

RE-600-1
11/16/2009

STATE OF OHIO
DEPARTMENT OF TRANSPORTATION
RELOCATION ASSISTANCE
BUSINESS OCCUPANT INTERVIEW FORM

County	MUS
Route	376
Section	5.090
Parcel No.	010-1P
PID No.	115989

Owner or Tenant? Tenant

Type of Operation: Personal Property

Name of Property Owners: Charlie N. Rodgers

Name of Site Occupant: Thomas Rodgers, Sr.

Occupancy Date: 7/11/05

Address of Location:

8895 Gaysport Road

Blue Rock, OH 43720

Contact Information:

Office Phone: _____

Cell Phone: 740-819-3271

Email Address: _____

Address (if different than subject location):

7300 Dietrick Hill Road

Philo, OH 43771

Annual Net Profit: \$ _____ -

Authorized Representative present for interview: Thomas Rodgers, Sr.

Title of Authorized Representative: Owner

Name of Interviewing Agent: Patty Moorman

Pre-Acquisition Interview Date: 6/15/2023

Is this the only location of this business?: Yes Is this part of a chain?: No

Briefly describe the operation to be moved:

Only Personal Property.

What lease terms or contractual obligations is the company presently under?:

Expiration Date of Lease or Contract: N/A

Terms: _____

Does your company currently enjoy specific site needs that will need to be available at the replacement site? Do you anticipate difficulty in locating such a site?: No

Briefly Explain: N/A

Will your company need specialized assistance to move machinery or personal property beyond those services typically provided for by a mover? No, there is no special assistance required

Can these services be provided by your current staff?: Yes, my staff is capable of performing the move

Is there a specific time of year that the move could take place that would least effect your operation?:

How much time will be needed to complete the move once it has begun?: Week or more

Relocaton Assistance Accepted or Declined?: Accepted

Interviewer's Signature:  Date: 6/17/24