Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ File Reference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Dear \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_:

On \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_, the Department of Transportation made an offer to purchase the property that you occupied on that date. As the eligible occupant of the property, you are entitled to certain benefits under the Department’s Relocation Assistance Program. These benefits are briefly outlined below and are discussed in further detail in the brochure that was given to you.

The total dollar amounts have not been calculated at this time. When you are ready to relocate, you must contact your relocation agent, who will verify your occupancy and your rental rate. Your entitlement will then be calculated. Do not obligate yourself to a replacement dwelling until you have had your entitlement calculated. You will be given at least 90 days’ written notice before you will be required to move from the property. As the occupant of the property on the date of the Department’s initiation of negotiations, you are entitled to:

1. **RELOCATION ADVISORY ASSISTANCE:**The Department will assist you in finding a replacement residence. If you wish assistance, contact your relocation agent.
2. **MOVING EXPENSES:**You may select payment based on:
3. Fixed Moving Schedule based on number of rooms, OR
4. Moving Service Authorization where the Department makes direct payment to an approved commercial mover;

OR

1. Actual Cost Move by for‑hire carrier based on written estimate and receipted bills.

Your relocation agent will discuss these options with you.

1. **REPLACEMENT HOUSING PAYMENT:**As the occupant of the property on the date of the Department’s initiation of negotiations, you may be eligible for the following benefits:
2. **IF YOU RENT REPLACEMENT HOUSING:**A RENT DIFFERENTIAL payment equal to the difference between the lesser of 1) the monthly rental and estimated average monthly cost of utilities for a comparable replacement dwelling as determined by the Department, or 2) the actual monthly rental of your replacement dwelling and estimated average monthly cost of utilities, AND the base monthly rent during the three months immediately prior to vacation from the displacement dwelling, multiplied times 42. Base monthly rent is defined as the lesser of 1) the average monthly cost for rent and utilities at the displacement dwelling, 2) 30% of the household’s gross monthly household income based on your Income Certification, if the total amount is classified as “low income” by the U.S. Department of Housing and Urban Development, or 3) if receiving a welfare assistance payment, the portion of such payment that is specifically designated for shelter and utilities. The Rent Differential is paid in a single payment or in semiannual installments, depending on the payment amount.
3. **IF YOU BUY A REPLACEMENT DWELLING:** You may convert the Rent Differential to a Down Payment and certain nonrecurring incidental expenses for a replacement dwelling. In the event the Rent Differential is less than $7,200, the State will pay the full amount of $7,200 to be used as a Down Payment and/or payment for incidental purchase expenses. All amounts used as down payments and incidental expenses must be applied to the purchase of the replacement dwelling.

You do not have to accept any dwelling referred to you by the Department. You may choose your own replacement, but it must be decent, safe, and sanitary to qualify for replacement housing payments.

To avoid losing part or all of your relocation benefits, DO NOT MOVE from your home and DO NOT CONTRACT to rent or purchase a replacement dwelling without first contacting your relocation agent whose name is shown below.

The Relocation Assistance Program is very complex; it is important that you read and understand the matters explained in the Uniform Relocation Assistance Program (Residential) brochure which relate to your eligibility. If at any time in the future you want assistance, please contact your relocation agent by writing, telephoning, or visiting him/her at the address listed below.

**IMPORTANT:**To receive the replacement housing payments outlined under item 3 above, you as an owner‑occupant must rent or purchase and occupy your replacement dwelling within one year from the later of the following two dates:1) the date you move from the displacement dwelling, or 2) the date the Department has paid the acquisition cost of your current dwelling (usually the close of escrow on the State’s acquisition). If you are a 90‑day tenant occupant, to be eligible for a rental assistance payment, you must rent and occupy or purchase and occupy a decent, safe, and sanitary dwelling within one year after you move from the displacement dwelling. Failure to act within the one‑year period could result in loss of all replacement housing benefits.

The Uniform Act provides that a person may appeal to the head of the responsible department if the person believes that the Department has failed to properly determine the person’s eligibility or the amount of the payment authorized by the Uniform Act. You have the right to be represented by legal counsel at your own expense, but their presence is not required. If you still believe a proper determination has not been made by the Relocation Appeals Board, you may seek judicial review. You may submit an appeal in writing to:  Caltrans, Right of Way Office, Relocation Appeals Board, 1120 N Street, Sacramento, CA 95814.

Displacees not lawfully present in the United States are ineligible for relocation payments and assistance. Certification of legal U.S. residency status must be on file with the Department for all household members in order to receive benefits.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Relocation Agent

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relocation Agent Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone

# ACKNOWLEDGEMENT

I was personally contacted by the above agent for the Department of Transportation. I have had the services and entitlements available explained to me. I was further advised that the Department of Transportation Relocation Assistance Program is available to assist me if any questions arise or as assistance is needed. I have been given a copy of this form letter.

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Displacee’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_