

REPLACEMENT HOUSING PAYMENT COMPUTATION – OWNER

COUNTY	ITEM NO.	PARCEL	NAME
PROJECT NO.	FEDERAL NUMBER	PROJECT	
REVISION NO.	EXPLAIN REASON FOR REVISION		LENGTH OF OCCUPANCY VERIFIED BY

90 DAY OWNER - PURCHASES

ACQUISITION FROM TYPICAL SIZE HOMESITE			ACQUISITION FROM CARVE OUT (Home site or major exterior attribute)		
TOTAL ACQUISITION			Area of Home Site		
Cost of Comparable			Home Site Area Acquired		
Less Acquisition Price			TOTAL ACQUISITION		
Purchase Supplement			PARTIAL ACQUISITION		
PARTIAL ACQUISITION			Home Site		
Before Value			Residence		
Less After Value			SLI		
Acquisition Price			Other Buildings		
Cost of Comparable			Acquisition Price		
Less Acquisition Price			Acquisition Price		
Purchase Supplement			Purchase Supplement		

90 DAY OWNER - RENTS

LESS THAN 90 DAY OWNER - RENTS

Mo. rent & utilities of comparable	a	Monthly rent & utilities of comparable	a
Mo. market rent & utilities of subject	b	Monthly market rent & utilities of subject	b
Difference in mo. rent & utilities (a-b)	c	HUD Low Income Limit Amount (to qualify for 30% must meet HUD established Low Income Limit) ÷ 12 =	c
Rental Assistance (c times 42)		Monthly household income X 30%	d
<u>Rent Calculations for Owner Occupants:</u> 90 day owner – Rental Assistance cannot exceed approved calculated purchase supplement. < 90 day owner – Rental assistance calculated only if determined to meet HUD low income standards.		Lesser of b or d	e
		Difference in monthly rent & utilities (a - e)	f
		Rental Assistance (f times 42)	

REMARKS:

I the undersigned evaluator certify that this determination of replacement value is to be used with a federal aid or state highway project; that such value is based on the indicated comparables which are decent, safe and sanitary; are available on the private market; are adequate to accommodate the displaced owner and are reasonably accessible to public services and place of employment. I further certify I have no direct, indirect, present or contemplated future personal interest in this property, nor will I benefit in any way from acquisition of this property. The finding of replacement housing cost is as of the date signed below.

APPROVED (Rounded)	TOTAL ACQ	PARTIAL ACQ	RENT
PARTIAL ACQUISITION RATIO			
Carve Out (CO)			
FMV Offer	Relocation Agent	Date	
CO ÷ FMV Offer			
TOTAL ACQUISITION RATIO	Central Office	Date	
Carve Out (CO)	Project Manager	Date	
FMV Offer			
CO ÷ FMV Offer			
	Right of Way Supervisor	Date	Right of Way Director Date