|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| County | | | | Route | | | | Parcel | | Federal No. | | | | | Job No. | | |
| Relocatee(s) | | | | | | | | | | | | | | | Date of Claim | | |
| **SUBJECT PROPERTY** | | | | | | | | | | | | | | | | | |
| Relocatee was  Tenant | | Short Term Owner | | | Date Purchased (If owner-occupied) | | | | | | | | Date Occupied | | | | |
| Type Property | | | Duplex | | Sleeping Room | | | | | | Other (Specify) | | | | | | |
| Single Family Dwelling | | | Apartment | | Mobile Home | | | | | |  | | | | | | |
| Address | | | | | | | | | | | | | | | | | |
| **REPLACEMENT** | | | | | | | | | | | | | | | | | |
| Address | | | | | | | | | Date Purchased | | | | | Date Occupied | | | |
| Single Family Dwelling | | | Mobile Home Only | | | New House Constructed on Remainder | | | | | | | | | | | |
| Mobile Home & Site | | | Site Only | | | New House Constructed on Replacement Site | | | | | | | | | | | |
| Purchase Price | | | New Telephone Number | | | Replacement Obtained  With  Without Assistance From MoDOT Personnel | | | | | | | | | | | |
| Previous Owner(s) | | | | | | Seller’s Real Estate Firm | | | | | | | | | | | |
| Lending Agency Involved | | | | | | Lender’s Address | | | | | | | | | | | |
| **COMPUTATIONS** | | | | | | | | | | | | | | | | | |
| 1. | Computed Rental Subsidy | | | | | |  | | | | |  | | | | |  |
| 2. | Actual down payment  made  committed in purchase of  replacement | | | | | |  | | | | |  | | | | |  |
| 3. | Lesser of line 1 and 2 | | | | | |  | | | | |  | | | | |  |
| 4. | Actual incidental closing costs: | | | | | |  | | | | |  | | | | |  |
| 5. | Legal, including preparation of deeds and contracts | | | | | |  | | | | |  | | | | |  |
| 6. | Title examination and/or title insurance | | | | | |  | | | | |  | | | | |  |
| 7. | Surveys, drawing and/or plats | | | | | |  | | | | |  | | | | |  |
| 8 | Other: | | | | | |  | | | | |  | | | | |  |
|  |  | | | | | |  | | | | |  | | | | |  |
|  |  | | | | | |  | | | | |  | | | | |  |
| 9. | Total incidental closing costs | | | | | |  | | | | |  | | | | |  |
| 10. | Applicable purchaser points | | | | | |  | | | | |  | | | | |  |
| 11. | Applicable loan origination and/or service fees | | | | | |  | | | | |  | | | | |  |
| 12. | Enter total of lines 3, 9, 10, and 11(Not to exceed $5,250  unless last resort, then not to exceed amount on line 1.) | | | | | |  | | | | |  | | | | |  |
| 13. | Less previous rental subsidy payment – if any | | | | | |  | | | | | - | | | | |  |
| **TOTAL AMOUNT CLAIMED** | | | | | | |  | | | | |  | | | | |  |
| The undersigned certifies both the above subject property and the above replacement property was/is our principal and | | | | | | | | | | | | | | | | | |
| legal residence. We further certify the above replacement meets decent, safe and sanitary standards as outlined in the | | | | | | | | | | | | | | | | | |
| Missouri Department of Transportation’s Relocation Assistance Brochure and to the best of our knowledge and belief we | | | | | | | | | | | | | | | | | |
| are eligible for the payment claimed herein. The undersigned further certifies under penalties and provisions of U.S.C. | | | | | | | | | | | | | | | | | |
| Title 18, Sec. 1001, and any other applicable law, this claim and information submitted herewith have been examined by | | | | | | | | | | | | | | | | | |
| us and are true, correct, and complete. We understand, apart from the penalties and provisions of U.S.C. Title 18, | | | | | | | | | | | | | | | | | |
| Section 1001, and any other applicable law, falsification of any item in this claim or submitted herewith may result in | | | | | | | | | | | | | | | | | |
| forfeiture of the entire claim. The undersigned further certifies being a U.S. citizen or an alien that is lawfully present in the U.S. | | | | | | | | | | | | | | | | | |
| Signatures  ► | | | | | | | | | | | | | | | | Date | |
| Husband and Wife must both sign claim. If single or legally separated, the head of the household must sign. | | | | | | | | | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **TO BE COMPLETED TY THE MISSOURI DEPARTMENT OF TRANSPORTATION** | | | | | | | | | | | | | |
| Payable to | | | | | | | | | | | | Amount | |
| **TO BE COMPLETED BY THE DISTRICT RIGHT OF WAY UNIT** | | | | | | | | | | | **TO BE COMPLETED BY THE BBS DIVISION** | | |
| Line | Fixed  Asset | | | Quantity | Fund | Agency | | Org. | | Appr.  Unit | Name of Payee is same as on document | | |
| 01 |  | | |  |  |  | |  | |  | Distribution on code block is correct | | |
| 02 |  | | |  |  |  | |  | |  |  | | |
| Line | Object | | | | Sub-  Obj | Activity | | Function | | Amount | Document is certified | | |
| 01 |  | | | |  |  | |  | |  | Amount is same as on document | | |
| 02 |  | | | |  |  | |  | |  |  | | |
| Line | Project/Job No.  Reporting Category | | | | | Commodity Code | | | | | Parcel Number entered to PVQ document | | |
| 01 |  | | | | |  | | | | | Checked By | | |
| 02 |  | | | | |  | | | | |  | | |
| TO BE COMPLETED BY DISTRICT R/W UNIT | | | | | | | | | | | | | |
| Relocatee occupied subject for required time prior to negotiations | | | | | | | | | | | | | |
| Replacement was purchased or built and occupied within required one-year time period | | | | | | | | | | | | | |
| Replacement meets decent, safe and sanitary requirements and inspection report is in the file (inspection report in unit file) | | | | | | | | | | | | | |
| Any previously paid rental subsidy payment has been deducted from amount being claimed | | | | | | | | | | | | | |
| All required documents and receipts are in subject’s unit file | | | | | | | | | | | | | |
| Computations have been checked and are correct | | | | | | | | | | | | | |
| Relocatee was in legal occupancy at initiation of negotiations for subject or upon receipt of a “Notice of Intent to Acquire” | | | | | | | | | | | | | |
| Information in required documents and receipts is compatible with amounts reflected on claim | | | | | | | | | | | | | |
| Proper agreement in file if “Advance” payment involved | | | | | | | | | | | | | |
| Purchaser points included in claim are normal in the area | | | | | | | | | | | | | |
| Purchaser points, origination and/or loan service fees do not exceed limitations | | | | | | | | | | | | | |
| Claim Submitted within required eighteen month time limit | | | | | | | | | | | | | |
| Comments: | | | | | | | | | | | | | |
| The total sum | | |  | | | | is approved for payment under this claim. | | | | | | |
| I certify the above information has been checked against this district’s records and it is a just and correct | | | | | | | | | | | | | |
| payment. I further certify I have no direct or indirect present or contemplated personal interest in the | | | | | | | | | | | | | |
| transaction and I will not derive any benefit from the payment of the above claim. | | | | | | | | | | | | | |
| Signature  ► | | | | | | | | | Title | | | | Date |
| THIS CLAIM IS NOT APPROVED FOR PAYMENT FOR THE FOLLOWING REASONS: | | | | | | | | | | | | | |
| Signature  ► | | | | | | | | | Title | | | | Date |
| I Concur | | District R/W Manager | | | | | | | | | | | Date |