

**REPLACEMENT HOUSING PAYMENT WORKSHEET - RESIDENTIAL**

|  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
|--|---------------------------------|---------------------------------|----------------------------------|---|--|---------------------------------------|-----------------------------------|---------------------------------|-------------------|
| <b>COUNTY</b>  |                                 | <b>ITEM NO.</b>                 | <b>PARCEL</b>                    | <b>NAME</b>                               |  |                                       |                                   |                                 |                   |
| <b>PROJECT NO.</b>                                     |                                 | <b>FEDERAL NUMBER</b>           |                                  |   | <b>PROJECT</b>                           |                                       |                                   |                                 |                   |
| <b>OCCUPANT TYPE</b>                                   |                                 | <b>HOME TYPE</b>                |                                  |   |  |                                       | <b>MH Site</b>                    |                                 |                   |
| <input type="checkbox"/> Owner                         | <input type="checkbox"/> Tenant | <input type="checkbox"/> SF     | <input type="checkbox"/> DUP     | <input type="checkbox"/> APT              | <input type="checkbox"/> OTHER           | <input type="checkbox"/> MH           | <input type="checkbox"/> Owned    | <input type="checkbox"/> Rented |                   |
| <b>DATE OCCUPIED</b>                                   |                                 | <b>MORTGAGE</b>                 |                                  |   | <b>OWNER'S NAME (If Tenant Occupied)</b> |                                       |                                   |                                 | <b>PHONE NO.</b>  |
|  |                                 | <b>% Rate</b>                   | <b>Mo. Payment</b>               |   |  |                                       |                                   |                                 |                   |
| <b>OCCUPANTS</b>                                       |                                 | <b>AGE</b>                      | <b>SEX</b>                       | <b>RELATIONSHIP</b>                       | <b>PHONE NUMBER</b>                      | <b>EMPLOYER / SCHOOL - CITY</b>       |                                   | <b>MO INCOME</b>                |                   |
|  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
|  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
|  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
|  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
|  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
|  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
|  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
|  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
|  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
|  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| E-mail address:  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| <b>Tenant's average monthly rent and utility costs</b> |                                 | <b>ELEC</b>                     | <b>GAS</b>                       | <b>WATER</b>                              | <b>SEWER</b>                             | <b>MO UTIL</b>                        | <b>MO RENT</b>                    | <b>MO TOTAL</b>                 | <b>TOT INCOME</b> |
|  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| <b>Possible Problems</b>                               |                                 | <input type="checkbox"/> Income | <input type="checkbox"/> Elderly | <input type="checkbox"/> Large Home       | <input type="checkbox"/> Large Family    | <input type="checkbox"/> Tight Market | <input type="checkbox"/> Disabled |                                 |                   |
| <b>Include utilities in rent price</b>                 | <b>SUBJECT</b>                  |                                 | <b>COMP</b>                      |   | <b>COMP</b>                              |                                       | <b>COMP</b>                       |                                 |                   |
| Price  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| Street Address   |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| City, Zip Code   |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| Distance to Work - School                              |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| No. Stories - Ext. Walls                               |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| 1 <sup>st</sup> Floor Room Count - Size                |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| 2 <sup>nd</sup> Floor Room Count - Size                |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| Bsmt Total Size - Unfin Size                           |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| Fin Bsmt Room Count -Size                              |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| Garage/Carport (No & Type)                             |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| Air Conditioning                                       |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| Other  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| Age - Condition  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| Lot Size   |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| Electric - Gas   |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| Water - Sewer  |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| Is Dwelling / Site DS&S?                               |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| Listed by / Phone                                      |                                 |                                 |                                  |   |  |                                       |                                   |                                 |                   |
| <b>Relying on Comparable No.</b>                       |                                 |                                 |                                  | <b>A replacement dwelling / site cost</b> |  |                                       |                                   |                                 |                   |