

DESCRIPTION		ROLL NO	ODOMETER
PARCEL NO. AB-3-8	STOKES, SAMUEL 2931 N. GANTENBEIN		
PARCEL NO. E-3-5	STUART, JERRY A. JR. 2648 N. COMMERCIAL CT.		
PARCEL NO. R-8-12	TAYLOR, BIRDIE LEE 3229 N. GANTENBEIN		
PARCEL NO. R-8-1	THOMAS, AUGUSTINE (MRS.) 302 N. COOK (DECEASED)		
PARCEL NO. RS-4-9	THOMAS, CHARLES 7 N. RUSSELL #8		
PARCEL NO. R-8-1	THOMAS, WILLIE 300-302 N. COOK		
PARCEL NO. E-4-3	THOMPSON, FRED 322 N. KNOTT		
PARCEL NO. A-3-6	THOMPSON, HEWEY 242 N. COOK		
PARCEL NO. E-3-2	TURNER, REV. BRADY 508 N. KNOTT		
PARCEL NO. E-2-2	TURNER, FLORENCE 532 N. GRAHAM		
PARCEL NO. A-4-4	TURNER, QUEEN E. 260 N. IVY		
PARCEL NO. E-3-8	VAN ZILE, HAZEL 2640 N. KERBY		
PARCEL NO. A-4-2	VERNON, CECIL L. 222 N. IVY		
PARCEL NO. AB 3-5	WALLIN, JACOB E. 413 N. STANTON		
PARCEL NO. RS-4-4	WALTON, LLOYD & WILLIE MAE . 102-06 N. KNOTT		
PARCEL NO. E-4-1	WARD, ARTHUR B. 2651 N. GANTENBEIN		
PARCEL NO. E-4-1	WARD, BILLY L. 2651 N. GANTENBEIN		
PARCEL NO. R-8-2	WARREN, LEO & INA 312 N. COOK		

# RESIDENTIAL RELOCATION RECORD

Project Name Emanuel - ORE. R-20 Parcel No. AB 3-5 Advisor \_\_\_\_\_

Client's Name WALLIN, Jacob E. Phone 282-3523

Address 413 N. Stanton Ethn White Age 79

☒ Male ☒ Family ☒ Married ☐ Renter/Occupant  
☐ Female ☐ Individual ☐ Single ☒ Owner/Occupant

## Family Composition

Total Number in Family 2

Martha A. wife, husband

Other: Relation Age Relation Age

Wife	78		

## Economic Data

Employer \$

Address

Other Source of Income

Social Security \$ 239.00

Pension-St. of Oregon 40.00

Total Monthly Income \$ (279.00)

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 5-3-71 Date of Info pamphlet delivery \_\_\_\_\_

Date Notice to Move given \_\_\_\_\_ Date Effective \_\_\_\_\_ Expires \_\_\_\_\_

CLAIMANT'S INITIAL DATE OF OCCUPANCY

1952

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

1952

Date of initiation of negotiations for purchase of property

June 25, 1971

Date of Acquisition

DEC. 2-25-74

December 6, 1971

Date of letter of intent

Date of move

12-15-72



DWELLING UNIT FROM WHICH RELOCATED

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"/>

Age of Housing Unit 1904

Size of Habitable Area 1584 sq. ft.

Furnished with claimant's furniture  
☐ YES ☐ NO

Total Number of Rooms 6 Rent Paid \$                      Utilities                     

Number of Bedrooms 4 Monthly Housing Payments \$                      Taxes                     

Liens \$                      (please explain)                     

Acquisition Price \$ 8,500 Amenities                     

REPLACEMENT DWELLING UNIT

Address 4006 N. E. 68th 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 1954

Size of Habitable Area 1254

No. of Rooms 86 No. of Bedrooms 3

For Claimants Who Purchased

Purchase Price of Replacement Dwelling \$ 26,000

Taxes \$                     

RHP or TACO (including incidental costs) \$ 15,000

For Claimants Who Rented

Rent \$                     

Utilities \$                     

Total Rent Assistance \$                     

Amount of Annual Payment \$                     

No. of Housing Referrals to:

                     Standard Sales

                     Standard Rent

Agency Referrals:

                     MCW                      HAP                      OTHER (                      )

                     Food Stamp                      Legal Aid                      Other (                      )

Benefits Received

Date 11/8/71 Ck # 152 EH Type RHP Amount \$ 15,000

Date 12/14/71 Ck # 28166G Type M/C & D/A Amount \$ 500

Date                      Ck #                      Type                      Amount \$



# RESIDENTIAL RELOCATION RECORD

CLIENT'S NAME WALLIN, Jacob E. RELOCATION ADVISOR \_\_\_\_\_  
 ADDRESS 413 N. Stanton PHONE 282-3523 PROJECT NAME Emanuel ORE.-R-20  
 SEX M. ETHN white VETERAN \_\_\_\_\_ AGE 79 PARCEL NO. AB3-5  
 MARITAL STATUS married TENURE owner  
 DISABILITY \_\_\_\_\_ INDIV \_\_\_\_\_ FAMILY X  
 ELIGIBLE FOR: PUBLIC HOUSING \_\_\_\_\_ FHA 235 \_\_\_\_\_  
 RENT SUPPLEMENT \_\_\_\_\_ OTHER \_\_\_\_\_  
 INITIAL INTERVIEW 5-3-71 DATE INFO PAMPHLET DELIVERED \_\_\_\_\_  
 NOTICE TO MOVE \_\_\_\_\_ DATES EFFECTIVE \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_  
 NOTIFY IN CASE OF EMERGENCY \_\_\_\_\_

DATE ON SITE:	<u>1952</u>
INITIATION OF NEGOTIATIONS:	<u>June 25, 1971</u>
DATE OF ACQUISITION:	<u>December 6, 1971</u>

## ECONOMIC DATA

Employer \_\_\_\_\_ \$ \_\_\_\_\_  
 Address \_\_\_\_\_  
 MCW \_\_\_\_\_  
 Social Security \_\_\_\_\_ 239.00  
 Pension State of Oregon 40.00  
 Other \_\_\_\_\_  
 TOTAL MONTHLY INCOME \$ 279.00

## FAMILY COMPOSITION

Name	Relation	Age
Martha A.	wife	78

## 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 1904 No. Rooms 6  
 No. Bedrooms 4 Furn. \_\_\_\_\_ Unfurn \_\_\_\_\_  
 Utilities \$ \_\_\_\_\_  
 Monthly Payments (Rent) \$ \_\_\_\_\_  
 Acquisition Price \$ 8,500.00  
 Taxes \$ \_\_\_\_\_ Equity \$ \_\_\_\_\_  
 Liens \$ \_\_\_\_\_

Size of Habitable Area 1584 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 4006 N. E. 68th Phone \_\_\_\_\_ Date of Move \_\_\_\_\_

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 X Number of Rooms 3 Number of Bedrooms 3 Habitable Area \_\_\_\_\_

Utilities \$ \_\_\_\_\_ Monthly Payments (Rent) \$ \_\_\_\_\_ Purchase Price \$ 26,000.00

Age of Structure: \_\_\_\_\_ Taxes \$ \_\_\_\_\_ Equity \$ \_\_\_\_\_ Distance Moved Away \_\_\_\_\_

Name of Moving Company \_\_\_\_\_ Name of Realtor \_\_\_\_\_

BENEFITS RECEIVED

Type	Ck #	Date	Amount
RHP	152 EH	11/8/71	\$ 15,000.00
TACO (Rental)			\$
TACO (Rental)			\$
TACO (Rental)			\$
TACO (Rental)			\$
TACO (Sales)			\$
Fixed Moving	28166 G	12/14/71	\$ 500.00
Actual Move			\$
Storage			\$
Incidental			\$
Interest			\$

Purchase Price \$ 26,000.00

Down Payment \$ \_\_\_\_\_

RHP \$ 15,000.00

Total Down - \$ \_\_\_\_\_

Total Mortgage \$ \_\_\_\_\_

TOTAL BENEFITS RECEIVED \$ 15,500.00

REALTOR: \_\_\_\_\_ ESCROW CO. Pioneer National Title OFFICER \_\_\_\_\_

# INTERVIEW REGISTER

Date		Relocation Worker
1/14/71	FLYER: delivered by Ben Webb. Knew about office - no new info needed.	
1/20	<p>Mrs. Wallin came into the site office. Her husband has heart trouble. She doesn't want us to bother him with details. She will handle all matters herself. Wanted to know when we would be able to relocate them. She had heard they would have to be out in 90 days. She has tomatoes to set out and wants to be around when they are ready for harvest.</p> <p>Mrs. Wallin used to run the lunch room across from Emanuel and thus is very friendly with all hospital personnel, including board of directors president, etc. Mr. Wallin is retired from the legal department of the Highway Commission, it appears. They are very friendly, understanding people. She would like house in N. area, possibly off Fremont but wants to find house themselves. (I explained that we are only here to assist. . . they buy house and move self.)</p>	<p>JC</p> <p>SLC</p>
2/9	SURVEY: need two bedroom house ( because of husbands health) will buy south of Burnside - on busline.	
5/3	<p>Mrs. Wallin came to office to ask about status of project and about replacement housing payment. They went out and looked at houses over the weekend. They found one for \$24,000; prefer NE location and need 2 bedrooms and den. She wanted to know if an RHP would enable them to buy the above house without going into debt. Explained problem with new law and fact that we could not yet make payments. Indicated that under old law the payment would probably not be enough to buy the \$24,000 house, but that it might be a possibility under the new law. Emphasized that there is no way of knowing at this point.</p>	
6/3/7	Called Mrs. Wallin and tried to set up appointment. She said she was too nervous, will contact later.	
6/21	<p>Visited with Mrs. Wallin with H. H. to present real estate offer, but she was too nervous again today, she said, which affects her vision. She was prepared to talk with us in the morning but before she set a definite time she checked with her husband, who said he wanted a legal aid attorney present. Mrs. Wallin said she would contact legal aid but she was sure they were busy.</p>	
9/1/7	<p>Mrs. Wallin called to say she thought she was ready to look for a house again. She completely refused help from us. Offered to let Betty Burns drive them around, but she wants to be completely independent. She has difficulty in comprehending the situation.</p>	
1/6/72	<p>At Mrs. Wallins request, went to visit her at her new place. She just wanted to show me how nice her furniture looked in its new setting and let me know how satisfied they were.</p>	



December 16, 1971

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

ATTENTION: Jean Egberg  
Escrow Officer

Re: Escrow No. 388801  
WALLIN, Jacob E. and  
Martha A.

Gentlemen:

You have in the above-identified escrow account  
a \$15,000 Replacement Housing Payment in accordance with  
out instructions of November 24, 1971.

This is to certify that Mr. and Mrs. Wallin have  
acquired and moved into a standard structure located at  
4006 N. E. 68th Avenue. You are hereby authorized to  
release the replacement housing payment and disburse it  
in such manner as directed by Mr. and Mrs. Wallin.

Yours very truly,

John B. Kenward  
Executive Director

JBK:dl



MEMORANDUM

Date December 15, 1971

TO: Ben Webb  
FROM: Emanuel Site Office  
SUBJECT: Release of RHP from Escrow

Escrow Company Pioneer National Title Insurance Co.

Escrow No. \_\_\_\_\_

Parcel No. AB-3-5

Name WALLIN, Jacob E. and Marthe A.

Moving Date December 15, 1971

The above client has relocated and does occupy the property which they purchased at 4006 N.E. 68th, Portland. The City Bureau of Buildings reports that the structure complies with City Housing Regulations.

Please authorize the release of the Replacement Housing Payment in the amount of \$15,000.00.

\_\_\_\_\_  
Relocation Worker

**PORTLAND DEVELOPMENT COMMISSION**1700 S.W. FOURTH AVENUE  
PORTLAND, OREGON 97201

N? 28166

G

DATE December 14, 19 71PAY TO THE  
ORDER OF

Martha A. Mallin

\$ 500.00

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
		Reimbursement per Claim for Relocation Payment filed. Move from 413 N. Stanton (AB-3-5) to 4006 N.E. 68th Ave.	
		Dislocation Allowance	\$200.00
		Fixed Payment - Own furniture	<u>300.00</u>
			<u>\$500.00</u>

**Account Distribution**

NO.	TITLE	AMOUNT
E 1501	Relocation Payments (EH) (Fixed - Own furniture - Family)	\$500.00

SE

BD



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

NAME, ADDRESS AND ZIP CODE OF LOCAL AGENCY

Portland Development Commission  
1700 S. W. Fourth  
Portland, Oregon 97201

PROJECT NAME (if applicable)

Emanuel Hospital Project  
Project Number: ORE R-20

PENALTY FOR FALSE OR FRAUDULENT STATEMENT. U.S.C. Title 18, Sec. 1001, provides:  
"Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies . . . or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both."

1. FULL NAME OF CLAIMANT x Family      Individual

WALLIN, Jacob E. and Martha A.

2. DATE(S) OF MOVE

3. DWELLING UNIT FROM WHICH YOU MOVED PARCEL NO. AB-3-5

a. Address 413 N. Stanton, Portland, Oregon 97227

b. Apartment, Floor, or Room Number ---

c. Was it furnished with your own furniture?  
x Yes      No

d. Number of rooms occupied (excluding bathrooms, hallways, and closets: 8

e. Date you moved into this address: 1952

4. DWELLING UNIT TO WHICH YOU MOVED

a. Address (include ZIP Code) 4006 N.E. 68th, Portland, Oregon 97213

b. Apartment, Floor, or Room Number ---

c. Were household goods moved to or from storage?

     Yes x No

If "Yes", complete table,  
"Statement of Claim for Storage  
Costs"

5. TOTAL CLAIM (if 5 b. marked above)

Dislocation Allowance \$200.00

Fixed Moving Payment 300.00

(Consult local agency)

Total \$ 500.00

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

December 13, 1971

Date

Martha A. Wallin  
Signature of Claimant



RP 2

(For Local Agency Use Only)

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

NAME AND ADDRESS OF CLAIMANT:

Jacob E. and Martha A. Wallin  
4006 N. E. 68th  
Portland, Oregon 97213

NAME OF LOCAL AGENCY:

Portland Development Commission  
1700 S. W. Fourth  
Portland, Oregon 97201

INSTRUCTIONS: Attach this form to the pertinent claim form filed by claimant. Attach an explanation of any difference between amounts claimed and amounts approved.

1. Does claimant meet basic eligibility requirements? ☒ Yes ☐ No

If "No," explain:

2. Complete if claim is for a fixed payment including an amount for moving articles located in household storage space:

Date items inspected: \_\_\_\_\_  
Month-Day-Year

3. If claim is for a self-move, does approved amount exceed estimated cost of accomplishing the move through services of a commercial mover or contractor?

☐ Yes ☐ No

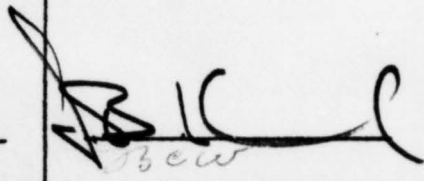
If "Yes," explain basis for approved amount:

4. CERTIFICATION

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

(For Local Agency Use Only)

(Complete either A or B:)

Item	Amount <u>1/</u>	Authorized Signature	Date
A. Fixed Payment and Dislocation Allowance	\$		
1. Fixed payment \$ <u>300.00</u>			
2. Dislocation allowance \$ <u>200.00</u>			
3. Total \$ <u>500.00</u>	<u>500.00</u>		<u>12-14-71</u>
B. Actual Moving and Related Expenses	\$		
1. Initial payment including, if applicable, storage and related costs in the amount of \$ _____	_____	_____	_____
2. Supplementary payment (s) for storage costs:	_____	_____	_____
3. Final payment for moving expenses covering storage and related costs	_____	_____	_____

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

5. RECORD OF PAYMENTS MADE

Date	Check Number	Amount	Date	Check Number	Amount
12/14/71	28166 G	\$ 500.00			\$

**PORTLAND DEVELOPMENT COMMISSION**1700 S.W. FOURTH AVENUE  
PORTLAND, OREGON 97201N<sup>o</sup> 152 EHDATE November 18, 19 71PAY TO **Pioneer National Title Insurance Company**

\$ 15,000.00

DOLLARS

TO THE TREASURER OF THE  
CITY OF PORTLAND, OREGONAUTHORIZED SIGNATURE  
**NON-NEGOTIABLE**

AUTHORIZED SIGNATURE

Portland Development Commission • 224-4800

DETACH BEFORE DEPOSITING CHECK

DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUNT
		Deposit in escrow for Jacob E. and Martha A. Wallin. Replacement Housing Payment for Tenants per claim filed. From 413 N. Stanton (Parcel AB-3-5). Lump Sum Payment	\$15,000.00

**Account Distribution**

NO.	TITLE	AMOUNT
E 1501	Relocation Payments (RHP)	\$15,000.00

*[Signature]**AL*



CLAIM FOR REPLACEMENT HOUSING PAYMENT FOR  
HOMEOWNERS

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: ORE R-20

INSTRUCTIONS: Complete all applicable items and sign certification in Block 4. Consult the displacing agency as to whether you need a Claimant's Report of Self-Inspection of Replacement Dwelling 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) 2. DATE OF DISPLACEMENT:

WALLIN, Jacob E. and Martha A.

☒ Family ☐ Individual

Parcel No. AB-3-5

3. INFORMATION IN SUPPORT OF CLAIM

A. Differential Payment

Part I. Data on dwelling unit from which you moved

1. Address of dwelling unit from which you moved 413 N. Stanton, Portland, Oregon 97227
2. Date you first occupied this dwelling as the owner 1952  
Month-Day-Year
3. Number of bedrooms in the dwelling 4
4. Date of initiation of negotiations for local agency acquisition of dwelling June 25, 1971
5. Payment made by local agency for the dwelling \$ 8,500.00

Part II. Data on dwelling unit to which you moved

6. Address of dwelling unit to which you moved (include ZIP Code)  
4006 N. E. 68th, Portland, Oregon 97213
7. Number of bedrooms in replacement dwelling 3
8. Purchase price of the replacement dwelling \$ 26,000.00

9. Complete either a. or b.:

a. If you have purchased and occupy the replacement dwelling:

Date you signed purchase agreement Oct 21, 1971 Date of Settlement                       
Month-Day-Year Month-Day-Year

b. If you have purchased but do not yet occupy the replacement dwelling:

Date you signed purchase contract                      Date of settlement                       
Month-Day-Year Month-Day-Year

Date you expect to occupy                       
Month-Day-Year

10. Check method you choose to determine the replacement housing cost that will be used as a basis for computing the amount of the differential payment

           Schedule       x       Comparative

B. Interest Payment

1. Outstanding balance of mortgage (if any) on dwelling from which you moved \$ -0-
2. Number of monthly payments remaining on the mortgage -0-
3. Annual interest rate of mortgage on the dwelling from which you moved                     %
4. Annual interest rate of mortgage on the replacement dwelling                     %
5. Prevailing annual interest rate paid on standard passbook savings accounts by savings banks in the community where the replacement dwelling is located                     %

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

NAME AND ADDRESS OF CLAIMANT:  
Jacob E. and Martha A. Wallin  
4006 N. E. 68th  
Portland, Oregon 97213

NAME OF LOCAL AGENCY:  
Portland Development Commission  
1700 S. W. Fourth Avenue  
Portland, Oregon 97201

INSTRUCTIONS: Complete this form to determine eligibility of claimant for Replacement Housing Payment for Homeowners. Attach the completed form to the pertinent claim form filed by claimant. Note that the determination of the amount of payment to cover costs incidental to purchase of a replacement dwelling is made on the applicable claim form. Attach an explanation of any entries which differ from claimant's entries on claim form.

1. Did the claimant own the dwelling at the time of acquisition? ☒ Yes ☐ No

Initial Date of Ownership: 1952 Date of Acquisition: \_\_\_\_\_  
Month-Day-Year Month-Day-Year

2. Did the claimant own and occupy the dwelling at least 180 days prior to the initiation of negotiations? ☒ Yes ☐ No

Initial Date of Ownership: 1952 Date of Initiation of  
Negotiations: June 25, 1971

3. Did the claimant purchase and occupy the replacement housing within one year from the date of displacement? ☒ Yes ☐ No

Date of Displacement: \_\_\_\_\_ Date of Purchase of Replacement  
Housing: \_\_\_\_\_

Date of Occupancy of Replacement Housing: \_\_\_\_\_  
(If the claimant was unable to occupy the replacement housing within the required one-year period, use reverse side of this form to provide explanation.)

4. Did the claimant have a bona fide mortgage on his dwelling for at least 180 days prior to initiation of negotiations? ☐ Yes ☒ No

Issuance Date of Mortgage: \_\_\_\_\_ Date of Discharge of  
Mortgage: \_\_\_\_\_  
Date of Initiation of Negotiations: \_\_\_\_\_

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.) ☒ Yes ☐ No

6. CERTIFICATION OF LOCAL 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. 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 in the amount of \$ 15,000 is authorized.

11-17-71

Date

[Signature]  
Authorized Signature

7. RECORD OF PAYMENT

Date of Payment: Nov 18, 1971 Check No. 15244 Amount: \$ 15,000.00



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

NAME AND ADDRESS OF CLAIMANT  
Jacob E. and Martha A. Wallin  
4006 N. E. 68th  
Portland, Oregon 97213

COMPUTATION PREPARED BY:

WSJ

11/11/71

Name

Date

INSTRUCTIONS: Attach this form to the pertinent claim form filed by claimant. Attach an explanation of any difference between amounts claimed and amounts approved. Complete Blocks B and C; then complete Block A.

A. COMPUTATION OF TOTAL REPLACEMENT HOUSING PAYMENT FOR HOMEOWNERS

1. Amount of differential payment (Block B, Line 6) \$ 15,000.00
2. Plus interest payment (Block C, Step 4, Last line) + \$ -0-
3. Plus costs incidental to purchase (Total amount approved by agency, from claim form, Block 3C, Column (e)) + \$ -0-
4. Total (Sum of Lines 1, 2, and 3) \$ 15,000.00
5. Minus adjustments (Attach explanation; e.g., amount previously received as Replacement Housing Payment for Tenants and Certain Others) - \$ -0-
6. Total Replacement Housing Payment for Homeowner (Line 4 minus Line 5) \$ 15,000.00

(Enter this amount in the space provided in Block 6 on the Guideform Determination of Eligibility for Replacement Housing Payment for Homeowners)

B. COMPUTATION OF DIFFERENTIAL PAYMENT

Required Information

1. Actual purchase price of replacement dwelling \$ 26,000.00
2. Cost of comparable replacement dwelling  
(Cost based on:  
       Schedule   x   Comparative        Other) \$ 23,500.00
3. Acquisition payment made by agency for claimant's former dwelling \$ 8,500.00

Computation

4. Line 1 or Line 2, whichever is less \$ 23,500.00
5. Minus Line 3 - \$ 8,500.00
6. Amount of differential payment \$ 15,000.00

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

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

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

I submit this information in support of a claim for a Replacement Housing Payment under Section 203 of P.L. 91-646, as amended, and I certify under the penalties and provisions of U.S.C. Title 18, Sec. 1001, and any other applicable law, that the information submitted herewith has been examined by me and is true, correct, and complete, and that I understand that, apart from the penalties and provisions of U.S.C. Title 18, Sec. 1001, and any other applicable law, falsification of any item submitted herewith may result in forfeiture of the entire claim.

11/16/71  
Date

Jacob E. Hallin  
Martha R. Wallin X  
Signature of Owner-Occupant (s)





FORM No. 671E (Escrow)  
Stevens-Ness Law Publishing Co.  
Portland, Oregon 97204

# EARNEST MONEY RECEIPT

City PORTLAND State OREGON OCT 21, 1971

RECEIVED FROM JACOB E. WALLIN & MARTHA A. WALLIN (hereinafter called "purchaser")

the sum of ONE THOUSAND AND NO/100 Dollars (\$ 1000.00)

in the form of NOTE as earnest money and in part payment for the purchase of the following described real estate situated in the City of MULTNOMAH State of OREGON to-wit:

LOTS 9 & 10 BLOCK 21 WELLINGTON ADDN ALSO KNOWN AS 4006 NE 68TH AVE.

for the sum of TWENTY-SIX THOUSAND AND NO/100 Dollars (\$ 26000.00)

on the following terms, to-wit: The sum, hereinabove receipted for, of ONE THOUSAND AND NO/100 Dollars (\$ 1000.00);

• {On acceptance, 1971, as additional earnest money, the sum of \_\_\_\_\_ Dollars (\$ \_\_\_\_\_);

Upon acceptance of title and delivery of \_\_\_\_\_ deed, the sum of \_\_\_\_\_ Dollars (\$ \_\_\_\_\_);

Balance of TWENTY-FIVE THOUSAND AND NO/100 Dollars (\$ 25000.00)

payable as follows: CASH OUT SELLER AT TIME OF CLOSING - THIS AGREEMENT IS SUBJECT TO PAYMENT OF BENEFITS UNDER THE UNIFORM

RELOCATION & REAL PROPERTY ACQUISITION POLICIES ACT OF 1970 IN THE

AMOUNT OF \$ \_\_\_\_\_ - THIS IS A 2ND

FIRST RIGHT OF REFUSAL AN EXPIRES OCT 31, 1971

PURCHASER AGREES TO REIMBURSE SELLER FOR FUEL OIL

A title insurance policy from a reliable company insuring marketable title in seller is to be furnished purchaser in due course at seller's expense; preliminary to closing, seller may furnish a title insurance company's title report showing its willingness to issue title insurance, which shall be conclusive evidence as to seller's record title; or in lieu of said title insurance policy, seller may furnish purchaser an abstract of title prepared by a reliable abstract company.

It is agreed that if seller does not approve this sale within the period allowed broker below in which to secure seller's acceptance, or if the title to the said premises is not insurable or marketable, or cannot be made so within thirty days after notice containing a written statement of defects is delivered to seller, the said earnest money shall be refunded. But if said sale is approved by seller and title to the said premises is insurable or marketable and purchaser neglects or refuses to comply with any of said conditions within ten days after the said evidence of title is furnished and to make payments promptly, as hereinabove set forth, then the earnest money herein receipted for (including said additional earnest money) shall be forfeited to seller as liquidated damages and this contract thereupon shall be of no further binding effect.

The property is to be conveyed by good and sufficient deed free and clear of all liens and encumbrances except zoning ordinances, building and use restrictions, reservations in Federal patents, easements of record and, NONE

All irrigation, plumbing and heating fixtures and equipment (including stoker and oil tanks but excluding fire place fixtures and equipment), water heaters, electric light fixtures, light bulbs and fluorescent lamps, bathroom fixtures, venetian blinds, drapery and curtain rods, window and door screens, storm doors and windows, attached linoleum, attached television antenna, all shrubs and trees and all fixtures except SWAG LIGHTS IN LIVING ROOM & DEN - DESK

IN HALLOWAY

are to be left upon the premises as part of the property purchased. The following personal property is also included as a part of the property for said purchase price: DRAPES, CARPETS, RANGE, DISHWASHER, REFRIGERATOR, DISPOSAL & AIR-COND

Seller and purchaser agree to pro rate the taxes which are due and payable for the current tax year. Rents, interest, premiums for existing insurance and other matters shall be pro rated on a calendar year basis. Adjustments are to be made as of the date of the consummation of said sale or delivery of possession, whichever first occurs. Encumbrances to be discharged by seller may be paid at his option out of purchase money at date of closing. SELLER AND PURCHASER AGREE THAT SUBJECT SALE WILL BE CLOSED IN ESCROW, THE COST OF WHICH SHALL BE BORNE CO-EQUALLY BETWEEN SELLER AND PURCHASER.

Possession of said premises is to be delivered to purchaser on or before DEC 1, 1971 BUT NOT BEFORE CLOSING, or as soon thereafter as existing laws and regulations will permit removal of tenants, if any. Time is the essence of this contract. This contract is binding upon the heirs, executors, administrators, successors and assigns of buyer and seller. However, the purchaser's rights herein are not assignable without written consent of seller. In any suit or action brought on this contract, the prevailing party shall be entitled to recover reasonable attorney's fees to be fixed by the court.

Address 13809 NE FAIRING RUBEN J. MENASHE, INC. Broker

Phone 255-9680 By [Signature]

## AGREEMENT TO PURCHASE

I hereby agree to purchase the property herein described in its present condition and to pay the price of 26000.00 as set forth above and grant to said agent a period of 3 days hereafter to secure seller's acceptance hereof, during which period my offer shall not be subject to revocation. Said deed or contract to be in name of JACOB E. WALLIN & MARTHA A. WALLIN

Address 413 N STANTON Purchaser Jacob E. Wallin (SEA)

Phone 282-3523 Martha A. Wallin (SEA)

## AGREEMENT TO SELL

I hereby approve and accept the sale of above described property and the price and conditions as set forth in above contract, and agree to furnish evidence of title as above provided; also the said deed when stated.

Address 4006 NE 68TH Seller Shallan M. White (SEA)

Phone 281-8845 Ellen S. White (SEA)

DELIVER PROMPTLY TO PURCHASER, either manually or by registered mail, a copy hereof showing seller's acceptance.

Purchaser acknowledges receipt of the foregoing instrument bearing his signature and that of the seller showing acceptance.

DATE: \_\_\_\_\_ Purchaser Jacob E. Wallin

Copy hereof showing Seller's signed acceptance sent purchaser by registered mail to purchaser's above address

(return receipt requested) on \_\_\_\_\_ 19 \_\_\_\_\_

Return receipt card received and attached to broker's copy \_\_\_\_\_ 19 \_\_\_\_\_

## SELLER'S CLOSING INSTRUCTIONS

I agree to pay forthwith to the above named broker a commission amounting to \$1820.00 for services rendered in this transaction. In the event of a forfeiture of the deposit as above provided, the said deposit shall be paid to or retained by the broker to the extent of the agreed upon commission with residue to the seller. I authorize said broker to pay out of the cash proceeds of sale the expense of furnishing evidence of title, of recording fees and revenue stamps, if any, as well as any encumbrances on said premises payable by me at or before closing. I acknowledge receipt of a copy of this earnest money receipt bearing my signature(s) and that of the purchaser named above.

Seller Shallan M. White (SEA)

Ellen S. White (SEA)

NOTE: IF ANY BLANK SPACES ARE INSUFFICIENT, USE S-N No. 810 "HANDY PAD", TO BE SEPARATELY SIGNED BY BUYER AND SELLER.

EIGHTEEN THOUSAND FIVE HUNDRED AND NO/100 DOLLARS (\$18,500.00)



MEMORANDUM

Date November 4, 1971

TO: The File  
FROM: Benjamin C. Webb  
SUBJECT: Comparable Replacement Housing - Wallin

There are some problems here. Mr. and Mrs. Wallin are both nearly 80 years old. They have lived in the North Portland area for many years and want to continue living in this section of Portland. Mr. Wallin has a heart problem and must therefore live in a property that is on level ground and has a bedroom on the ground floor and near transportation and shopping. We have both searched multiple listings and actually cruised the area and talked with some of the area real estate people.

The area itself is quite stable. Houses are seldom up for sale. We have, therefore, not been able to locate an area property that is truly comparable to the acquired dwelling. We have selected three properties that seem to us to be the most representative of the acquired dwelling, as required under the provisions of Circular 1371.1, Chapter 6, Section 3, Paragraph 34 b. (2).

BCW:ch

ADJUSTMENTS FIREPLACE \$1200

EXTRA SQ. FT.

1300 \$2500

ADJUSTED SALES PRICE  
ASKING PRICE  
ADJUSTMENTS

26,000  
2500 \$23,500

BCW

11/4/71

☒ Housing Additive    ☐ Rent Supp.    ☐ Down Payment    ☐ Economic Rent

Relocatee WALLIN, Jacob E. Address 413 N. Stanton

ITEM	SUBJECT			COMPARABLE #1			COMPARABLE #2			COMPARABLE #3		
Multiple Listing #	XXX			7596-71								
Sale or Rent Price	OFFER \$8,500			Sale Price \$26,000			Asking \$24,500			ASKING \$26,000		
Address	413 N. Stanton			4014 N. E. 65th			4242 N. E. Mason			4006 N. E. 68th		
No. of Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms
	4	1 1/2	8	4	2	9	3	1 2/3		3	1 2/3	6
Type	2-Story Frame			1 1/2 Story			Ranch			Ranch		
State of Repair	Int.	Ext.		Good	Good		Good	Good		Good		
Type of Neighborhood				Residential			Residential			Residential		
Street Improvements	Sidewalks Curbs			Sidewalks Curbs			Sidewalks Curbs			Sidewalks Curbs		
Availability of Public Services	Close to bus and hospital						Within walking distance			Good		
Lot Size	2266 sq. ft.			50' X 100'			55' X 104.61'			52 X 100		
Year Built	1904			1951			1954			1953		
Fireplace	No			2			1			2		
Heating System	Oil			Oil			Oil			OFA		
Basement	Full			Full			Full			FCB		
Garage	Single			Single			Single			Double		
Habitable Area	1584 sq. ft.			1896 sq. ft.			1200 sq. ft.			1284 sq. ft.		
Total Area	2376 sq. ft.			3160 sq. ft.			2400 sq. ft.			2568 sq. ft.		
Furnished or Unfurnished	Unf.			Unf.			Unf.			Unf.		
Extraordinary Amenities	Housekeeping room w/sink in 1 B/R						Patio			2 finished rooms in basement plus utility room		

Comparable # \_\_\_\_\_ is considered most like subject because:

The adjusted price is \$ \_\_\_\_\_. Explain \_\_\_\_\_

CONNIE McCREADY  
COMMISSIONER  
DEPARTMENT OF PUBLIC UTILITIES



CITY OF PORTLAND  
OREGON

97204

November 15, 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. Chegwiddden, Chief

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

Re: 4006 N. E. 68 Avenue

Attn: Mr. Jim Crolley

Dear Sirs:

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

Our inspector reports the structures comply with City Housing Regulations at this time.

Yours truly,

C. N. CHRISTIANSEN  
BUILDING INSPECTIONS DIRECTOR

S. J. Chegwiddden  
Chief Housing Inspector

JHM:ms

cc: Mr. Hal White, Jr.  
4006 N. E. 68 Ave.  
Mr. H. Leo Flynn  
12048 N. E. Fargo Ct.



FILE

MEMORANDUM

Date October 13, 1971

TO: Ben Webb  
FROM: Norm Beukelman  
SUBJECT: Replacement Dwelling for Wallens

The subject property at 4006 N.E. 68th was inspected on October 12, 1971,

It is a three-bedroom, one-story house, with a full basement and double garage.

Interior finish is good. Exterior paint is good.

Some of the curbs or dry wells around basement windows are broken and falling away from the house. Also, the basement window sills have dry rot and need attention.

An estimate of value would be \$24,500.

NB:ch

ORIGINAL TO ENHANCED  
ON 9/12/71

November 4, 1971

The File

Benjamin C. Webb

Comparable Replacement Housing - Wallin

There are some problems here. Mr. and Mrs. Wallin are both nearly 80 years old. They have lived in the North Portland area for many years and want to continue living in this section of Portland. Mr. Wallin has a heart problem and must therefore live in a property that is on level ground and has a bedroom on the ground floor and near transportation and shopping. We have both searched multiple listings and actually cruised the area and talked with some of the area real estate people.

The area itself is quite stable. Houses are seldom up for sale. We have, therefore, not been able to locate an area property that is truly comparable to the acquired dwelling. We have selected three properties that seem to us to be the most representative of the acquired dwelling, as required under the provisions of Circular 1371.1, Chapter 6, Section 3, Paragraph 34 b. (2).

BCW:ch

ADJUSTMENTS: FIRE PLACE \$1200

EXTRA 59 FT. 1300 \$2500

ADJUSTED SALES PRICE

ASKING PRICE \$26,000

ADJUSTMENTS

2500

\$23,500



# RESIDENTIAL RELOCATION RECORD

RELOCATION WORKER \_\_\_\_\_ PROJECT NO. Ore. R-20 PARCEL AB 3-5

NAME WALLIN, Jacob E. ADDRESS 413 N. Stanton APT NO. \_\_\_\_\_

PHONE 282-3523 INITIAL INTERVIEW 1/20/71 SEX M W X NW AGE 79

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

## FAMILY COMPOSITION

Name	Relation	Age
Martha A	Wife	78

HANDLE EVERYTHING THRU WIFE

Employer: Name \_\_\_\_\_ \$ \_\_\_\_\_  
 Address \_\_\_\_\_  
 MCW Caseworker \_\_\_\_\_  
 Social Security \_\_\_\_\_ 239.00  
 VA. \_\_\_\_\_ Fed. \_\_\_\_\_ Mult Co. \_\_\_\_\_  
 Pension: Name State of Oregon 40.00  
 Other: Name \_\_\_\_\_  
 TOTAL MONTHLY INCOME 279.00

Rent \_\_\_\_\_, Inc. Heat \_\_\_\_\_ Water \_\_\_\_\_ Gas \_\_\_\_\_ Gar \_\_\_\_\_ Elec \_\_\_\_\_ Unfurn \_\_\_\_\_ Furn \_\_\_\_\_ No. Rms 6

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 hsg. 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 \_\_\_\_\_



DATE	NOTES	C/W
1/14/71	Flyer delivered by Ben Webb. Knew about office - no new info needed.	
1/20/71	<p>Mrs. Wallin came into the site office. Her husband has heart trouble. She does not want us to bother him with details. She will handle all matters herself. Wanted to know when we would be able to relocate them. She had heard they would have to be out in 90 days. She has tomatoes to set out and wants to be around when they are ready for harvest</p> <p>Mrs. Wallin used to run the lunch room across from Emanuel and thus is very friendly with all hospital personnel, including board of directors, pres., etc. Mr. Wallin is retired from the legal department of the highway commission it appears. They are very friendly, understanding people. She would like house in N. area, possibly off Fremont, but want to find house themselves. (I explained that we are only here to assist..they buy own house and move self.)</p>	JC
2/9/71	Survey: Need 2 bedroom house (because of husband's health) will buy south of Burnside - on busline.	SLC
5/3/71	<p>Mrs. Wallin came to office to ask about status of project and about replacement housing payment. They went out and looked at houses over the weekend. They found one for \$24,000; prefer NE location and need 2 bedrooms and den. She wanted to know if an RHP would enable them to buy the above house without going into debt. Explained problem with new law and fact that we could not yet make payments. Indicated that under old law the payment would probably not be enough to enable them to buy the \$24,000 house, but that it might be a possibility under the new law. Emphasized that there is no way of knowing at this point.</p>	WSJ
6/3/71	Called Mrs. Wallin and tried to set up appt. She said she was too nervous now, will contact later.	SLC
6/21/71	<p>Visited Mrs. Wallin with H.H. to present real estate offer, but she was too nervous again today she said, which affects her vision. She was prepared to talk with us in the morning but before she set definite time she checked with her husband, who said he wanted a legal aid attorney present. Mrs. Wallin said she would contact legal aid but she was sure they were busy.</p>	WSJ
9/1/71	<p>Mrs. Wallin called to say she thought she was ready to look for a house again. She completely refused a help from us. Offered to let Betty Burns drive them around, but she wants to be completely independent. She has difficulty in <del>the</del> comprehending the situation.</p>	CSJ

DATE

NOTES

C/W

1/6/72

At Mrs. Wallins request went to visit her at her new home. She just wanted to show me how nice her furniture looked in its new setting & let me know how satisfied they were

Weg

## Wallin's House

### Upstairs

- ① One Room NE Corner - presently used as a den, average size bedrm, has closet

Formerly a housekeeping room - still has sink, in operating condition, capped gas connection for range

- ② One Bedrm. - Middle, same size as above room, double bed dresser, closet, etc

One Bath Room - Full

Open Foyer at top, contains ~~2~~ closet has desk, large open area

- ③ One Bedrm. - SE Corner, single bed closet, Dresser w/ mirror, table, chair

- ④ One Bedrm. - SW Corner, closet double Bed, Dresser, Chest chairs, table



Formal Entry Way (with bookcase)

⑤ Formal Sitting Room - Has been used as bedroom in the past - ~~used~~ rented in past as such - Doors are in Basement  
Also ~~closet~~ Portable Closet is in Basement

⑥ Living Rm -  
⑦ Dining Area in corner of Living Room

⑧ Kitchen

Butlers Pantry (has sink)

Enclosed storage Area - Room off Kitchen in Back, Contains, toilet.

Full Basement - No Separate Room  
Unfinished

---

Sitting Room Contains

2 Chairs

Rocker

Piano

Occ. Table

Chest of Drawers

2 night stand type Tables

Single Cot - husband

uses for resting during

day  
Hussock

About 8 rooms  
try Comparable

Highway Dept.

## Residential Additive Determination

<u>Item</u>	<u>Subject</u>
Address	413 N. Stanton
no. of Rooms	<div>BR 4 Bath 1 Total 08</div> Lv Rm, Dining, Kit. Pantry, Den. Full Basement -
Type	2 Story Frame
State of	Int. Good
Repair	Ext. Good
Type of Neighborhood	Blighted
Street Improvements	Sidewalk Curb
Availability of Public Services	Close to Bus line - Close to Hospital
Lot Size	2266 sq. ft. ♦
Year Built	1904 *
Fire place	No ✓
Heating System	oil -
Basement	Full
Garage	Yes, Single
Habitable Area	1584
Total Area	2376
Furnished or Unfurnished	Unf.
Extraordinary Amenities	Housekeeping Rm



☒ Housing Additive☐ Rent Supp.☐ Down Payment☐ Economic RentRelocatee WALLINS, JACOBAddress 413 N.E. STANTON

ITEM	SUBJECT			COMPARABLE #1			COMPARABLE #2			COMPARABLE #3		
Multiple Listing #	XXX			7596-71						<del>NEW REAR</del> <del>480-7226</del>		
Sale or Rent Price				Sale Price \$26,000			Asking 24,500			<del>24,000</del> <del>24,000</del>		
Address	413 N.E. STANTON			4014 NE 65th			4142 NE Mason			<del>4006 N.E. 65th</del> <del>4014 NE Thompson</del>		
No. of Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms
	4	1 1/2	8	4	2	9	3	1 2/3		3	1 2/3	6
Type	2 Story Frame			1 1/2 Story			RANCH			RANCH		
State of Repair	Int.	Ext.		Int.	Ext.		Int.	Ext.		Int.	Ext.	
	Good	Good		Good	Good		Good	Good		Good	Good	
Type of Neighborhood	—			Residential			Residential			RESIDENTIAL		
Street Improvements	Sidewalk Curb			Sidewalk Curb			CURBS + SIDEWALK			CURBS + SIDEWALK		
Availability of Public Services	Close to Bus & Hospital						WITHIN WALKING DISTANCE			GOOD		
Lot Size	2264 ft			50' x 100'			55' x 104.61'			52 x 100		
Year Built	1904			1951			1954			1953		
Fireplace	No			2			1			2		
Heating System	Oil			Oil			Oil			OFA		
Basement	Full			Full			Full			FEB		
Garage	Single			Single			Single			DOUBLE		
Habitable Area	1584			1200 1896			1200 ft			1284		
Total Area	2376			1200 3160			2400 ft			2568		
Furnished or Unfurnished	UNF			UNF			UNF			UNF		
Extraordinary Amenities	Housekeeping Room w/sink in one Bedroom						Patio			2 FINISHED ROOMS IN BMT PLUS UTILITY ROOM		

Comparable # \_\_\_\_\_ is considered most like subject because:

The adjusted price is \$ \_\_\_\_\_. Explain \_\_\_\_\_

By \_\_\_\_\_

Date \_\_\_\_\_



# RESIDENTIAL ADDITIVE DETERMINATION

File No. \_\_\_\_\_

☐ Sale

☐ Rental

Owner WALLINS,

Address \_\_\_\_\_

☐ Occupant

Tenant \_\_\_\_\_

Address \_\_\_\_\_

☐ Occupant

ITEM	SUBJECT	OFFERING #1	OFFERING #2	OFFERING #3
Address		4006 N.E. 68		
		\$26,000		
No. of Rooms	BR Bath Total Rooms	BR Bath Total Rooms	BR Bath Total Rooms	BR Bath Total Rooms
		3 1 2/3 6		
Type		RANCH		
State of Int. Repair Ext.		GOOD		
Type of Neighborhood		RESIDENTIAL		
Street Improvements		CURBS & SIDEWALKS		
Availability of Public Services		GOOD		
Lot Size		52 X 100		
Year Built		1953		
Fireplace		2		
Heating System		OIL - <sup>AIR</sup> FORCED		
Basement		FCB		
Garage		DOUBLE		
Habitable Area		1254		
Total Area		2568		
Furnished or Unfurnished		UNF		
Extraordinary Amenities		2 FINISHED ROOMS		
		IN BSMT PLUS		
		UTILITY ROOM		

~~BSMT~~ (Continue on Part 2)

~~2 FINISHED~~

~~UTILITY ROOM~~

~~NO 2 STORY STRUCTURES IN AREA~~

☐ Housing Additive☐ Rent Supp.☐ Down Payment☐ Economic Rent

Relocatee

Address

TRI - 665-7171

4329 NE 70<sup>th</sup>

TRI STATE - KENDALL

ITEM	SUBJECT			COMPARABLE #1			COMPARABLE #2			COMPARABLE #3		
Multiple Listing #	XXX			X			X			X		
Sale or Rent Price	X			X			X			X		
Address	X			X			X			X		
No. of Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms
	3	3										
Type	Ranch											
State of Repair	Int.	Ext.		as built								
Type of Neighborhood	comparable											
Street Improvements	in + good											
Availability of Public Services	good											
Lot Size	50X100											
Year Built	1956											
Fireplace	2 ✓			basement party room w/ F.P.								
Heating System	oil F.A.											
Basement	100%											
Garage	2 car											
Habitable Area	1300 <sup>+</sup>											
Total Area	2600 <sup>+</sup>											
Furnished or Unfurnished	unfurn											
Extraordinary Amenities												

Comparable # \_\_\_\_\_ is considered most like subject because:

The adjusted price is \$ \_\_\_\_\_ Explain \_\_\_\_\_

✓ air conditioned - barbecue - elec doors opener

By \_\_\_\_\_

Date \_\_\_\_\_

TO: STANTONE  
RELOCATION

RE: WALLINS  
10-28-71

Cruised area where above subject prefers to move, some homes for sale but very few. The majority were small 2 bedroom plus attic and there ~~was~~ were only three or four of them. The area covered was from NE 60<sup>th</sup> to NE 70<sup>th</sup> between Prescott and Fremont.

This is a mixed area of well maintained homes with few exceptions. The better homes are quite expensive and very nice, one might say the more expensive homes are overbuilt for the area, however they appear compatible to the area.

We may have missed a house or two but this is doubtful.

Regards  
Dick



NEW'S RLT4  
282-7226

☐ Housing Additive

☐ Rent Supp.

☒ Down Payment

☐ Economic Rent

Relocatee

Wallens

Address

413 N. Stanton

ITEM	SUBJECT			COMPARABLE #1			COMPARABLE #2			COMPARABLE #3		
Multiple Listing #	XXX			X			X			X		
Sale or Rent Price												
Address	6011 NE THOMPSON - 24000											
No. of Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms
				3	1 1/2							
Type												
State of Repair	Int. Ext.			Good								
Type of Neighborhood				Good								
Street Improvements				LN								
Availability of Public Services				Neat								
Lot Size				65x100								
Year Built												
Fireplace				yes								
Heating System				F.H.O.								
Basement				2/3								
Garage				2 car								
Habitable Area				1230								
Total Area				2000 inc. porch								
Furnished or Unfurnished				UNF								
Extraordinary Amenities				sprinkling syst								

Comparable # \_\_\_\_\_ is considered most like subject because:

The adjusted price is \$ 24000 . Explain \_\_\_\_\_

☐ Housing Additive

☐ Rent Supp.

☐ Down Payment

☒ Economic Rent

Relocatee \_\_\_\_\_

Address \_\_\_\_\_

ITEM	SUBJECT			COMPARABLE #1			COMPARABLE #2			COMPARABLE #3		
Multiple Listing #	XXX			X			X			X		
Sale or Rent Price	X			X			X			X		
Address	4242 NE Mason 24500											
No. of Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms
Type	Ranch											
State of Repair	Int.	Ext.		Immaculate								
Type of Neighborhood	Res & good											
Street Improvements	in											
Availability of Public Services	walking distance											
Lot Size	55 x 104.61											
Year Built	1954											
Fireplace	YHS											
Heating System	F.A.O.											
Basement	full											
Garage	single											
Habitable Area	1200 <sup>#</sup>											
Total Area	2400 <sup>#</sup>											
Furnished or Unfurnished	unf.											
Extraordinary Amenities	1 1/3 bath 3br up one in base & large patio											

Comparable # \_\_\_\_\_ is considered most like subject because:

The adjusted price is \$ \_\_\_\_\_. Explain \_\_\_\_\_

SEND TO EMANUEL

MEMORANDUM

Date October 13, 1971

TO: Ben Webb  
FROM: Norm Beukelman  
SUBJECT: Replacement Dwelling for Wallens

The subject property at 4006 N.E. 68th was inspected on October 12, 1971.

It is a three-bedroom, one-story house, with a full basement and double garage.

Interior finish is good. Exterior paint is good.

Some of the curbs or dry wells around basement windows are broken and falling away from the house. Also, the basement window sills have dry rot and need attention.

An estimate of value would be \$24,500.

NB:ch



REPLACEMENT HOUSING PAYMENT COMPUTATION

Parcel File No. \_\_\_\_\_

OFFERINGS:

Asking Price

Adjusted Selling Price

Average of Adjusted  
Selling Prices

Asking Monthly Rental

Adjusted Monthly Rental

Average Adjusted Rental  
Prices

#1	#2	#3
\$ _____		
\$ _____ ( x 24 = \$ _____ )		

NAME \_\_\_\_\_

SUBJECT: (\*Use whichever is the lesser)

Market Value \$ \_\_\_\_\_ \*Economic Rent \$ \_\_\_\_\_ \*Contract Rent \$ \_\_\_\_\_  
M. V. x 0.12 = \$ \_\_\_\_\_ E. R. x 24 = \$ \_\_\_\_\_ C. R. x 24 = \$ \_\_\_\_\_

Explain: (1) Adjustment of listed prices to selling price, (2) Use of non-comparable listings, (3) reasons for additive (4) Unusual details.

STATEMENT OF ADDITIVE ELIGIBILITY FOR REPLACEMENT HOUSING PAYMENT

(Occupant) has ☐ owned and occupied ☐ rented the dwelling at \_\_\_\_\_ (Address) since \_\_\_\_\_ (Date) and is, therefore, qualified effective \_\_\_\_\_ (Date) to receive the following:

☐ Replacement housing in the amount of \$ \_\_\_\_\_

☐ Rent supplement in the amount of \$ \_\_\_\_\_

To qualify, it is necessary for recipients to occupy decent, safe, and sanitary dwellings within 12 months. Owner occupants over 12 months may rent and receive the rent supplement, but must own and occupy within 12 months to qualify for replacement housing payment. The above is my determination of the amount of the ~~additive~~ <sup>REPLACEMENT HOUSING</sup> payment. I understand that the ~~additive~~ <sup>REPLACEMENT HOUSING</sup> payment may be used in connection with a ~~federal aid highway~~ <sup>REPLACEMENT HOUSING</sup> project. I have no direct or indirect present or contemplated personal interest in this transaction, nor will I derive any benefit from the supplemental payment.

Right of Way Agent  
RELOCATION REPRESENTATIVE

Date \_\_\_\_\_

Reviewed By

Date \_\_\_\_\_

MEMORANDUM

September 8, 1971

TO: SHB  
FROM: WSJ  
SUBJECT: Relocation Report - Priority Block AB-3

AB 3-2 Myra L. Frary

Mr. John Heydon, grandson of client, has been cooperative and has found a replacement house in Case Bay for his grandmother. He has accepted the RHP based on average price for a 3 bedroom house as a satisfactory settlement. He has indicated that he is ready and anxious to proceed in behalf of his grandmother. The holdup seems to be problem with acquisition of real estate involving clearing title.

AB 3-5 Joseph E. Mallin

Spoke with Mrs. Mallin again on 9/1/71. She still refuses to accept or consider any help or assistance from relocation. She insists on being independent in their search for a replacement house. She maintains that she can look on her own, but at age 79 neither she nor her husband function that well - mentally or physically.

AB 3-1 Gordon Glover

Relocation, Social Council and Legal Council met with the Glover's on 8/25/71. Mr. Glover wanted a third appraisal. An appointment was set up on 8/25/71 by relocation for the purpose of locating satisfactory replacement housing. Mr. Glover canceled this appointment. A further meeting has been requested by Mr. Glover for Monday, September 13th. It is our understanding that he has now found a house, but price may be too high to be covered by RHP.

AB 3-8 Samuel Stokes

Mr. Stokes has been the most resistant of this group to the idea of relocation. We have been unable to make any progress with this family.



# 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 WSG Date of survey 2/9/71 Tabulator \_\_\_\_\_ Date tabulated \_\_\_\_\_  
 Dwelling Unit No. 4 Structure No. 3 Census Block No. 46 Census Tract No. 22A  
 Street Address 413 N Stanton 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 \_\_\_\_\_

*(Talk to wife only - friendly - knows Paul Hansen very well)*

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

Name	Family relation	Age	Sex	Occupation
1. <u>Walker, Jacob E.</u>	<u>Head of household</u>	<u>79</u>	<u>M</u>	
2. <u>" Martha A</u>	<u>wife</u>	<u>78</u>	<u>F</u>	
3.				
4.				
5.				
6.				
7.				
8.				
9.				

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

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>Jacob</u>	<u>\$ 239.00</u>	<u>\$ 239.00</u>
<u>State Retire.</u>		<u>40.00</u>	<u>40.00</u>
<b>Total family or household income per month</b>		<b>\$ <u>279.00</u></b>	<b>\$ <u>279.00</u></b>

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

1. Location (indicate approximate cross streets) South of Burnside SE
2. Transportation, number of autos owned 1, use bus ☒, walk Bustime
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 \$ comparable, 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 ☒, dining room ☒, + Den 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 W32 Date 2/9/71 Surveyed 2/9/71 Tabulator \_\_\_\_\_ Date \_\_\_\_\_  
 Dwelling Unit No. 4 Structure No. 3 Census Block No. 46 Census Tract No. 22A  
 Street Address 413 N Stanton Apartment No. \_\_\_\_\_  
 Legal Description \_\_\_\_\_

NAME OF OCCUPANT: Jacob E. Wallin NAME & ADDRESS OF OWNER: Jacob E. Wallin NAME & ADDRESS OF PROP. MGR: \_\_\_\_\_  
413 N Stanton 413 N Stanton \_\_\_\_\_  
 TELEPHONE: 282-3523 TELEPHONE: 282-3523 TELEPHONE: \_\_\_\_\_  
 INTERVIEWED? ( ) Yes ( ) No INTERVIEWED? ( ) Yes ( ) No INTERVIEWED? ( ) Yes ( ) No

**I. DESCRIPTION OF STRUCTURE**

Kind of dwelling unit No. of units in bldg.  
☒ One-family house \_\_\_\_\_  
 \_\_\_\_\_ Apt. in a house \_\_\_\_\_  
 \_\_\_\_\_ Apt. in apt. bldg. or plex \_\_\_\_\_  
 \_\_\_\_\_ Apt. in comm. bldg. \_\_\_\_\_  
 \_\_\_\_\_ 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**

792 Sq. ft. in first floor (county figure)  
1584 Sq. ft. in dwelling unit (if more than 1 floor)  
6 Total no. of rooms (include kitchen, dining, living and bedrooms, exclude bathrooms)  
1 No. of bathrooms  
4 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  
5/8/67 Date of last appraisal  
1904 Date structure was originally built

B. Market value data for one-family dwelling

	Market value	Computed value per sq. ft.
Land	\$ <u>2080</u>	\$ _____
Improvements	<u>4420</u>	_____
Total	<u>6500</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	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**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

June 25, 1971

Mr. and Mrs. Jacob E. Wallin  
413 N. Stanton Street  
Portland, Oregon 97227

Re: Parcel No. AB-3-5  
Emanuel Hospital Urban Renewal Project

Dear Mr. and Mrs. Wallin:

Recently I had the opportunity of meeting with you briefly at your home. You stated that you were going to engage an attorney in the negotiation for the purchase of your residence by this Commission.

Under these circumstances it is my opinion that it is in your best interest that I furnish you with the form of our Real Estate Option, in duplicate, so that your attorney may have the opportunity to review it.

You are reminded that there are additional benefits for which you may be eligible. Mr. Jones of our staff is prepared to meet with us to explain these benefits.

Respectfully,

Harold D. Hand  
Real Estate Supervisor

HDH:d1  
Enclosures (2)  
cc: Mr. Stan Jones

Rec'd  
6-25-71



1 1-00060-0890 WALLIN, JACOB E & MARTHA A 4

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

413 N STANTON ST  
PORTLAND OREGON

97227

ABENDS ADD

LOT BLOCK

S 1/2 OF

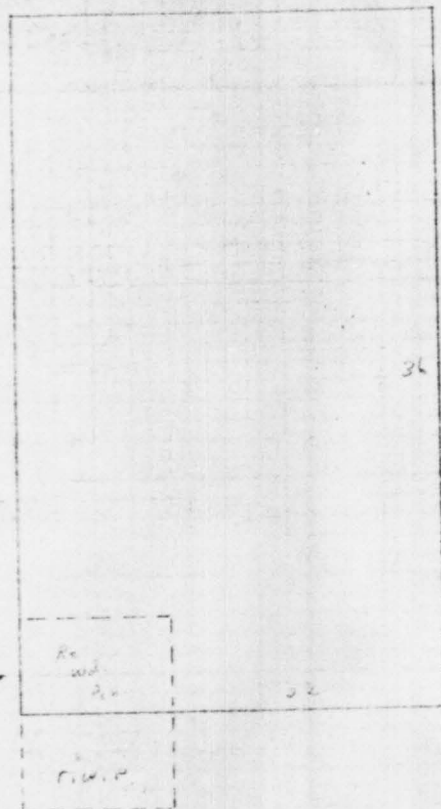
15 3

PROPERTY ADDRESS: 413 N STANTON ST  
PORTLAND

APPEALS:

AVE. OR ST.

AVE. OR ST.



N. Stanton  
FRONT OF BUILDING

AVE. OR ST.



FUNCTION G / P

ECON G / P

COND G / P

REMARKS 1968 Dist R/A

DATE 1/31/68

SIGN R. Fisher

DEPUTY

DATE	CHECKED	REVIEWED	BLDG. COUNT	INDEX	RE-CHECKED	NOTIFIED
4/22/68		4/23/68				
BY ANDREWS						

SUMMARY - ASSESSED VALUATION - REAL PROPERTY

ASSESS YEAR	MIN RIGHTS	TIMBER	LAND	IMPS	TOTAL	SIGN DATE
1968			2000	4250	6250	213 66
1971			2,080	4,420	6,500	UD



