**READS RELOCATION PARCEL CHECKLIST**

Wisconsin Department of Transportation

Bureau of Technical Services – Relocation Program

Unnumbered 11/2019

INSTRUCTIONS: Items listed below should be uploaded into READS generally in this order. Relocation Specialist will verify that the Relocation Log has been completed by checking box and filling in each line as appropriate. This checklist should be uploaded in Relocation Log for BTS review. PLEASE NOTE: Any duplicates and unsigned documents/letters should be deleted from relocation log.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Project ID | | Parcel # | Unit # | Occupant Name(s) | Relocation Specialist |
| Review Completed | Uploaded in READS relocation log | Name of Relocation Specialist | Date  Entered or Approved | ITEM | |
|  | n/a |  |  | DOA brochure sent – date entered in READS field | |
|  |  |  | n/a | Questionnaire & interview letter – signed by specialist | |
|  | n/a |  |  | Initial occupancy – date entered | |
|  |  |  |  | Letter of intent to acquire – signed by specialist/date entered | |
|  |  |  |  | Intent to acquire sent – date entered | |
|  |  |  |  | Acquisition stage plan approved – uploaded to READS plan tab | |
|  |  |  |  | Replacement computation submitted | |
|  |  |  |  | Replacement computation approved by BTS statewide relocation facilitator | |
|  | n/a |  |  | Relocation assistance package delivered – date entered | |
|  |  |  |  | Initiation of relocation letter – signed by specialist | |
|  |  |  |  | 90 day assurance of occupancy given – signed by specialist | |
|  | n/a |  |  | 90 day notice to vacate – date entered | |
|  |  |  |  | Signed – Certification of legal residency and date entered in READS | |
|  |  |  |  | Signed – relocation payments summary | |
|  |  |  |  | Signed – relocation assistance package receipt | |
|  |  |  |  | 30 day notice to vacate given (if necessary) – signed by specialist and date entered | |
|  |  |  |  | Rental agreement & closing summary – signed and uploaded | |
|  |  |  |  | Residential DSS inspection of replacement – signed | |
|  |  |  |  | Vacancy notice – signed by displacee and specialist | |
|  | n/a |  |  | Move inspection date – date entered | |
|  | n/a |  |  | Actual vacate date – date entered | |
|  |  |  |  | All relocation claims - uploaded with supporting documentation, receipts and photos (should match items found under the claims tab). | |
|  |  |  |  | Any claim reductions or denials, letters and explanations, and appeals handout | |
|  |  |  |  | Individual relocation case report completed and CO notified | |
|  |  |  |  | Generate completed diary – signed by specialist and dated | |
| Identify missing items, outstanding issues or concerns that must be addressed by relocation specialist: | | | | | |
| File Auditor Name: Date: | | | | | |