EXHIBIT N

COLORADO DEPARTMENT OF TRANSPORTATION	Project Code:
	Parcel No:
MOVING PERSONAL PROPERTY UNDER \$3,000 - CLAIM	Project No:
	Location:
	County:
Claimant's Name and Address (include City, State, Zip)	
Address where personal property is located (if different than above)	
Total Moving Costs: \$	
Inventoried items moved off right of way: Yes No	
<u> </u>	Date:
Claimant's Signature	Date.
Claimant's Signature	Date:
I certify I have examined this claim and the Moving Personal Property Under \$3,000 – Relocation Determination (CDOT Form #1170) with substantiating documentation submitted in connection with this claim and have found it	
to conform to the applicable provisions of State Law.	
Authorized by Region ROW Manager/Supervisor	Date: