

AVAILABLE OR ACQUIRED REPLACEMENT HOUSING

State Project: _____ Federal Project: _____ UPC: _____

County: _____ Parcel: _____

Landowner: _____

Displacee: _____

AVAILABLE REPLACEMENT HOUSING

Comparable No. _____

Address of Property _____

Seller's Name _____ Phone No. _____

Listed By _____ Phone No. _____

Asking Price \$ _____ Adjusted Price \$ _____

Landlord's Name _____ Phone No. _____

Asking Rent \$ _____ Average Utilities \$ _____

REPLACEMENT HOUSING ACQUIRED

Address of Property _____

Date of Occupancy _____

Purchase Price \$ _____ Recording Data: Date _____ Deed Book _____ Page No. _____

Date of Lease _____ Terms of Lease _____

Was assistance in locating or obtaining replacement housing declined accepted

Name of individual declining or accepting assistance: _____

Building Information:

Type of Building (Single Family, Duplex, etc.) _____

Type of Construction (1 sty. frame, etc.) _____

Approximate age of Structure _____ Lot Size _____

Total No. of Rooms _____ No. of Bedrooms _____ No. of Baths _____

Total Area _____ square feet (Outside Measurement)

Kitchen or Kitchen Area:

Does it contain a sink with hot and cold running water and connected to a sewage system? _____

Does it contain utility service connections and adequate space for the installation of a stove and refrigerator? _____

Bathroom:

Is it well lighted and ventilated? _____

Does it afford privacy? _____

- Does it contain a sink? _____
- Does it contain a bathtub or shower stall? _____
- Does it contain a toilet? _____
- Are they all in good working order and properly connected to appropriate water sources and to sewage drainage system? _____

General:

- Does it conform to State and local codes and ordinances? _____
- Does it contain a safe electrical wiring system adequate for lighting and other devices? _____
- Does structure appear to be sound? _____
- Does structure appear to be in good state of repair? _____
- Is there a safe, unobstructed means of egress at all levels? _____
- Does it have a heating system capable of maintaining a temperature of approximately 70°? _____
- If yes, what type? _____
- Is it free of any barriers which would prevent reasonable ingress, egress, or use of the dwelling by a disabled displacee? _____
- In your opinion, does structure meet the standards for decent, safe, and sanitary housing? _____
- If not, could it be made to meet the standards by reasonable repairs? _____

*******USE BACK FOR PHOTOGRAPHS AND SKETCH OF BUILDING (OUTSIDE NOT TO SCALE)*******

The above is based on a visual inspection and represents the opinion of the inspector.

Interview & Inspection Made By: _____

Title: _____

Date: _____