GUIDEFORM NOTICE OF ELIGIBILITY FOR SECTION 104(d) RELOCATION ASSISTANCE -- LOWER INCOME RESIDENTIAL TENANT Section 8 Assistance NOT Available (Sample)

Grantee or Agency Letterhead

(Date)

Dear____:

On <u>(date)</u>, we notified you of proposed plans to <u>(identify</u> project). On <u>(date)</u>, the project was approved.

This is a notice of eligibility for relocation assistance. To carry out the project, it will be necessary for you to relocate. However, you do not need to move now. You will not be required to move without at least 90 days advance written notice of the date by which you must vacate. When you do move, you will be entitled to relocation payments and other assistance. You may choose assistance under the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended, or section 104(d) of the Housing and Community Development Act of 1974, as amended.

The effective date of this notice is <u>(date of initiation of negotiations)</u>. You are now eligible for relocation assistance, including:

- Counseling and Other Advisory Services.
- Security Deposit and Credit Checks. (Not provided under URA.) We will pay the cost of any security deposit required to rent a replacement dwelling unit and for required credit checks.
- Payment for Moving Expenses. You may choose either (1) a payment for your actual reasonable moving and related expenses, or (2) if you prefer, a fixed moving expense and dislocation allowance of \$ _____.
- Replacement Housing Payment. You are eligible for a replacement housing payment to rent or purchase a replacement home. The payment will be based on several factors, including the cost of a "comparable replacement home" and your average household income.

Listed below are three "comparable replacement homes" that you may wish to consider:

1.	Address	Utility Costs	of Person to Contact
2.			
3.			

We would be pleased to provide you with transportation to inspect these dwelling units. We believe that the unit at (address) is the most representative of your present home. The rent and the estimated average cost of utility services for that unit is \$. Based on the information you provided about your income, you may be eligible for rental assistance up to \$ (60 x). This is the maximum amount that you would be eligible to receive. It \$ would be paid in (indicate number of installments or lump sum). If you rent a decent, safe and sanitary home where the monthly rent and average estimated utility costs are ____, your rental assistance payment would be based on the less than \$ actual cost of such unit.

Contact us immediately if you do not agree that these units are comparable to your home. We will explain the basis for our selecting these units. And, if necessary, we will find other units. We will not base your payment on any unit that is not a "comparable replacement home."

Should you choose to buy (rather than rent) a decent, safe and sanitary replacement home, you would be eligible under the URA for a down payment of \$______. Under the URA, you are not limited in the type of home you choose. Section 104(d) assistance for a down payment is available only for purchasing an interest in a housing cooperative or mutual housing association. We estimate that you are eligible for a down payment of \$______ under section 104(d). Let us know if you would prefer to buy a replacement home, and we will help you find such housing.

I am enclosing a brochure entitled, "Relocation Assistance to Tenants Displaced From Their Homes." Please read the brochure carefully. It explains your rights and some things you must do to obtain relocation payments under the URA. With the exception of the differences explained in this letter, this information also applies to section 104(d) assistance. For example, to obtain a replacement housing payment you must move to a decent, safe and sanitary home within one year after you vacate your present home. Therefore, do not commit yourself to rent or buy a unit until we inspect it.

I want to make it clear that you are eligible for assistance to help you relocate. In addition to relocation payments and housing referrals, counseling and other services are available to you. A representative of this office will soon contact you to determine your needs and preferences. He/she will explain your rights and help you obtain the relocation payments and other assistance for which you are eligible. If you have any questions, please contact _______ (name) _______, (title) _______ at _____ (phone) ______, (address)

Remember, do not move before we have a chance to discuss your eligibility for assistance. This letter is important to you and should be retained.

Sincerely,

(Name and Title)