

Relocation Assistance Package Receipt

Wisconsin Department of Transportation

RE1036 04/2015

| | |
|------|---------|
| Name | Address |
|------|---------|

This document is a receipt to confirm the WisDOT forms that have been delivered to you on this date.

Relocation Payment - To be eligible for the following relocation payments, you must:

Residential Housing Replacement Payment

- Relocate your residence no later than one year after the later of: (1) date you received payment from WisDOT; or, (2) date you moved from acquired property.
- File a claim within two years from the later of: (1) date you received payment from WisDOT; or, (2) date you moved from acquired property.

Business Replacement Payment

- Own or occupy a business/farm/non-profit conducted on the property acquired or affected by displacement for not less than one year before initiation of negotiations.
- Relocated your business/farm/non-profit no later than two years after the later of: (1) date you received payment from WisDOT; or, (2) date you moved from acquired property.
- File a claim within two years from the later of: (1) date you received payment from WisDOT; or, (2) date you moved from acquired property.

Relocation Assistance Package (check all that apply)

| | | |
|--|--------------------------------------|---|
| Wisconsin Relocation Rights (WI Dept of Administration brochure) | <input type="checkbox"/> Residential | <input type="checkbox"/> Business/Farm/Non-Profit |
| WisDOT general relocation information notice | <input type="checkbox"/> Residential | <input type="checkbox"/> Business/Farm/Non-Profit |
| Computation – residential housing replacement payment (includes form RE1947 and pictures) | <input type="checkbox"/> Owner | <input type="checkbox"/> Tenant |
| Computation – business/farm/non-profit replacement payment (includes form RE1958 and pictures) | <input type="checkbox"/> Owner | <input type="checkbox"/> Tenant |
| Relocation payment summary | <input type="checkbox"/> Residential | <input type="checkbox"/> Business/Farm/Non-Profit |
| Initiation of negotiations / notice of eligibility letter | <input type="checkbox"/> | |
| Claim forms | <input type="checkbox"/> | |
| Certificate of residency | <input type="checkbox"/> | |
| Notice of vacancy | <input type="checkbox"/> | |
| Self-addressed return envelope | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | |

The relocation agent has explained the advisory services and relocation payment that WisDOT offers to me as a relocatee; and, I have received from _____ on _____ the above (checked) items known as the "Relocation Assistance Package."

Signature

Date

Note: This receipt indicates delivery and explanation of above items only; it does not necessarily indicate agreement.

Project ID

County

Parcel No.