

PROJECT

COMPARISON OF RESIDENCE ON TRACT NO. _____ WITH AVAILABLE
REPLACEMENT DWELLINGS (PL 91-646)
(Privacy Act Statement on Reverse)

DISPLACED PERSON _____ Owner/Tenant

ITEM	SUBJECT	COMP 1	COMP 2	COMP 3
Decent, safe and sanitary				
Type construction and floors				
Number of rooms & kind				
Total area (square feet)				
Basement (finished/unfinished)				
Garage and type				
Approximate age				
Condition				
Site size				
Type of neighborhood				
Gas (G) Electric (E) Phone (P)				
Water (public/well)				
Sewer (public/septic)				
Access road (paved/gravel)				
Available to displacee	_____			
Adequate to accommodate displacee	_____			
Within financial means of displacee	_____			
Asking price/Monthly rental	_____	\$	\$	\$
Market value (estimate)	_____	\$	\$	\$
Selected value of replacement	\$	_____	_____	_____
Actual price of replacement	\$	_____	_____	_____
Acquisition/rental price of subject	\$	_____	_____	_____
Differential payment	\$	_____	_____	_____

CERTIFICATION: I am familiar with the above referenced properties and recommend use of the selected comparables as being equal to or better than the subject property. I have no present or contemplated personal interest in any of the referenced properties.

Replacement Housing Adviser

Date

Approving Official

Date

