**SEARCHING EXPENSES DETERMINATION**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name | DISPLACEE(S) NAME | Project | PROJECT # |  |  |  |
| Address | DISPLACEE(S) ADDRESS | Code | CODE | Parcel | PARCEL |

|  |
| --- |
| Reimbursement will be based on the actual and usual hourly rate of the person conducting the search. All expenses except value of time spent and mileage driven must be supported by receipted bills. Fees paid to realtors to locate replacement sites are eligible. Real estate commissions are **NOT** reimbursable searching expenses. **Maximum reimbursement is $2,500.00.** |
|  |
| 1. Name of person conducting search.
 |       |
|  |
| 1. Actual and usual hourly rate of person conducting search is
 |       | / hr |
| (hourly rate excludes bonus or incentive pay and must be considered reasonable to be approved) |
|  |
| 1. Mileage rate is reimbursed based on the IRS mileage rate found on the IRS website for the corresponding date.
 |
|  |
| 1. Breakdown of time and mileage spent searching for replacement site:
 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date |  | Time Spent |  | Miles Driven |  | Date |  | Time Spent |  | Miles Driven |  | Date |  | Time Spent |  | Miles Driven |  |
|       |  |       | hr |       | mi |       |  |       | hr |       | mi |       |  |       | hr |       | mi |
|       |  |       | hr |       | mi |       |  |       | hr |       | mi |       |  |       | hr |       | mi |
|       |  |       | hr |       | mi |       |  |       | hr |       | mi |       |  |       | hr |       | mi |
|       |  |       | hr |       | mi |       |  |       | hr |       | mi |       |  |       | hr |       | mi |
|       |  |       | hr |       | mi |       |  |       | hr |       | mi |       |  |       | hr |       | mi |
|       |  |       | hr |       | mi |       |  |       | hr |       | mi |       |  |       | hr |       | mi |
|       |  |       | hr |       | mi |       |  |       | hr |       | mi |       |  |       | hr |       | mi |
|       |  |       | hr |       | mi |       |  |       | hr |       | mi |       |  |       | hr |       | mi |
|       |  |       | hr |       | mi |       |  |       | hr |       | mi |       |  |       | hr |       | mi |
| **Total:** |  |  | **hr** |  | **mi** | **Total:** |  |  | **hr** |  | **mi** | **Total:** |  |  | **hr** |  | **mi** |
|  |
| 1. Other expenses supported by receipted bills, (e.g. lodging and meals) if overnight travel was involved
 |
|  |
| Item |  |  | Amount |  |
|       |  |  |       |  |
|       |  |  |       |  |
|  |
| 1. Summary of Searching Costs
 |
|  |
|       | Total hours spent @ |       | / Hr | = |       |  |
|       | Total miles driven during (date range) @  |       | / mi | = |       |  |
|       | Total miles driven during (date range) @  |       | / mi | = |       |  |
|       | Total miles driven during (date range) @  |       | / mi | = |       |  |
| Total other expenses from Item 5 (receipts required): |       |  |
|  |  |
| **TOTAL SEARCHING COSTS** |  |  |

I certify that the information in this form is true and accurate to the best of my knowledge and submit this report with the attached receipts, if applicable, as evidence of the expenses incurred.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Date |  | Displacee |