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| County | | | | | | | | | | | | | Route | | | | | Parcel | | | | | Federal No. | | | | | | Job No. | | | | |
| Owner(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Date of Claim | | | | |
| **SUBJECT PROPERTY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | | | | | | | | | Date Purchased | | | | | | Date Occupied | | | | |
| Farm Home | | | | | | | | Acquired by MHTD Through | | | | | | | | | | | Condemnation Case Settled | | | | | | | | | | Yes  No | | | | |
| Other Rural Dwelling | | | | | | | | Negotiated | | | Condemnation | | | | | | | |  | | | | | | | | | |  | | | | |
| Urban Property | | | | | | | | Settlement | | | | | | | | | | | If No, Agreement Signed | | | | | | | | | | Yes  No | | | | |
| **REPLACEMENT PROPERTY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | Date Purchased | | | | | Date Occupied | | | | | | MoDOT Personnel Assisted in Obtaining Replacement  Yes  No | | | | | | | | |
| Decent, Safe & Sanitary Dwelling Purchased | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Replacement Purchased and Brought up to Decent, Safe &  Sanitary Standards by Claimant | | | | | | | | | | | | | | | New House Constructed on Remainder | | | | | | | | | | | | | | | | Yes  No | | |
| Mobile Home and Site Purchased | | | | | | | | | | | | | | | Subject Retained and Moved to Remainder | | | | | | | | | | | | | | | | Yes  No | | |
| Only Mobile Home Purchased | | | | | | | | | | | | | | | If Retained and Moved, Owner is | | | | | | | | | | | | | Short Term Owner | | | | | |
| Only Site Purchased | | | | | | | | | | | | | | |  | | | | | | | | | | | | | Fully Qualified | | | | | |
| New Telephone Number | | | | | | Purchased from (Prior Owner(s)) | | | | | | | | | | | | | | | | | | Through Real Estate Firm | | | | | | | | | |
| **COMPUTATIONS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. | Computed Replacement Housing Cost (From Comparison Record) | | | | | | | | | | | | | | | | | | | | |  | | | | | Actual Cost | | | | | |  |
| 2. | R/W Payment (Residential Improvements and Supporting Land) or if Applicable “Before Value” of Residential Property. Include the value of salvage retained by relocate. | | | | | | | | | | | | | | | | | | | | - |  | | | | |  | | | | | - |  |
| 3. | Difference | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  |
| 4. | Replacement Housing Payment (Lesser Amount from Preceding Line – Not to Exceed $22,500) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 5. | Increased Interest Payment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 6. | Incidental Closing Costs: Legal, Including Preparation of Deeds & Contracts | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | |
| 7. |  | | | | | | Title Examination and/or Title Insurance | | | | | | | | | | | | | | |  | | | | |  | | | | | | |
| 8 |  | | | | | | Surveys, Drawings and/or Plats | | | | | | | | | | | | | | |  | | | | |  | | | | | | |
| 9. |  | | | | | | Other: | | | | | | | | | | | | | | |  | | | | |  | | | | | | |
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| 10 | Total Incidental | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 11. | Total of Above Payments | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 12. | Less Previous REPLACEMENT HOUSING or RENTAL SUBSIDY Payment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 13. | TOTAL PAYMENT DUE (If “short term” owner, payment cannot exceed ($5,250) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| Required Supporting Documents – to be Attached to Original Claim Form When Applicable: Copy of closing statement and conveyance | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| instrument, if any portion of replacement property was purchased, showing dates, amounts, grantees, grantors and other pertinent information. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Copies of paid receipts covering all costs included herein, including cost of bringing dwelling up to decent, safe and sanitary standards, all new | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| house construction costs, all incidental costs, all costs related to moving and re-establishing subject dwelling. If increased interest cost included | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| attach copy of paid note and mortgage instrument, copy of new note and mortgage instrument, and a copy of the computation sheet. Attach | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| any other documentation necessary to support and/or prove expenditures and costs claimed or quoted herein. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The undersigned certifies we have not heretofore filed (and will not file) a rental subsidy claim or received a rental subsidy payment except as | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| set out above. We further certify we owned and occupied the above subject property for not less than 180 consecutive days prior to the date we | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| vacated the property or the date that negotiations were initiated between ourselves and the Missouri Department of Transportation for such | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| property – whichever was earlier. We further certify both the above subject property and replacement property was/is our principal and legal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| residence. We further certify we acquired, built or established - and occupied - the above replacement property within the required one year time | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| period. We further certify the above replacement property meets decent, safe and sanitary standards as outlined in the Missouri Department of | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Transportation’s Relocation Assistance brochure. We further certify, to the best of our knowledge and belief, we are eligible for the payment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| claimed herein. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The undersigned hereby certifies to being a U.S. citizen or an alien that is lawfully present in the U.S. and 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, and that 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. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signatures  ► | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Date | | | | |
| Husband and Wife must both sign claim. If single or legally separated, the head of the household must sign. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **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 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Displacement was necessary due to highway taking | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Relocatee owned and occupied subject dwelling unit for required 180-day period | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Relocatee was in occupancy at initiation of negotiations for subject or upon receipt of a ”Notice of Intent to Acquire” | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Any amount previously paid as replacement housing or rental subsidy payment has been deducted from the amount being claimed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| All required documents and receipts were attached to original claim and are on file in district office (subject unit file) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Information in required documents and receipts is compatible with amounts reflected on claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Replacement was purchased, built ore re-established and occupied within required one year time period | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Replacement meets decent, safe and sanitary requirements and inspection report is in the unit file | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If condemnation case pending, a condemnation agreement is in unit file | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Computations have been checked and are correct | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| “Fair Home” replacement built on subject farm as required | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Claim submitted within required eighteen month time limit | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If a “Short Term” Owner in involved, total payment does not excess $5,250 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Purchaser points, origination and/or loan service fees and title insurance fees do not exceed limitations | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Comments: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The total sum of | | | |  | | | | | | 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 | | | |