SITE OCCUPANT RECORD—RESIDENTIAL

PROJECT NAME _____
PROJECT NO. _____
RELOCATION CASE NO. _____
ACQUISITION PARCEL NO. _____

LOCALITY/AGENCY

DATE OF INITIAL INTERVIEW _____ INTERVIEWER _____

NAME OF OCCUPANT _____

ADDRESS _____

TELEPHONE NUMBER _____ CENSUS TRACT _____

DATE OCCUPANT FIRST OCCUPIED THIS DWELLING

CHECK: ☐ FAMILY ☐ INDIVIDUAL ☐ OWNER ☐ TENANT

DATE OF GENERAL INFORMATION NOTICE _____

EFFECTIVE DATE OF NOTICE OF ELIGIBILITY FOR RELOCATION ASSISTANCE _____
(INCLUDE COPY OF NOTICES IN CASE FILE)

RACIAL/ETHNIC CLASSIFICATION

- ☐ WHITE, NOT OF HISPANIC ORIGIN
- ☐ BLACK, NOT OF HISPANIC ORIGIN
- ☐ AMERICAN INDIAN OR ALASKAN NATIVE
- ☐ HISPANIC
- ☐ ASIAN OR PACIFIC ISLANDER

HOUSING COSTS AND CHARACTERISTICS OF DISPLACEMENT DWELLING

TENANT:
MONTHLY CONTRACT RENT $ _____
AVERAGE MONTHLY UTILITY COSTS $ _____
MONTHLY HOUSING COST $ _____

OWNER:
MONTHLY MORTGAGE PAYMENT (P&I) $ _____
AVERAGE MONTHLY UTILITY COSTS $ _____
REAL PROPERTY TAXES $ _____
MON. HOUSING COSTS $ _____

NO. OF ROOMS _____
NO. OF BEDROOMS _____
UNIT IS:
HOUSEKEEPING ☐
NONHOUSEKEEPING ☐

SURNAME, GIVEN NAME(S)	RELATION-SHIP	SEX	AGE	OCCUPATION	SOURCE OF INCOME: EMP.	WELF.	PENS.	OTHER (Identify)	GROSS MONTHLY INCOME	NAME OF EMPLOYER–TELEPHONE NO.
									$	
				TOTAL GROSS MONTHLY INCOME: $						

SPECIAL CHARACTERISTICS OF HOUSEHOLD (E.G., DISABLED, ELDERLY, ETC.)

REHOUSING PREFERENCES:
PURCHASE ☐ RENT ☐ SUBSIDIZED HOUSING ☐ NONE ☐
LOCATION/NEIGHBORHOOD CONSIDERATIONS: _____

PETS, GARAGE, ETC.: _____

REHOUSING REQUIREMENTS:
NO. OF ROOMS _____
NO. OF BEDROOMS _____
MAX. MON. HOUSING COST $ _____
MAXIMUM PURCHASE PRICE $ _____