

# 2012 Neighborhood Survey

This survey will be used to help the Department of Metropolitan Development identify needs and set priorities for the use of federal housing and community development dollars in the year 2012.

For part one (1) of this survey, use the following scale:

1 - No need exists    2 - Very little need exists    3 - Considerable need exists    4 – A great need exists

**1. Please rank the need for the following services in your community.**

***Housing***

Assisted Living .....	1	2	3	4
Demolishing/Rehabilitating Unsafe and Abandoned Properties .....	1	2	3	4
Emergency Shelters (battered women, substance abuse, etc.) .....	1	2	3	4
Home Repair Assistance .....	1	2	3	4
Multi-family Homeownership (condominiums, cooperatives, etc.) .....	1	2	3	4
Multi-family Rental (Apartments) .....	1	2	3	4
Senior Rental .....	1	2	3	4
Single-family Homeownership .....	1	2	3	4
Single-family Rental .....	1	2	3	4
Transitional Housing (temporary housing for homeless families/ persons for up to 2 years) .....	1	2	3	4
Permanent Housing (housing with needed services for persons with physical or mental disabilities) .....	1	2	3	4



***Non Housing***

**Public Facility Needs**

Senior Centers .....	1	2	3	4
Centers for Disabled Persons .....	1	2	3	4
Youth Centers .....	1	2	3	4
Child Care Centers .....	1	2	3	4
Health Facilities .....	1	2	3	4
Neighborhood Facilities .....	1	2	3	4
Parks and/ or Recreation Facilities .....	1	2	3	4
Parking Facilities .....	1	2	3	4



**Infrastructure**

Water/ Sewer Improvements .....	1	2	3	4
Street Improvements .....	1	2	3	4
Sidewalks .....	1	2	3	4
Flood Drain Improvements .....	1	2	3	4

**Public Service Needs**

Senior Services .....	1	2	3	4
Persons with Disabilities Services .....	1	2	3	4
Youth Services .....	1	2	3	4
Child Care Services .....	1	2	3	4
Transportation Services .....	1	2	3	4
Substance Abuse Services .....	1	2	3	4
Employment Training .....	1	2	3	4
Health Services .....	1	2	3	4
Lead Hazard Training .....	1	2	3	4
Crime Awareness .....	1	2	3	4

**Economic Development**

Technical Assistance to For-Profits (businesses) .....	1	2	3	4
Rehabilitation of Commercial Buildings (publicly or privately owned) .....	1	2	3	4
Commercial Development Leading to Job Creation .....	1	2	3	4

**Homeless Services**

Job Training .....	1	2	3	4
Case Management .....	1	2	3	4
Substance Abuse Treatment .....	1	2	3	4
Mental Health Care .....	1	2	3	4
Housing Placement .....	1	2	3	4
Life Skills Training .....	1	2	3	4



**2. Use this space to list any housing needs not addressed above or elaborate upon any of those listed.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**3. Use this space to list any non-housing needs not addressed above or elaborate upon any of those listed.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



*Your address and other personal information will be used only by the Division of Community Economic Development for the purpose of assessing the residences and demographics of survey respondents.*

**4. Street Address of residence or organization:** \_\_\_\_\_

**Age** \_\_\_\_\_ **Sex** \_\_\_\_\_ **Renter** \_\_Y/N\_\_

**Race** \_\_\_\_\_ **Homeowner** \_\_Y /N\_\_

**Annual Income Level:**

- \$0 - \$9,999                       \$30,000 - \$49,000                       \$90,000 - \$99,999
- \$10,000 - \$19,999                       \$50,000 - \$69,000                       \$100,000 or greater
- \$20,000 - \$29,999                       \$70,000 - \$89,000

**Which of the following categories best describes you or your organization?**

- Individual                       Social Service Provider                       Homeless Service Provider
- Homebuilder/Developer                       Financial Institution                       Community Development Corporation
- Neighborhood Association                       Religious Organization                       Other \_\_\_\_\_

This survey may be photocopied and distributed.

**Questions?**  
Please call (317) 327-5444.

This survey must be returned by **June 10<sup>th</sup>, 2011** mailed to:  
ATTN: Neighborhood Survey, Community Development, 200 E. Washington St., Room 2042, Indianapolis, IN 46204  
or faxed to: (317) 327-5908. This survey is also available online at  
<http://www.indy.gov/EGOV/CITY/DMD/Pages/home.aspx>