CITY OF ANN ARBOR
HOUSING INFORMATION REQUEST

The following information is being collected for the purpose of evaluating the impact of the proposed project on the existing housing stock of the community.

Project Name: ____________________________________________________________

Project Address: _________________________________________________________

Developer/Sponsor: ________________________________________________________

Type of Organization: ______________________________________________________

Address: __________________________________________________________________

Phone: __________________________________________________________________

A. PROJECT INFORMATION:

1. Number of units by bedroom size:  Total units ______
   ______ 0 bedroom; ______ 1 bedroom; ______ 2 bedroom; ______ 3+ bedroom;

2. type of units: ______ owner; ______ renter; ______ other ______

3. building type:
   ______ one family detached; ______ one family attached (townhouse)
   ______ two family (duplex); ______ multi-family or apartment

4. size of unit(s): (sq. ft) ________________________________

5. density/ dwelling units per acre: ________________________________

6. estimated sales or rental price range: _____________________________

7. number and type of existing dwelling units to be demolished by project:
   __________________________________________________________________

________________________________________________________________________

signature of individual completing form - title

__________________________
Printed Name

__________________________
Date