

APPENDIX C



CITY OF CHOWCHILLA

Housing Element Update Survey and Comment Sheet

The City of Chowchilla is asking for your input on the most important housing issues the City faces. Circle whether you are offering your comments as an **INDIVIDUAL** or a **GROUP REPRESENTATIVE**. Mail or deliver the completed survey to the City of Chowchilla, 130 S Second St., Chowchilla, CA 93610, or email to Planning@CityOfChowchilla.org.

☐ **INDIVIDUAL** – I belong to the group(s) below (check any that applies):

☐ **Senior** (65 years old and older)

☒ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Agricultural worker**

☐ **Large household** (5+ people)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☒ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

☐ Less than \$25,750

☒ \$25,751 to \$32,399

☐ \$32,400 to \$51,849

☐ \$51,850 to 64,799

☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (check any that applies):

☒ **Business (Owner/Manager)**

☐ **Faith-based Organization**

☐ **Public Schools**

☐ **Service/civic group**

☐ **Neighborhood association**

☐ **Building Industry**

☐ **Affordable housing Org/agency**

☐ **A special needs group:**

☐ Seniors

☐ Those with disabilities

☐ Agricultural workers

☐ Those in need of temporary, emergency, or other suitable housing

☐ Medical, health, or mental health organization/profession

☐ Other _____

MY CURRENT HOUSING is (check one):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (check one):

☒ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

2 Maintain neighbor character

1 Public transportation

1 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

1 Affordable housing, particularly for (check any that applies):

☐ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____

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- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input checked="" type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input checked="" type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

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2 Public transportation

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1 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
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I WOULD PREFER TO LIVE in (*check one*):

- | | | |
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| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
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5 Public transportation

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1 Safety (lighting, sidewalks, crime protection) and privacy

6 Emergency and temporary housing to prevent homelessness

4 Healthy home (electricity, appliances, working water/sewer, no lead paint)

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- | | | |
|--|--------------------------------------|---|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
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| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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MY CURRENT HOUSING is (check one):

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- ☒ Seniors
☐ Large families
☐ Single parent with minor children

- ☐ Disabled
☐ Veterans

☒ Other PARKS & GREEN SPACE

- ☒ Single persons
☐ Agricultural workers

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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

- | | | |
|---|--|---|
| <u>3</u> Maintain neighbor character | <u>1</u> Public transportation | <u>1</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>1</u> Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |

2 Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--------------------------------------|---|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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| <input type="checkbox"/> More than 8 Person Household | | | |
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- | | | | | |
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| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

___ Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

___ Healthy home (electricity, appliances, working water/sewer, no lead paint)

___ Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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| <input checked="" type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
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| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☒ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
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☐ **Large household** (5+ people)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

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☒ 1-2 person household

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☐ **Service/civic group**

☐ **Neighborhood association**

☐ **Building Industry**

☐ **Affordable housing Org/agency**

☐ **A special needs group:**

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☐ Those with disabilities

☐ Agricultural workers

☐ Those in need of temporary, emergency, or other suitable housing

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☐ Other _____

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☐ Live in substandard housing

☐ Rent an apartment, duplex, etc.

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

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2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Large families

☐ Single parent with minor children

☒ Disabled

☒ Veterans

☐ Other _____

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- | | | | |
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| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

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- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
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- | | | |
|--|--|---|
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☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

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☐ 1-2 person household

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☒ **Seniors**

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☐ Those with disabilities

☐ **Service/civic group**

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☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

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☐ Am homeless

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___ Maintain neighbor character

___ Public transportation

___ Access to services, shopping, schools close to home

___ Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

___ Healthy home (electricity, appliances, working water/sewer, no lead paint)

___ Affordable housing, particularly for (check any that applies):

☐ Seniors

☐ Disabled

☐ Single persons

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- | | |
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1 Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for (*check any that applies*):

- ☒ Seniors ☐ Disabled
☐ Large families ☒ Veterans
☐ Single parent with minor children ☐ Other _____

- ☐ Single persons
☐ Agricultural workers

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CITY OF CHOWCHILLA

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☐ **INDIVIDUAL** – I belong to the group(s) below (check any that applies):

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☒ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (check any that applies):

- | | |
|---|---|
| <input checked="" type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (check one):

- | | | |
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| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
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I WOULD PREFER TO LIVE in (check one):

- | | | |
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| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

- | | | |
|---|---|---|
| <u>3</u> Maintain neighbor character | ___ Public transportation | ___ Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | ___ Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| ___ Affordable housing, particularly for (check any that applies): | | |
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
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- | | | |
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- | | | |
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- | | | |
|--|--|---|
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| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
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☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla

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☒ 1-2 person household

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☐ Am homeless

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1 = Least Important

2 = Somewhat Important

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2 Maintain neighbor character

2 Public transportation

3 Access to services, shopping, schools close to home

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| <u>3</u> Maintain neighbor character | <u>1</u> Public transportation | <u>2</u> Access to services, shopping, schools close to home |
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☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☒ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

3 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☒ Disabled

☐ Single persons

☐ Large families

☒ Veterans

☒ Agricultural workers

☒ Single parent with minor children

☐ Other _____

If you have additional comments please attach a separate sheet or email them to Planning@CityOfChowchilla.org



CITY OF CHOWCHILLA

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The City of Chowchilla is asking for your input on the most important housing issues the City faces. Circle whether you are offering your comments as an **INDIVIDUAL** or a **GROUP REPRESENTATIVE**. Mail or deliver the completed survey to the City of Chowchilla, 130 S Second St., Chowchilla, CA 93610, or email to Planning@CityOfChowchilla.org.

☒ **INDIVIDUAL** – I belong to the group(s) below (*check any that applies*):

- | | | |
|--|---|---|
| <input type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input checked="" type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☒ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
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| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

- | 1 = Least Important | 2 = Somewhat Important | 3 = Very Important |
|---|---|--|
| <u>3</u> Maintain neighbor character | ___ Public transportation | ___ Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | ___ Emergency and temporary housing to prevent homelessness | ___ Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| ___ Affordable housing, particularly for (<i>check any that applies</i>): | | |
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input checked="" type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is *(check one)*:

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☐ **GROUP REPRESENTATIVE** of *(check any that applies)*:

- | | |
|--|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is *(check one)*:

- | | | |
|--|--|--|
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| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in *(check one)*:

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

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3 = Very Important

- | | | |
|---|---|--|
| <u>3</u> Maintain neighbor character | ___ Public transportation | ___ Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | ___ Emergency and temporary housing to prevent homelessness | ___ Healthy home (electricity, appliances, working water/sewer, no lead paint) |

___ Affordable housing, particularly for *(check any that applies)*:

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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Check all that apply to you:

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input checked="" type="checkbox"/> City of Chowchilla Employee |
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| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input checked="" type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is *(check one)*:

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☒ More than \$64,800

☐ **GROUP REPRESENTATIVE** of *(check any that applies)*:

- | | |
|---|---|
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| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is *(check one)*:

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in *(check one)*:

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

- | | | |
|---|--|---|
| <u>1</u> Maintain neighbor character | <input type="checkbox"/> Public transportation | <input type="checkbox"/> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <input type="checkbox"/> Emergency and temporary housing to prevent homelessness | <u>2</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |

☐ Affordable housing, particularly for *(check any that applies)*:

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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- | | | | |
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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input checked="" type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
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___ Maintain neighbor character

___ Public transportation

___ Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

1 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--------------------------------------|---|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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☐ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla ☐ Renter ☐ Homeowner ☐ City of Chowchilla Employee

☐ 1-2 person household ☐ 3-4 person household ☐ 5-6 person household ☐ 7-8 person household

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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

☐ **Business (Owner/Manager)**

☐ **A special needs group:**

☐ **Faith-based Organization**

☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

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☐ **Building Industry**

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MY CURRENT HOUSING is (*check one*):

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☒ Rent a house

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I WOULD PREFER TO LIVE in (*check one*):

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3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

1 Affordable housing, particularly for (*check any that applies*):

Please Do Not Look @ merced.

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☐ Disabled

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- | | | | |
|--|--|---|--|
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|---|---|
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- | | | |
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|--|---|---|
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| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

- | | | |
|---|--|---|
| <u>2</u> Maintain neighbor character | <u>1</u> Public transportation | <u>2</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>2</u> Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |

____ Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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CITY OF CHOWCHILLA

Housing Element Update Survey and Comment Sheet

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☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☐ 1-2 person household

☐ 3-4 person household

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☐ More than 8 Person Household

☐ Use public transportation

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☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

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☐ Rent/own in mobile home community

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I WOULD PREFER TO LIVE in (check one):

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☐ A mobile home in a community

☐ Gated community with private security

☒ A retirement or other community that offers medical, meals, and/or other services on-site *When needed. Not old enough for a while*

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

2 Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for (check any that applies):

☒ Seniors

☒ Disabled

☐ Single persons

☐ Large families

☒ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other

Develop retail & take advantage of geography to highway 152 & 99 interchange.

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OCT 17 2019

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☐ More than 8 Person Household

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☒ **Seniors**

☐ **Public Schools**

☒ **Those with disabilities**

☐ **Service/civic group**

☐ **Agricultural workers**

☐ **Neighborhood association**

☐ **Those in need of temporary, emergency, or other suitable housing**

☐ **Building Industry**

☐ **Medical, health, or mental health organization/profession**

☐ **Affordable housing Org/agency**

☐ **Other** _____

MY CURRENT HOUSING is (*check one*):

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☐ Rent a house

☐ Rent an apartment, duplex, etc.

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☐ Live in substandard housing

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I WOULD PREFER TO LIVE in (*check one*):

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☐ Gated community with private security

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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

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3 Maintain neighbor character

1 Public transportation

1 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☒ Disabled

☐ Single persons

☐ Large families

☒ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____

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Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input type="checkbox"/> 1-2 person household | <input checked="" type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

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- | | |
|---|---|
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| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
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- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
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I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
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| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

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3 Maintain neighbor character

1 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

1 Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |



CITY OF CHOWCHILLA

Housing Element Update Survey and Comment Sheet

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| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|--|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input checked="" type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

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☐ **GROUP REPRESENTATIVE** of (check any that applies):

- | | |
|--|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

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- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (check one):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A cond o ^{house} I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

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- | | | |
|---|--|---|
| <u>3</u> Maintain neighbor character | <u>2</u> Public transportation | <u>2</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>2</u> Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>3</u> Affordable housing, particularly for (check any that applies): | | |
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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☐ 1-2 person household

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☐ **Faith-based Organization**

☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☒ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

1 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

2 Healthy home (electricity, appliances, working water/sewer, no lead paint)

Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☒ Veterans

☐ Agricultural workers

☒ Single parent with minor children

☐ Other _____

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☐ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Agricultural worker**

☐ **Large household** (5+ people)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☒ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

☐ Less than \$25,750

☐ \$25,751 to \$32,399

☐ \$32,400 to \$51,849

☐ \$51,850 to 64,799

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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

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☐ **Building Industry**

☐ **Affordable housing Org/agency**

☐ **A special needs group:**

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☐ Those with disabilities

☐ Agricultural workers

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☐ Other _____

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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

3 Maintain neighbor character

3 Safety (lighting, sidewalks, crime protection) and privacy

3 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Large families

☐ Single parent with minor children

2 = Somewhat Important

2 Public transportation

3 Emergency and temporary housing to prevent homelessness

☒ Disabled

☒ Veterans

☐ Other _____

3 = Very Important

2 Access to services, shopping, schools close to home

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

☐ Single persons

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☐ **5-6 person household**

☐ **7-8 person household**

☐ **More than 8 Person Household**

☐ **Use public transportation**

☐ **Commute more than 10 miles to work**

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☒ **Seniors**

☐ **Public Schools**

☐ **Those with disabilities**

☒ **Service/civic group**

☐ **Agricultural workers**

☐ **Neighborhood association**

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☐ **Live in substandard housing**

☐ **Am homeless**

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☐ **A condo that I own**

☐ **An apartment that I rent**

☐ **A duplex, triplex, or similar**

☐ **A mobile home in a community**

☐ **Gated community with private security**

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2 **Maintain neighbor character**

1 **Public transportation**

1 **Access to services, shopping, schools close to home**

3 **Safety (lighting, sidewalks, crime protection) and privacy**

2 **Emergency and temporary housing to prevent homelessness**

2 **Healthy home (electricity, appliances, working water/sewer, no lead paint)**

3 **Affordable housing, particularly for (check any that applies):**

☒ **Seniors**

☐ **Disabled**

☐ **Single persons**

☐ **Large families**

☐ **Veterans**

☐ **Agricultural workers**

☐ **Single parent with minor children**

☐ **Other**

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☐ Seniors

☐ **Public Schools**

☒ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☒ **Building Industry**

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☐ Am homeless

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3 = Very Important

3 Maintain neighbor character

1 Public transportation

1 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☒ Disabled

☐ Single persons

☐ Large families

☒ Veterans

☐ Agricultural workers

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| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors |
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| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
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- | | | |
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| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

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___ Maintain neighbor character

___ Public transportation

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- | | | |
|--|--------------------------------------|---|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

1 Maintain neighbor character

2 Public transportation

2 Access to services, shopping, schools close to home

1 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

1 Healthy home (electricity, appliances, working water/sewer, no lead paint)

1 Affordable housing, particularly for (*check any that applies*):

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1 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for (check any that applies):

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

If you have additional comments please attach a separate sheet or email them to Planning@CityOfChowchilla.org



CITY OF CHOWCHILLA

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☐ **INDIVIDUAL** – I belong to the group(s) below (*check any that applies*):

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☒ **Large household** (5+ people)

☐ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☐ 1-2 person household

☐ 3-4 person household

☒ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☒ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

☐ Less than \$25,750

☐ \$25,751 to \$32,399

☐ \$32,400 to \$51,849

☐ \$51,850 to 64,799

☒ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

☐ **Business (Owner/Manager)**

☐ **A special needs group:**

☐ **Faith-based Organization**

☒ Seniors

☐ **Public Schools**

☒ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☒ **Neighborhood association**

☒ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☐ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☒ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

2 Maintain neighbor character

___ Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

___ Affordable housing, particularly for (*check any that applies*):

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☒ Disabled

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| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|---|--|--|--|
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- | | | |
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| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
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| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

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☒ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | | |
|---|---|----------------------------------|
| <input type="checkbox"/> Business (Owner/Manager) | <input checked="" type="checkbox"/> A special needs group: | <i>Not sure what this means.</i> |
| <input checked="" type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors | |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities | |
| <input checked="" type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers | |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing | |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession | |
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MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
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I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
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1 Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--------------------------------------|---|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
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- | | | |
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| <input checked="" type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
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| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

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☐ **GROUP REPRESENTATIVE** of (check any that applies):

- | | |
|--|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
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| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (check one):

- | | | |
|--|--|--|
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I WOULD PREFER TO LIVE in (check one):

- | | | |
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| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
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- | | | |
|---|--|---|
| <u>3</u> Maintain neighbor character | <u>1</u> Public transportation | <u>2</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>2</u> Emergency and temporary housing to prevent homelessness | <u>1</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>2</u> Affordable housing, particularly for (check any that applies): | | |

- | | | |
|--|--|--|
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- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☒ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input checked="" type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Maintain neighbor character | <input type="checkbox"/> Public transportation | <input checked="" type="checkbox"/> Access to services, shopping, schools close to home |
| <input checked="" type="checkbox"/> Safety (lighting, sidewalks, crime protection) and privacy | <input type="checkbox"/> Emergency and temporary housing to prevent homelessness | <input checked="" type="checkbox"/> Healthy home (electricity, appliances, working water/sewer, no lead paint) |

☐ Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--------------------------------------|---|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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CITY OF CHOWCHILLA

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☐ **Large household** (5+ people)

☒ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

☒ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla ☐ Renter ☒ Homeowner ☐ City of Chowchilla Employee

☒ 1-2 person household ☐ 3-4 person household ☐ 5-6 person household ☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation ☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of *(check any that applies)*:

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☐ **A special needs group:**

☐ **Faith-based Organization**

☒ Seniors

☐ **Public Schools**

☒ Those with disabilities

☒ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (check one):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (check one):

☒ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

2 Maintain neighbor character

1 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for *(check any that applies)*:

☒ Seniors

☒ Disabled

☐ Single persons

☐ Large families

☒ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____

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☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☒ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

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☐ Commute more than 10 miles to work

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☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☒ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

___ Public transportation

___ Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

___ Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____

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☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☒ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

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☐ \$51,850 to 64,799

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☒ **Seniors**

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (check one):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (check one):

☒ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

55+

☒ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

2 Maintain neighbor character

1 Public transportation

3 Access to services (shopping) schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (check any that applies):

☒ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☒ Other

Senior Housing community of like-age 55+

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☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

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☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☒ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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☐ \$25,751 to \$32,399

☒ \$32,400 to \$51,849

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☐ More than \$64,800

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☐ **Faith-based Organization**

☒ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☒ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

1 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☒ Disabled

☐ Single persons

☒ Large families

☒ Veterans

☐ Agricultural workers

☒ Single parent with minor children

☐ Other _____

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☐ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☒ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☐ Commute more than 10 miles to work

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☒ **Seniors**

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

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☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

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☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☒ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

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☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

1 Public transportation

1 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

2 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☒ Other

Renters

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- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input type="checkbox"/> 1-2 person household | <input checked="" type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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- | | |
|---|---|
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| <input type="checkbox"/> Public Schools | <input checked="" type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

- | | | |
|---|---|---|
| <u>3</u> Maintain neighbor character | ___ Public transportation | ___ Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | ___ Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |

___ Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--------------------------------------|---|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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☒ 1-2 person household ☐ 3-4 person household ☐ 5-6 person household ☐ 7-8 person household

☐ More than 8 Person Household

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☒ Seniors

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☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☒ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

2 Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

1 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☒ Disabled

☐ Single persons

☐ Large families

☒ Veterans

☐ Agricultural workers

☐ Single parent with minor children

3 Other GET The sidewalks fixed on Main Street.

If you have additional comments please attach a separate sheet or email them to Planning@CityOfChowchilla.org



CITY OF CHOWCHILLA

Housing Element Update Survey and Comment Sheet

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☐ **INDIVIDUAL** – I belong to the group(s) below (*check any that applies*):

☒ **Senior** (65 years old and older)

☐ **Large household** (5+ people)

☒ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

☐ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☒ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

☐ Less than \$25,750

☐ \$25,751 to \$32,399

☒ \$32,400 to \$51,849

☐ \$51,850 to 64,799

☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

☐ **Business (Owner/Manager)**

☐ **A special needs group:**

☐ **Faith-based Organization**

☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

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☐ Gated community with private security

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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

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☐ Maintain neighbor character

☐ Public transportation

☐ Access to services, shopping, schools close to home

☒ Safety (lighting, sidewalks, crime protection) and privacy

☐ Emergency and temporary housing to prevent homelessness

☒ Healthy home (electricity, appliances, working water/sewer, no lead paint)

☒ Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☒ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____

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| <input checked="" type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input checked="" type="checkbox"/> Renter | <input type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

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|--|--|--|
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I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
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2 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

____ Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--------------------------------------|---|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

Cats, Dogs, Chickens, Regulate

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| <input checked="" type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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☒ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input checked="" type="checkbox"/> A special needs group: |
| <input checked="" type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

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3 Public transportation

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3 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input checked="" type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input checked="" type="checkbox"/> Agricultural workers |
| <input checked="" type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|--|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input checked="" type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input checked="" type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☒ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (check any that applies):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
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| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
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MY CURRENT HOUSING is (check one):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (check one):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

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3 = Very Important

- | | | |
|---|--|---|
| <u>3</u> Maintain neighbor character | <u>2</u> Public transportation | <u>3</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>2</u> Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>3</u> Affordable housing, particularly for (check any that applies): | | |
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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Check all that apply to you:

- | | | | |
|--|--|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input checked="" type="checkbox"/> Renter | <input type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
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☒ **GROUP REPRESENTATIVE** of (check any that applies):

- | | |
|--|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input checked="" type="checkbox"/> A special needs group: |
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| <input checked="" type="checkbox"/> Public Schools | <input checked="" type="checkbox"/> Those with disabilities |
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- | | | |
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I WOULD PREFER TO LIVE in (check one):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home <u>own</u> | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

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- | | | |
|---|---|--|
| <u>1</u> Maintain neighbor character | ___ Public transportation | ___ Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | ___ Emergency and temporary housing to prevent homelessness | ___ Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>2</u> Affordable housing, particularly for (check any that applies): | | |
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input checked="" type="checkbox"/> Agricultural workers |
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_____ Affordable housing, particularly for (*check any that applies*):

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| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
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- | | |
|--|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (check one):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (check one):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> A single-family home | <input checked="" type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input checked="" type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

1 Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

☒ Affordable housing, particularly for (check any that applies):

- | | | |
|--|--------------------------------------|--|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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☐ **INDIVIDUAL** – I belong to the group(s) below (check any that applies):

☐ **Senior** (65 years old and older)

☐ **Large household** (5+ people)

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

☒ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla ☐ Renter ☒ Homeowner ☐ City of Chowchilla Employee

☒ 1-2 person household ☐ 3-4 person household ☐ 5-6 person household ☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation ☒ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☒ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (check any that applies):

☐ **Business (Owner/Manager)**

☐ **A special needs group:**

☐ **Faith-based Organization**

☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

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☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (check one):

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☐ Am homeless

I WOULD PREFER TO LIVE in (check one):

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☐ A condo that I own

☐ An apartment that I rent

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1 = Least Important

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1 Maintain neighbor character

2 Public transportation

3 Access to services, shopping, schools close to home

1 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

2 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (check any that applies):

☒ Seniors

☒ Disabled (real disabled, not Dr's note disabled)

☒ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

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☐ Other _____

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☒ 1-2 person household

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☐ 7-8 person household

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☐ Use public transportation

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☐ Other _____

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___ Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

___ Affordable housing, particularly for (*check any that applies*):

☐ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

☐ Single parent with minor children

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☒ 1-2 person household

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☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

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☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

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☐ Gated community with private security

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2 = Somewhat Important

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3 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

3 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

☐ Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☒ Disabled

☒ Single persons

☒ Large families

☒ Veterans

☒ Agricultural workers

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- | | | |
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| <input checked="" type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
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| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
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- | | | |
|--|--|--|
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| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

2 Maintain neighbor character

2 Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

____ Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--------------------------------------|--|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input checked="" type="checkbox"/> Renter | <input type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
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| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
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MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input type="checkbox"/> Own a house or condo | <input checked="" type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
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I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

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3 = Very Important

- | | | |
|--|--|---|
| <u>2</u> Maintain neighbor character | <u>1</u> Public transportation | <u>2</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>2</u> Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>3</u> Affordable housing, particularly for (<i>check any that applies</i>): | | |
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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Check all that apply to you:

- | | | | |
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☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☒ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

3 Public transportation

3 Access to services, shopping, schools close to home

2 Safety (lighting, sidewalks, crime protection) and privacy

3 Emergency and temporary housing to prevent homelessness

1 Healthy home (electricity, appliances, working water/sewer, no lead paint)

_____ Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☒ Disabled

☐ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____



CITY OF CHOWCHILLA

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☐ **INDIVIDUAL** – I belong to the group(s) below (*check any that applies*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input checked="" type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Resident of City of Chowchilla | <input checked="" type="checkbox"/> Renter | <input type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input checked="" type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☐ Less than \$25,750 ☒ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|--|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input checked="" type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
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MY CURRENT HOUSING is (*check one*):

- | | | |
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|--|--|---|
| <u>2</u> Maintain neighbor character | <u>3</u> Public transportation | <u>3</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>3</u> Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>3</u> Affordable housing, particularly for (<i>check any that applies</i>): | | |
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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I WOULD PREFER TO LIVE in (*check one*):

- | | | |
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- | | | |
|---|--|--|
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| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input checked="" type="checkbox"/> Agricultural workers |
| <input checked="" type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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- | | |
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- | | | |
|---|--|---|
| <u>3</u> Maintain neighbor character | <u>3</u> Public transportation | <u>3</u> Access to services, shopping, schools close to home |
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3 Affordable housing, particularly for (check any that applies):

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
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make america great again in Jesus Name Amen

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- | | |
|---|---|
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- | | | |
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I WOULD PREFER TO LIVE in (*check one*):

- | | | |
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- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
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☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla ☐ Renter ☐ Homeowner ☐ City of Chowchilla Employee

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☐ **Faith-based Organization**

☒ Seniors

☐ **Public Schools**

☒ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

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☐ Use public transportation

☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

☐ Less than \$25,750

☒ \$25,751 to \$32,399

☐ \$32,400 to \$51,849

☐ \$51,850 to 64,799

☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

☐ **Business (Owner/Manager)**

☒ **A special needs group:**

☐ **Faith-based Organization**

☒ **Seniors**

☐ **Public Schools**

☒ **Those with disabilities**

☐ **Service/civic group**

☐ **Agricultural workers**

☐ **Neighborhood association**

☐ **Those in need of temporary, emergency, or other suitable housing**

☐ **Building Industry**

☐ **Medical, health, or mental health organization/profession**

☐ **Affordable housing Org/agency**

☐ **Other** _____

MY CURRENT HOUSING is (*check one*):

☒ **Own a house or condo**

☐ **Rent a house**

☐ **Rent an apartment, duplex, etc.**

☐ **Rent/own in mobile home community**

☐ **Live in substandard housing**

☐ **Am homeless**

I WOULD PREFER TO LIVE in (*check one*):

☒ **A single-family home**

☐ **A condo that I own**

☐ **An apartment that I rent**

☐ **A duplex, triplex, or similar**

☐ **A mobile home in a community**

☐ **Gated community with private security**

☐ **A retirement or other community that offers medical, meals, and/or other services on-site**

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 **Maintain neighbor character**

1 **Public transportation**

___ **Access to services, shopping, schools close to home**

3 **Safety (lighting, sidewalks, crime protection) and privacy**

___ **Emergency and temporary housing to prevent homelessness**

3 **Healthy home (electricity, appliances, working water/sewer, no lead paint)**

☒ **Affordable housing, particularly for** (*check any that applies*):

☒ **Seniors**

☒ **Disabled**

☐ **Single persons**

☐ **Large families**

☐ **Veterans**

☐ **Agricultural workers**

☐ **Single parent with minor children**

☐ **Other** _____

If you have additional comments please attach a separate sheet or email them to Planning@CityOfChowchilla.org



CITY OF CHOWCHILLA

Housing Element Update Survey and Comment Sheet

The City of Chowchilla is asking for your input on the most important housing issues the City faces. Circle whether you are offering your comments as an **INDIVIDUAL** or a **GROUP REPRESENTATIVE**. Mail or deliver the completed survey to the City of Chowchilla, 130 S Second St., Chowchilla, CA 93610, or email to Planning@CityOfChowchilla.org.

☐ **INDIVIDUAL** – I belong to the group(s) below (*check any that applies*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input checked="" type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input checked="" type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input checked="" type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

___ Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

___ Healthy home (electricity, appliances, working water/sewer, no lead paint)

___ Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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☒ **Senior** (65 years old and older)

☐ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Agricultural worker**

☐ **Large household** (5+ people)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

☒ Resident of City of Chowchilla ☐ Renter ☐ Homeowner ☐ City of Chowchilla Employee

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☐ More than 8 Person Household

☐ Use public transportation ☐ Commute more than 10 miles to work

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☐ **Faith-based Organization**

☐ **Public Schools**

☐ **Service/civic group**

☐ **Neighborhood association**

☐ **Building Industry**

☐ **Affordable housing Org/agency**

☐ **A special needs group:**

☒ Seniors

☐ Those with disabilities

☐ Agricultural workers

☐ Those in need of temporary, emergency, or other suitable housing

☐ Medical, health, or mental health organization/profession

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☐ Own a house or condo

☒ Rent/own in mobile home community

☒ Rent a house

☐ Live in substandard housing

☐ Rent an apartment, duplex, etc.

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☒ A single-family home

☐ A duplex, triplex, or similar

☐ A retirement or other community that offers medical, meals, and/or other services on-site

☐ A condo that I own

☐ A mobile home in a community

☐ An apartment that I rent

☐ Gated community with private security

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

1 Public transportation

1 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

1 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Large families

☐ Single parent with minor children

☒ Disabled

☒ Veterans

☐ Other _____

☐ Single persons

☐ Agricultural workers

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CITY OF CHOWCHILLA

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Check all that apply to you:

☒ Resident of City of Chowchilla ☐ Renter ☒ Homeowner ☐ City of Chowchilla Employee

☒ 1-2 person household ☐ 3-4 person household ☐ 5-6 person household ☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation ☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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☐ Seniors

☐ **Public Schools**

☒ Those with disabilities

☐ **Service/civic group**

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☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

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☐ Live in substandard housing

☐ Am homeless

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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

1 Maintain neighbor character

___ Public transportation

3 Access to services, shopping, schools close to home

2 Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

☒ Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☒ Disabled

☐ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

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| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input checked="" type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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- | | |
|---|--|
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| <input checked="" type="checkbox"/> Public Schools | <input checked="" type="checkbox"/> Those with disabilities |
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| <input checked="" type="checkbox"/> Neighborhood association | <input checked="" type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input checked="" type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
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- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
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| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

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3 = Very Important

- | | | |
|--|---|--|
| <u>3</u> Maintain neighbor character | ___ Public transportation | ___ Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | ___ Emergency and temporary housing to prevent homelessness | ___ Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>3</u> Affordable housing, particularly for (<i>check any that applies</i>): | | |
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input checked="" type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input checked="" type="checkbox"/> Agricultural workers |
| <input checked="" type="checkbox"/> Single parent with minor children | <input checked="" type="checkbox"/> Other <u>All</u> | |

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CITY OF CHOWCHILLA

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☒ **INDIVIDUAL** – I belong to the group(s) below (check any that applies):

- | | | |
|--|---|---|
| <input type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input checked="" type="checkbox"/> Renter | <input type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

- ☒ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (check any that applies):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors |
| <input checked="" type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (check one):

- | | | |
|--|--|--|
| <input type="checkbox"/> Own a house or condo | <input checked="" type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (check one):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

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3 = Very Important

- | | | |
|---|--|---|
| <u>3</u> Maintain neighbor character | <u>2</u> Public transportation | <u>2</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>3</u> Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>3</u> Affordable housing, particularly for (check any that applies): | | |
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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INDIVIDUAL – I belong to the group(s) below (check any that applies):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 65 years old and older | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input checked="" type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

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- | | | | |
|--|--|---|--|
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| <input type="checkbox"/> Use public transportation | <input checked="" type="checkbox"/> Commute more than 10 miles to work | | |

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GROUP REPRESENTATIVE of (check any that applies):

- | | |
|--|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
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| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
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- | | | |
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- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
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3 = Very Important

- | | | |
|---|--|---|
| <u>1</u> Maintain neighbor character | <u>3</u> Public transportation | <u>2</u> Access to services, shopping, schools close to home |
| <u>2</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>2</u> Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>3</u> Affordable housing, particularly for (check any that applies): | | |
| <input type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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☐ **Single person or couple** (not living with children, parents, or other dependents)

☒ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☐ Homeowner

☐ City of Chowchilla Employee

☐ 1-2 person household

☒ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☒ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

☐ Less than \$25,750

☒ \$25,751 to \$32,399

☐ \$32,400 to \$51,849

☐ \$51,850 to 64,799

☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

☐ **Business** (Owner/Manager)

☐ **A special needs group:**

☐ **Faith-based Organization**

☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☒ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☐ Own a house or condo

☒ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☒ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

2 Maintain neighbor character

3 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

3 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

___ Affordable housing, particularly for (*check any that applies*):

☐ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☒ Other

families in transition from social services to workforce. That in between is difficult.

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CITY OF CHOWCHILLA

Housing Element Update Survey and Comment Sheet

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☒ **INDIVIDUAL** – I belong to the group(s) below (*check any that applies*):

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☒ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

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- | | | |
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- | | | |
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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

- | | | |
|---|--|---|
| <u>1</u> Maintain neighbor character | <u>3</u> Public transportation | <u>2</u> Access to services, shopping, schools close to home |
| <u>2</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>3</u> Emergency and temporary housing to prevent homelessness | <u>1</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |

☐ **Affordable housing, particularly for** (*check any that applies*):

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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| <input type="checkbox"/> Agricultural worker | | |

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| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

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☐ **GROUP REPRESENTATIVE** of (check any that applies):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (check one):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
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I WOULD PREFER TO LIVE in (check one):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

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1 = Least Important

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2 Maintain neighbor character

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3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (check any that applies):

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input checked="" type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

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- | | |
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- | | | |
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I WOULD PREFER TO LIVE in (*check one*):

- | | | |
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___ Maintain neighbor character

___ Public transportation

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___ Affordable housing, particularly for (*check any that applies*):

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☐ Large families

☒ Veterans

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- | | | |
|--|---|--|
| ___ Maintain neighbor character | ___ Public transportation | ___ Access to services, shopping, schools close to home |
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- | | | |
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☒ **Single person or couple** (not living with children, parents, or other dependents)

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☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla

☒ Renter

☐ Homeowner

☐ City of Chowchilla Employee

☒ 1-2 person household

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|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☒ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

- | | | |
|--|---|---|
| <u>3</u> Maintain neighbor character | ___ Public transportation | <u>3</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | ___ Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>3</u> Affordable housing, particularly for (<i>check any that applies</i>): | | |
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input checked="" type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input checked="" type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

If you have additional comments please attach a separate sheet or email them to Planning@CityOfChowchilla.org



CITY OF CHOWCHILLA

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■ **INDIVIDUAL** – I belong to the group(s) below (*check any that applies*):

- ☐ Senior (65 years old and older) ☐ Large household (5+ people)
☒ Single person or couple (not living with children, parents, or other dependents) ☐ Single parent (with children younger than 18 years in the home)
☐ Agricultural worker

■ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

- Resident of City of Chowchilla ☐ Renter ☐ Homeowner ☐ City of Chowchilla Employee
☒ 1-2 person household ☐ 3-4 person household ☐ 5-6 person household ☐ 7-8 person household
☐ More than 8 Person Household
☐ Use public transportation ☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

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☐ Faith-based Organization ☐ Seniors
☐ Public Schools ☐ Those with disabilities
☐ Service/civic group ☐ Agricultural workers
☐ Neighborhood association ☐ Those in need of temporary, emergency, or other suitable housing
☐ Building Industry ☐ Medical, health, or mental health organization/profession
☐ Affordable housing Org/agency ☐ Other _____

MY CURRENT HOUSING is (*check one*):

- ☐ Own a house or condo ☒ Rent a house ☐ Rent an apartment, duplex, etc.
☐ Rent/own in mobile home community ☐ Live in substandard housing ☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

- A single-family home ☐ A condo that I own ☐ An apartment that I rent
☐ A duplex, triplex, or similar ☐ A mobile home in a community ■ Gated community with private security
☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

3 Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

3 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

- Seniors ■ Disabled
 ■ Large families ■ Veterans
 ■ Single parent with minor children ☐ Other _____

- Single persons
☐ Agricultural workers

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☐ **Public Schools** ☒ **Those with disabilities**
☐ **Service/civic group** ☐ **Agricultural workers**
☐ **Neighborhood association** ☐ **Those in need of temporary, emergency, or other suitable housing**
☐ **Building Industry** ☐ **Medical, health, or mental health organization/profession**
☐ **Affordable housing Org/agency** ☐ **Other** _____

MY CURRENT HOUSING is (*check one*):

- ☒ Own a house or condo ☐ Rent a house ☐ Rent an apartment, duplex, etc.
☐ Rent/own in mobile home community ☐ Live in substandard housing ☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

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3 = Very Important

3 Maintain neighbor character

___ Public transportation

___ Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

___ Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

- ☒ Seniors ☒ Disabled
☐ Large families ☐ Veterans
☐ Single parent with minor children ☐ Other _____

- ☒ Single persons
☐ Agricultural workers

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| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
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| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

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☐ **GROUP REPRESENTATIVE** of (check any that applies):

- | | |
|---|---|
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| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

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- | | | |
|--|--|--|
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- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

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3 Maintain neighbor character

3 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

7 Affordable housing, particularly for (check any that applies):

☒ Seniors

☐ Disabled

☒ Single persons

☐ Large families

☒ Veterans

☐ Agricultural workers

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☐ Other _____

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Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

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☒ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

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☐ More than 8 Person Household

☐ Use public transportation

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☐ **Business (Owner/Manager)**

☐ **A special needs group:**

☐ **Faith-based Organization**

☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☒ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

___ Public transportation

___ Access to services, shopping, schools close to home

1 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

___ Healthy home (electricity, appliances, working water/sewer, no lead paint)

___ Affordable housing, particularly for (*check any that applies*):

☐ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____

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Check all that apply to you:

- ☒ Resident of City of Chowchilla ☒ **Renter** ☐ Homeowner ☐ City of Chowchilla Employee
☒ 1-2 person household ☐ 3-4 person household ☐ 5-6 person household ☐ 7-8 person household
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MY CURRENT HOUSING is (*check one*):

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I WOULD PREFER TO LIVE in (*check one*):

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1 = Least Important

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3 Maintain neighbor character

3 Public transportation

3 Access to services, shopping, schools close to home

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3 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

- ☒ Seniors
☐ Large families
☒ Single parent with minor children

- ☒ Disabled
☐ Veterans
☐ Other

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☒ Agricultural workers

Entire town in the real world

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3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

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- | | | | |
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| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other <u>old AGE</u> |

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- | | | |
|--|--|--|
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- | | | |
|--|---|--|
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- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

If you have additional comments please attach a separate sheet or email them to Planning@CityOfChowchilla.org



The City of Chowchilla is asking for your input on the most important housing issues the City faces. Circle whether you are offering your comments as an **INDIVIDUAL** or a **GROUP REPRESENTATIVE**. Mail or deliver the completed survey to the City of Chowchilla, 130 S Second St., Chowchilla, CA 93610, or email to Planning@CityOfChowchilla.org.

☐ **INDIVIDUAL** – I belong to the group(s) below (check any that applies):

☐ **Senior** (65 years old and older)

☐ **Large household** (5+ people)

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

☐ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☐ Resident of City of Chowchilla ☐ Renter ☐ Homeowner ☐ City of Chowchilla Employee

☐ 1-2 person household ☒ 3-4 person household ☐ 5-6 person household ☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation ☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

☒ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (check any that applies):

☐ **Business (Owner/Manager)**

☐ **A special needs group:**

☐ **Faith-based Organization**

☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (check one):

☐ Own a house or condo

☒ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (check one):

☒ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

2 Maintain neighbor character

1 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

3 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (check any that applies):

☒ Seniors

☒ Disabled

☒ Single persons

☒ Large families

☒ Veterans

☐ Agricultural workers

☒ Single parent with minor children

☐ Other _____

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CITY OF CHOWCHILLA

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 - ☐ Single parent (with children younger than 18 years in the home)
 - ☐ Agricultural worker
 - ☐ Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

- ☒ Resident of City of Chowchilla
- ☐ Renter
- ☒ Homeowner
- ☐ City of Chowchilla Employee
- ☐ 1-2 person household
- ☐ 3-4 person household
- ☒ 5-6 person household
- ☐ 7-8 person household
- ☐ More than 8 Person Household
- ☐ Use public transportation
- ☒ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

- ☒ Less than \$25,750
- ☐ \$25,751 to \$32,399
- ☐ \$32,400 to \$51,849
- ☐ \$51,850 to 64,799
- ☐ More than \$64,800

☐ GROUP REPRESENTATIVE of (check any that applies):

- ☐ Business (Owner/Manager)
- ☐ Faith-based Organization
- ☐ Public Schools
- ☐ Service/civic group
- ☐ Neighborhood association
- ☐ Building Industry
- ☐ Affordable housing Org/agency
- ☐ A special needs group:
 - ☐ Seniors
 - ☐ Those with disabilities
 - ☐ Agricultural workers
 - ☐ Those in need of temporary, emergency, or other suitable housing
 - ☐ Medical, health, or mental health organization/profession
 - ☐ Other _____

MY CURRENT HOUSING is (check one):

- ☒ Own a house or condo
- ☐ Rent a house
- ☐ Rent an apartment, duplex, etc.
- ☐ Rent/own in mobile home community
- ☐ Live in substandard housing
- ☐ Am homeless

I WOULD PREFER TO LIVE in (check one):

- ☒ A single-family home
- ☐ A condo that I own
- ☐ An apartment that I rent
- ☐ A duplex, triplex, or similar
- ☐ A mobile home in a community
- ☐ Gated community with private security
- ☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

- | | | |
|---|--|---|
| <u>3</u> Maintain neighbor character | <u>1</u> Public transportation | <u>3</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>3</u> Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |

Affordable housing, particularly for (check any that applies):

- ☒ Seniors
- ☒ Disabled
- ☒ Single persons
- ☒ Large families
- ☐ Veterans
- ☐ Agricultural workers
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- | | | |
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| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☒ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input checked="" type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input checked="" type="checkbox"/> <i>Public</i> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

2 Maintain neighbor character

3 Public transportation

3 Access to services, shopping, schools close to home

9 Safety (lighting, sidewalks, crime protection) and privacy

3 Emergency and temporary housing to prevent homelessness

___ Healthy home (electricity, appliances, working water/sewer, no lead paint)

___ Affordable housing, particularly for (*check any that applies*):

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input checked="" type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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- | | | |
|---|---|---|
| <input type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input checked="" type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|---|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input checked="" type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☒ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

2 Public transportation

2 Access to services, shopping, schools close to home

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2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

____ Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--|---|
| <input type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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CITY OF CHOWCHILLA

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☒ **INDIVIDUAL** – I belong to the group(s) below (check any that applies):

- ☐ Senior (65 years old and older)
- ☐ Single person or couple (not living with children, parents, or other dependents)
- ☐ Agricultural worker
- ☐ Large household (5+ people)
- ☐ Single parent (with children younger than 18 years in the home)
- ☒ Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

- ☒ Resident of City of Chowchilla
- ☐ Renter
- ☒ Homeowner
- ☐ City of Chowchilla Employee
- ☐ 1-2 person household
- ☒ 3-4 person household
- ☐ 5-6 person household
- ☐ 7-8 person household
- ☐ More than 8 Person Household
- ☐ Use public transportation
- ☒ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

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☐ **GROUP REPRESENTATIVE** of (check any that applies):

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- ☐ Public Schools
- ☐ Service/civic group
- ☐ Neighborhood association
- ☐ Building Industry
- ☐ Affordable housing Org/agency
- ☐ A special needs group:
 - ☐ Seniors
 - ☒ Those with disabilities
 - ☐ Agricultural workers
 - ☐ Those in need of temporary, emergency, or other suitable housing
 - ☐ Medical, health, or mental health organization/profession
 - ☐ Other _____

MY CURRENT HOUSING is (check one):

- ☒ Own a house or condo
- ☐ Rent a house
- ☐ Rent an apartment, duplex, etc.
- ☐ Rent/own in mobile home community
- ☐ Live in substandard housing
- ☐ Am homeless

I WOULD PREFER TO LIVE in (check one):

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- ☐ An apartment that I rent
- ☐ A duplex, triplex, or similar
- ☐ A mobile home in a community
- ☐ Gated community with private security
- ☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Most Important

2 = Somewhat Important

3 = Very Important

- 1 ☒ Affordable housing
- 2 ☐ Public transportation
- 3 ☐ Access to services, shopping, schools close to home
- 1 ☐ Emergency and temporary housing to prevent homelessness
- 2 ☐ Healthy home (electricity, appliances, working water/sewer, no lead paint)
- 3 ☐ Single persons

3 ☐ Other _____

- ☐ Agricultural workers

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☒ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Agricultural worker**

☐ **Large household** (5+ people)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☒ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☒ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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☐ \$25,751 to \$32,399

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☐ **Service/civic group**

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☐ **Building Industry**

☐ **Affordable housing Org/agency**

☐ **A special needs group:**

☐ Seniors

☐ Those with disabilities

☐ Agricultural workers

☐ Those in need of temporary, emergency, or other suitable housing

☐ Medical, health, or mental health organization/profession

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

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☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

2 Maintain neighbor character

1 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☒ Disabled

☒ Single persons

☐ Large families

☒ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____

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☐ More than 8 Person Household

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☐ **Public Schools**

☐ **Service/civic group**

☐ **Neighborhood association**

☐ **Building Industry**

☐ **Affordable housing Org/agency**

☐ **A special needs group:**

☐ Seniors

☐ Those with disabilities

☐ Agricultural workers

☐ Those in need of temporary, emergency, or other suitable housing

☐ Medical, health, or mental health organization/profession

☐ Other _____

MY CURRENT HOUSING is *(check one)*:

☒ Own a house or condo

☐ Rent/own in mobile home community

☐ Rent a house

☐ Live in substandard housing

☐ Rent an apartment, duplex, etc.

☐ Am homeless

I WOULD PREFER TO LIVE in *(check one)*:

☐ A single-family home

☐ A duplex, triplex, or similar

☐ A retirement or other community that offers medical, meals, and/or other services on-site

☐ A condo that I own

☐ A mobile home in a community

☐ An apartment that I rent

☒ Gated community with private security

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

1 Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for *(check any that applies)*:

☒ Seniors

☐ Large families

☐ Single parent with minor children

☐ Disabled

☐ Veterans

☐ Other _____

☒ Single persons

☐ Agricultural workers

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- | | | |
|--|---|---|
| <input type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
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Check all that apply to you:

- ☒ Resident of City of Chowchilla ☐ Renter ☒ Homeowner ☐ City of Chowchilla Employee
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- ☐ Use public transportation ☒ Commute more than 10 miles to work

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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- ☒ Own a house or condo ☐ Rent a house ☐ Rent an apartment, duplex, etc.
- ☐ Rent/own in mobile home community ☐ Live in substandard housing ☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

- ☐ A single-family home ☐ A condo that I own ☐ An apartment that I rent
- ☐ A duplex, triplex, or similar ☐ A mobile home in a community ☒ Gated community with private security
- ☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

2 Maintain neighbor character

1 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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☐ **Agricultural worker**

☒ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☒ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

☐ Less than \$25,750

☐ \$25,751 to \$32,399

☐ \$32,400 to \$51,849

☐ \$51,850 to 64,799

☒ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

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☐ **A special needs group:**

☐ **Faith-based Organization**

☒ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☒ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

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☐ Live in substandard housing

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I WOULD PREFER TO LIVE in (*check one*):

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☐ An apartment that I rent

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☒ Gated community with private security

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1 Maintain neighbor character

___ Public transportation

___ Access to services, shopping, schools close to home

2 Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

☒ Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

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| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input type="checkbox"/> 1-2 person household | <input checked="" type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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- | | | |
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- | | | |
|--|---|---|
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| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input checked="" type="checkbox"/> Gated community with private security |
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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

- | | | |
|--|--|---|
| <u>3</u> Maintain neighbor character | <u>1</u> Public transportation | <u>3</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>1</u> Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>2</u> Affordable housing, particularly for (<i>check any that applies</i>): | | |
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|--|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input type="checkbox"/> 1-2 person household | <input checked="" type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input checked="" type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☒ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (check any that applies):

- | | |
|--|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
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| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
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MY CURRENT HOUSING is (check one):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (check one):

- | | | |
|--|---|---|
| <input type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
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Our neighbor makes the whole block look like Trash
RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

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3 Maintain neighbor character

1 Public transportation

___ Access to services, shopping, schools close to home

2 Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

___ Healthy home (electricity, appliances, working water/sewer, no lead paint)

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- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
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☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla ☐ Renter ☒ Homeowner ☐ City of Chowchilla Employee

☐ 1-2 person household

☐ 3-4 person household

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☐ Use public transportation

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☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

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I WOULD PREFER TO LIVE in (*check one*):

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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

1 Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

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☒ Disabled

☐ Single persons

☒ Large families

☐ Veterans

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☐ Other _____

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- | | | | |
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☐ A mobile home in a community

☒ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

1 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

____ Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

☐ Seniors

☒ Disabled

☐ Single persons

☐ Large families

☒ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____

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- | | | |
|--|---|---|
| <input type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input checked="" type="checkbox"/> Renter | <input type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input type="checkbox"/> 1-2 person household | <input checked="" type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☒ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input type="checkbox"/> Own a house or condo | <input checked="" type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

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2 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--|---|
| <input type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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CITY OF CHOWCHILLA

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| <input type="checkbox"/> 1-2 person household | <input checked="" type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input checked="" type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

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☐ **GROUP REPRESENTATIVE** of (check any that applies):

- | | |
|---|--|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
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| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
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- | | | |
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I WOULD PREFER TO LIVE in (check one):

- | | | |
|---|--|--|
| <input type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
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2 **Maintain neighbor character**

1 **Public transportation**

3 **Access to services, shopping, schools close to home**

3 **Safety (lighting, sidewalks, crime protection) and privacy**

2 **Emergency and temporary housing to prevent homelessness**

3 **Healthy home (electricity, appliances, working water/sewer, no lead paint)**

2 **Affordable housing, particularly for (check any that applies):**

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla ☐ Renter ☒ Homeowner ☐ City of Chowchilla Employee

☒ 1-2 person household ☐ 3-4 person household ☐ 5-6 person household ☐ 7-8 person household

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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

☐ **Business (Owner/Manager)**

☐ **A special needs group:**

☐ **Faith-based Organization**

☒ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

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☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☐ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☒ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

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3 Maintain neighbor character

___ Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Disabled

☐ Single persons

☐ Large families

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☐ Agricultural workers

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☐ Other _____

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☐ **Agricultural worker**

☐ **Large household** (5+ people)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

☒ Resident of City of Chowchilla ☐ Renter ☒ Homeowner ☐ City of Chowchilla Employee

☒ 1-2 person household ☐ 3-4 person household ☐ 5-6 person household ☐ 7-8 person household

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☐ **Public Schools**

☐ **Service/civic group**

☐ **Neighborhood association**

☐ **Building Industry**

☐ **Affordable housing Org/agency**

☐ **A special needs group:**

☒ **Seniors**

☐ Those with disabilities

☐ Agricultural workers

☐ Those in need of temporary, emergency, or other suitable housing

☐ Medical, health, or mental health organization/profession

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent/own in mobile home community

☐ Rent a house

☐ Live in substandard housing

☐ Rent an apartment, duplex, etc.

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☐ A single-family home

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 Emergency and temporary housing to prevent homelessness

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3 Affordable housing, particularly for (*check any that applies*):

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- | | | | |
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- | | |
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- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
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| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
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- | | | |
|--|--|---|
| <u>3</u> Maintain neighbor character | <u>2</u> Public transportation | <u>3</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>2</u> Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>3</u> Affordable housing, particularly for (<i>check any that applies</i>): | | |
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
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I WOULD PREFER TO LIVE in (check one):

- | | | |
|--|---|---|
| <input type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input checked="" type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

2 Maintain neighbor character

1 Public transportation

1 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for (check any that applies):

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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| <input checked="" type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
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| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
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| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☒ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (check any that applies):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (check one):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (check one):

- | | | |
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| <input type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
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☐ **Public Schools**

☐ Those with disabilities

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☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

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☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

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☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

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2 Affordable housing, particularly for (*check any that applies*):

- ☐ Seniors
☐ Large families
☐ Single parent with minor children

- ☐ Disabled
☐ Veterans

☒ Other All People

- ☐ Single persons
☐ Agricultural workers

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3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (check any that applies):

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☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

___ Maintain neighbor character

___ Public transportation

2 Access to services, shopping, schools close to home

1 Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

___ Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Disabled

☐ Single persons

☒ Large families

☐ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____

If you have additional comments please attach a separate sheet or email them to Planning@CityOfChowchilla.org



CITY OF CHOWCHILLA

Housing Element Update Survey and Comment Sheet

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☒ **INDIVIDUAL** – I belong to the group(s) below (*check any that applies*):

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input checked="" type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☒ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input checked="" type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|---|---|--|
| <input type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input checked="" type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

- | | | |
|--|---|--|
| <u>1</u> <input checked="" type="checkbox"/> Maintain neighbor character | <u>2</u> <input type="checkbox"/> Public transportation | <u>2</u> <input type="checkbox"/> Access to services, shopping, schools close to home |
| <u>2</u> <input checked="" type="checkbox"/> Safety (lighting, sidewalks, crime protection) and privacy | <u>3</u> <input type="checkbox"/> Emergency and temporary housing to prevent homelessness | <u>3</u> <input type="checkbox"/> Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>3</u> <input checked="" type="checkbox"/> Affordable housing, particularly for (<i>check any that applies</i>): | | |
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input checked="" type="checkbox"/> Agricultural workers |
| <input checked="" type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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CITY OF CHOWCHILLA

Housing Element Update Survey and Comment Sheet

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☐ **INDIVIDUAL** — I belong to the group(s) below (check any that applies):

☒ **Senior** (65 years old and older)

☐ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Agricultural worker**

☐ **Large household** (5+ people)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

☒ **Resident of City of Chowchilla**

☐ **Renter**

☒ **Homeowner**

☐ **City of Chowchilla Employee**

☒ **1-2 person household**

☐ **3-4 person household**

☐ **5-6 person household**

☐ **7-8 person household**

☐ **More than 8 Person Household**

☐ **Use public transportation**

☐ **Commute more than 10 miles to work**

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

☒ **Less than \$25,750**

☐ **\$25,751 to \$32,399**

☐ **\$32,400 to \$51,849**

☐ **\$51,850 to 64,799**

☐ **More than \$64,800**

☐ **GROUP REPRESENTATIVE of (check any that applies):**

☐ **Business (Owner/Manager)**

☐ **Faith-based Organization**

☐ **Public Schools**

☐ **Service/civic group**

☐ **Neighborhood association**

☐ **Building Industry**

☐ **Affordable housing Org/agency**

☐ **A special needs group:**

☒ **Seniors**

☐ **Those with disabilities**

☐ **Agricultural workers**

☐ **Those in need of temporary, emergency, or other suitable housing**

☐ **Medical, health, or mental health organization/profession**

☐ **Other**

MY CURRENT HOUSING is (check one):

☒ **Own a house or condo**

☐ **Rent/own in mobile home community**

☐ **Rent a house**

☐ **Live in substandard housing**

☐ **Rent an apartment, duplex, etc.**

☐ **Am homeless**

I WOULD PREFER TO LIVE in (check one):

☐ **A single-family home**

☐ **A duplex, triplex, or similar**

☐ **A retirement or other community that offers medical, meals, and/or other services on-site**

☒ **A condo that I own**

☐ **A mobile home in a community**

☐ **An apartment that I rent**

☐ **Gated community with private security**

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 **Maintain neighbor character**

3 **Safety (lighting, sidewalks, crime protection) and privacy**

3 **Affordable housing, particularly for (check any that applies):**

☒ **Seniors**

☐ **Large families**

☐ **Single parent with minor children**

1 **Public transportation**

1 **Emergency and temporary housing to prevent homelessness**

☐ **Disabled**

☐ **Veterans**

☐ **Other**

2 **Access to services, shopping, schools close to home**

2 **Healthy home (electricity, appliances, working water/sewer, no lead paint)**

☐ **Single persons**

☐ **Agricultural workers**

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☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

☐ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla

☒ Renter

☐ Homeowner

☐ City of Chowchilla Employee

☐ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☒ Use public transportation

☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

☒ Less than \$25,750

☐ \$25,751 to \$32,399

☐ \$32,400 to \$51,849

☐ \$51,850 to 64,799

☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

☐ **Business (Owner/Manager)**

☒ **A special needs group:**

☐ **Faith-based Organization**

☒ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☒ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☐ Own a house or condo

☐ Rent a house

☒ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*): Two.

☐ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☒ A mobile home in a community

☐ Gated community with private security

☒ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

3 Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

X Affordable housing, particularly for (*check any that applies*): Safe

☒ Seniors

☒ Disabled

☒ Single persons

☒ Large families

☒ Veterans

☒ Agricultural workers

☒ Single parent with minor children

☒ Other _____

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CITY OF CHOWCHILLA

Housing Element Update Survey and Comment Sheet

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- | | | |
|--|---|---|
| <input type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☒ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|---|---|--|
| <input type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input checked="" type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

___ Maintain neighbor character

☒ Public transportation

☒ Access to services, shopping, schools close to home

___ Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

☒ Healthy home (electricity, appliances, working water/sewer, no lead paint)

___ Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☒ Disabled

☐ Single persons

☐ Large families

☒ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____

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☒ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Agricultural worker**

☐ **Large household** (5+ people)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

☐ Resident of City of Chowchilla ☐ Renter ☒ Homeowner ☐ City of Chowchilla Employee

☒ 1-2 person household ☐ 3-4 person household ☐ 5-6 person household ☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation ☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☒ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

☐ **Business** (Owner/Manager)

☐ **Faith-based Organization**

☐ **Public Schools**

☐ **Service/civic group**

☐ **Neighborhood association**

☐ **Building Industry**

☐ **Affordable housing Org/agency**

☐ **A special needs group:**

☐ Seniors

☐ Those with disabilities

☐ Agricultural workers

☐ Those in need of temporary, emergency, or other suitable housing

☐ Medical, health, or mental health organization/profession

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent/own in mobile home community

☐ Rent a house

☐ Live in substandard housing

☐ Rent an apartment, duplex, etc.

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☐ A single-family home

☐ A duplex, triplex, or similar

☐ A retirement or other community that offers medical, meals, and/or other services on-site

☐ A condo that I own

☐ A mobile home in a community

☐ An apartment that I rent

☐ Gated community with private security

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

2 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

3 Emergency and temporary housing to prevent homelessness

2 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Large families

☒ Single parent with minor children

☒ Disabled

☒ Veterans

☐ Other _____

☐ Single persons

☐ Agricultural workers

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☒ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☐ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☒ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☒ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

☐ Less than \$25,750

☐ \$25,751 to \$32,399

☐ \$32,400 to \$51,849

☐ \$51,850 to 64,799

☒ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (check any that applies):

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☐ **A special needs group:**

☐ **Faith-based Organization**

☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (check one):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (check one):

☒ **POOL - INDOOR**

☐ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

___ Maintain neighbor character

2 Public transportation

___ Access to services, shopping, schools close to home

___ Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

1 Affordable housing, particularly for (check any that applies):

☒ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☒ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☒ Other young couples starting out

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☒ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☒ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☒ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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☐ \$25,751 to \$32,399

☐ \$32,400 to \$51,849

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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

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☐ **Faith-based Organization**

☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☐ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

___ Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☒ Disabled

☐ Single persons

☐ Large families

☒ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____

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☒ **INDIVIDUAL** – I belong to the group(s) below (check any that applies):

- ☐ Senior (65 years old and older)
- ☐ Single person or couple (not living with children, parents, or other dependents)
- ☐ Agricultural worker
- ☐ Large household (5+ people)
- ☐ Single parent (with children younger than 18 years in the home)

☒ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

- ☒ Resident of City of Chowchilla
- ☐ Renter
- ☒ Homeowner
- ☐ City of Chowchilla Employee
- ☐ 1-2 person household
- ☒ 3-4 person household
- ☐ 5-6 person household
- ☐ 7-8 person household
- ☐ More than 8 Person Household
- ☐ Use public transportation
- ☒ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

- ☐ Less than \$25,750
- ☐ \$25,751 to \$32,399
- ☐ \$32,400 to \$51,849
- ☐ \$51,850 to 64,799
- ☒ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (check any that applies):

- ☒ Business (Owner/Manager)
- ☐ Faith-based Organization
- ☐ Public Schools
- ☐ Service/civic group
- ☐ Neighborhood association
- ☐ Building Industry
- ☐ Affordable housing Org/agency
- ☐ A special needs group:
 - ☐ Seniors
 - ☒ Those with disabilities
 - ☐ Agricultural workers
 - ☐ Those in need of temporary, emergency, or other suitable housing
 - ☐ Medical, health, or mental health organization/profession
 - ☐ Other _____

MY CURRENT HOUSING is (check one):

- ☒ Own a house or condo
- ☐ Rent/own in mobile home community
- ☐ Rent a house
- ☐ Live in substandard housing
- ☐ Rent an apartment, duplex, etc.
- ☐ Am homeless

I WOULD PREFER TO LIVE in (check one):

- ☐ A single-family home
- ☐ A duplex, triplex, or similar
- ☐ A retirement or other community that offers medical, meals, and/or other services on-site
- ☐ A condo that I own
- ☐ A mobile home in a community
- ☐ An apartment that I rent
- ☐ Gated community with private security

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

3 Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

3 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (check any that applies):

- ☒ Seniors
- ☒ Large families
- ☒ Single parent with minor children

- ☒ Disabled
- ☐ Veterans
- ☐ Other _____

- ☐ Single persons
- ☐ Agricultural workers

If you have additional comments please attach a separate sheet or email them to Planning@CityOfChowchilla.org



CITY OF CHOWCHILLA

Housing Element Update Survey and Comment Sheet

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☐ **INDIVIDUAL** – I belong to the group(s) below (*check any that applies*):

☒ **Senior** (65 years old and older)

☐ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Agricultural worker**

☐ **Large household** (5+ people)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

Check all that apply to you:

☐ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☐ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

☐ Less than \$25,750

☐ \$25,751 to \$32,399

☐ \$32,400 to \$51,849

☐ \$51,850 to 64,799

☒ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

☐ **Business** (Owner/Manager)

☐ **A special needs group:**

☐ **Faith-based Organization**

☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☐ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

___ Maintain neighbor character

___ Public transportation

___ Access to services, shopping, schools close to home

___ Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

___ Healthy home (electricity, appliances, working water/sewer, no lead paint)

___ Affordable housing, particularly for (*check any that applies*):

☐ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____

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☒ **INDIVIDUAL** – I belong to the group(s) below (check any that applies):

- | | | |
|--|---|---|
| <input type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- ☒ Resident of City of Chowchilla ☐ Renter ☒ Homeowner ☐ City of Chowchilla Employee
- ☐ 1-2 person household ☒ 3-4 person household ☐ 5-6 person household ☐ 7-8 person household
- ☐ More than 8 Person Household
- ☐ Use public transportation ☒ Commute more than 10 miles to work

*1 Person
Does not*

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☒ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (check any that applies):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (check one):

- ☒ Own a house or condo ☐ Rent a house ☐ Rent an apartment, duplex, etc.
- ☐ Rent/own in mobile home community ☐ Live in substandard housing ☐ Am homeless

I WOULD PREFER TO LIVE in (check one): *At the Beach*

- ☐ A single-family home ☐ A condo that I own ☐ An apartment that I rent
- ☐ A duplex, triplex, or similar ☐ A mobile home in a community ☐ Gated community with private security
- ☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

3 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

 Healthy home (electricity, appliances, working water/sewer, no lead paint)

1 Affordable housing, particularly for (check any that applies):

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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☒ **INDIVIDUAL** ~ I belong to the group(s) below (check any that applies):

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input checked="" type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (check one):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☒ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (check any that applies):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input checked="" type="checkbox"/> Other <u>Retired</u> |

MY CURRENT HOUSING is (check one):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (check one):

- | | | |
|--|---|--|
| <input type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

- | | | |
|---|--|---|
| <u>3</u> Maintain neighbor character | <u>2</u> Public transportation | <u>3</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>2</u> Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |

2 Affordable housing, particularly for (check any that applies):

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input checked="" type="checkbox"/> Single persons |
| <input checked="" type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input checked="" type="checkbox"/> Agricultural workers |
| <input checked="" type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input checked="" type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☒ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

1 Public transportation

2 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

____ Affordable housing, particularly for (*check any that applies*):

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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CITY OF CHOWCHILLA

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☒ **INDIVIDUAL** – I belong to the group(s) below (*check any that applies*):

- | | | |
|--|---|---|
| <input type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input type="checkbox"/> 1-2 person household | <input checked="" type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

- | | | |
|--|---|--|
| <u>2</u> Maintain neighbor character | ___ Public transportation | ___ Access to services, shopping, schools close to home |
| <u>2</u> Safety (lighting, sidewalks, crime protection) and privacy | ___ Emergency and temporary housing to prevent homelessness | ___ Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>3</u> Affordable housing, particularly for (<i>check any that applies</i>): | | |
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
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☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input type="checkbox"/> Faith-based Organization | <input checked="" type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
| <input type="checkbox"/> A duplex, triplex, or similar | <input type="checkbox"/> A mobile home in a community | <input type="checkbox"/> Gated community with private security |
| <input type="checkbox"/> A retirement or other community that offers medical, meals, and/or other services on-site | | |

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

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3 = Very Important

2 Maintain neighbor character

2 Public transportation

___ Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

___ Emergency and temporary housing to prevent homelessness

___ Healthy home (electricity, appliances, working water/sewer, no lead paint)

___ Affordable housing, particularly for (*check any that applies*):

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Seniors | <input checked="" type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input checked="" type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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☐ **INDIVIDUAL** – I belong to the group(s) below (*check any that applies*):

☒ **Senior** (65 years old and older)

☐ **Large household** (5+ people)

☒ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

☐ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☐ 1-2 person household

☒ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

☐ Less than \$25,750

☐ \$25,751 to \$32,399

☒ \$32,400 to \$51,849

☐ \$51,850 to 64,799

☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

☐ **Business (Owner/Manager)**

☐ **A special needs group:**

☐ **Faith-based Organization**

☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☐ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☐ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

2 Maintain neighbor character

2 Public transportation

2 Access to services, shopping, schools close to home

2 Safety (lighting, sidewalks, crime protection) and privacy

2 Emergency and temporary housing to prevent homelessness

2 Healthy home (electricity, appliances, working water/sewer, no lead paint)

2 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☒ Disabled

☒ Single persons

☒ Large families

☒ Veterans

☒ Agricultural workers

☒ Single parent with minor children

☐ Other _____

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CITY OF CHOWCHILLA

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☐ **INDIVIDUAL** – I belong to the group(s) below (*check any that applies*):

- | | | |
|--|---|---|
| <input type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Resident of City of Chowchilla | <input type="checkbox"/> Renter | <input checked="" type="checkbox"/> Homeowner | <input type="checkbox"/> City of Chowchilla Employee |
| <input type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

- ☐ Less than \$25,750 ☐ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☒ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

- | | |
|---|---|
| <input type="checkbox"/> Business (Owner/Manager) | <input type="checkbox"/> A special needs group: |
| <input checked="" type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Public Schools | <input type="checkbox"/> Those with disabilities |
| <input type="checkbox"/> Service/civic group | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Neighborhood association | <input type="checkbox"/> Those in need of temporary, emergency, or other suitable housing |
| <input type="checkbox"/> Building Industry | <input checked="" type="checkbox"/> Medical, health, or mental health organization/profession |
| <input type="checkbox"/> Affordable housing Org/agency | <input type="checkbox"/> Other _____ |

MY CURRENT HOUSING is (*check one*):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Own a house or condo | <input type="checkbox"/> Rent a house | <input type="checkbox"/> Rent an apartment, duplex, etc. |
| <input type="checkbox"/> Rent/own in mobile home community | <input type="checkbox"/> Live in substandard housing | <input type="checkbox"/> Am homeless |

I WOULD PREFER TO LIVE in (*check one*):

- | | | |
|--|---|--|
| <input type="checkbox"/> A single-family home | <input type="checkbox"/> A condo that I own | <input type="checkbox"/> An apartment that I rent |
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3 = Very Important

- | | | |
|--|--|---|
| <u>3</u> Maintain neighbor character | <u>2</u> Public transportation | <u>2</u> Access to services, shopping, schools close to home |
| <u>3</u> Safety (lighting, sidewalks, crime protection) and privacy | <u>3</u> Emergency and temporary housing to prevent homelessness | <u>3</u> Healthy home (electricity, appliances, working water/sewer, no lead paint) |
| <u>3</u> Affordable housing, particularly for (<i>check any that applies</i>): | | |
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Disabled | <input type="checkbox"/> Single persons |
| <input type="checkbox"/> Large families | <input checked="" type="checkbox"/> Veterans | <input type="checkbox"/> Agricultural workers |
| <input type="checkbox"/> Single parent with minor children | <input type="checkbox"/> Other _____ | |

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☐ **Neighborhood association**

☐ **Building Industry**

☐ **Affordable housing Org/agency**

☒ **A special needs group:**

☒ Seniors

☒ Those with disabilities

☐ Agricultural workers

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☐ Other _____

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3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

3 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

1 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Large families

☐ Single parent with minor children

☒ Disabled

☒ Veterans

☐ Other _____

☐ Single persons

☐ Agricultural workers

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CIUDAD DE CHOWCHILLA

Actualización de la Vivienda de Elemento Encuesta Y Comentario

La Ciudad de Chowchilla esta pidiendo su opinion sobre las cuestiones de vivienda mas importantes que enfrenta la Ciudad. Encierre en un círculo si está ofreciendo sus comentarios como **REPRESENTANTE INDIVIDUAL** o **GRUPAL**. Cuando se complete, envíe por correo o entregue personalmente su encuesta al Ayuntamiento de Chowchilla, 130 S Second St., Chowchilla, CA 93610, o envíela por correo electrónico a Planning@CityOfChowchilla.org.

☒ **INDIVIDUO** – Yo pertenesco a estos grupos por debajo (marque todos las que apliquen):

- | | | |
|--|---|---|
| <input type="checkbox"/> Mayores (65 años y mas) | <input checked="" type="checkbox"/> Casa grande (por lo menos 5 personas) | <input type="checkbox"/> Tener una discapacidad (la discapacidad visual o auditiva o condición física, mental o emocional de por lo menos seis meses de duración que me impedían realizar tareas esenciales) |
| <input type="checkbox"/> Persona sola o pareja (que no vive con hijos, padres, o otras personas dependientes) | <input type="checkbox"/> Madres Solteras o Mujer cabeza de hogar (con hijos menores de 18 años de edad en su casa) | |
| <input type="checkbox"/> Los Trabajadores de Campo y Agricultura | | |

Marque todo lo que le corresponda:

- | | | | |
|--|--|---|--|
| <input checked="" type="checkbox"/> Residente de la ciudad de Chowchilla | <input type="checkbox"/> Inquilin | <input checked="" type="checkbox"/> Dueño de casa | <input type="checkbox"/> Empleado de la ciudad de Chowchilla |
| <input type="checkbox"/> Hogar de 1-2 personas | <input type="checkbox"/> Hogar de 3-4 personas | <input checked="" type="checkbox"/> Hogar de 5-6 personas | <input type="checkbox"/> Hogar de 7-8 personas |
| <input type="checkbox"/> Hogar de más de 8 personas | | | |
| <input type="checkbox"/> Usa transporte público | <input type="checkbox"/> Viaja más de 10 millas al trabajo | | |

MI INGRESO GANADO DEL HOGAR POR AÑO es (marque uno):

- ☐ Menos de \$25,750 ☒ \$25,751 a \$32,399 ☐ \$32,400 a \$51,849 ☐ \$51,850 a 64,799 ☐ Más de \$64,800

☐ **Un Representante de** (marque todas las que apliquen):

- | | |
|--|--|
| <input checked="" type="checkbox"/> Negocio Local (Propietario / Administrador) | <input type="checkbox"/> Industria de Construcción |
| <input type="checkbox"/> Organización basada en la fe | <input type="checkbox"/> Servicio / grupo cívico |
| <input type="checkbox"/> Organización/Agencia de hogares en bajos ingresos | <input type="checkbox"/> Asociación de Vecindario |
| <input type="checkbox"/> Un grupo de necesidades especiales: | |
| <input type="checkbox"/> Mayores (65 años y más) | <input type="checkbox"/> Los necesitados de seguridad, vivienda temporal o de emergencia |
| <input type="checkbox"/> Los Trabajadores de Campo y Agricultura | <input type="checkbox"/> Otro _____ |
| <input type="checkbox"/> Personas con discapacidades | |
| <input type="checkbox"/> Organización/profesión médica | |

ACTUAL DE LA VIVIENDA (escojer una):

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Dueño de una casa o condominio | <input type="checkbox"/> Rentan una casa | <input type="checkbox"/> Rentan un apartamento, duplex o triplex |
| <input type="checkbox"/> Rentan o comprar una casa móvil en una comunidad | <input type="checkbox"/> Una casa móvil en una comunidad | <input type="checkbox"/> Sin hogar |

YO PREFERIA VIVIR EN (escojer una):

- | | | |
|--|--|--|
| <input type="checkbox"/> Un familia solamente | <input type="checkbox"/> Un condiminio que soy propietario | <input type="checkbox"/> Un Apartamento que yo rento |
| <input type="checkbox"/> Un dúplex, tríplex o madre-en-ley cuartos | <input type="checkbox"/> Una casa móvil en una comunidad | <input type="checkbox"/> Comunidad cerrada con seguridad privada |
| <input type="checkbox"/> Un retiro u otra comunidad que ofrece médicos, comidas, y / u otros servicios en el-sitio | | |

En una escala de 1 a 3, ponen las siguientes cuestiones en orden de importancia para usted personalmente.

1 = Menos Importante

2 = Algo Importante

3 = Muy Importante

- | | | |
|--|---|--|
| _____ Mantener caracter vecino | _____ El transporte publico | <u>2</u> El acceso a los servicios, commercial, escuelas cerca de su casa |
| <u>3</u> Seguridad (iluminación, aceras, y la protección contra la violencia y la delincuencia) y Privacidad | _____ Emergencia y alojamiento temporal para evitar sin hogar | <u>1</u> Hogar saludable: electricidad, electrodomésticos, y la función del agua / alcantarillado correctamente, sin pintura con plomo |

_____ Casas a precios razonables, especialmente para (escojer grupos apropiados):

- | | | |
|--|--|--|
| <input type="checkbox"/> Mayores (65 años y mas) | <input type="checkbox"/> Dicapacitado | <input type="checkbox"/> Veteranos |
| <input type="checkbox"/> Trabajadores de campo y agricultura | <input type="checkbox"/> Padres solteros con hijos menores de edad | <input type="checkbox"/> Personas Solteras |
| <input type="checkbox"/> Familias grandes | | <input type="checkbox"/> Otro _____ |

Si tiene comentarios adicionales, adjunte una hoja separada o envíela por correo electrónico a Planning@CityOfChowchilla.org



CITY OF CHOWCHILLA

Housing Element Update Survey and Comment Sheet

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☐ **Single parent** (with children younger than 18 years in the home)

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Check all that apply to you:

☒ Resident of City of Chowchilla ☐ Renter ☒ Homeowner ☐ City of Chowchilla Employee

☒ 1-2 person household ☐ 3-4 person household ☐ 5-6 person household ☐ 7-8 person household

☐ More than 8 Person Household

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MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

☐ Less than \$25,750 ☒ \$25,751 to \$32,399 ☐ \$32,400 to \$51,849 ☐ \$51,850 to 64,799 ☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

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☐ Seniors

☐ **Public Schools**

☐ Those with disabilities

☐ **Service/civic group**

☐ Agricultural workers

☐ **Neighborhood association**

☐ Those in need of temporary, emergency, or other suitable housing

☐ **Building Industry**

☐ Medical, health, or mental health organization/profession

☐ **Affordable housing Org/agency**

☐ Other _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

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RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

1 Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

3 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

____ Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

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- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Senior (65 years old and older) | <input type="checkbox"/> Large household (5+ people) | <input type="checkbox"/> Have a disability (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks) |
| <input type="checkbox"/> Single person or couple (not living with children, parents, or other dependents) | <input type="checkbox"/> Single parent (with children younger than 18 years in the home) | |
| <input type="checkbox"/> Agricultural worker | | |

Check all that apply to you:

- | | | | |
|--|---|---|--|
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| <input checked="" type="checkbox"/> 1-2 person household | <input type="checkbox"/> 3-4 person household | <input type="checkbox"/> 5-6 person household | <input type="checkbox"/> 7-8 person household |
| <input type="checkbox"/> More than 8 Person Household | | | |
| <input type="checkbox"/> Use public transportation | <input type="checkbox"/> Commute more than 10 miles to work | | |

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- | | |
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- | | | |
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- | | | |
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CITY OF CHOWCHILLA

Housing Element Update Survey and Comment Sheet

The City of Chowchilla is asking for your input on the most important housing issues the City faces. Circle whether you are offering your comments as an **INDIVIDUAL** or a **GROUP REPRESENTATIVE**. Mail or deliver the completed survey to the City of Chowchilla, 130 S Second St., Chowchilla, CA 93610, or email to Planning@CityOfChowchilla.org.

☐ **INDIVIDUAL** – I belong to the group(s) below (*check any that applies*):

☒ **Senior** (65 years old and older)

☐ **Large household** (5+ people)

☐ **Have a disability** (visual or hearing impairment, or physical, mental, or emotional condition for at least six months that has prevented me from performing essential tasks)

☐ **Single person or couple** (not living with children, parents, or other dependents)

☐ **Single parent** (with children younger than 18 years in the home)

☐ **Agricultural worker**

Check all that apply to you:

☒ Resident of City of Chowchilla

☐ Renter

☒ Homeowner

☐ City of Chowchilla Employee

☒ 1-2 person household

☐ 3-4 person household

☐ 5-6 person household

☐ 7-8 person household

☐ More than 8 Person Household

☐ Use public transportation

☐ Commute more than 10 miles to work

MY HOUSEHOLD EARNED INCOME PER YEAR is (*check one*):

☒ Less than \$25,750

☐ \$25,751 to \$32,399

☐ \$32,400 to \$51,849

☐ \$51,850 to 64,799

☐ More than \$64,800

☐ **GROUP REPRESENTATIVE** of (*check any that applies*):

☐ **Business (Owner/Manager)**

☒ **A special needs group:**

☐ **Faith-based Organization**

☒ **Seniors**

☐ **Public Schools**

☒ **Those with disabilities**

☐ **Service/civic group**

☐ **Agricultural workers**

☐ **Neighborhood association**

☐ **Those in need of temporary, emergency, or other suitable housing**

☐ **Building Industry**

☐ **Medical, health, or mental health organization/profession**

☐ **Affordable housing Org/agency**

☐ **Other** _____

MY CURRENT HOUSING is (*check one*):

☒ Own a house or condo

☐ Rent a house

☐ Rent an apartment, duplex, etc.

☐ Rent/own in mobile home community

☐ Live in substandard housing

☐ Am homeless

I WOULD PREFER TO LIVE in (*check one*):

☐ A single-family home

☐ A condo that I own

☐ An apartment that I rent

☐ A duplex, triplex, or similar

☐ A mobile home in a community

☐ Gated community with private security

☐ A retirement or other community that offers medical, meals, and/or other services on-site

RANK THE FOLLOWING ISSUES THAT MATTER TO YOU PERSONALLY IN ORDER OF IMPORTANCE

1 = Least Important

2 = Somewhat Important

3 = Very Important

3 Maintain neighbor character

2 Public transportation

3 Access to services, shopping, schools close to home

3 Safety (lighting, sidewalks, crime protection) and privacy

1 Emergency and temporary housing to prevent homelessness

3 Healthy home (electricity, appliances, working water/sewer, no lead paint)

3 Affordable housing, particularly for (*check any that applies*):

☒ Seniors

☐ Disabled

☐ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

☐ Single parent with minor children

☐ Other _____

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☒ Maintain neighbor character

☐ Public transportation

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☐ Safety (lighting, sidewalks, crime protection) and privacy

☐ Emergency and temporary housing to prevent homelessness

☐ Healthy home (electricity, appliances, working water/sewer, no lead paint)

☒ Affordable housing, particularly for (*check any that applies*):

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☐ Disabled

☒ Single persons

☐ Large families

☐ Veterans

☐ Agricultural workers

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