## **REPLACEMENT HOUSING PAYMENT - TENANT**

Wisconsin Department of Transportation

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DE4040	07/0004		

RE1946 07/2021						
Name		No. Occupants	Name of Relocation	Specialist		
Subject Property Address			Relocation Specialis		st Contact Information	
, , ,			•			
☐Tenant – Occupant ☐S		90 Day – Owner Occupant		☐ <90 Day – Owner Occupant		
SECTION A - Avai	lable Comparable Housir	ng				
All properties are co	onsidered comparable. Compusions actually spent, up to the max	tations are made using	Comparable Property A I	isted below. Computations	are maximum amounts.	
Only those amounts	actually sperit, up to the max	illium wiii be reimburse				
ITI	ΞM	SUBJECT	COMPARABLE	COMPARABLE	COMPARABLE	
		PROPERTY	Α	В	С	
Address						
Functionally equiv						
Meets DSS stand						
Within financial m						
Adequate for disp						
Available to displa	aced persons					
Fair housing						
Unit type Type of Construct	ion					
Type of construct						
Approximate Age	lood					
State of repair						
Lot size						
Garage size						
Utilities Available						
Distance to work						
Distance to school	ls					
Distance to transp	ortation					
Distance to other:						
# Rooms / Bedroo	oms					
Habitable area						
Actual Monthly Re			\$	\$	\$	
Utilities (Avg. of 1			\$	\$	\$	
Total Monthly Rer	nt \$		\$	\$	\$	
SECTION B - Expl	anation					
	roperties used and how they	are functionally equival	ent to the subject.			
Comparable Property		Brief description	of comparable properties			
Α						
В						
С						
	I .					

Project ID County Parcel

SECTION C – Replacement Housing Payment Calculation		
The relocation program provides four options for tenant calculations. Co	mplete all applicable sections to determine the lesser of	of the four(4) options.
ACTUAL RENT PAID		( ) 1
	nonth X 48 months	\$
2. Less Actual Monthly Rent (rent + utilities) \$ per month X 48 mg		\$
3. Equals Calculated Rental Replacement Housing Payment	\$	
Required Supporting Documentation		
Executed Lease     Months confirmation of paid rant		
<ul> <li>3 Months confirmation of paid rent</li> <li>Confirmation of average utility usage by agent with the utility of</li> </ul>	company for the past 12 months	
ECONOMIC RENT	ompany for the pact 12 mention	
	nonth X 48 months	\$
2. Less Economic Rent (rent + utilities) \$ per month X 48 months		\$
Equals Calculated Rental Replacement Housing Payment		\$
		Ψ
Required Supporting Documentation		
Economic rent calculation		
<ul> <li>Confirmation of average utility usage by agent with the utility of 30% GROSS MONTHLY INCOME</li> </ul>	company for the past 12 months	
	wanth V 40 was also	<u></u>
New Total Monthly Rent (rent + utilities) from Section A \$ per r     Less 30% Gross Monthly Income \$ per month X 48 months	nonth X 48 months	<u>\$</u> \$
Equals Calculated Rental Replacement Housing Payment		φ
3. Equals Calculated Remarkeplacement Flousing Fayment		Φ
Required Supporting Documentation		
<ul> <li>W-2 income verification, Social Security Award letter (if in place)</li> </ul>		
U.S. Department of Housing and Urban Development's Annua		ection 8 Programs with
<ul> <li>appropriate County or Metropolitan Area highlighted and the n</li> <li>Written explanation by agent how the relocatee meets require</li> </ul>		
AMOUNTS DESIGNATED FOR SHELTER & UTILITIES BY PUBLIC AC		
	nonth X 48 months	<u> </u>
2. Less Amounts designated for shelter & utilities \$ per month X 4		\$
Equals Calculated Rental Replacement Housing Payment	40 monute	\$
o. Equals suitable remain replacement risdoing rayment		Ψ
Required Supporting Documentation		
Documentation showing support that the relocatee is receiving	• •	Housing Voucher
Program. Review §24.402(b)(2)(iii) and Appendix A to Section		
SECTION D – Maximum Rental Replacement Payment Eligib	-	
The rental replacement housing payment is made upon receipt of documenthly utility usage is verified. Tenants are eligible to receive rental assert replacement property. The maximum amount, of actual, reasonable and	sistance <i>OR</i> the maximum amount allowable as down-p	
Maximum Calculated Rental Replacement Housing Payment		\$
Amount of Installments		<u> </u>
The rental replacement housing payment shall be made in two	Amount of first installment, if eligible	¢ 0 00
installments based on actual, reasonable and necessary costs.	-	\$ 0.00
·	Amount of second installment, if eligible	\$ 0.00
ATTACHMENTS  • Documentation of comparable properties from source informat associated with having pets and parking, provided that they we Relocation Specialist Statement of Certification – I certify that	ere present at the subject. Please label all sources in res	
<ol> <li>The determination of the amount of this payment as shown in the corn.</li> <li>I understand that the determination may be used in connection with a.</li> <li>I have no direct or indirect present or contemplated interests in this transfer.</li> </ol>	nputations on this document is correct to my knowledge Federal Aid Project;	

APPROVAL RECOMMENDED:			
	Relocation Specialist	Date	
COMPUTATION APPROVED BY:			
	BTS-RE Statewide Relocation Facilitator	Date	

## REPLACEMENT HOUSING PAYMENT – TENANT ACTUAL PRICING DIFFERENTIAL ACKNOWLEDGEMENT

Wisconsin Department of Transportation

(Date)

Unnumbered 07/2021

□ 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. TENANT OR OWNER TO TENANT STATUS Documentation for a Replacement Housing Payment for tenant or owner going to a tenant status include, but are not limited to: A fully executed lease; Decent, Safe and Sanitary (DSS) Housing Inspection Certification; 2 3. Verification of average cost of utilities. The rental replacement housing payment is made upon receipt of documentation of execution of a new lease ata replacement property and estimated monthly utility usage is verified. A signed copy of this form is part of the required documentation to support that claim. **Actual Pricing Differential of Replacement Housing Payment** \$ **Amounts of Actual Installments** Amount of first installment \$ Amount of second installment, \*Subject to confirmation of living in D.S.S. housing at 6 months (Signature) (Date) (Signature) (Date) **TENANT TO OWNER STATUS** Documentation for a Replacement Housing Payment for tenant going to an owner status include, but are not limited to: An accepted offer to purchase; Decent, Safe and Sanitary Housing Inspection Certification. The replacement housing payment is made at closing of replacement property as down payment assistance. A signed copy of this form is part of the required documentation to support that claim and the entire payment is only eligible to be used as a down payment. \$ Maximum Calculated Replacement Housing Payment Amount for Down Payment Assistance (Signature) (Date)

(Signature)