PPMO - 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 |
|  |  |  |  |  |
| [ ]  | [ ]  | [ ]  | # 41D | **PPMO Questionnaire** fully completed |
|  |  |  |  |  |
| [ ]  | NA | [ ]  | #38 | Self certifying form that must be **signed** by the displacee |
|  |  |  |  |  |
| [ ]  | [ ]  | [ ]  | #44 | **Title VI Survey** fully completed or initialed by displacee |
|  |  |  |  |  |
| [ ]  | [ ]  | [ ]  | # 9 | Fully completed with landlord’s signature (**rental & landlord only**) |
|  |  |  |  |  |
| [ ]  | NA | [ ]  | #30A | 90 Day Notice **signed** by the agent and displacee |
|  |  |  |  |  |
| [ ]  | [ ]  | [ ]  | #25 | Top portion completed with agent’s signature  |
|  |  |  |  |  |
| [ ]  | [ ]  | [ ]  | Photo | Personal exterior photo of the subject building(s) |
|  |  |  |  |  |
| [ ]  | [ ]  | [ ]  | INV | Large or unique items should be noted in the caption. |
|  |  |  | **\*** | Photos must clearly identify the personal property being inventoried |
|  |  |  |  |  |
| [ ]  | NA | [ ]  | #42A | **Payment Notice** **signed** by the displacee |
|  |  |  |  |  |
| [ ]  | NA | [ ]  | #43A | **Tax Law Letter** initialed by the displacee |
|  |  |  |  |  |
| [ ]  | NA | NA | # 8 | Agent’s Report detailing the general relocation items discussed |
|  |  |  | **\*** | **Delivery Instructions** must be noted |
|  |  |  | **\*** | R8 does not need to be lengthy, but it must be specific and complete  |
|  |  |  | **\*** | R8 should be **signed** by both the agent and displacee |

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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 PHONEEmail: AGENT EMAIL |

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