# PROJECT RELOCATION EMANUEL BUSINESS AND RESIDENTIAL RELOCATION PAGE 5 OF 5

RP

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

moved before Project Begin RELOCATION WORKER \_\_\_\_\_ PROJECT NO. \_\_\_\_ PARCEL NAME ADDRESS \_\_\_\_\_ APT NO. \_\_\_\_\_ PHONE \_\_\_\_\_ INITIAL INTERVIEW \_\_\_\_\_ SEX \_\_\_\_ W\_\_\_ NW \_\_\_\_ AGE \_\_\_\_ U.S. CITIZEN \_\_\_\_ ALIEN \_\_\_ VETERAN \_\_\_ SERVICEMAN \_\_\_ DATE ON SITE \_\_\_\_\_ FAMILY COMPOSITION Employer: Name Name IRelation Age Address 201 201 MCW Caseworker Social Security \_\_\_\_\_\_ Va.\_\_\_\_Fed.\_\_\_\_Mult Co.\_\_\_\_\_ Pension: Name \_\_\_\_\_ Other: Name \_\_\_\_ TOTAL MONTHLY INCOME Rent\_\_\_\_\_, Inc.Heat\_\_\_Water\_\_Gas\_\_Gar\_\_Elec\_\_\_\_Unfurn\_\_\_Furn\_\_\_No.Rms\_\_\_\_\_ ELIGIBILITY FOR PUBLIC HOUSING: (yes or no) Over 62 \_\_\_\_ Disabled(Soc.Sec.def.) \_\_\_\_ Income below limits \_\_\_\_\_ Assets below limits \_\_\_\_\_ 221 CERTIFICATE OF ELIGIBILITY: Date delivered \_\_\_\_\_ by \_\_\_\_\_ Notify in case of accident: 
 Name
 Address
 Phone

 Information Statement given to
 on
 by

 Notice to move given to
 on
 by

 Payments: Amount \$
 Check No.
 Date delivered
 Moved by self
 (or)

 (Phone) moved by moving company \_\_\_\_\_ (Date) REMAINING ON CASELOAD: REMOVED FROM CASELOAD: Address unknown, tracing Refused assistance Evicted, further assistance Relocated in: contemplated Low-rent public housing Temporarily relocated by Other perm. public housing \_\_\_\_ Standard priv. rent. hsg. LPA within project: \_\_\_\_\_ Sub-standard priv. rent address hqs. with refusal of outside project: \_\_\_\_\_ further aid address Standard sales housing Sub-standard sales hsg. Out-of-town Address unknown, abandoned FAMILY REFUSED ADDITIONAL ASSISTANCE: Evicted, no further Date Worker\_\_\_\_ assistance Other (explain)\_\_\_\_\_ **RELOCATION REFERRALS:** Inspection Certified By Date Address

NEV ADDRESS:

Phone



## HOUSING RESOURCES SURVEY

. 18

#### RELOCATION ASSISTANCE NEEDS OF RESIDENTS OF EMANUEL HOSPITAL PROJECT AREA

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

Analyst       ONSQ       Date of survey       Z/2Z/7/       Tabulator       Date tabulated         Dwelling Unit No.       /       Structure No.       Census Block No.       23       Census Tract No.       22A         Street Address       252 M. Cook       Apartment No.	
<ul> <li>A. Status Of Relocation Assistance Needs At This Dwelling Unit:</li> <li>1. Assistance may be needed, yes <u>×</u>, no</li> <li>2. Why no assistance may be needed <ul> <li>aVacant</li> <li>bWill be vacated on the following date</li> <li>cOther reasons</li> </ul> </li> </ul>	
B. Residents Of This Dwelling Unit Who May Need Relocation Assistance:	
Name     Family relation     Age     Sex     Occupation       1.     Cothcell     Hoggans     Head of household     24     M     Occupation       2.     3.     4.     Image: Sex mark     Image: Sex mark     Occupation	
5.       6.       7.       8.       9.	
Names of jobholders Names of employers Street address where jobs are located to	stance work 6 mi
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 Cottrell 320 \$	:
Total family or household income per month \$ 320 \$ 320	
<ul> <li>D. Characteristics Of Replacement Housing Needs Expected To Be Sought: <ol> <li>Location (indicate approximate cross streets)</li> <li>NE, N, or NW</li> </ol> </li> <li>2. Transportation, number of autos owned _/_, use bus, walk</li></ul>	er mo.
PDC-HRS-3 1-15-71 Date on Site 3-45	
1-15-71 Date on site	

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

	ate			
AnalystSur Dwelling Unit No/_ Structure Street AddressSiz N.	veyed <u>2/22/7/</u> Ta e No. <u>/</u> Census Code	Block No	23 Census Trac Apartmen	Date t No t No
Legal Description				
	AME & ADDRESS OF O ayne, Isaac 3 9		NAME & ADDRESS O	F PROP. MGR:
	3946 N. Borthunich	4		
TELEPHONE:T INTERVIEWED? (>) Yes () No I	ELEPHONE: 28/-80 NTERVIEWED? () Ye	479 s () No	TELEPHONE: INTERVIEWED? ()	Yes ( ) No
I. DESCRIPTION OF STRUCTURE	1			
Kind of dwelling unit No. of u	inits in bldg.		lue data for dwell	1997
One-family house		multiple-1		r commercial bldg.
X Apt. in a house				Computed value per sq. ft. for
Apt. in apt. bldg. or plex				this dw. unit
Apt. in comm. bldg.		Land	\$ 2700	and the second sec
Mobile home or trailer			s 2800	Ψ
This structure has <u> </u> stories (do		Total		
count basement)			ft. of all d. u. ir	this structure
II. OCCUPANCY STATUS OF DWELL	ING UNIT		ft. of commercia	
Owner occupied			eial space: Land \$	
X Renter occupied			nts \$, total	
Vacant				
			ATE FOR THIS I	
III. SIZE OF DWELLING UNIT		-	sh Utilities nt	
690' Sq. ft. in first floor (county f	0 / -	tent \$ 4		\$
$\frac{600'}{4}$ Sq. ft. in dwelling unit (if mot 4 Total no. of rooms (include k	itchen dining E	lectricity	\$	Ψ
living and bedrooms, exclude		las		
/ No. of bathrooms		Vater		
/ No. of bedrooms (rooms used	mainly H	leat (oil, or o	ther)	
for sleeping)		Total \$	0.00 \$ 20	\$ 80
IV. ASSESSOR'S MARKET VALUATIO A. Dates or period of time	ON DATA		quired of renter nt \$, other	\$
1971 Period market value data a	applicable	Rental infor	mation obtained fr	om
1967 Date of last appraisal		Tenant,	, owner, mana	ager, or
1895 Date structure was origina	IIy built	estimated fi	rom assessor's da	ta
	v	I. FOR SALE	INFORMATION	FOR THIS HOUSE
B. Market value data for one-family	dwelling	THAT IS	OCCUPIED BY O	WNER OR RENTE
	nputed value	Listed with	broker, yes,	no
	sq. ft		by owner, yes	
Land \$\$			price \$	
Improvements		Period hous	e has been for sal	e, months
Total	v	I. REMARKS	S	
PDIC-HRS-1				
Rew. 1/21/71				



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SIDEWATES & CUTES	OTHER											
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