

RE-610
5/3/2017

STATE OF OHIO
DEPARTMENT OF TRANSPORTATION

County MUS
Route 376
Section 5.09
Parcel No. 010-1
PID No. 115989

RESIDENTIAL RELOCATION RECORD

Displaced Person(s): Thomas Rodgers, Hope Miller

Date Interviewed: 6/15/23

Site Address: _____
8895 Gaysport Hill Road

Gaysport, OH 43720

Home Phone: N/A
Cell Phone: 740-487-8603, 740-487-8594, 740-647-2404
Email Address: 0

Date of Occupancy: 1/1/21 Occupancy Class: Tenant: 90 Days or more

Is owner considering retention of the home?: No

Is there a mortgage on the site dwelling?: No Balance: \$0.00 Loan Type: 0 % Rate: 0.00%

Mobile Home Rent: \$0.00 Monthly Dwelling Rent: \$0.00 Utilities for Dwelling: \$144.00

Mobile Home Lot Rent: \$0.00 Utilities for Lot: \$0.00

FMVE: _____ Approval Date: _____

Rev. FMVE: _____ Approval Date: _____

THSC: _____ Approval Date: _____

Rev. THSC: _____ Approval Date: _____

Owner Occupant:

Tenant Occupant:

Price Differential Computation: \$0.00

Rent Differential Computation: \$18,438.00

Price Differential Approval Date: _____

Rent Differential Approval Date: 1/30/2024

Revised Price Differential Computation: \$0.00

Revised Rent Differential Computation: \$0.00

LRH Approved?: 0

LRH Approved?: Yes

Less than (3) Comps Approved?: 0

Less than (3) Comps Approved?: N/A

of Referrals: _____ Date Sent: _____

of Referrals: _____ Date Sent: _____

of Referrals: _____ Date Sent: _____

of Referrals: _____ Date Sent: _____

Date Move Approved: _____

Initiation of Negotiations: 1/13/2024

Move Auth. Date: _____

Price Differential Offer Date: _____

Move Type: _____

Revised Price Differential Offer Date: _____

Actual Move Date: _____

Date Contract for Subject Signed: _____

Post Move By: _____

90-Day Expiration Date: _____

Date of Post Move: _____

Date filed by Ag's office: _____

Last Date to file a claim: _____

Vacate Notice Delivered: _____

Date of Final Acquisition Payment: _____

Expiration of Vacate Notice: _____

Address Relocated To:
0

0

Dwelling Type: _____

Other: _____

Is Replacement DS&S: _____

Occupancy Status of Replacement: _____

Distance moved: 0.00

Temporary or Permanent Move?: _____

Appeal Data

Date: _____ Appeal Granted or Denied?: _____

Basis for granting: