INCENTIVE - INITIAL RELOCATION MEETING SUBMISSION

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NAME:** |  | | | **CODE:** |  | | **PARCEL:** |  | **REVIEWER:** |  |
|  |  |  |  | | |  | | | | |
| Attached | Previously Submitted | Submit when available | Form # | | | Required Items | | | | |
|  | | | | | | | | | | |
|  |  |  | W-9 | | | Fully completed and **signed** by the displacee **+ 1 copy** | | | | |
|  |  |  |  | | |  | | | | |
|  | NA |  | #10 | | | Fully completed and **signed** by the displacee and agent | | | | |
|  |  |  |  | | |  | | | | |
|  |  | NA | #12 or #25 | | | Top & Middle portions completed – **signed** by agent | | | | |
|  |  |  |  | | |  | | | | |
|  | NA |  | #16, 17, or 17A | | | All items required for a **Residential** 90 Day Notice found on 90-Day Pre-Approval assembly page | | | | |
|  |  |  |  | | |  | | | | |
|  | NA |  | #30 or 30A | | | 90 Day Notice for **Business** or **PPMO** - **signed** by agent and displacee | | | | |
|  |  |  |  | | |  | | | | |
|  | NA |  | #38 | | | Self certifying form that must be **signed** by the displacee | | | | |
|  |  |  |  | | |  | | | | |
|  |  |  | #9 | | | Fully completed with landlord’s signature (**renters and landlords only**) | | | | |
|  |  |  |  | | |  | | | | |
|  |  |  | #41 A/B/C/D | | | Appropriate Interview Questionnaire fully completed | | | | |
|  |  |  |  | | |  | | | | |
|  | NA |  | #42B | | | Payment Notice **signed** by the displacee | | | | |
|  |  |  | **\*** | | | MUST INCLUDE “**Relocation Incentive Payment is considered as reportable taxable income.”** | | | | |
|  |  |  |  | | |  | | | | |
|  | NA |  | #43B | | | **Tax Law Letter** initialed by the displacee | | | | |
|  |  |  | **\*** | | | MUST INCLUDE “**Relocation Incentive Payment is considered as reportable taxable income.”** | | | | |
|  |  |  |  | | |  | | | | |
|  |  |  | #44 | | | **Title VI Survey** fully completed or initialed by displacee | | | | |
|  |  |  |  | | |  | | | | |
|  | NA |  | #45, 46, 47, 48 | | | Reestablishment vs. PIL, Reestablishment Guidelines, and Business Eligible and Ineligible Moving Expenses (**businesses only**) | | | | |
|  |  |  |  | | |  | | | | |
|  |  |  | INV | | | Large or unique items should be noted in the caption. | | | | |
|  |  |  | **\*** | | | Photos must clearly identify the personal property being inventoried | | | | |
|  |  |  |  | | |  | | | | |
|  | NA |  | #49 | | | Relocation Incentive Agreement fully completed | | | | |
| . |  |  |  | | |  | | | | |
|  | NA | NA | #8 | | | Agent’s Report detailing the general relocation items discussed | | | | |
|  |  |  | **\*** | | | R8 does not need to be lengthy, but it must be specific and complete | | | | |
|  |  |  | **\*** | | | R8 should be **signed** by both the agent and displacee | | | | |
|  |  |  | **🡺** | | | MUST INCLUDE “**Relocation Incentive Payment is considered as reportable taxable income.”** | | | | |

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| **COMPLIANCE CERTIFICATION** | |
| --- | --- |
| *I,* AGENT NAME & TITLE, AGENT COMPANY*, certify that this submittal is made in good faith; that the supporting data is accurate and complete to the best of my knowledge and that this submittal is in accordance with 49 CFR Part 24, PL 91-646 and IC 32-24 and that all applicable rules and regulations of the Federal Highway Administration have been complied with.* | |
|  |  |
|  | (Signature) |
|  | Phone: AGENT PHONE  Email: AGENT EMAIL |

Reviewer Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_