

Notice of Eligibility For
Relocation Payment – GUIDE

(date)

Dear _____,

On (date) , the (city, county, state, Public Housing Authority, other) , notified you of proposed plans to (acquire, rehabilitate, or demolish) the property you currently occupy at (address) for a project which could receive funding assistance from the Missouri Housing Development Commission (MHDC) under MHDC's Rental Housing Production Program. On (date) , the project was approved and will receive the MHDC funding.

It has been determined that you will be displaced by the project. Since you are being displaced in connection with this state funding project, you will be eligible for a relocation payment under the Missouri Revised Statutes, Chapter 523.205.

- **This is your Notice of Eligibility for relocation payment.**
- **The effective date of your eligibility is (date of FIRM Commitment) .**

All persons seeking relocation payments will be required to certify that they are a United States citizen or national, or an alien lawfully present in the United States.

To carry out the project, it will be necessary for you to move. However, **you do not need to move now.** You will be provided written notice of the date by which you will be required to move. This date will be no less than 90 days from the date suitable replacement housing will be made available to you.

The relocation payment to which you are entitled includes:

Payment for Reasonable Expenses – You may choose one of the following:

1. A payment for your actual reasonable moving and related expenses, or
2. A fixed moving payment in the amount of \$1,000 set by the Missouri Revised Statutes, Chapter 523.205.

Replacement Housing – Listed below are three comparable replacement dwellings that you may wish to consider for your replacement home. If you would like, we can arrange transportation for you to inspect these and other replacement dwellings.

	Address	Rent & Utility Costs	Contact Information
1.	_____		
2.	_____		
3.	_____		

We believe that the dwelling located at (address) is the most representative of your present home. The monthly rent and the estimated average monthly cost of utilities for this dwelling is \$_____. Please contact us immediately if you believe this dwelling is not suitable. We can explain our basis for selecting this dwelling as most representative of your current home and discuss your concerns.

Please note that all replacement housing must be inspected in order to ensure it is decent, safe and sanitary before the relocation payment is made. To be eligible for the relocation payment, the replacement unit must pass inspection.

If you have any questions about this letter and your eligibility for a relocation payment, please contact (name) (title) at (phone number) or (address) before you make any moving plans. He/she will assist you with your move to a new home and help ensure that you preserve your eligibility for your relocation payment to which you may be entitled.

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

Sincerely,

 (name and title)

NOTES:

1. The case file must indicate the manner in which this notice was delivered – personally served or certified mail with a return receipt – and the date of delivery.
2. This is a guide and should be revised to reflect the circumstances.