

APPLICATION FOR PURCHASE REPLACEMENT HOUSING PAYMENT
(TENANT-OCCUPANT OF NOT LESS THAN 90 DAYS)

Date:

Route: «(Route_Text)»
State Project: <<(Project_Number_Text)»
Federal Project:
«(Federal_Rw_Number_Text)»
County: «(Project_City_County_Name)»
UPC: «(Upc_Id)»

RIGHT OF WAY - Property of «(List_Of_Owners)»
Parcel «(Parcel_Id)»
Displacee:

«(Rw_Utii_Mgr_Name)»
«(Rw_Utii_Mgr_Title)»
Virginia Department of Transportation

Dear

This is to certify that on _____ I, _____
(Date) (Name)

_____ purchased and occupied or contracted
for and will occupy decent, safe and sanitary replacement housing. As evidenced by copy of the closing
statement and/or attached receipts, a total amount of \$_____ was expended by me for the
purchase of replacement housing.

I am requesting a replacement housing payment in the amount of \$ _____,
which does not exceed the maximum amount stated in your letter of _____ to which I am
entitled to purchase replacement housing.

Mailing Address: _____

Signature of Displacee(s)

Date

Phone Number _____

(Use this portion only in case of joint payment)

It is hereby requested that this replacement housing payment be made jointly to _____
and _____

Signature of Displacee(s)