

	DESCRIPTION	ROLL NO.	ODOMETER
	EMANUEL BUSINESS CONCERNS AND NON-PROFIT ORGANIZATIONS		
PARCEL NO. R-15-3	LEHL, HENRY 3000 N. COMMERCIAL	C.R. ROBBINS INN	
PARCEL NO. RS-5-4	ALBINA PIPE BENDING CO. INC. 225 N. RUSSELL OWNER: JOHN F. SMITH		
PARCEL NO. R-10-9 R-10-4	BRINK RENTAL 535 N. MONROE 3127 N. COMMERCIAL		
PARCEL NO. R-14-3	CRINER APARTMENTS 554-544 N. MONROE OWNER: LLOYD CRINER		
PARCEL NO. RS-5-6	CARLOS BODY & FENDER SHOP 2609 N. VANCOUVER OWNER: CHARLES MONTOYA		
PARCEL NO. RS-4-9	CATHAY FOOD MARKET 2619 N. WILLIAMS OWNER: RICHARD LOW		
PARCEL NO. RS-4-6	DEMME BROTHERS, INC. 35 N. RUSSELL OWNER: JOHN & ALICE BOLZELL		
PARCEL NO. A-4-7	DENSON ROOMING HOUSE 3316 N. GANTENBEIN OWNER: JEWEL BENSON		
PARCEL NO. R-9-7	FIELD-SENSI THREADER MACHINE CO. 417 N. MONROE OWNER: HERBERT FIELD		
PARCEL NO. RS-5-5	GETHSEMANE CHURCH OF GOD IN CHRIST 237 N. RUSSELL		
PARCEL NO. R-8-7	GOOD SAMARITAN CHURCH OF GOD 3204 N. COMMERCIAL		
PARCEL NO. RS-4-7	GRESS APARTMENTS 109 N. RUSSELL		
PARCEL NO. RS-2-1	INGLE SERVICE STATION 2847 N. WILLIAMS OWNER: RONALD INGLE	C.R. MANNING BROS GARAGE	
PARCEL NO. RS-4-2	JEWELL ALL STAR DAIRY 20 N. KNOTT OWNER: IRVING ERICKSON		
PARCEL NO. RS-5-6	JEWELL GLASS COMPANY 2607 N. VANCOUVER OWNER: SEYMOUR R. DANISH		
PARCEL NO. E-4-8	JOHNSON (JULIA MAE) APARTMENTS 2640 N. KERBY		
PARCEL NO. E-4-8	JOHNSON (LUCILLE) APARTMENTS 321 N. RUSSELL		

Levant

(7)

RESIDENTIAL RELOCATION RECORD

RELOCATION WORKER _____

PROJECT NO. R-20 PARCEL R 153

NAME Lehl, Henry ADDRESS 3000 N Commercial APT NO. _____

PHONE 284-9965 INITIAL INTERVIEW _____ SEX W X NW AGE _____

U.S. CITIZEN _____ ALIEN _____ VETERAN _____ SERVICEMAN _____ DATE ON SITE _____

FAMILY COMPOSITION

Name	Relation	Age
<u>Emily</u>	<u>wife</u>	

Employer: Name _____ \$ _____
 Address _____
 MCV 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 4

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 _____

2/25/71 ^{Survey}

lease whole bldg. inc tower downstairs (Robbins Inn)
which has little or no income. Not presently occupied
apt (see Robbins Inn file) J

[Faint, mostly illegible handwritten notes and a table-like structure follow. The text is very light and difficult to decipher. Some words like "APR", "MAY", "JUN", "JUL", "AUG", "SEP", "OCT", "NOV", "DEC" are visible, suggesting a calendar or schedule. There are also some numbers and possibly names.]

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 JO Date of survey 2-25-71 Tabulator _____ Date tabulated _____
 Dwelling Unit No. 2 Structure No. 2 Census Block No. 41 Census Tract No. 22A
 Street Address 3000 N. COMMERCIAL 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 _____

*Husband in vest home
 Wife ill - staying with
 someone else - info from
 owner, didnt know where she
 is living while recuperating*

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

	<u>Name</u>	<u>Family relation</u>	<u>Age</u>	<u>Sex</u>	<u>Occupation</u>
1.	<u>LEHL, Henry</u>	<u>Head of household</u>			
2.	<u>Lehl, Emily</u>				
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:

<u>Names of jobholders</u>	<u>Names of employers</u>	<u>Street address where jobs are located</u>	<u>Distance to work</u>
	<u>Self Employed</u>		

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

<u>Names of persons in this household who have income from any source</u>	<u>Amount of income per month</u>	
	<u>In month before this survey</u>	<u>In an average month during 1970</u>
<u>Income diminished by freeway project & Emanuel Project.</u>	\$ _____	\$ _____
<u>Living on uncertain income, which is just about</u>	\$ _____	\$ _____
<u>Total family or household income per month</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 2, kitchen 1, dining room _____, living room 1, 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

Date _____

Analyst _____ Surveyed _____ Tabulator _____ Date _____
 Dwelling Unit No. 2 Structure No. 2 Census Block No. 41 Census Tract No. 22A
 Street Address 3000 N. Commercial Apartment No. _____
 Legal Description _____

NAME OF OCCUPANT: Henry Lehl NAME & ADDRESS OF OWNER: Eileen C. Good NAME & ADDRESS OF PROP. MGR: _____
EMILY LEHL 3123 NE Everett
 TELEPHONE: _____ TELEPHONE: 235-0214 TELEPHONE: _____
 INTERVIEWED? () Yes () No INTERVIEWED? Yes () No INTERVIEWED? () Yes () No
John Curran 253-0029

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. or plex	_____
<input checked="" type="checkbox"/> Apt. in comm. bldg.	<u>1</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

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

IV. ASSESSOR'S MARKET VALUATION DATA

A. Dates or period of time
1971 Period market value data applicable
1967 Date of last appraisal
1900 Date structure was originally built

B. Market value data for one-family dwelling

	<u>Market value</u>	<u>Computed value per sq. ft.</u>
Land	\$ _____	\$ _____
Improvements	_____	_____
Total	<u>3000</u>	_____

1/3 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>1140</u>	\$ _____
Improvements	<u>7900</u>	_____
Total	<u>9040</u>	_____

2253 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	<u>Lease</u>	\$ _____	_____
Gas	<u>the whole Bldg</u>	_____	_____
Water	<u>and living area</u>	<u>and lawn</u>	_____
Heat (oil, or other)	<u>Rent not separate</u>	_____	_____
Total	\$ _____	\$ _____	\$ <u>59.00</u> <u>d.u. only</u>

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

