

CITY OF VISTA  
REHABILITATION INQUIRY CARD  
REDEVELOPMENT & HOUSING DEPARTMENT

Owner's Name \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

#Bedrooms \_\_\_\_\_ #Bathrooms \_\_\_\_\_ Adults/Ages \_\_\_\_/\_\_\_\_ Children/Ages \_\_\_\_/\_\_\_\_

Year Purchased \_\_\_\_\_ Purchase Price \_\_\_\_\_ Current Balance \_\_\_\_\_ Market \_\_\_\_\_

Repairs Needed \_\_\_\_\_

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INCOME/ASSETS

Employer \_\_\_\_\_ Hourly/Salary \_\_\_\_\_

Employer \_\_\_\_\_ Hourly/Salary \_\_\_\_\_

Social Security /SSI \_\_\_\_\_ Private/Workers Comp/Disability \_\_\_\_\_

Ira \_\_\_\_\_ RetirementAccount \_\_\_\_\_ Stocks \_\_\_\_\_ Bonds \_\_\_\_\_

Child/Spousal Support \_\_\_\_\_ Unemployment Benefits \_\_\_\_\_ Veterans Benefits \_\_\_\_\_

Bank \_\_\_\_\_ ✓ /Savings \_\_\_\_\_ ✓ /Savings \_\_\_\_\_

Bank \_\_\_\_\_ ✓ /Savings \_\_\_\_\_ ✓ /Savings \_\_\_\_\_

Rental(s) \_\_\_\_\_ APN \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_ City Representative \_\_\_\_\_