**EXHIBIT H**

COLORADO DEPARTMENT OF TRANSPORATION

CHECKLIST FOR RESIDENTIAL RELOCATION

 Project Code:

 Parcel #:

 Project #:

 Real Estate Specialist:

Acquisition by: [ ]  State [ ]  Local Public Agency [ ]  Consultant

Taking: [ ]  Total [ ]  Partial

Acquisition type: [ ]  Negotiated [ ]  Administrative Settlement [ ]  Court Award

Final Acquisition Costs: $

Final Acquisition Date:

[ ]  Owner [ ]  Tenant Name:

Subject Address:

[ ]  Single Family Dwelling [ ]  Apartment [ ]  Mobile Home

Date of Occupancy:

Number in Occupancy:

Date Moved:

Replacement Housing Address:

Replacement Housing Payment (RFP) Date Approved:       $      Date Paid:

Moving Costs Payment Date Approved:       $      Date Paid:

Evaluation Items: Date

A. Relocation benefits adequately explained to displacees [ ] yes [ ] No

B. Advisory services offered & furnished to displacees [ ] yes [ ] No

 (Explain – what type)

C. Selected comparable met comparability/DSS & was functionally

 Equivalent to the displacement dwelling [ ] Yes [ ] No

D. RHP provided in writing (entitlement/90 day letter) [ ] Yes [ ] No

E. General information notice given (1st Negotiation Contact letter) [ ] Yes [ ] No

F. 30-Day Notice issued [ ] Yes [ ] No

G. Decent, safe & sanitary inspection completed prior to payment [ ] Yes [ ] No

H. Displacees reimbursed for incidental closing costs [ ] Yes [ ] No

I. Moving expenses reimbursed (telephone, etc.) [ ] Yes [ ] No

J. Increased mortgage interest cost computed & paid [ ] Yes [ ] No

K. Last Resort Housing provisions used in effective manner [ ] yes [ ] No

 Alternatives considered:

L. Action appealed [ ] Yes [ ]  No

 Explain board’s decision:

M. Relocation conducted with discrimination [ ] Yes [ ] No

 Explain:

N. Agent log signed by agent who negotiated with owner/relocatee [ ] Yes [ ] No

General comments on overall handling of this relocation:

Reviewed by:       Date: