TAB R

Uniform Relocation Act
General Information Guideform Notices
GUIDEFORM GENERAL INFORMATION NOTICE -- RESIDENTIAL TENANT THAT WILL NOT BE DISPLACED

Grantee or Agency Letterhead

(date)

Dear ________:

On ____ (date)____, ____ (property owner)____ - submitted an application to the ____ (grantee)____ for financial assistance to rehabilitate the building which you occupy at ____ (address)____.

This notice is to inform you that, if the assistance is provided and the building is rehabilitated, you will not be displaced. Therefore, we urge you not to move anywhere at this time. (If you do elect to move for reasons of your choice, you will not be provided relocation assistance.)

If the application is approved and Federal assistance is provided for the rehabilitation, you will be able to lease and occupy your present apartment (or another suitable, decent, safe and sanitary apartment in the same building) upon completion of the rehabilitation. Of course, you must comply with standard lease terms and conditions.

After the rehabilitation, your initial rent, including the estimated average monthly utility costs, will not exceed the greater of (a) your current rent/average utility costs or (b) 30 percent of your average monthly gross household income. If you must move temporarily so that the rehabilitation can be completed, suitable housing will be made available to you for the temporary period, and you will be reimbursed for all reasonable extra expenses, including all moving costs and any increase in housing costs.

Again, we urge you not to move. If the project is approved, you can be sure that we will make every effort to accommodate your needs. Because Federal assistance would be involved, you would be protected by the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended.

This letter is important and should be retained. You will be contacted soon. In the meantime, if you have any questions about our plans, please contact (name)______________, (title)______ at ____ (phone)______, (address)______________.

Sincerely,

(name and title)

NOTES:

1. The case file must indicate the manner in which this notice was delivered (e.g., personally served or certified mail, return receipt requested), and the date of delivery. (See Paragraph 2-3d of Handbook 1378.)

2. This is a guideform. It should be revised to reflect the circumstances.
GUIDEFORM NOTICE OF NONDISPLACEMENT TO RESIDENTIAL TENANT
Grantee or Agency Letterhead

(date)

Dear ______________:

On (date) we notified you that the owner of your building had applied for assistance to make extensive repairs to the building. On (date) the owner's request was approved, and the repairs will begin soon.

This is a notice of nondisplacement. You will not be required to move permanently as a result of the rehabilitation. This notice guarantees you the following:

1. You will be able to lease and occupy your present apartment (or another suitable, decent, safe and sanitary apartment in the same building/complex) upon completion of the rehabilitation. Your monthly rent will remain the same or, if increased, your new rent and estimated average utility costs will not exceed 30% of the gross income of all adult members of your household. Of course, you must comply with the reasonable terms and conditions of your lease.

2. If you must move temporarily so that the repairs can be completed, you will be reimbursed for all of your extra expenses, including the cost of moving to and from the temporarily occupied unit and any additional housing costs. The temporary unit will be decent, safe and sanitary, and all other conditions of the temporary move will be reasonable.

Since you will have the opportunity to occupy a newly rehabilitated apartment, I urge you not to move. (If you do elect to move for your own reasons, you will not receive any relocation assistance.) We will make every effort to accommodate your needs. Because Federal assistance is involved, you are protected by the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended.

If you have any questions, please contact __________ (name) __________, __________ (title) __________, at (phone) __________, __________ (address) __________. Remember, do not move before we have a chance to discuss your eligibility for assistance. This letter is important to you and should be retained.

Sincerely,

(name and title)

NOTE:

1. The case file must indicate the manner in which this notice was delivered (e.g., personally served or certified mail, return receipt requested), and the date of delivery. (See Paragraph 2-3d of Handbook 1378.)

2. This is a guideform. It should be revised to reflect the circumstances.
GUIDEFORM NOTICE TO PROSPECTIVE TENANT

Grantee or Agency Letterhead

(date)

Dear __________________:

On ______ (date) ______, ______ (property owner) ______ submitted an application to the (Grantee) ______ for financial assistance to (acquire) (rehabilitate) (demolish) (convert) the building, located at ______ (address) ______. Because Federal funds are being used in this project, the Uniform Relocation Assistance and Real Property Acquisition Policies Act (URA) of 1970, as amended (URA) applies for tenants in residence at the time of application. However, as a new tenant, you will not be eligible for relocation benefits under the URA.

This notice is to inform you of the following information before you enter into any lease agreement and occupy a unit at the above address:

You may be displaced by the project.

You may be required to relocate temporarily.

You may be subject to a rent increase.

You will not be entitled to any relocation benefits provided under the URA. If you have to move or your rent is increased as a result of the above project, you will not be reimbursed for any such rent increase or for any costs or expenses incurred by you in connection with a move as a result of the project.

Please read this notification carefully prior to signing a rental agreement and moving into the project. If you should have any questions about this notice, please contact ______ (Grantee) at ______ (address and telephone number) ______. Once you have read and have understood this notice, please sign the statement below if you still desire to lease the unit.

Sincerely,

(name and title)

NOTE:

This is a guideform. It should be revised to reflect the circumstances.
I have read the above information and understand the conditions under which I am moving into this project.

Print Name of Tenant(s)

Signature(s)

Address and Unit Number

Date

NOTE:

This is a guideform. It should be revised to reflect the circumstances.
NOTIFICATION TO SELLER

Make two copies. Leave one with the seller and keep the other copy in program files.

Date:

Dear Owner:

The purchaser of your property located at ____________________________ is being assisted with funding from the HOME Program, provided through the Michigan State Housing Development Authority. The purpose of this letter is to inform you of your rights under Federal law when Federal funds are involved in property acquisition. This is a voluntary sale. Activities funded by the HOME Program are covered by the Uniform Relocation Assistance and Real Property Acquisition Policies Act, commonly called "the Uniform Act." The Uniform Act protects persons whose property is taken involuntarily or who are forced to move as a direct result of a Federally funded project. However, because this is a voluntary sale negotiated between you and the buyer, and there is no threat of eminent domain or condemnation to take your property, this sale is not regulated by the Uniform Act except for the following notifications which we must present to you:

1. The purchaser does not have power of eminent domain to take your property if we cannot reach an agreement through negotiation.

2. The fair market value of the property located at ____________________________ has been estimated at _____________. The purchase price we are offering is _____________. You have the authority to accept or reject our offer just as you would in a private transaction.

You, as the seller, are not eligible for relocation assistance under the Uniform Relocation Act because the proposed sale is considered voluntary, and the above information is being provided to you prior to executing a purchase agreement or sales contract. If you have any questions or require additional information, please contact ________________ at between the hours of ________ and ________.

Sincerely,

Owner Receipt of Information

I, ____________________________, the owner of the property located at certify that I have received and understood the above information. I further certify that this notice was received:

_________ Prior to executing a purchase agreement.

_________ After the purchase agreement was executed, however, I do not wish to terminate this voluntary sale.

Signed: ___________________________ Date:

Guide to Program Compliance Acquisition and Relocation- 8 MSHDA 6/97
OCCUPANCY/VACANCY CERTIFICATION

This is to certify that I/we ______________________________________________________________________ are the owners and sellers of the property located at ______________________________________________________________________.

On or about the date of ______________________________________, I/we entered into a Purchase Agreement with ______________________________________ for the purchase of the property described above.

At the time of the Purchase Agreement, I/we certify that the property located at:

__________________________________________________________________________________________:

(Complete and check one of the following)

A. ___ was/is vacant of residential or non-residential tenants. I/we further certify that his property was vacant prior to any verbal and/or written agreement with the buyer.

B. ___ has been occupied by ourselves (the sellers) for the previous ____ months.

C. ___ has been occupied by the prospective purchasers, for the previous ____ months.

Nothing that I/we did as part of this sale, or previous to it, caused tenants to vacate and therefore avoid relocation in a Federally-assisted project.

__________________________________________________________________________  _____________________________
Signature of Seller  Date

__________________________________________________________________________  _____________________________
Signature of Co-Seller  Date