

**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: \_\_\_\_\_