**REESTABLISHMENT EXPENSES DETERMINATION**

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| Business Name | | | | | | | | DISPLACEE(S) NAME | | | | | | | | | |  | | | Project | | PROJECT # | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subject Address | | | | | | | | | ADDRESS IN RIGHT OF WAY | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contact Address | | | | | | | | | DISPLACEE(S) ADDRESS | | | | | | | | |  | | | Code | CODE | | | | | Parcel | | | | | PARCEL # |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Eligibility Determination:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Does the business have 500 or fewer employees working at the displacement site? Yes No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Were the reestablishment costs claimed actually incurred by the business in relocating and reestablishing at a replacement site? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | Yes No | | | | | | | | | | | | | | | | | | | | | | |
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| IF THE ANSWER TO EITHER OF THE PRECEDING QUESTIONS IS “**NO**”, THE BUSINESS IS NOT ELIGIBLE FOR A BUSINESS REESTABLISHMENT EXPENSES PAYMENT. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Eligible Expenses (must be reasonable and necessary):** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. | | | Repairs or improvements to the replacement property as required by Federal, State or Local Law, | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
|  | | | Code, or Ordinance. | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
| 2. | | | Modifications to the replacement property to accommodate the business operation or make the | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
|  | | | replacement structure suitable for conducting business. | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
| 3. | | | Construction and installation costs for exterior signing to advertise the business. (Ensure there is | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
|  | | | no duplication of cost-to-cure in appraisal or of moving cost.) | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
| 4. | | | Redecoration or replacement of soiled or worn surfaces at the replacement site such as paint, | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
|  | | | paneling, or carpet. | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
| 5. | | | Advertisement of replacement location. | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
| 6. | | | Estimated increased cost of operation during the first 2 years at the replacement site. | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |
|  | | | A. | | | | Increase in lease or rental charges | | | | | |  | | | |  | | | | | | |  | | | | | |  | | |
|  | | |  | | | |  | | | | | |  | | | |  | | | | | | |  | | | | | |  | | |
|  | | | B. | | | | Increase in personal or real property taxes | | | | | |  | | | |  | | | | | | |  | | | | | |  | | |
|  | | |  | | | |  | | | | | |  | | | |  | | | | | | |  | | | | | |  | | |
|  | | | C. | | | | Increase in insurance premiums | | | | | |  | | | |  | | | | | | |  | | | | | |  | | |
|  | | |  | | | |  | | | | | |  | | | |  | | | | | | |  | | | | | |  | | |
|  | | | D. | | | | Increase in utility charges (excluding impact fees) | | | | | |  | | | |  | | | | | | |  | | | | | |  | | |
|  | | |  | | | |  | | | | | | | |  | | | | Total Items A-D | | | | | | | |  | | | | $ 0.00 | |
|  | | |  | | | |  | | | | | | | |  | | | |  | | | | | | |  | | |  | | | |
| 7. | | | Other items approved as eligible by the INDOT Relocation Supervisor. | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | |
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| **REESTABLISHMENT EXPENSES: (TOTAL ITEMS 1-7)** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | $ 0.00 | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | **MAX** | | | |
|  | |  | | | |  | | | | | | |  | | | |  | | | | | | |  | | | | | |  | | |
|  | | F. | MAXIMUM Reimbursement for Reestablishment | | | | | | | | | |  | | | | $25,000.00 | | | | | | |  | | | | | |  | | |
|  | |  | | | |  | | | | | | |  | | | |  | | | | | | |  | | | | | |  | | |
|  | | G. | Less Previously Paid Reimbursements | | | | | | | | | | - | | | |  | | | | | | |  | | | | | |  | | |
|  | |  | | | |  | | | | | | |  | | | |  | | | | | | |  | | | | | |  | | |
|  | | I. | Remaining Balance Available NOW for Reimbursement | | | | | | | | | |  | | | | $25,000.00 | | | | | | |  | | | | | |  | | |
|  | |  | | | | | | | | | | |  | | | |  | | | | | | |  | | | | | |  | | |
|  | | J. | Current Claim – **$25,000.00 MAXIMUM**  **Not to Exceed Remaining Balance Available (Line I)** | | | | | | | | | | - | | | | $ 0.00 | | | | | | |  | | | | | |  | | |
|  | |  | | | | | | | | | | |  | | | |  | | | | | | |  | | | | | |  | | |
|  | | K. | Remaining Balance Available for FUTURE Reimbursement | | | | | | | | | |  | | | | $25,000.00 | | | | | | |  | | | | | |  | | |
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| Based on the foregoing, this business **IS** eligible to receive a Reestablishment Expense Payment in the amount of | | | | | | | | | | | | | | | | | | | | | | | | | | | $ 0.00 | | | | | |
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| Date | | | | | | | | | |  | , Right of Way Agent | | | | | | | | | | | | | | | | | | | | | |