

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:

Comp1

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

Table with columns for Rent Differential and Downpayment Assistance. Rows include A: Base Rent for Prime Comparable, B: Subject Base Rental Rate, C: 30% of Income, D: A minus B (or C) X 42 = Estimated Supplement, E: Base Rent for Replacement, F: E minus B (or C) X 42, G: Lesser D or F = FINAL DIFFERENTIAL, and corresponding Downpayment Assistance items.

Maximum Rent Differential Certification:

I, the undersigned, hereby state that the amount of: \$19,278.00 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:

Date:

FOR REVIEWER PURPOSES ONLY:

Less than (3) Approved?: \_\_\_\_\_ LRH Approved?: \_\_\_\_\_

Patty Moorman
Signature:

1/30/2024
Date:

Final Differential Certification:

I, the undersigned, hereby state that the amount of: \$0.00 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:

Signature of Reviewer:

Date:

