



**Department of
Transportation**
transportation.ohio.gov

Mike DeWine, Governor
Jon Husted, Lt. Governor
Jack Marchbanks, Ph.D., Director

DATE: August 8, 2024
TO: Patty Moorman
FROM: Kimber L. Heim
SUBJECT: 115989 MUS 376 PCL 010-1 Rent Supplement Payment
Thomas Rodgers, Jr. and Hope Mills

The subject property is located at 8895 Gaysport Hill Road, Blue Rock, OH 43720, and is a one-story converted schoolhouse located in a rural residential area of Muskingum County, Ohio. The subject sits on 1.061 acres of land on a hill above Blue Rock/Gaysport, Ohio. Most of this property is heavily wooded with a steep ravine topography surrounding the house. This home sits on a hill and is accessed by a long, narrow drive. The project has a take area of 1.061 acres. There is no garage, there is a carport in poor condition and barn down in the ravine.

The subject property has a room count of 4/2/1, which includes a Living Room, combination kitchen/dining room, one full bathroom, and 3 bedrooms. There also is a utility room, which is not included in the total room count. There is a room blocked off, which could be a bedroom, but it has a collapsed ceiling. It should be noted that the appraiser states there are four bedrooms— per my inspection, one is considered storage only with minimal items on the floor, and one is uninhabitable. The appraisal states baseboard heat, but upon inspection, only heat by a wood pellet stove. There is no central air.

The property has 1918 sq ft of living space per auditor. There is a partial basement and part cellar, both areas considered unsafe to access and enter. The estimated habitable living space of this home is 919 per measurement of accessible rooms. The property has a deck and carport. The building was originally built in 1885 and used as a schoolhouse until decommissioned in 1950's and sold in late 1950 to be used as a residence. The heating by pellet stove, unknown condition of the well servicing the property and the septic system does not seem to be up to code. The property is in poor maintenance and is not decent, safe, and sanitary due to the condition of two rooms and basement.

Move inspection completed 05/06/2024 by Patty Moorman and Kimber Heim.
Move authorization letter issued 06/07/24. Thomas Jr. and Hope did not

completely vacate the property until 7/11/24 with respect to personal property, final inspection completed 7/15/2024.

A replacement house had already been found in Zanesville and Thomas Jr and Hope had agreed to rent. The lease was finally completed by the landlords and turned over to Kimber Heim on 6/7/24. Thomas and Hope had moved to this location in April 2024 after they were provided the authorization letter stating the amount of the Rent Supplement Payment of \$18,438.00. Kimber Heim had completed an inspection of the premises when they told me they had decided to move to Zanesville because Hope was pregnant.

Based on the market rent which was calculated for the displacement site, \$619.00 a month including utilities. Utility calculations utilized the current utility information available from the Zanesville Metropolitan Housing Authority. The Rent Supplement Payment was calculated by finding and inspecting five (5) comparable dwellings. Three (3) dwellings were personally inspected with rents in the \$825 to \$850 range with all comparable rentals being without utilities. Again, utilities were calculated utilizing the Zanesville Metropolitan Housing Authority. The Prime Comparable Rental was deemed to be a property with the same bedrooms and living space for \$850.00 plus utilities of \$208.00 for a total monthly rent of \$1,058.00. The Rent Supplement Payment was calculated as follows:

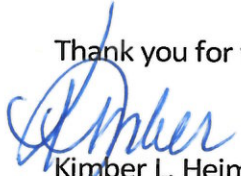
Replacement Dwelling Rent plus utilities	\$1,058.00
Displacement Site MARKET RENT plus utilities	\$ 619.00
Rent Differential	\$ 439.00

RSP Calculation per Manual Section 6603.03
 $\$439.00 \times 42 \text{ months} = \$18,438.00$

Per Manual Section 6603.07, and RSP amount above \$12,000. Payments will be made in quarterly installments of \$4,609.50 until the balance is below \$12,000.00. This will require three (3) payments, two payments of \$4,609.50 (Installment 1 and 2) and the third payment of \$9,219.00.

Included in this request for approval is the RE 607 and the Signed and dated lease as required by Manual section 6603.09 as well as the RE 610, 611, 615, 616, 617, Tenant Relocation Offer Letter, LRH memo, Market/Economic Rent Memo, and the Zanesville Metropolitan Housing Authority Utility Allowances used prior to July 1, 2024 and the new allowances approved and provided 07/07/24.

Thank you for your review!



Kimber L. Heim
Relocation Trainee
D5, Realty Specialist Manager

6603.09 Billing Package- Owner Occupant of Less than 90 Days or Tenant Occupant Who Rents

A. The complete billing package must be approved by the Relocation Reviewer prior to the Residential Claim Form (RE-617) being presented to the Displaced Person for signature. The contents of the billing package for a replacement housing payment are:

1. ~~W-9 Form~~ and Vendor Information Form (VIF), as applicable.
2. Original and one copy of the Residential Claim form (RE-617). ✓ 3
3. One copy of the Residential Site Occupant Relocation Record form (RE-610). ✓
4. One copy of the Relocation Comparables and Additive Computation form (RE-611) plus the Utility Allowance Schedule for the site and comparables. ✓ T, Tp2, Tp3
5. One copy of the RE 607 with attached, signed and dated lease or three rent receipts for the acquired site and one rent receipt for the replacement site, plus the Utility Allowance Schedule for the replacement site. ✓ no receipts yet
6. One copy of the Economic Rent, if applicable, including:
 - a. One copy of the documentation to support all figures used in the Economic Rent computation.
7. One copy of the Tenant Income Verification form (RE-604) if the 30% of income approach is applicable. Include a copy of the appropriate U.S. Department of Housing and Urban Development's Annual Survey of Income Limits for the Public Housing and Section 8 Programs web page highlighted for the project area.
8. One copy of the Decent, Safe and Sanitary Certification form (RE-616). ✓
9. One copy of the Relocation Offer Letter/90-Day Notice Letter (RE-O or RE-T). ✓
10. One copy of the memo to file on a request for Last Resort Housing, if applicable. ✓
11. One copy of the memo to file on a request for the use of Less than Three Comparables, if applicable.
12. One copy of the Assignment Letter when payment is to be made to a third party. The assignment must be signed and dated by both the Displaced Person and the Assignee. The Assignee's tax identification number should also appear on this form.
13. One copy of any Appeal Letter and related documentation, if applicable.
14. One copy of the Relocation Agent's typed notes (RE-615). ✓
15. One copy of any miscellaneous documentation or memos to file in support of payments, as applicable

STATE OF OHIO
DEPARTMENT OF TRANSPORTATION
ENTITLEMENT COMPUTATION

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

Comparable selected as basis for correlation of entitlement:

Compl

Basis for the selected comparable is found within the attached Site Description, Comparable Descriptions, Correlation Description and Interior Photos

Rent Differential:	
A: Base Rent for Prime Comparable:	\$1,058.00
B: Subject Base Rental Rate:	\$619.00
or:	
C: 30% of Income:	\$0.00
D: A minus B (or C) X 42 = Estimated Supplement:	\$18,438.00
E: Base Rent for Replacement:	\$1,058.00
F: E minus B (or C) X 42	\$18,438.00
G: Lesser D or F = FINAL DIFFERENTIAL:	\$18,438.00
Downpayment Assistance:	
A: Rent Differential:	\$18,438.00
B: LRH Maximum:	\$7,200.00
C: Greater of A or B:	\$18,438.00
D: Purchase Amount:	
E: Actual Downpmt:	
F: Incidental Costs:	
G: FINAL ADDITIVE:	

Maximum Rent Differential Certification:

I, the undersigned, hereby state that the amount of: \$18,438.00 has been established by me as the Rent Differential Maximum for the subject displacee. I understand that this determination may be used in securing parcels in connection with Federal-Aid or Project. I further state that I have no direct or indirect, present or contemplated personal interest in this transaction or will I derive any benefit from this differential payment. I further state that all housing was interiorly and exteriorly inspected by myself and the dwellings utilized in this determination are available, decent, safe and sanitary open fair housing.

Signature: *Phyllis A. Stearns* Date: January 30, 2014

FOR REVIEWER PURPOSES ONLY:

Less than (3) Approved?: N/A LRH Approved?: Yes

Signature: _____ Date: _____

Final Differential Certification:

I, the undersigned, hereby state that the amount of: \$18,438.00 has been established by me as the final additive payment for the subject displaced person. I understand that this determination may be used in securing parcels in connection with a Federal Aid Highway or Project. I further state that I have no direct or indirect, present or contemplated personal interest in this transaction or will I derive any benefit from this additive payment.

Signature of Agent: *Phyllis A. Stearns* Signature of Reviewer: _____
p3 of 3 Date: _____

Utility Allowances Schedule
See Public Reporting and Instructions on back

U.S. DEPARTMENT OF HOUSING
AND URBAN DEVELOPMENT
Office of Public and Indian Housing

OMB Approval No. 2577-0169
(exp. (04/30/2026))

in effect 7/1/2024
per Agency

The following allowances are used to determine the total cost of tenant-furnished utilities and appliances

Locality/PHA		Unit Type						Date (mm/dd/yyyy)
Zanesville/Muskingum County Ohio		Single Family						10/01/2024
Utility or Service	Fuel Type	0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	
Heating	Natural Gas	23	28	35	43	54	68	
	Bottled Gas	108	135	168	210	262	328	
	Electric	37	61	85	109	142	168	
	Electric - Heat Pump	32	52	72	92	121	143	
	Fuel Oil	112	140	174	218	273	340	
Cooking	Natural Gas	2	2	2	2	2	2	
	Bottled Gas	7	8	9	9	10	11	
	Electric	8	9	11	12	13	16	
	Fuel Oil	-	-	-	-	-	-	
Other Electric		28	37	43	52	62	74	
Air Conditioning		25	30	35	45	52	63	
Water Heating	Natural Gas	6	7	9	10	11	12	
	Bottled Gas	29	33	44	51	58	65	
	Electric	21	26	39	47	55	63	
	Electric - Heat Pump	16	20	29	35	41	47	
	Fuel Oil	15	16	22	29	35	41	
Water	City	13	13	26	37	48	58	
	County	30	30	39	49	59	69	
Sewer	City	25	26	35	42	49	56	
	County	38	40	52	62	72	82	
Trash Collection	City	31	31	31	31	31	31	
	County	24	24	24	24	24	24	
Other -specify Customer Charge	Electric	14	14	14	14	14	14	
	Natural Gas	47	47	47	47	47	47	
Range/Microwave		7	7	7	7	7	7	
Refrigerator		8	8	8	8	8	8	
Actual Family Allowances - May be used by the family to compute allowance while searching for a unit.					Utility/Service/Appliance	Allowance		
Head of Household Name					Heating	\$		
					Cooking			
Unit Address					Other Electric			
					Air Conditioning			
					Water Heating			
					Water			
					Sewer			
Number of Bedrooms					Trash Collection			
					Other			
					Range/Microwave			
					Refrigerator			
					Total	\$		

Previous versions are obsolete.