

RELOCATION CHECKLIST

Resident: _____ Case #: _____
Property Address: _____ Phone #: _____
Owner: _____ Owner's Phone #: _____
_____ 180-Day Owner-occupant _____ 90-Day Owner-occupant _____ Tenant

A. INFORMATION ON OCCUPANTS

- 1.A. General Government Information Notice (GIN Notice)
- 1.B. Household Case Record (# in Household: _____)
- 2. Release of Information Form A. General _____ B. Social Security
- 3. Income Verification: A. Recap _____ B. Verification(s)

B. INFORMATION ON CURRENT UNIT:

- 4. Current Unit Information
- 5. Utility Verification: A. Recap _____ B. Verification(s)
- 6. Monthly Housing Payment A. Rent _____ B. Mortgage

C. NOTICES:

- 7. Notice of Right to Continue in Occupancy (If Applicable)
- 8. Notice of Relocation Eligibility/HUD Brochure/Grievance Procedures
 - A. Renter _____ OR B. Homeowner _____
 - C. Grievance Procedures _____ D. Evidence of Receipt _____
- 9. A. 90-Day Notice to Vacate _____ B. Evidence of Receipt _____
Date to Vacate by: _____
- 10. A. 30-Day Notice to Vacate _____ B. Evidence of Receipt _____ (If applicable)
Issued 30 days after #9 & after Title is obtained to Property

D. COMPARABLES/HOUSING REFERRALS/INSPECTIONS:

- 11. Computation of Comparables/Housing Referrals List
- 12. Inspection of Each Comparable and Referral

E. REPLACEMENT DWELLING UNIT

- 13. Replacement Unit Information-Recap
- 14. Inspection of Replacement Dwelling Unit
- 15. Replacement Dwelling - Verification - Recap
 - A. Rent Payments: _____ OR B. Mortgage _____ & C. Utilities _____

F. CLAIM FORMS:

- 16. Claim for Moving & Related Expenses
- 17. Claim for Relocation Payment: Does Claim Include Last Resort?
Was Certificate/Voucher Offered? _____ Accepted? _____
 - A. Claim for Replacement Housing Payment - Homeowners
 - B. Claim for Rental Assistance or Downpayment Assistance - 42 months
 - C. Claim for Rental or Purchase Assistance - 60 months

G. RELOCATION PAYMENTS:

- 18. Recap/Copy of Cancelled Payment Checks (Both sides of check)
- 19. Acknowledgement of Receipt of Relocation Payments by Relocatee

H. OTHER:

- 20. Waiver of Relocation Benefits - Voluntary Acquisition Only
- 21. Other: _____
- 22. Other: _____

I. INFORMATION ON CONTACTS WITH RELOCATEE(S):

- 23. Contact Log