**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: