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>Soc. Sec.</u>	<u>\$ 171.40</u>	<u>\$ 171.40</u>
_____	_____	_____
Total family or household income per month	\$ 171.40	\$ 171.40

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

1. Location (indicate approximate cross streets) NE 10th - Shaver
2. Transportation, number of autos owned 1, use bus no, walk no
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 \$ 8000, down payment of \$ -, monthly payment of \$ 0
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 2, kitchen , dining room -, living room , number of bathrooms 1, total sq. ft. in dwelling unit _____
7. Other characteristics W O B I M

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

Analyst WSJ Date 2/16/71 Surveyed 2/16/71 Tabulator _____ Date _____
 Dwelling Unit No. 7 Structure No. 6 Census Block No. 22 Census Tract No. 22 A
 Street Address 319 N Fargo Apartment No. -
 Legal Description _____

NAME OF OCCUPANT: <u>Charles Montague</u> <u>319 N Fargo</u> TELEPHONE: <u>287-6764</u> INTERVIEWED? () Yes () No	NAME & ADDRESS OF OWNER <u>Charles Montague</u> <u>319 N Fargo</u> TELEPHONE: <u>287-6764</u> INTERVIEWED? () Yes () No	NAME & ADDRESS OF PROP. MGR: _____ _____ TELEPHONE: _____ INTERVIEWED? () Yes () No
---	---	---

I. DESCRIPTION OF STRUCTURE

<u>✓</u> One-family house	No. of units in bldg. _____
___ Apt. in a house	_____
___ Apt. in apt. bldg. or plex	_____
___ Apt. in comm. bldg.	_____
___ Mobile home or trailer	_____

This structure has 1 stories (do not count basement)

II. OCCUPANCY STATUS OF DWELLING UNIT

✓ Owner occupied
 ___ Renter occupied
 ___ Vacant

III. SIZE OF DWELLING UNIT

981 Sq. ft. in first floor (county figure)
1481 Sq. ft. in dwelling unit (if more than 1 floor)
8 Total no. of rooms (include kitchen, dining, living and bedrooms, exclude bathrooms)
1 No. of bathrooms
5 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
4-27-67 Date of last appraisal
1905 Date structure was originally built

B. Market value data for one-family dwelling

	Market value	Computed value per sq. ft.
Land	\$ <u>4000</u>	\$ _____
Improvements	<u>2080</u>	_____
Total	<u>6080</u>	_____

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

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

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

V. RENTAL RATE FOR THIS RENTED UNIT

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

Deposits required of renter
 Advance rent \$ _____, other \$ _____

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

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

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

VII. REMARKS

1 1-71080-2310 MONTAGUE, CHARLES & VIOLET

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

319 N FARGO ST
PORTLAND, OREGON 97227

RIVERVIEW SUB

LOT 12
BLOCK 8

PROPERTY ADDRESS: 319 N FARGO ST
PORTLAND

APPEALS:



14-20'



319 N Fargo
RIGHT OF BUILDING

AVE OR ST

SUMMARY ASSESSED VALUATION - REAL PROPERTY

ASSESS YEAR	MILL RIGHTS	TIMBER	LAND	IMPS	TOTAL	SIGN DATE
1968			3850	2000	5850	2
1971			4000	2080	6080	X.P.

REMARKS

1 Not best land use

2 poor cond. traffic

DATE	CHECKED	REVIEWED	BLOG. COUNT	INDEX	RE-CHECKED	DEPUTY NOTIFIED
FEB 23 68		MAY 14 1968				
		C MILLER				

