

RELOCATION PAYMENTS SUMMARY

RESIDENTIAL

RE1679R 08/2015

Wisconsin Department of Transportation

Original

Revised

Name	Address
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<input type="checkbox"/> Owner	<input type="checkbox"/> Approved Offering Price _____
<input type="checkbox"/> Tenant	<input type="checkbox"/> Final Acquisition Amount _____
	<input type="checkbox"/> Carve Out Value \$ _____

This summary is to confirm relocation payments you may be eligible for as a displaced person(s). Final amounts are determined by the agency for reasonable and necessary expenses and adequate documentation of incurred expenses. Please inquire with your relocation agent for more details.

Replacement Housing Payment (s. 32.19(4), Wis. Stats.)

The actual payment amounts are finalized once acquisition is completed to identify the correct replacement housing payment amount for owner occupants.

<input type="checkbox"/> Supplemental housing payment for an owner occupant of at least 90 days. (Owner to Owner)	\$
<input type="checkbox"/> Down payment for a tenant occupant for at least 90 days who purchases a replacement home. (Tenant to Owner)	\$
<input type="checkbox"/> Supplemental rent payment for an owner occupant for a period of not less than 90 days who rents (May be paid in two installments.) (Owner to Tenant)	\$
<input type="checkbox"/> Supplemental rent payment for a tenant occupant for not less than 90 days who rents (May be paid in two installments). (Tenant to Tenant)	\$

Expenses Incidental to Purchase of Replacement Housing (s. 32.19(4), Wis. Stats.)

No prepaid expenses allowed. Amounts to be determined upon purchase.

1. Increased mortgage interest costs.
2. Legal, closing and related costs, including: title search, preparing conveyance contracts, notary fees, surveys, preparing drawings or plats, and charges paid incident for recording, credit report, application fees, incidental fees.

Moving Expenses – Residential (s. 32.19(3), Wis. Stats.)

<input type="checkbox"/> Actual and reasonable cost to move personal property from subject property to a replacement home based on receipted bills from qualified mover.	\$
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OR

<input type="checkbox"/> Amount from Fixed Payment Schedule – residential, including sleeping rooms and mobile home occupants Schedule for: _____ Room(s) is: _____	\$
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Incidental Expenses to Transfer of Property to State (s. 32.195, Wis. Stats.)

Amounts to be determined upon acquisition and/or selection of replacement home.

<input type="checkbox"/> Recording fees and similar items	<input type="checkbox"/> Realignment of personal property on same site	<input type="checkbox"/> Fencing cost
<input type="checkbox"/> Penalty cost for prepayment of mortgage	<input type="checkbox"/> Expenses incurred for unusable plans from subject property	
<input type="checkbox"/> Prorated share of property taxes	<input type="checkbox"/> Reasonable net rental loss attributable to project	

RELOCATION PACKAGE RECEIPT

As received from _____, Relocation Specialist on _____ (date) for WisDOT, I acknowledge this "relocation package," containing a relocation assistance brochure and forms. The Relocation Specialist has explained the relocation services and payments that WisDOT offers to me as a displaced person under Wisconsin Statutes Chapter 32 and the federal Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended.

I/We understand that the payment summary amounts are an estimate and final payment amounts will be determined based on eligibility requirements; agency determination of costs as actual, reasonable, and necessary; and supporting documentation.

(Signature)

(Date)

(Signature)

(Date)

Project ID

County

Parcel No.