

ACQUISITION

(Acquisition from another public entity is not subject to the URA.)

1. Is there a separate file for each acquisition? Yes No
2. Was the General Information Notice hand-delivered or mailed with certified receipt? Yes No
3. Is there a copy of the appraisal? Yes No
4. Is there evidence that the owner was invited to accompany the appraiser? Yes No
5. Was a review appraisal done? Yes No
6. Were qualified independent appraisers used? Yes No
7. If not appraised, was the value of the property \$10,000 or less? Yes No
8. If less than \$10,000, was the value based upon a review of the available market data? Yes No
9. Is a copy of the written offer to purchase in the file? Yes No
10. Was the offer issued promptly after the appraisal? Yes No
11. Was a statement of the basis for determining the offer included with the offer? Yes No
12. Is there evidence of clear title, a current survey, deed and legal description of the property? Yes No
13. Was a statement of settlement costs included in the file? Yes No
14. Is proof of receipt of payment in the file (canceled check)? Yes No
15. Was payment timely? Yes No
16. Is there proof of recording the deed in the file? Yes No
17. If recipients determined not to purchase after distributing the notice to acquire and/or offer, is there a written notice of such decision in the file with evidence of hand delivery (or certified mail)? Yes No
18. If the recipient permitted an owner or tenant to occupy the real property acquired, was the rent charged equivalent to the fair rental value of the property? (if tenant occupied, see Relocation) Yes No
19. Was there a copy of any appeal or payment for incidental expenses or certain litigation expenses? Yes No
20. If property was donated: N/A____
 - a. Is a signed release of the grantee's obligation to an appraisal in the file? Yes No
 - b. If appraisal obligation is not waived, is a copy of appraisal or determination of value data in the file? Yes No
 - c. Is a signed waiver of rights of "just compensation" in the file? Yes No
 - d. Is a copy of all required title documentation included in file (recorded deed or easement)? Yes No
 - e. Was grantee's payment of all incidental costs to the transfer of title documented (recording fees, survey, title insurance, transfer fees, prorated taxes, deed preparation)? Yes No
21. If property was voluntarily acquired: N/A____
 - a. Was the property vacant, unoccupied AND unoccupiable for more than 3 months? Yes No
 - i. Is a signed owner statement verifying the above in the file? Yes No
 - ii. Is there an approved inspection checklist verifying unoccupiable condition in the file? Yes No
 - b. If the unit was occupied/occupiable, was it a low-moderate unit demolished/converted from housing triggering 104(d)? Yes No
 - c. Did the grantee inform the property owner/homeowner, in writing, that in the event the negotiation failed, the grantee will not acquire the property? Yes No
 - d. Were the property owners informed in writing they were not eligible for relocation benefits and of the "fair market" value of the property with receipt in the file? Yes No
 - e. Were all documents duplicated and sent to Department for permanent file? Yes No

RELOCATION

This section is applicable to grantees providing relocation assistance or grantees that have otherwise displaced persons by the use of HOME/Nebraska Affordable Housing Trust funds.

Were any residents/tenants permanently displaced as a direct result of this project? ___Yes ___No

If no, do not fill in the rest of this form and send a copy to the Dept.

Please list the data on the race, ethnic, and gender characteristics of displaced households (if more than 5 households, add another sheet):

	Race	Ethnicity	Gender
Household #1:			
Household #2:			
Household #3:			
Household #4:			
Household #5:			

Is there documentation of the location of the HOME/TRUST-funded activity that caused the displacement? Yes No

Did the relocation activities promote fair housing by providing displaced persons with two choices of replacement housing in the community's total housing supply regardless of race, color, religion, sex or national origin? Yes No

Were relocation services and benefits to displaced persons and businesses provided in a manner that did not result in different treatment to those persons relocated on account of race, color, sex, or national origin? Yes No

Part 1: Residential Relocation

Does the grantee have a file for each displaced household? Yes No

Does the displacing activity make it subject to the Uniform Relocation Act Section 104(d)? Yes No

a. Was the unit a low-to-moderate unit if rented?

Please review at least one relocation case file.

What is the name of the party displaced? _____

What was the former address of the displaced party? _____

What is the current address of the displaced party? _____

Date occupant was initially contacted: _____

Date of initial occupancy: _____

Monthly housing cost at acquired dwelling: _____

Name	Age	Sex	Marital Status	Race	Disability	Monthly Gross Income

Please describe any relocation needs of household including transportation, moving costs, etc.

1. Is the notice of relocation adequate? Yes No
2. Was the notice issued promptly after the initiation of negotiations? Yes No
3. Is there documentation describing services and assistance provided (must include the date the service/assistance was provided)? Yes No
4. Do the referrals to comparable replacement housing include the date of referral, address, sale/rental price, monthly housing cost and date of availability? Yes No
- a. If referral was rejected, what is the reasoning for the rejection?

5. Is there a copy of any lease between the grantee and occupant? Yes No
6. Is there a statement identifying the basis for grantee's determination of the fair rental after acquisition? Yes No
7. Is there a copy of 90-day notice? Yes No
- a. Was the notice received? Yes No
- b. Is the timing of notice adequate? Yes No
8. Is there a copy of 30-day notice? Yes No
- a. Was the notice received? Yes No
- b. Is the timing of notice adequate? Yes No

9. Inspection:

- a. Date of inspection: _____
- b. Address and description of replacement dwelling: _____
- c. Date of the relocation: _____
- d. Note what standards grantee used to determine if replacement dwelling is decent, safe and, sanitary.

10. Is there a copy of each relocation claim form together with supporting documentation? Yes No
11. Are there copies of worksheets used to determine benefits? Yes No
- a. Do the worksheets contain correct calculations and determination of benefits? Yes No
12. Is there evidence of verification of claim and receipt of payment? Yes No
13. If an appeal has been filed, what was the disposition? _____
14. Are there copies of correspondence in the file? Yes No
15. Has the relocation been completed within 6 months following acquisition of property? Yes No
- a. If no, please provide an explanation of the delay and plan for timely completion.

Interview member of displaced household using HUD form 4002.

Part 2: Nonresidential Relocation

The grantee should have all of the following items on file for each business displaced. A separate file should be established for each business. Send a duplicate file to the Department for the permanent file. Review at least one completed relocation case file and check for the items below, noting any deficiencies.

	Date the occupant was initially contacted
	Name, age, minority-group classification, disabilities of business owner (or principal official)
	Provide general information about the relocation
	Address, complete name, telephone number, and type of business
	Approximate annual gross sales, payroll and number of employees
	Size of business by square feet, number of stories, parking area, space leased or owned
	Monthly rental or mortgage cost (not landlord or institution receiving payment)
	Number of years in business and at present location

	Evidence of Notice of Relocation Eligibility
	Notice is adequate
	Notice was issued promptly after the initiation of negotiations
	Relocation requirements
	Evidence of referrals and other assistance, including date, address, purchase or rental price, date of availability
	If referral is rejected, reason(s) for rejection
	Copy of 90-day notice and evidence of receipt

	Description of Replacement Location
	Address
	Size
	Date move initiated and completed
	Manner of move (self move, commercial, etc.)
	Cost (monthly rental/mortgage payment)

	Copy of each relocation claim form and supporting documentation
	Copy of worksheets used to determine benefits
	Worksheet accuracy
	Evidence of verification of claim and receipt of payments
	Moving costs
	Appeal, if filed, and disposition:
	Copies of correspondence
	If relocation has not been completed within 6 months following acquisition, explanation of delay and plan for timely completion.