

EXHIBIT I

**COLORADO DEPARTMENT OF TRANSPORTATION
CHECKLIST FOR BUSINESS 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:
Date of Occupancy:
Date Moved:
Replacement Business Site Address:
Moving Cost Type: Commercial Self (Low Bid Estimate) Actual In Lieu
Moving Costs Payment Date Approved: \$
In Lieu Payment Date Approved: \$
Site Search Payment Date Approved: \$
Reestablishment Date Approved: \$
Actual Direct Loss/Tangible Personal Property Date Approved: \$

- Evaluation Items:
- | | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Date |
|--|------------------------------|-----------------------------|-------|
| A. Relocation benefits adequately explained to displacees | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| B. Availability & information provided on replacement site | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| C. General Information Notice given (Business First Negotiation
Contact Letter/90-Day Notice) | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| D. 30-Day Notice issued | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| E. Inventory of personal property obtained by CDOT at subject | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| F. All personal property from subject was removed | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| G. Moving cost adequately supported and paid | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| H. Business reestablishment costs supported and paid | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| I. Actual Direct Loss/Tangible Personal property supported and paid | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| J. Searching expenses adequately supported and paid | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| K. In Lieu payment adequately supported and paid | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| L. Reestablishment payment adequately supported and paid | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| M. Action Appealed? | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| If yes, explain board's decision: | | | |
| N. Relocation conducted with evidence of discrimination | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| If yes, explain: | | | |
| O. Agent log signed by agent who negotiated with business owner/tenant | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

General comments on overall handling of this relocation:

Reviewed by:

Date: