

**RELOCATION FORM K**  
**NOTICE OF ELIGIBILITY FOR**  
**URA RELOCATION ASSISTANCE - NONRESIDENTIAL**  
(Businesses, Nonprofit Organizations, or Farms)

Date \_\_\_\_\_

Dear \_\_\_\_\_:

On   (date)  , we notified you of our proposed project and that your (business, nonprofit organization or farm) located at   (address)   may be displaced as a result of that project. On   (date)  , the project was approved and will be receiving HUD funding assistance under the HOME Program. It has been determined that your (business, nonprofit organization or farm) will be displaced by the project. Since your (business, nonprofit organization or farm) is being displaced in connection with this federally funded project, you will be eligible for relocation assistance and payments under the Uniform Relocation Assistance and Real Property Acquisition Policies Act (URA).

- **This is your Notice of Eligibility for relocation assistance**
- **The effective date of your eligibility is \_\_\_\_\_.**

*(Insert date of Initiation of Negotiations, see 49 CFR 24.1(a)(15) or applicable HUD program regulations)*

**(NOTE: Pursuant to Public Law 105-117, aliens not lawfully present in the United States are not eligible for relocation assistance, unless such ineligibility would result in exceptional hardship to a qualifying spouse, parent, or child. All persons seeking relocation assistance will be required to certify that they are a United States citizen or national, or an alien lawfully present in the United States.)**

To carry out the project, it will be necessary for you to move. However, **you do not need to move now**. You will be provided written notice of the date by which you will be required to move. This date will be no less than 90 days from the date of such notice.

Enclosed is a brochure entitled, "Relocation Assistance to Displaced Businesses, Nonprofit Organizations and Farms." Please read the brochure carefully. It explains your rights and provides additional information on eligibility for relocation payments and what you must do in order to receive these payments. **Do not move or commit yourself to renting or purchasing a replacement location at this time.** A representative of the Agency will assist you with your move and help ensure that you preserve your eligibility for all relocation payments for which you may be entitled.

Some of the relocation assistance for which you are entitled includes:

**Relocation Advisory Services** to help you find a suitable replacement location and to provide other assistance in connection with your move.

**Payment for Moving and Reestablishment Expenses.** You may be eligible for:

- (1) a payment for your actual reasonable moving and related expenses; including payment for reestablishment expenses of up to \$10,000, or
- (2) a fixed moving payment for your actual reasonable and necessary moving and reestablishment expenses. The fixed moving payment ranges from a minimum of \$1,000 to a maximum of \$20,000 depending on a number of factors.

If you have any questions about this letter and your eligibility for relocation assistance and payments, please contact:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Remember, do not move or commit to the purchase or lease of a replacement location** before we have a chance to further discuss your eligibility for relocation assistance. This letter is important to you and should be retained.

Sincerely,

\_\_\_\_\_

**NOTES.**

1. The case file must indicate the manner in which this notice was delivered (e.g., personally served or certified mail, return receipt requested) and the date of delivery. (See Paragraph 2-3 I of Handbook 1378.)
2. This is a guide form. It should be revised to reflect the circumstances.