

REPLACEMENT HOUSING PAYMENT – OWNER

RE1943 10/2021

Wisconsin Department of Transportation

Original Revised

Name	No. Occupants	Name of Relocation Specialist
Subject Property Address		Relocation Specialist Contact Information

90 Day – Owner Occupant <90 Day – Owner Occupant

SECTION A – Available Comparable Housing

All properties are considered comparable. Computations are made using Comparable Property A listed below. Computations are maximum amounts. Only those amounts *actually spent for DSS Housing and other allowable costs*, up to the maximum will be reimbursed.

ITEM	SUBJECT PROPERTY	COMPARABLE A	COMPARABLE B	COMPARABLE C
Address				
Functionally equivalent				
Meets DSS standards				
Within financial means				
Adequate for displaced persons				
Available to displaced persons				
Fair housing				
Unit type				
Type of Construction				
Type of neighborhood				
Approximate Age				
State of repair				
Lot size				
Garage size				
Utilities Available				
Distance to work				
Distance to schools				
Distance to transportation				
Distance to other:				
# Rooms / Bedrooms				
Habitable area				
Price	\$	\$	\$	\$

- Yes, Carve-out – Attach Explanation
- No Carve-out

Project ID

County

Parcel

SECTION B – Explanation

Discuss comparable properties used and how they are functionally equivalent to the subject.

Comparable Property	Brief description of comparable properties
A	
B	
C	

SECTION C – Replacement Housing Payment Calculation

Computations are calculated to determine maximum amounts only. If the owner elects to retain the dwelling, the Replacement Housing payment cannot exceed the amount indicated in #3, below.

1. List Price of Comparable A	\$
2. Less Acquisition Price of subject property	\$
3. Equals Calculated Replacement Housing Payment, maximum amount	*\$

*Only those amount actually spent for DSS Housing and other allowable costs, up to the maximum amount will be reimbursed.

ATTACHMENTS

- Documentation of comparable properties from source information. Please label all sources in respect to the comparable.

Relocation Specialist Statement of Certification – I certify that:

1. The determination of the amount of this payment as shown in the computations on this document is correct to my knowledge;
2. I understand that the determination may be used in connection with a Federal Aid Project;
3. I have no direct or indirect present or contemplated interests in this transaction nor will I derive any benefit from this payment.

APPROVAL RECOMMENDED:

Relocation Specialist

Date

COMPUTATION APPROVED BY:

BTS-RE Statewide Relocation Facilitator

Date

**REPLACEMENT HOUSING PAYMENT – OWNER
ACTUAL PRICING DIFFERENTIAL ACKNOWLEDGEMENT**

Unnumbered 07/2021

Wisconsin Department of Transportation

Original Revised

Acknowledgement Actual Pricing Differential Replacement Payment Eligibility

This form is to be completed and presented to the relocatee upon receipt of necessary documentation needed in order to make the Replacement Housing Payment Claim. Documentation for a Replacement Housing Payment for an owner occupant include, but are not limited to:

1. An accepted offer to purchase a replacement home;
2. Decent, Safe and Sanitary Housing Inspection Certification.

The replacement housing payment is made payable at closing of replacement housing as down payment assistance or made payable after the purchase as a reimbursement. The maximum amount, of actual, reasonable and necessary replacement costs are identified above in Section C. A signed copy of this form is part of the required documentation to support that claim.

Actual Pricing Differential of Replacement Housing Payment

\$ _____

(Signature)

(Date)

(Signature)

(Date)
