

RESOLUTION NO. 2010-476

Adopted by the Sacramento City Council

August 10, 2010

APPROVAL OF THE RELOCATION PLAN FOR ELIGIBLE TENANTS AT 5300 AND 5340 YOUNG STREET

BACKGROUND

- A. The Redevelopment Agency of the City of Sacramento desires to acquire real property at 5300 and 5340 Young Street (Property) for redevelopment purposes. Acquisition of the Property furthers the Stockton Boulevard Redevelopment Plan and its program for the elimination of blighting influences. The proposed project supports the Stockton Boulevard Five-Year Implementation Plan, specifically the strategies of Strengthen the Residential Neighborhoods and Attract High Quality Design and Development on Obsolete Motel and Key Catalyst Sites Along the Boulevard. The proposed project is consistent with the Stockton/Broadway Urban Design Plan and the Broadway/Stockton Special Planning District and it also supports the objectives of the County's General Plan Economic Development Element by creating a catalyst site for commercial corridor redevelopment to improve community quality of life, balance land uses and increase the tax base.
- B. Acquisition of the property as described herein is in furtherance of the Stockton Boulevard Redevelopment Plan. The proposed action of demolishing and removing a multi-family structure of not more than six units and no more than three single-family units is exempt from CEQA pursuant to CEQA Guidelines section 15301 (I). The Replacement Housing Plan consists of an administrative action designating units within a previously approved low-income housing development to replace the low-income units lost by demolition of the structures at 5300 and 5340 Young Street. The purchase of the properties and funding of an Environmental Site Assessment are also administrative actions associated with the demolition project. As such, these actions do not constitute a separate project under CEQA Guidelines Section 15378, and do not require further environmental review. Therefore, the entirety of the proposed action is exempt from further CEQA review.
- C. The Agency has prepared a Relocation Plan for the relocation of tenants from the Property, a copy of which is attached as Exhibit A.

BASED ON THE FACTS SET FORTH IN THE BACKGROUND, THE CITY COUNCIL RESOLVES AS FOLLOWS:

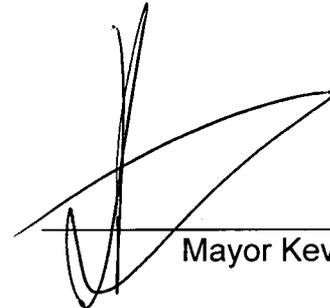
- Section 1. After due consideration of the evidence presented, the findings, including the environmental findings regarding this action as stated above, are approved.
- Section 2. The Relocation Plan for the eligible tenants at 5300 and 5340 Young Street is approved.

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Exhibit A: Relocation Plan

Adopted by the City of Sacramento City Council on August 10, 2010 by the following vote:

- Ayes: Councilmembers Cohn, Fong, Hammond, Pannell, Sheedy, Tretheway, Waters, and Mayor Johnson.
- Noes: None.
- Abstain: None.
- Absent: Councilmember McCarty.



Mayor Kevin Johnson

Attest:


Shirley Concolino, City Clerk

RELOCATION PLAN FOR 5300 & 5340 Young Street

**PREPARED FOR
SACRAMENTO HOUSING & REDEVELOPMENT
AGENCY**



INVESTING IN COMMUNITIES

PREPARED BY:

Paragon Partners Ltd

July 2010

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1.0 INTRODUCTION

Two parcels located at 5300 and 5340 Young Street are the subject of a proposed acquisition by Sacramento Housing and Redevelopment Agency (SHRA) acting as the Redevelopment Agency of the City of Sacramento. Both parcels are located in the City of Sacramento and are within the joint City and County Stockton Boulevard Redevelopment Area. Both properties are occupied by rental tenants. If approved by the governing bodies, the proposed project will consist of acquiring and demolishing the rental units and land banking them for a future redevelopment project.

A three-bedroom, one bath single family home, currently a rental unit, is situated on 5300 Young Street and a small apartment building consisting of four, one- bedroom one bath units is situated on 5340 Young Street. If the project is approved SHRA will provide relocation services and assistance to five (5) households consisting of a total of twelve (12) occupants. All occupants of these households must be permanently relocated for the completion of this project. The funding source for the proposed project consists entirely of redevelopment tax increment funding. Therefore, California Title 25 State Relocation Guidelines will provide the regulatory basis for relocating any eligible tenants.

In 1993, Stockton Boulevard was designated as a redevelopment study area. In May 1994, the Sacramento City Council and the Sacramento County Board of Supervisors approved the adoption of the Redevelopment Plan for the joint City and County Stockton Boulevard Redevelopment Project Area. A new Five Year (2009-2014) Implementation Plan for the redevelopment area was adopted on November 3, 2009. In addition to other matters, the implementation plan will continue to address issues of obsolete motels with plans for their reuse and reconfiguration. The Young Street properties are adjacent to the former San Juan Motel, which is currently owned by SHRA and has recently been demolished and is being held for future redevelopment. In addition, SHRA has purchased 5270 and 5320 Young Street and is in various stages of demolition of these properties for future redevelopment. SHRA is also currently negotiating the purchase of 5258 Young Street.

Young Street meets state redevelopment definitions of blight and acquisition of the properties is consistent with SHRA's goal of blight removal and reuse of properties that will prove beneficial to the surrounding neighborhood. Currently, Young Street experiences high rates of crime and is occupied by rental units with deferred maintenance needs. In addition, SHRA's Housing Authority owns several units on Young Street that are negatively impacted by the local crime. Acquisition of the two parcels identified in this relocation plan will assist SHRA in addressing its redevelopment goals for the area.

In order to comply with the California Environmental Quality Act (CEQA) and the State of California, Title 25 Department of Housing and Community Development Relocation Guidelines, this relocation plan will provide SHRA with summary and statistical information regarding the potential impact of this project to occupants within the project limits. Specifically, this plan will identify potential impacts that may occur as a result of the demolition of existing structures, proposed displacement of occupants, and presentation of a plan to mitigate respective impacts.

2.0 REDEVELOPMENT PROJECT AREA (See Attachment 1)

This project lies within a portion of the joint City and County Stockton Boulevard Redevelopment Project Area, which includes 925 acres, and runs along Stockton Boulevard from 14th Avenue in the City to the City/County redevelopment project area boundary line south of Riza Avenue.

2.1 PROJECT AREA DESCRIPTION (See Map of Project Site, Attachment 2)

The location of the Young Street properties is west of Stockton Boulevard between Elder Creek Road and Fruitridge Road in the City of Sacramento. The area's ethnic make up is diverse and consists of, 20.2% Hispanic or Latino, 10.5% African American, 69.7% Caucasian, 13.4% Asian, 0.8% Pacific Islander, 1.3% Native American, and 4.4% from two or more races. **(See Attachment 3)**

A resource study was undertaken to ascertain the availability of adequate replacement sites. This report profiles the project area population, describes the resource survey, and details SHRA's relocation assistance plan.

The State of California, Title 25, Housing and Community Development Relocation Guidelines will be complied with in the implementation of the relocation assistance program.

3.0 ASSESSMENT OF RELOCATION NEEDS

To implement the relocation program, SHRA contracted with Paragon Partners Ltd, an experienced relocation consulting firm. During the month of July Paragon met with four of the five households. During this time the tenants were surveyed and the relocation program was described and questions were answered. No members of the households were determined to be elderly or disabled. It was emphasized during the meeting that tenants should continue to pay rent during the entire project planning stages.

The General survey conducted with residents included questions concerning existing conditions, type of occupancy, mortgage/lease and income information, size of unit, and relocation needs (i.e. bedroom/bath, pets, physical limitations, transportation, proximity to services/shopping, etc.). A sample of the questionnaire form is included. **(See Attachment 4)**

3.1 FIELD SURVEY DATA

- A. Residential: There are five (5) households that have been identified who will be affected as a result of the project. One household was not available for an interview at the time of the writing of this plan. Additional attempts will be made to contact this household.
- B. Business: No business displacements will be involved in this relocation
- C. Concurrent Displacement: There are no projects, current or anticipated, in this general area of Sacramento that will deter SHRA from providing adequate replacement housing referrals to current Project occupants.

- D. Temporary Housing: There is no anticipated need for temporary housing. Should the need arise, SHRA will respond appropriately and in conformance with all applicable laws and requirements.
- E. Evidence of Overcrowding. For purposes of determining whether overcrowding conditions exist, an occupancy standard of two persons per sleeping room plus one person in a non-sleeping room was utilized. Based on that occupancy standard, it appears that none of the affected households is overcrowded.

Refer to **Attachment 5** for the household characteristics of tenants.

4.0 RELOCATION RESOURCES

SHRA's relocation consultant will personally inspect the site of each potentially impacted residential unit surveyed in the project area to assess the potential needs for a replacement location. Additionally, SHRA's relocation consultants have engaged in preliminary investigations through internet searches, review of classified advertisements and communication with local real estate brokers to determine the general availability of rental and sale listings in the immediate and surrounding areas of the project. The chart below shows the availability of units for rent available to the residents of the affected properties.

4.1 RESIDENTIAL PROPERTY

For Rent Properties: The survey identified residence replacements for rent. The rental prices range from \$575/month to \$695/month for one bedroom apartments and \$895/month to \$1,050/month for three bedroom homes. The relocation consultant's files contain additional housing resources.

Sample Prices for Replacement Units for Rent for the Young Street Residents

Size	Price Range of Replacement Units for Rent	Average (Price)
1 Bedroom Apartments	\$575 - \$695/mth	\$630.17/mth
3 Bedroom Homes	\$895 - \$1,050/mth	\$980.00/mth

4.2 Results of Survey – July 2010 (See Attachment 6 – Replacement Units for Rent)

The investigation indicated there are an adequate number of replacement units available to accommodate the needs of the displaced residential occupants within the project area. Based on the results of this survey, it appears that the displaced tenants in the Project area will have an adequate supply of available replacement units from which to select.

However, the conclusion from the survey also indicated that, based on the current housing market, comparable housing for residential occupants is not available within the statutory \$5,250 (90-day occupant). As a result, SHRA will have to resort to the administrative process of Last Resort Housing, which pursuant to the California Relocation Guidelines provides for replacement housing payments in excess of the statutory limit.

5.0 RELOCATION ASSISTANCE SERVICES

SHRA will provide all relocation assistance activities in accordance with the State of California, Title 25, Housing & Community Development Guidelines, as amended. Relocation resources shall be available to all displaced without discrimination.

5.1 Program Assurances, Standards and Objectives

The relocation program to be implemented by SHRA will conform to the standards and provisions of the California Government Code Section 7260 et. seq.; and Title 25, Chapter 6 of the California Code of Regulations. At the time of the interviews, A General Information Notice (See Attachment 7) was delivered to each resident.

Pursuant to applicable guidelines, program objectives will be as follows:

1. To fully inform eligible Project area occupants of the nature of and procedures for obtaining relocation assistance and benefits, printed "Informational Statements" (See Attachment 8) will be provided to all Project occupants.
2. To provide an adequate number of referrals to comparable residential sites within a reasonable time prior to displacement and assure that no occupant will be required to move without a minimum of 90 days written notice to vacate.
3. To provide current and continuously updated information concerning residential listings.
4. To provide whatever assistance is required to ensure that the relocation process does not result in different or separate treatment on account of race, color, religion, national origin, sex, marital status or other arbitrary circumstances.
5. To supply information concerning federal and state business programs and other governmental programs providing assistance to displaced persons.
6. To assist each eligible person to complete claims for payments and benefits.
7. To make relocation benefit payments in accordance with all aforementioned guidelines, as applicable.
8. To inform all eligible persons subject to displacement of SHRA's policies with regard to eviction and property management.
9. To establish and maintain a formal grievance procedure for use by displaced persons seeking administrative review of SHRA's decisions with respect to relocation assistance.
10. To assist eligible persons to become established in residential housing.
11. To provide other advisory assistance to eligible displaced persons in order to minimize the hardship of relocation.

In addition, before displaced occupants are required to move, they will receive: 1.) All required information regarding SHRA's Relocation Assistance Program at least ninety days prior to the date they must move, and 2.) 'Ninety Days' written notice prior to the date they must move.

5.2 CITIZEN PARTICIPATION

SHRA has encouraged citizen participation and comments in the preparation of this Relocation Plan. Consistent with obligations under Section 6012 (Citizen Participation) of the California Code of Regulations, Title 25, Chapter 6 the Agency will provide:

1. Full and timely access to all documents relevant to the Relocation Assistance Program.
2. Technical assistance necessary to interpret elements of the Relocation Plan and other pertinent materials.
3. Copies of this Relocation Plan shall be submitted for review (30) days prior to final approval by the governing bodies to the following:
 - a. Interested parties who desire to comment will be invited to submit written or oral comments and objections, and such written comments shall be attached to the Relocation Plan when it is forwarded to the governing bodies for final approval.
 - b. A general notice concerning the availability of this Relocation Plan shall be distributed to all occupants of the Project site. This Plan will be available for review by interested citizen groups, state and county agencies, and by the general public.
 - c. Upon completion of all reviews, the Relocation Plan will be presented for adoption by the governing bodies.

5.3 RELOCATION ADVISORY ASSISTANCE

An important element of the relocation assistance program is to provide all potential occupants with technical and advisory assistance. The following specific activities will be undertaken:

1. Each potential residential occupant will be personally interviewed to gather appropriate information to determine needs and preferences with regard to residential locations.

Inquiries made of residential needs by relocation personnel will focus on family composition, requirements and needs.
2. Printed "Notice of Eligibility letters" will be personally delivered to all displaced persons. Signed acknowledgements will be obtained to verify receipt of this material.
3. Transportation will be provided, if necessary, for any displaced occupant to inspect replacement sites within the local area.

4. Eligible residential tenants will receive referrals to replacement sites that match, as closely as possible, the requirements and preferences of each family with regard to size, cost, and location.
5. Relocation staff will assist residential occupants in preparing for the physical move of personal property and act as a liaison with appropriate agencies. Moving payments will be based on actual expenses or a fixed rate according to number of rooms as established by the State of California (**See Attachment 9**).
6. Assistance will be offered to all occupants in connection with arrangements for the purchase of real property, the filing of claim forms to request relocation benefits from SHRA, and to obtain services from other public agencies.
7. For the purposes of scheduled meetings with occupants of the Project, SHRA's Relocation Staff will be available to meet at the occupant's residence or SHRA's offices located at 801 12th St., Sacramento, CA 95814.

5.4 GENERAL INFORMATION ON PAYMENT OF RELOCATION BENEFITS

Relocation benefit payments will be made in a timely manner following the submission of appropriate claims. Claims and supporting documentation for claims must be filed with SHRA within eighteen (18) months from the date the claimant moves from the acquired property.

The procedure for the preparation and filing of claims and the processing and delivery of payments will be as follows:

1. Claimant(s) will provide all necessary documentation to substantiate eligibility for assistance and payments.
2. The relocation staff, in consultation with the claimant(s), will determine assistance amounts and prepare required claim forms.
3. Original signed claims supported by appropriate documentation and a Relocation staff recommendation will be submitted to SHRA.
4. SHRA will review and approve claims for payment.
5. SHRA warrants will be prepared and issued to Relocation staff for distribution.
6. Payments are to be delivered by Relocation staff unless circumstances dictate otherwise. When payments cannot be personally delivered, they will be sent by certified mail, return receipt requested.
7. Receipts of payment will be obtained by Relocation staff and maintained in the case file.
8. Unless otherwise instructed by SHRA, Relocation staff will not deliver final payments until the Project area premises of the claimant(s) have been vacated. Before issuance of final payments, actual occupancy at new quarters must be verified.

9. Claims can be submitted for payment to landlord for advance rents and security deposits. Any remaining benefits will be paid directly to the displacee in one check unless otherwise specified by SHRA.

5.5 RELOCATION TAX CONSEQUENCES

In general, relocation payments are not considered income for tax purposes. Benefit payments are made subject to the provisions of Title 24 of the Code of Federal Regulations and Chapter 16 of the California Government Code. The above statements on tax consequences are not intended to be tax advice by SHRA. Occupants are encouraged to consult with their own tax advisors concerning the tax consequences of relocation payments.

5.6 EVICTION POLICY

Under State guidelines, eviction is permissible only as a last resort. Relocation records must be documented to reflect the specific circumstances surrounding the eviction.

Eviction shall be undertaken only for one or more of the following reasons:

1. Failure to pay rent, except in those cases where the failure to pay is due to the lessor's failure to keep the premises in habitable condition, is the result of harassment or retaliatory action or is the result of discontinuation or substantial interruption of services;
2. Performance of a dangerous, illegal act in the unit;
3. Material breach of the rental agreement and failure to correct breach within 30 days of notice;
4. Maintenance of a nuisance and failure to abate within a reasonable time following notice; or
5. The eviction is required by State or local law and cannot be prevented by reasonable efforts on the part of the public entity.

Those who remain in the project area will be obliged to honor the terms and conditions of rental agreements provided by SHRA. Failure to abide by the terms of the rental agreement may result in eviction.

5.7 PROJECTED DATES OF DISPLACEMENT

The displacement period for all eligible displacees will commence once the Relocation Plan has been adopted. It is anticipated that this date will be in **August of 2010** and the project is anticipated to continue through **February of 2011**. The current Project schedule provides adequate time for proper planning of the relocation program and notification to the residential tenants.

5.8 ESTIMATED RELOCATION COSTS

The relocation cost estimates for the one single family home and four one-bedroom apartments are listed below. The estimates for the un-interviewed apartment residents are calculated as extremely low-income residents under the Sacramento County Income Limits (**See Attachment 3**) and their incomes will be assumed as such until more detailed income information can be gathered. Tenants of the extremely low-income category have an estimated gross monthly income not to exceed \$1,275.00 a month. As such, each resident will have an estimated monthly ability to pay (ATP) of \$382.50. Replacement rent of \$630.17 has been identified for replacement of one bedroom apartments based upon the average replacement rents in the immediate area. Replacement rent of \$980.00 has been identified for replacement of three bedroom homes. Currently there are a suitable amount of replacement properties for the identified displacees.

Based upon the estimated ATP (\$382.50) and the average replacement rents and utility allowances (\$726.00 Rounded), one bedroom tenants will have an average monthly rental need of \$343.50. This rental assistance will be paid for a period of forty two (42) months. Estimated relocation eligibility of each one-bedroom resident will be \$14,427.00. Based upon estimated ATP (\$636.00) and the average replacement rents and utility allowance (\$1,195.00) for a three bedroom home, it is estimated that the single family home tenants will have a monthly rental need of \$559.00. Estimated relocation eligibility for the single family home household will be \$23,478.00.

Summary of Amounts of Relocation Benefits

Rental Assistance Payments	\$81,186.00
<i>(One single family home & four one bedroom apartments)</i>	
Residential Fixed Moving Payments	\$ 5,425.00
<i>(1 single family home (\$1,425.00) and 4 one bedroom apts. residents \$1,000 per)</i>	
Total Estimated Relocation Cost of On-site Residents	\$86,611.00
Plus 10% Contingency	\$ 8,611.10
Total Estimated Relocation Costs (rounded)	\$95,222.10

5.9 RIGHT TO APPEAL

Any person who has been refused a relocation payment or who disagrees with the amount of their relocation payment has the right to appeal. Information about the appeal procedure is available from the Relocation Advisor. The Relocation Advisor will also help a displacee to file an appeal. A displacee must file an appeal within eighteen (18) months of the time the dwelling is vacated.

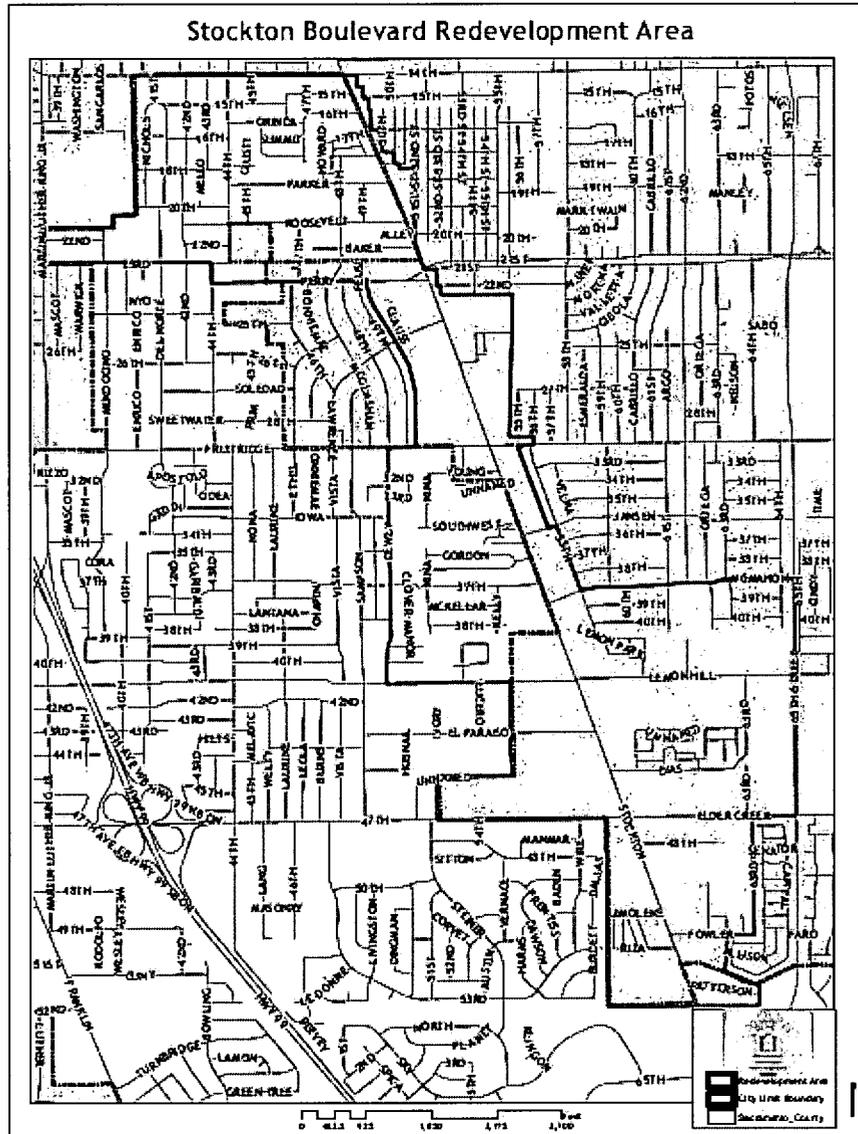
5.10 SUMMARY OF RECOMMENDATIONS

In summary, a total of three (3) long term apartment residents were surveyed along with one (1) single family home long term resident in the Project Area. Based on the information obtained from the interviews and site inspection, the relocation agent will determine if all occupants of property in the project area are eligible for relocation assistance by SHRA.

At this time, it is SHRA's belief that four (4) households may be considered extremely low-income (less than 30% Area Median Income) and one household may be considered very low-income (less than 50% Area Median Income) and therefore qualify for relocation benefits under Last Resort Housing.

Relocation Assistance information and assistance will be provided in the primary language of the displaced occupants in order to assure that all displaced occupants obtain a complete understanding of the relocation program and eligible benefits.

ATTACHMENT 1 – STOCKTON BLVD. REDEVELOPMENT AREA MAP



ATTACHMENT 2 – PROJECT AREA MAP



ATTACHMENT 3 – GENERAL DEMOGRAPHICS AND HOUSING CHARACTERISTICS

2008 BASIC HOUSEHOLD CHARACTERISTICS	
Sacramento County	
Total Population	1,394,154
Persons in Household	1,198,004
Housing Units	551,090
Households	453,602
Persons per household	2.64
Vacancy Factor	3.1%

Source: U.S. Census (1990-2000 with 2008 estimated)

Sacramento County Income Limits

FY 2009 Income Limit Area	<u>Median Income</u>	FY 2007 Income Limit Category	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
		<u>Very Low (50%) Income Limits</u>	\$25,600	\$29,250	\$32,900	\$36,550	\$39,500	\$42,400	\$45,350	\$48,250
Sacramento County	\$73,100	<u>Extremely Low (30%) Income Limits</u>	\$15,400	\$17,600	\$19,800	\$21,950	\$23,750	\$25,500	\$27,250	\$29,000
		<u>Low (80%) Income Limits</u>	\$40,950	\$46,800	\$52,650	\$58,500	\$63,200	\$67,900	\$72,550	\$77,250

Source: US Dept. of Housing & Community Development – FY 2010 HUD Income Limits

Ethnicity	Sacramento County
White	69.7%
Black or African American	10.5%
American Indian and Alaska Native Persons	1.30%
Asian	13.4%
Native Hawaiian & Other Pacific Islander	0.80%
Hispanic or Latino Origin	20.2%
Reporting Two or More Races	4.40%
White persons not Hispanic	51.9%

Source: U.S. Census Bureau - 2000

ATTACHMENT 4 – PERSONAL INTERVIEW RESIDENTIAL QUESTIONNAIRE

RESIDENTIAL RELOCATION INTERVIEW (Paragon Partners Ltd)																																																											
Site Move-In Date: ___/___/___ Initial Offer Date: ___/___/___ CASE #:			Interview Date: ___/___/___ Interviewer: _____																																																								
Head of Household: _____ Address: _____ Unit # _____ Home Tel# (____) _____ Other #(____) _____			Day Tel # (____) _____ ext: _____ <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work e-mail: _____ SS #: _____																																																								
DISPLACEMENT STATISTICS		OTHER		MONTHLY UTILITIES																																																							
Occupancy Status: <input type="checkbox"/> Rent <input type="checkbox"/> Own Type: <input type="checkbox"/> Apt <input type="checkbox"/> SFR <input type="checkbox"/> Dupl. <input type="checkbox"/> Condo <input type="checkbox"/> Mobil H <input type="checkbox"/> Motel/Hotel Displacement Site Features: BD: _____ BA: _____ Replacement Requirement: BD: _____ BA: _____ Furnished with own furniture? <input type="checkbox"/> Yes <input type="checkbox"/> No Total of furniture rooms for FMP: _____ (excl. baths & hallways) Condition of unit: <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Laundry Fac. <input type="checkbox"/> Carport <input type="checkbox"/> Garage used as <input type="checkbox"/> pkw OR <input type="checkbox"/> storage <input type="checkbox"/> Pets? (describe) _____ Did all occupants move in at the same time? <input type="checkbox"/> Yes <input type="checkbox"/> No (Specify) _____ (If you have to move) would you consider relocating out of the area? <input type="checkbox"/> Yes <input type="checkbox"/> No ...if yes, where? _____ Would all occupants move at the same time, and to the same replacement dwelling? <input type="checkbox"/> Yes <input type="checkbox"/> No		ETHNICITY: <input type="checkbox"/> White /Caucasian <input type="checkbox"/> African American <input type="checkbox"/> Hispanic / Latino <input type="checkbox"/> Asian <input type="checkbox"/> Other _____ PRIMARY LANGUAGE: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other _____ SPECIALIZED NEEDS: Elderly Household? <input type="checkbox"/> No <input type="checkbox"/> Yes Handicapped Household? <input type="checkbox"/> No <input type="checkbox"/> Yes - Nature of Disability: _____ - Special Requirements: _____ Need to live near some medical facilities? Which location: _____ Other Special needs? Describe: _____ Own Car? <input type="checkbox"/> Yes <input type="checkbox"/> No additional info: _____ Primary Transportation to work / school? <input type="checkbox"/> - car <input type="checkbox"/> - public transportation <input type="checkbox"/> - other: _____		UTILITIES PAID BY TENANT: <input type="checkbox"/> Gas <input type="checkbox"/> Electricity <input type="checkbox"/> Water <input type="checkbox"/> Trash UTILITIES INCLUDED WITH RENT: <input type="checkbox"/> Gas <input type="checkbox"/> Electricity <input type="checkbox"/> Water <input type="checkbox"/> Trash Appliances Owned by Tenant: <input type="checkbox"/> Stove <input type="checkbox"/> Refrigerator <input type="checkbox"/> W/D <input type="checkbox"/> Other _____ Home business? _____ <input type="checkbox"/> No <input type="checkbox"/> Yes Is the business legal? (i.e. conforms to the city ordinances, and applicable law) <input type="checkbox"/> No <input type="checkbox"/> Yes INCOME INFORMATION TOTAL HOUSEHOLD GROSS MONTHLY INCOME.....\$ _____ (all sources, all adult members of the household) 1) Do you get income from operation of any business? <input type="checkbox"/> No <input type="checkbox"/> Yes 2) Have any of the adult income earners been at their current job(s) for less than one year? <input type="checkbox"/> No <input type="checkbox"/> Yes 3) Are any income earners currently on unemployment, disability, SSI, AFDC or are cash earners? <input type="checkbox"/> No <input type="checkbox"/> Yes Other Public Assistance ? <input type="checkbox"/> No <input type="checkbox"/> Yes (ask for Entitlement Letter) 4) Have all sources of income been disclosed? <input type="checkbox"/> Yes <input type="checkbox"/> No Also refer to Income Certification form.																																																							
RENTERS: Total Monthly Rent: \$ _____ ("contract rent" if Sec. 8) Landlord: _____ <input type="checkbox"/> Month-to-month <input type="checkbox"/> Lease <input type="checkbox"/> Vacant /No Contact Lease expiration date ___/___/___ Security Deposit? \$ _____ <input type="checkbox"/> SEC. 8 => Tenant's Portion of Rent: \$ _____ Annual Review Due Date: ___/___/___ Caseworker: _____ Tel #: (____) _____ Ext: _____		OWNERSHIP / FINANCIAL INFORMATION <input type="checkbox"/> Mortgage(s) <input type="checkbox"/> Own Clear Year built: _____ Approx. Sq. Ft _____ Do you rent out any portion of your property? <input type="checkbox"/> No <input type="checkbox"/> Yes SPECIFY: _____ Loan #1: Principal \$ _____ Original Date: _____ Loan Balance as of ___/___/___ \$ _____ <input type="checkbox"/> Fixed <input type="checkbox"/> Variable APR % _____ Current Mo. Pmt: \$ _____ Lender _____ Loan # _____ Loan #2: Principal \$ _____ Original Date: _____ Loan Balance as of ___/___/___ \$ _____ <input type="checkbox"/> Fixed <input type="checkbox"/> Variable APR % _____ Current Mo. Pmt: \$ _____ Lender _____ Loan # _____																																																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">HOUSEHOLD MEMBERS (AS SPELLED ON CURRENT ID)</th> <th style="width: 5%;">SEX</th> <th style="width: 5%;">AGE</th> <th style="width: 10%;">INCOME</th> <th style="width: 10%;">RELATIONSHIP</th> <th style="width: 30%;">EMPLOYER/SCHOOL</th> </tr> </thead> <tbody> <tr><td>1)</td><td>M F</td><td></td><td></td><td></td><td></td></tr> <tr><td>2)</td><td>M F</td><td></td><td></td><td></td><td></td></tr> <tr><td>3)</td><td>M F</td><td></td><td></td><td></td><td></td></tr> <tr><td>4)</td><td>M F</td><td></td><td></td><td></td><td></td></tr> <tr><td>5)</td><td>M F</td><td></td><td></td><td></td><td></td></tr> <tr><td>6)</td><td>M F</td><td></td><td></td><td></td><td></td></tr> <tr><td>7)</td><td>M F</td><td></td><td></td><td></td><td></td></tr> <tr><td>8)</td><td>M F</td><td></td><td></td><td></td><td></td></tr> </tbody> </table>						HOUSEHOLD MEMBERS (AS SPELLED ON CURRENT ID)	SEX	AGE	INCOME	RELATIONSHIP	EMPLOYER/SCHOOL	1)	M F					2)	M F					3)	M F					4)	M F					5)	M F					6)	M F					7)	M F					8)	M F				
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NOTES: (use other side if necessary)																																																											
<input type="checkbox"/> continued on reverse =>																																																											

Respondent's Signature: X _____

Date: _____

(FORM R-CC1, Oct 07)

ATTACHMENT 5 – HOUSEHOLD CHARACTERISTICS

Household	Composition Adults/ Children	Current Rent	Current Bedrooms	Bedrooms Needed	Elderly/ Disabled	Language
1	4/1	\$600	3	3	No	English
2	1/0	\$525	1	1	No	English
3	2/1	\$550	1	1	No	English
4	2/0	\$550	1	1	No	English/ Spanish
5 (unavailable)			1			

ATTACHMENT 6 - REPLACEMENT UNITS FOR RENT

One Bedroom Apartments

	Address	Price	Est cost of Utl	Contact
1 bed	7326 Stockton Blvd. Sacramento	\$650/mth	\$96/mth	866-575-8106
1 bed	5125 47 th Ave. Sacramento	\$640/mth	\$96/mth	916-395-6070
1 bed	3690 South Port Dr. Sacramento	\$640/mth	\$96/mth	916-363-7589
1 bed	7326 Stockton Blvd. Sacramento	\$650/mth	\$96/mth	866-575-8106
1 bed	5935 Riverside Blvd. Sacramento	\$695/mth	\$96/mth	916-393-0916
1 bed	6550 Wyndham Dr. Sacramento	\$645/mth	\$96/mth	866-281-8866
1 bed	5351 47 th Ave. Sacramento	\$599/mth	\$96/mth	916-393-0963
1 bed	1101 Weber Wy. Sacramento	\$575/mth	\$96/mth	916-928-3800
1 bed	4719 50 th Ave. Sacramento	\$579/mth	\$96/mth	877-463-2903
1 bed	5500 Sky Pkwy. Sacramento	\$615/mth	\$96/mth	916-392-4171
1 bed	5935 Riverside Blvd. Sacramento	\$695/mth	\$96/mth	916-393-0916
1 bed	4719 50 th Ave. Sacramento	\$579/mth	\$96/mth	877-463-2903

Three Bedroom Homes

	Address	Price	Est. cost of Utl	Contact
3 bed	5411 Emerson Rd. Sacramento	\$895/mth	\$215/mth	916-760-8888
3 bed	3829 Cora Ct. Sacramento	\$995/mth	\$215/mth	916-331-0800
3 bed	5816 55 th St. Sacramento	\$1050/mth	\$215/mth	916-429-1302

ATTACHMENT 7 – GENERAL INFORMATION NOTICE

GENERAL INFORMATION NOTICE

Resident(s)
5300 & 5340 Young St.
Sacramento, CA 95824

Dear Resident(s):

The Sacramento Housing & Redevelopment Agency is interested in acquiring the property commonly known as 5300 Young St. for the purpose of a future redevelopment project. As a result of the acquisition, you *may* be eligible for various relocation assistance benefits. However, **do not move now. This is not a notice to vacate the premises.**

Displaced individuals and families may be eligible for relocation advisory services and payments provided by the *Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended*, and/or *California Government Code § 7260 et sec.*

If you rent your unit, you should continue to pay your monthly rent to your landlord because failure to pay rent and meet your obligations as a tenant may be cause for eviction and result in loss of eligibility for relocation benefits. You are urged not to move or sign any agreement to purchase or rent a unit before receiving formal *Notice of Eligibility* for relocation assistance. If you move or are evicted before receiving such notice, you may not receive any assistance. Please contact us *before* you make any moving plans.

No lawful occupant will be asked to move without receiving a 90-day notice. No relocation payment can be made until the Sacramento Housing & Redevelopment Agency has made a written offer to acquire the real property where the person lives or operates their business, farm or nonprofit organization, and the eligible occupant has moved from the premises. A Relocation Agent has been assigned to your case on behalf of the Sacramento Housing & Redevelopment Agency and will provide all the relevant assistance in connection with your relocation case.

All services and/or benefits to be derived from any right of way activity will be administered without regard to race, color, national origin or sex in compliance with Title VI of the 1964 Civil Rights Act.

If you have any questions regarding this notice or you have not been interview for relocation benefits, please contact Pamela Samms at (916) 565-1174.

Paragon Partners, Ltd.
1111 Howe Ave, Suite 510
Sacramento, CA 95825
Fax: 916-565-0533

Sincerely,

Pamela Samms
Project Manager

ATTACHMENT 8 – INFORMATIONAL STATEMENT

INFORMATIONAL STATEMENT FOR FAMILIES AND INDIVIDUALS

- I. GENERAL INFORMATION
- II. ASSISTANCE IN LOCATING A REPLACEMENT DWELLING
- III. MOVING BENEFITS
- IV. REPLACEMENT HOUSING PAYMENT – TENANTS
- V. QUALIFICATION FOR AND FILING OF RELOCATION CLAIMS
- VI. LAST RESORT HOUSING ASSISTANCE
- VII. RENTAL AGREEMENT
- VIII. APPEAL PROCEDURES - GRIEVANCE
- IX. TAX STATUS OF RELOCATION BENEFITS
- X. ADDITIONAL INFORMATION AND ASSISTANCE AVAILABLE

I. GENERAL INFORMATION

The dwelling in which you now live is in an area to be improved by the Sacramento Housing & Redevelopment Agency (Agency). If the project schedule proceeds, it will be necessary for you to move from your dwelling. Please be assured that you will be given adequate time and assistance to locate a replacement dwelling. You will not be required to vacate your current dwelling without first receiving at least a 90-Day Notice to Vacate.

Please read this information as it will be helpful to you in determining your eligibility and the amount of your relocation benefits under the state law. We suggest you save this informational statement for reference.

The Agency has retained the services of Paragon Partners, Ltd., a qualified professional relocation firm, to assist you. The firm is available to explain the program and benefits. Their address and telephone number is:



Paragon Partners, Ltd.
1111 Howe Ave., Suite 510
Sacramento, CA 95825

Tele: 916.565.1174

Fax: 916.565.0533

Paragon Partners Ltd.

Spanish speaking representatives are available. **Si necesita esta información en Español, por favor llame a su representante.**

PLEASE DO NOT MOVE PREMATURELY. THIS IS NOT A NOTICE TO VACATE YOUR DWELLING. However, if you desire to move sooner than required, you must contact your representative with Paragon Partners, Ltd., so you will not jeopardize any benefits. This is a general informational brochure only, and is not intended to give a detailed description of either the law or regulations pertaining to the Agency's relocation assistance program.

II. ASSISTANCE IN LOCATING A REPLACEMENT DWELLING

The Agency, through its representatives, will assist you in locating a comparable replacement dwelling by providing referrals to appropriate and available housing dwellings. You are encouraged to actively seek such housing yourself.

When a suitable replacement dwelling has been found, your relocation consultant will carry out an inspection and advise you as to whether the dwelling meets decent, safe and sanitary housing requirements. A decent, safe and sanitary housing dwelling provides adequate space for its occupants, proper weatherproofing and sound heating, electrical and plumbing systems. Your new dwelling must pass inspection before relocation assistance payments can be authorized.

III. MOVING BENEFITS

If you must move as a result of displacement by the Agency, you will receive a payment to assist in moving your personal property. There are two types of moving payments. You have the option of selecting either one of the following types of moving payments:

A. Fixed Moving Payment

A Fixed Moving Payment is based upon the number of rooms you occupy and whether or not you own your own furniture. The payment is based upon a schedule approved by the Agency, and ranges, for example, from \$400.00 for one furnished room to \$2,150.00 for eight rooms in an unfurnished dwelling. (For details see the table below). Your relocation representative will inform you of the amount you are eligible to receive if you choose this type of payment.

FIXED MOVING SCHEDULE - CALIFORNIA (effective June 15, 2005)			
Occupant owns furniture		Occupant does NOT own furniture	
1 room	\$625.00	1 room	\$400.00
2 rooms	\$800.00	Each additional room	\$65.00
3 rooms	\$1,000.00		
4 rooms	\$1,175.00		
5 rooms	\$1,425.00		
6 rooms	\$1,650.00		
7 rooms	\$1,190.00		
8 rooms	\$2,150.00		
Each additional room	\$225.00		

If you select a fixed payment, you will be responsible for arranging for your own move and the Agency will assume no liability for any loss or damage of your personal property.

B. Actual Moving Expense (Professional Move)

If you wish to engage the services of a licensed commercial mover and have the Agency pay the bill, you may claim the ACTUAL cost of moving your personal property up to 50

miles. Your relocation representative will inform you of the number of competitive moving bids (if any) which may be required, and assist you in developing a scope of services for Agency approval.

IV. REPLACEMENT HOUSING PAYMENT – TENANTS

You may be eligible for a payment of up to \$5,250.00 to assist you in renting or purchasing a comparable replacement dwelling. In order to qualify, you must have been a tenant who has occupied your present dwelling for at least 90 days prior to the Agency's purchase of the property.

A. **Rental Assistance.** If you qualify, and **wish to rent** your replacement dwelling, your rental assistance benefits will be based upon the difference over a forty-two (42) month period between the rent you must pay for a comparable replacement dwelling and the lesser of your current rent or thirty percent (30%) of your gross monthly household income. You will be required to provide your relocation representative with monthly rent and household income verification prior to the determination of your eligibility for this payment.

- OR -

F. **Down-payment Assistance.** If you qualify, and **wish to purchase** a home as a replacement dwelling, you can apply up to the total amount of your rental assistance payment towards the down-payment and non-recurring incidental expenses. Your relocation representative will clarify procedures necessary to apply for this payment.

V. QUALIFICATION FOR AND FILING OF RELOCATION CLAIMS

To qualify for a Replacement Housing Payment, you must rent or purchase and occupy a comparable replacement dwelling **within one year from the later of** the following:

1. For a tenant, the date you move from the displacement dwelling
2. The date the Agency fulfills its obligation to make available comparable replacement dwellings.

All claims for relocation benefits must be filed with the Agency **within eighteen (18) months** from the date on which you move.

VI. LAST RESORT HOUSING ASSISTANCE

If comparable replacement dwellings are not available when you are required to move, or if replacement housing is not available within the monetary limits described above, the Agency will provide Last Resort housing assistance to enable you to rent or purchase a replacement dwelling on a timely basis. Last Resort housing assistance is based on the individual circumstances of the displaced person. Your relocation representative will explain the process for determining whether or not you qualify for Last Resort assistance.

If you are a tenant, and you choose to purchase rather than rent a comparable replacement dwelling, the entire amount of your rental assistance and last resort eligibility must be applied toward the down-payment of the home you intend to purchase.

VII. RENTAL AGREEMENT

As a result of the Agency's action to purchase the property where you live, you may become a tenant of the Agency. If this occurs, you will be asked to sign a rental agreement which will specify the monthly rent to be paid, when rent payments are due, where they are to be paid and other pertinent information.

Except for the causes of eviction set forth below, no person lawfully occupying property to be purchased by the Agency will be required to move without having been provided with at least 90 days written notice from the Agency. Eviction will be undertaken only in the event of one or more of the following infractions:

- A. Failure to pay rent; except in those cases where the failure to pay is due to the lessor's failure to keep the premises in habitable condition, is the result of harassment or retaliatory action or is the result of discontinuation or substantial interruption of services;
- B. Performance of a dangerous illegal act in the dwelling;
- C. Material breach of the rental agreement and failure to correct breach within 30 days of notice;
- D. Maintenance of a nuisance and failure to abate within a reasonable time following notice;
- E. Refusal to accept one of a reasonable number of offers of replacement dwellings; or
- F. The eviction is required by State or local law and cannot be prevented by reasonable efforts on the part of the public entity.

VIII. APPEAL PROCEDURES - GRIEVANCE

Any person aggrieved by a determination as to eligibility for a relocation payment, or the amount of a payment, may have his/her claim reviewed or reconsidered in accordance with the Agency's appeals procedure. Complete details on appeal procedures are available upon request from the Agency.

IX. TAX STATUS OF RELOCATION BENEFITS

Relocation benefit payments are not considered as income for the purpose of the Internal Revenue Code of 1986 or the Personal Income Tax Law, Part 10 (commencing with Section 17001) of Division 2 of the Revenue and Taxation Code, or the Bank and Corporation Tax law, Part 11(commencing with Section 23001) of Division 2 of the Revenue and Taxation Code.

X. ADDITIONAL INFORMATION AND ASSISTANCE AVAILABLE

Those responsible for providing you with relocation assistance hope to assist you in every way possible to minimize the hardships involved in relocating to a new home. Your cooperation will be helpful and greatly appreciated. If you have any questions at any time during the process, please do not hesitate to contact your relocation representative.

ATTACHMENT 9 – FIXED MOVING PAYMENT SCHEDULE

FIXED MOVING PAYMENT SCHEDULE (CALIFORNIA)	
<i>DWELLING FURNISHED WITH YOUR OWN FURNITURE</i>	
1 Room	\$625.00
2 Rooms	\$800.00
3 Rooms	\$1,000.00
4 Rooms	\$1,175.00
5 Rooms	\$1,425.00
6 Rooms	\$1,650.00
7 Rooms	\$1,900.00
8 Rooms	\$2,150.00
each additional room	\$225.00
<i>DWELLING NOT FURNISHED WITH YOUR OWN FURNITURE</i>	
1 Room	\$400.00
each additional room	\$65.00

ATTACHMENT 10 – SAMPLE 90 DAY NOTICE TO VACATE

NINETY (90) DAY NOTICE TO VACATE

_____, 2009

Dear _____;

The [name of agency] (Agency) acquired the property located at _____ (Premises) on _____. The Agency has now determined that it will be necessary for you to vacate the premises.

Notice is hereby given that the Agency elects to terminate your tenancy in ninety (90) days beginning _____ and ending _____ and you are hereby to quit and deliver up possession of the property you occupy on or before _____. If you do not vacate the premises by that date, the Agency will initiate legal proceedings to recover possession of the premises, along with rents and damages.

During this 90 Day period, Paragon Partners, Ltd. will be available to provide assistance with referrals to replacement sites, coordination with movers and other vendors, the processing of relocation benefit claim forms, and other tasks to help facilitate your relocation. Please call _____ of Paragon Partners, Ltd. at (916) 565-1174, extension _____ if you have any questions regarding this notice or the relocation process.

Sincerely,

[NAME]
[TITLE]
Paragon Partners, Ltd.

DATE DELIVERED TO CLAIMANT	OR	DATE MAILED TO CLAIMANT
DELIVERED BY		DATE RECEIVED FROM CLAIMANT

ATTACHMENT 11– SAMPLE NOTICE OF ELIGIBILITY

NOTICE OF ELIGIBILITY AND CONDITIONAL ENTITLEMENT LETTER

(90-DAY TENANT OCCUPANT)

{date}

Approved by: _____
Sandra Lee, Relocation Coordinator, SHRA

{name}

{address}

Sacramento, CA 95824

Dear {name};

The **Sacramento Housing and Redevelopment Agency** (Agency) has purchased the property in which you currently occupy. As an eligible occupant of the property, you may be entitled to certain benefits under the Agency's Relocation Assistance Program. These benefits are briefly outlined below and are discussed in further detail in the Informational Statement that was previously provided to you.

You will be given a written notice at least 90 days before you will be required to move from your property.

As the occupant of the property on the date of the first written offer, you are entitled to:

1. RELOCATION ADVISORY ASSISTANCE provided by Paragon Partners Ltd., a firm hired by the Agency to provide relocation assistance to you.
2. MOVING EXPENSES. You may select either one of following payments:
 - A. A Fixed Moving Payment based on the number of rooms you occupy (from Informational Statement). Your entitlement under this option is **\$ 0.00**; OR
 - B. A payment for your Actual Reasonable Moving and Related Expenses based on at least two written estimates and receipted bills.
3. REPLACEMENT HOUSING PAYMENT. If you occupied the property for 90 consecutive days or more immediately preceding the date of the Agency's written offer, you may be eligible for financial assistance to purchase or rent comparable replacement housing. To receive such payments, you must rent or purchase your replacement dwelling within one (1) year from the date of vacating your displacement dwelling. **Failure to act within the one (1) year period could result in loss of all replacement housing benefits.** This assistance is composed of the following replacement housing benefits:
 - A. **If you RENT replacement housing, you may file a claim for:**

A RENTAL ASSISTANCE payment equal to the difference between the lesser of 1) the monthly rent and estimated average monthly cost of utilities for a comparable replacement dwelling as determined by the Agency, or 2) the actual monthly rent of your replacement dwelling and estimated average monthly cost of utilities AND the base monthly rent during the three months immediately prior to vacation from the displacement dwelling, multiplied times 42 months. Base monthly rent is defined as the lesser of 1) the average monthly rent and estimated average monthly cost of utilities at the displacement dwelling, or 2) thirty (30) percent of your gross monthly household income, or 3) if you are receiving a welfare assistance payment, the portion of

such payment that is specifically designated for shelter and utilities. If you are paying little or no rent for the Agency acquired dwelling, the Rental Assistance payment will be based on economic rent that is rent typically charged for a comparable unit in your area.

Failure to supply adequate income information may result in a delay or denial of benefits based on income. Rental assistance benefits are paid in a single payment or in installments, depending on the payment amount. Based on the information you provided and the comparable dwelling as listed below, your estimated rental assistance payment calculation is as follows:

1	Current Rent + Utility allowance	\$0.00
2	Current Total Gross Monthly Household Income	N/A
3	Ability-To-Pay Rent (30% of Line 2)	N/A
4	Rent for Comparable Replacement Dwelling + Utility allowance	\$0.00
5	Lower of Current Rent OR Ability-To-Pay	\$0.00
6	Monthly Rental Need (Line 4 minus Line 5)	\$0.00
7	Estimated Total 42 Months Eligibility (Line 6 times 42)	\$0.00

B. If you BUY replacement housing, you may file a claim for:

DOWNPAYMENT ASSISTANCE. You may use the full amount of your rental assistance payment for a down payment and incidental purchase expenses on a replacement dwelling. All amounts used as a down-payment and incidental expenses must be applied to the purchase of the replacement dwelling. If you have received any amount as rental supplements, then those amounts will be deducted from all eligible down payment calculations.

Listed below are three comparable replacement dwellings that you may wish to consider renting:

	ADDRESS	RENT + UTILITIES	CONTACT NAME & NUMBER
1		\$ + \$	
2		\$ + \$	
3		\$ + \$	

Comparable # above is the one selected as the most representative of your present dwelling. Based on our current rent, comparable dwelling rent, and income information you provided to us, you may be eligible for a rental assistance payment as calculated in the table above. If you decide to rent a replacement dwelling that costs **less** than the comparable dwelling, the rental assistance payment would be based on the actual rent amount for the replacement dwelling. If you decide to rent a replacement dwelling that costs **more** than the comparable dwelling, the rental assistance payment would still be based on the comparable dwelling rent. You do not have to accept any dwelling referred to you by the Agency. You may choose your own replacement, but it must be decent, safe and sanitary to qualify for replacement housing payments.

Before a relocation payment can be issued to you, your replacement dwelling must be inspected to assure that it meets decent, safe and sanitary standards. For this reason, **DO NOT MOVE** from your home and **DO NOT CONTRACT** to rent or purchase a replacement dwelling without first contacting your relocation consultant.

If you remain in occupancy of your present dwelling after the Agency has completed the purchase, you must pay fair market rent to the Agency for the period of your tenancy. Failure to pay rent may reduce the replacement housing payment which you are eligible to receive.

The Relocation Assistance Program is very complex. It is important that you read and understand the matters explained in the Informational Statement which was given to you. If at any time in the future you want assistance, please contact **Jeremy Nied of Paragon Partners Ltd., 1111 Howe Ave, Sacramento, CA , telephone (916) 565-1174.**

Sincerely,

Pamela Samms
Project Manager
Paragon Partners Ltd.

ACKNOWLEDGMENT

I was personally contacted by the Agency's Relocation Consultant. I have had the available services and entitlements explained to me, including the requirement to rent or purchase a replacement dwelling within one (1) year as outlined above. I have been advised that the Agency's Relocation Consultant will be available to assist me if any questions arise or as assistance is needed. I have been given a copy of this form letter and a full explanation of relocation assistance available to me.

Signature:

Date:

ATTACHMENT 12- SAMPLE CLAIM FORM

Claim for Rental or Downpayment Assistance Payment

PRIVACY ACT NOTICE: You are asked to provide this information to determine whether you are eligible to receive a Rental or Downpayment Assistance Payment. You are not required by law to furnish this information, but if you do not provide it, you may not receive this payment, or it may take longer to pay you. This information is being collected under the authority of the Uniform Relocation Assistance and Real Property Acquisition Act (URA) and/or California Relocation Assistance Act.

INSTRUCTIONS: This claim form is for the use of families and individuals applying for a Rental or Downpayment Assistance Payment. A representative of the displacing Agency will help you complete the form and inform you of the information that you must provide in support of this claim. If the full amount of your claim is not approved, the Agency will provide you with a written explanation of the reason. If you are not satisfied with the Agency's determination, you may appeal that determination. The Agency will explain how to make an appeal.

FOR AGENCY USE ONLY

Agency	
Project	
Case #	

Program Rules [] Federal [X] State [] Other	Claim Serial Number RAP
---	--------------------------------

1. Your Name(s) (you are the Claimant(s))	1a. Present Mailing Address(es) of Claimant(s)	1b. Telephone Number(s)
--	---	--------------------------------

2. Have all members of the household moved to the same dwelling? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If "NO", explain in the Remarks Section.)	1c. Tax ID # of Claimant(s) N/A
---	---

Dwelling	Address	When Did You Rent/Buy This Unit?	When Did You Move To This Unit	When Did You Move Out Of This Unit?
3. Unit That You Moved From				
4. Unit That You Moved To				

5. COMPUTATION OF RENTAL ASSISTANCE/LAST RESORT HOUSING PAYMENT OR DOWNPAYMENT ASSISTANCE PAYMENT

ITEM	TO BE COMPLETED BY CLAIMANT	FOR AGENCY USE
(1) Monthly Housing Cost for Replacement Dwelling Unit to which you moved (From line (5), Column (c), Item 13 on reverse)		
(2) Monthly Housing Cost for Comparable Replacement Dwelling (From line (5), Column (e), Item 13 on reverse)		
(3) The lesser of Line (1) or Line (2) (If Claim is for Downpayment Assistance, enter amount from Line (2))		
(4) Monthly Housing Cost for Dwelling Unit from which you were displaced (From line (5), Column (a), Item 13 on reverse)		
(5) Claimant's Ability-To-Pay (From line (14), Column (a), Item 14 on reverse)		
(6) The lesser of Line (4) or Line (5)		
(7) Monthly Need (Line (3) minus Line (6))		
(8) Total Amount of Rental Assistance/Last Resort Housing eligibility (Line (7) multiplied by number of months) Enter number of months here → 42		
(9) Total Amount of Rental/Downpayment Assistance Payments Received to Date (from line (7) item 16 on reverse)		
(10) Balance Amount of RAP/DAP Payment Eligibility (before this payment) (Line (8) minus Line (9))		
(11) Amount Requested this Claim (Amount from line (10), or for LRH, line (7) times number of months) Enter number of months here → FINAL		

6. RAP Balance (after this payment) (Item 5 Line (10) minus Item 5 Line (11))	0.00	6a. Next Payment Amount (See Remarks)	N/A	6b. Next Payment Due Date (month, year) TBD
---	-------------	--	------------	---

7. Certification by Claimant(s)

WARNING: If you knowingly or deliberately make false statements on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition you may not receive any of the amounts claimed on this form. I CERTIFY that this claim and supporting information are true and complete, that I have not submitted any other claim for the expenses listed and that I have not been paid for the expenses by any other source.

Signature(s) of Claimant(s)	Date
------------------------------------	-------------

FOR AGENCY USE ONLY

8. Effective Date of Eligibility for Relocation Assistance:	10. Payment To Be Made in: <input checked="" type="checkbox"/> Lump Sum or <input type="checkbox"/> Installments every [] months			
9. Date Replacement Dwelling found "Decent, Safe and Sanitary":				
Payment Action	Amount of Payment	Signature	Name (Type or Print)	Date
11. Recommended				
12. Approved				

Paragon Partners Ltd Page 1 of 2)

13. DETERMINATION OF CLAIMANT'S MONTHLY HOUSING COST (MHC)

INSTRUCTIONS: The term "Monthly Housing Cost" means the average monthly cost for rent and utility charges. Utility charges include reasonable costs to provide heat, hot water, cooking, lighting, water and sewer, and trash removal. A person's monthly housing cost for a replacement dwelling shall include one-twelfth of the estimated reasonable yearly cost for utility charges.

AVERAGE MONTHLY HOUSING COST

	DISPLACEMENT DWELLING FROM WHICH YOU MOVED		REPLACEMENT DWELLING TO WHICH YOU MOVED		COMPARABLE REPLACEMENT DWELLING (PROVIDED BY AGENCY) (e)
	CLAIMANT (a)	FOR AGENCY USE ONLY (b)	CLAIMANT (c)	FOR AGENCY USE ONLY (d)	
	(1) Contract Rent Amount (it may or may not cover any utilities)				
(2) Average Monthly Utilities Not Included in Rent. (From local Housing Authority schedule)					
(3) Gross Monthly Housing cost (add lines (1) and (2))					
(4) Monthly Housing Subsidy, if any (e.g. Section 8 Assistance)					
(5) Net Monthly Housing Cost (line (4) minus line (3))					

14. DETERMINATION OF CLAIMANT'S ABILITY-TO-PAY

Gross Monthly Income (before taxes and any deductions) of All Adult Members (18 years or older) of Household (List names below and list amounts in Column (a))	CLAIMANT (a)	FOR AGENCY USE ONLY (d)
(1)	0.00	
(2)		
(3)		
(4)		
(5)		
(6)		
(6)		
(6)		
(6)		

(10) Total Gross Monthly Income (Add lines (1) through (9))		\$0.00	
(11) Adjustments to Gross Monthly Income (Dependents, elderly, handicapped, childcare, medical. See Guidelines)		\$0.00	
(12) Adjusted Gross Monthly Income (subtract line (11) from line (10))		\$0.00	
(13) Ability-To-Pay		30%	
(14) Claimant's Monthly Ability-To-Pay the Housing Cost (Line (12) times line (13))		\$0.00	
15. COMPARABLE REPLACEMENT DWELLING (Amount in Item 13, Line 5, Column (e))		16. Previous RAP/DAP Payments	
Address	Date Referral Provided	(a) Date	(b) Amount
		(1)	
17. REMARKS		(2)	
		(3)	
		(4)	
		(5)	
		(6)	
		(7)	\$0.00
		TOTAL	
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