



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:

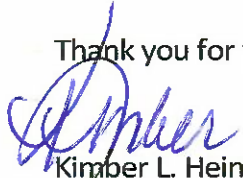
Replacement Dwelling Rent plus utilities	\$1,058.00
Displacement Site MARKET RENT plus utilities	\$ 619.00
Rent Differential	\$ 439.00

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

**STATE OF OHIO  
DEPARTMENT OF TRANSPORTATION  
COMPARABLE UTILITY ANALYSIS  
(FOR TENANT USE ONLY)**

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

Subject	Comp 1	Comp 2	Comp 3	Replacement
Electric: \$63.00	\$48.00	\$91.00	\$77.00	\$126.00
Gas:	\$63.00	\$60.00	\$60.00	\$43.00
Fuel Oil:				
LP: \$81.00				
Water:	\$27.00	\$27.00	\$27.00	\$37.00
Sewage:	\$48.00	\$48.00	\$48.00	\$42.00
Other				
trash	\$22.00	\$22.00	\$22.00	\$31.00
I.D. other item:				
I.D. other item:				
I.D. other item:				
Total Utility Usage: \$144.00	\$208.00	\$248.00	\$234.00	\$279.00
Econ. / Contract Rent: \$475.00	\$850.00	\$850.00	\$825.00	\$850.00
Total Base Rent: \$619.00	\$1,058.00	\$1,098.00	\$1,059.00	\$1,129.00

**30% of Income VERSUS Site Base Rent**

Income Limit - Designated Area: \$0.00 Gross Monthly Income: \$0.00  
 Low Income Limit: \$0.00 X 30% of Income: \$0.00  
 Annual Income of Principle Wage Earner: \$0.00 Site Base Rent: \$619.00  
 Qualified as Low Income: No Lesser of 30% or Base: \$0.00

# Replacement Site

not  
effect  
7/1/2024  
per  
Agency

**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))

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  Unit Address		Heating					\$ 43.00	
		Cooking					12.00	
		Other Electric					52.00	
		Air Conditioning					0.00	
		Water Heating					47.00	
		Water					37.00	
		Sewer					42.00	
		Trash Collection					31.00	
		Other						
		Range/Microwave					7.00	
Number of Bedrooms		Refrigerator					8.00	
		Total					\$	

Previous versions are obsolete.

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

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: \$1,129.00
- F: E minus B (or C) X 42: \$19,866.00
- 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 displaced. 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: \_\_\_\_\_

*Signed 7/1/24*

**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.

*Amber Dem*

Signature of Agent: \_\_\_\_\_

Signature of Reviewer: \_\_\_\_\_

Date: \_\_\_\_\_



RE 607

STATE OF OHIO

County MUS

6/2023

DEPARTMENT OF TRANSPORTATION

Route 376

TENANT RENT AND UTILITY VERIFICATION

Parcel No. 010-1

Pid No. 115989

**Verification of Utilities**

The Local Housing Authority's current Allowances for Tenant Furnished Utilities and Other Services will be used to determine the average cost of utilities at the displacement site. If the area is not covered by a Local Housing Authority, the schedule for a nearby and similar Housing Authority shall be used.

	Heat	HW Heater	Stove	Other	Included in monthly rent
Electric	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No
Propane	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No
Natural Gas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No
Fuel Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No
Water/sewage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No
Trash pickup	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Choose an item.

**Verification of Rent**

The Agency will use economic rent if a tenant's lease is not arm's length, if the tenant is providing a service in lieu of rent, or if the Agency is unable to obtain the needed data to verify rent.

**Lease/Rental Agreement**

**Rent Receipts (3 consecutive months)**

Copy attached Yes

Signed and Dated Yes

Monthly Rent Paid \$850.00

Copies attached Yes ~~Choose an item.~~

Signed and Dated Yes ~~Choose an item.~~

Monthly Rent Paid \$850.00 ~~\$0.00~~

Other services provided in lieu of rent DNA

HUD Voucher: Type of Unit \_\_\_\_\_ Monthly benefit \$0.00 Attached Yes  No

By signing below, I certify that the above information relating to rent and utilities for the housing unit Located at 883 Goddard Street, Zanesville, Ohio As set forth is true.

Kevin Lealson  
Thomas Podgelski  
 Owner/Landlord

Thomas Podgelski  
 Tenant/Occupant

U.S.C. Title 18 Sec 1001 provides "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry shall be fined not more than \$10,000 or imprisoned not more than five years or both." Chapter 2913, Ohio Revised Code, provides similar penalties for false, fictitious, or fraudulent statements or representations

RE-617  
5/3/2017

STATE OF OHIO  
DEPARTMENT OF TRANSPORTATION  
RELOCATION ASSISTANCE PROGRAM  
RESIDENTIAL CLAIM

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

Full Name of Claimant: Thomas Rodgers, Hope Miller

Address Moved From: 8895 Gaysport Hill Road  
Gaysport, OH 43720

Address Moved To: 883 Goddard Street  
Zanesville, OH

WARNING - FALSE, FICTITIOUS OR FRAUDULENT STATEMENTS  
MAY LEAD TO IMPRISONMENT OR FINES, OR BOTH

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PAYMENT ITEMIZATION

MOVING	\$	-
REPLACEMENT HOUSING PAYMENT	\$	-
RENT SUPPLEMENT / DOWNPAYMENT	\$	4,609.50
INCIDENTAL EXPENSES	\$	-
INCREASE INTEREST PAYMENT	\$	-
TOTAL THIS CLAIM:		\$ 4,609.50

I hereby certify that I have moved from the address shown above and am now a bona fide resident of the property at the address shown above as "address moved to". Further I certify that I am a lawful resident of the United States, that this claim and that all information I have submitted is true and correct. I understand must be audited and approved prior to payment.

Date: 8/15/24 Signature: Thomas Rodgers  
(Displaced Person)

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Displaced Person)

I hereby certify that the above named claimant is an eligible displacee in accordance with the Rules and Regulations established by the Director, Ohio Department of Transportation, for the Administration of the Relocation Assistance Program and that the named claimant is entitled to the amount indicated above.

Date: 7/25/24 Signature: Amber L Stein  
(Relocation Agent)

I certify that I have reviewed the file material and find that the amount(s) noted above is / are adequately supported. The claim form is approved for signing by the displaced person(s).

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Relocation Reviewer)

Installment Number: 1  
Installment Amount: \$4,609.50  
Balance of Amount: \$13,828.50  
Next installment Due: 9/1/2024

Payment indicated above assigned to:  
Name: \_\_\_\_\_  
Street: \_\_\_\_\_  
City, State and Zip: \_\_\_\_\_

Is this the final payment for the Relocation on this file?: \_\_\_\_\_



RE-617  
5/3/2017

STATE OF OHIO  
DEPARTMENT OF TRANSPORTATION  
RELOCATION ASSISTANCE PROGRAM  
RESIDENTIAL CLAIM

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

Full Name of Claimant: Thomas Rodgers, Hope Miller

Address Moved From: 8895 Gaysport Hill Road  
Gaysport, OH 43720

Address Moved To: 883 Goddard Street  
Zanesville, OH

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PAYMENT ITEMIZATION

MOVING	\$	-
REPLACEMENT HOUSING PAYMENT	\$	-
RENT SUPPLEMENT / DOWNPAYMENT	\$	4,609.50
INCIDENTAL EXPENSES	\$	-
INCREASE INTEREST PAYMENT	\$	-
TOTAL THIS CLAIM:		\$ 4,609.50

I hereby certify that I have moved from the address shown above and am now a bona fide resident of the property at the address shown above as "address moved to". Further I certify that I am a lawful resident of the United States, that this claim and that all information I have submitted is true and correct. I understand must be audited and approved prior to payment.

Date: 8/15/24 Signature: Thomas Rodgers  
(Displaced Person)

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Displaced Person)

I hereby certify that the above named claimant is an eligible displacee in accordance with the Rules and Regulations established by the Director, Ohio Department of Transportation, for the Administration of the Relocation Assistance Program and that the named claimant is entitled to the amount indicated above.

Date: 7/25/24 Signature: [Signature]  
(Relocation Agent)

I certify that I have reviewed the file material and find that the amount(s) noted above is / are adequately supported. The claim form is approved for signing by the displaced person(s).

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Relocation Reviewer)

Installment Number: 2  
Installment Amount: \$4,609.50  
Balance of Amount: \$9,219.00  
Next installment Due: 12/1/2024

Payment indicated above assigned to:

Name: \_\_\_\_\_  
Street: \_\_\_\_\_  
City, State and Zip: \_\_\_\_\_

Is this the final payment for the Relocation on this file?: No

RE-617  
5/3/2017

STATE OF OHIO  
DEPARTMENT OF TRANSPORTATION  
RELOCATION ASSISTANCE PROGRAM  
RESIDENTIAL CLAIM

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

Full Name of Claimant: Thomas Rodgers, Hope Miller

Address Moved From: 8895 Gaysport Hill Road  
Gaysport, OH 43720

Address Moved To: 883 Goddard Street  
Zanesville, OH

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PAYMENT ITEMIZATION

MOVING	\$	-
REPLACEMENT HOUSING PAYMENT	\$	-
RENT SUPPLEMENT / DOWNPAYMENT	\$	9,219.00
INCIDENTAL EXPENSES	\$	-
INCREASE INTEREST PAYMENT	\$	-
<b>TOTAL THIS CLAIM:</b>		\$ 9,219.00

I hereby certify that I have moved from the address shown above and am now a bona fide resident of the property at the address shown above as "address moved to". Further I certify that I am a lawful resident of the United States, that this claim and that all information I have submitted is true and correct. I understand must be audited and approved prior to payment.

Date: 8/15/24 Signature: Thomas Rodgers  
(Displaced Person)

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Displaced Person)

I hereby certify that the above named claimant is an eligible displacee in accordance with the Rules and Regulations established by the Director, Ohio Department of Transportation, for the Administration of the Relocation Assistance Program and that the named claimant is entitled to the amount indicated above.

Date: 7/25/24 Signature: Amber Adam  
(Relocation Agent)

I certify that I have reviewed the file material and find that the amount(s) noted above is / are adequately supported. The claim form is approved for signing by the displaced person(s).

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Relocation Reviewer)

Installment Number: 3  
Installment Amount: \$9,219.00  
Balance of Amount: \$0.00  
Next installment Due: N/A

Payment indicated above assigned to:

Name: \_\_\_\_\_  
Street: \_\_\_\_\_  
City, State and Zip: \_\_\_\_\_

Is this the final payment for the Relocation on this file?: Yes

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: \$35,000.00 Approval Date: 8/21/2023

Rev. FMVE: \_\_\_\_\_ Approval Date: \_\_\_\_\_

THSC: \_\_\_\_\_ Approval Date: \_\_\_\_\_

Rev. THSC: \_\_\_\_\_ Approval Date: \_\_\_\_\_

Owner Occupant:

Price Differential Computation: \_\_\_\_\_

Price Differential Approval Date: \_\_\_\_\_

Revised Price Differential Computation: \$0.00

LRH Approved?: 0

Less than (3) Comps Approved?: 0

Tenant Occupant:

Rent Differential Computation: \$18,438.00

Rent Differential Approval Date: 1/30/2024

Revised Rent Differential Computation: \$0.00

LRH Approved?: Yes

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

# of Referrals: 4 Date Sent: 1/22/2024 # of Referrals: \_\_\_\_\_ Date Sent: \_\_\_\_\_

# of Referrals: \_\_\_\_\_ Date Sent: \_\_\_\_\_ # of Referrals: \_\_\_\_\_ Date Sent: \_\_\_\_\_

Date Move Approved: 5/7/2024

Move Auth. Date: 5/7/2024

Move Type: \_\_\_\_\_

Actual Move Date: 5/31/2024

Post Move By: Kimber L. Heim

Date of Post Move: 7/15/2024

Last Date to file a claim: 8/1/2025

Date of Final Acquisition Payment: 6/11/2024

Initiation of Negotiations: 1/13/2024

Price Differential Offer Date: 2/1/2024

Revised Price Differential Offer Date: \_\_\_\_\_

Date Contract for Subject Signed: 4/11/2024

90-Day Expiration Date: 7/10/2024

Date filed by Ag's office: N/A

Vacate Notice Delivered: N/A

Expiration of Vacate Notice: N/A

Address Relocated To:

883 Goddard Street  
Zanesville, OH

Dwelling Type: 2-Story Single Family

Other: \_\_\_\_\_

Is Replacement DS&S: Yes

Occupancy Status of Replacement: Tenant

Distance moved: 19.00

Temporary or Permanent Move?: Permanent

Appeal Data

Date: \_\_\_\_\_ Appeal Granted or Denied?: \_\_\_\_\_

Basis for granting:

RE-616  
5/3/2017

STATE OF OHIO  
DEPARTMENT OF TRANSPORTATION  
RELOCATION ASSISTANCE  
DWELLING INSPECTION  
(Decent, Safe & Sanitary)

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

Name of Occupant: Thomas Rodgers, Hope Miller  
Address of Dwelling to be inspected: 883 Goddard Street  
Zanesville, OH

Housing Type: 2-Story Single Family

Number of Occupants:  
# of Male Adults: 1  
# of Female Adults: 1  
# of Male Children: \_\_\_\_\_  
# of Female Children: \_\_\_\_\_

Description of Dwelling:  
Total No. of Rooms: 6  
No. of Bedrooms: 3  
No. of Bathrooms: 1

Total # of Occupants: 2

**General Conditions of the Replacement Dwelling:**

Adequate water supply?: Yes  
Adequate sewage disposal system?: Yes  
Building structurally sound?: Yes  
Adequate living space?: Yes  
Adequate heating system?: Yes  
Adequate electrical system?: Yes  
Meets egress requirements?: Yes

**Kitchen Features:**

Sink in good working order?: Yes  
Sink connected to hot/cold water?: Yes  
Utility service connections?: Yes  
Space for installing appliances?: Yes

**Bathroom Features:**

Separate bathroom area?: Yes  
Ventilated?: Yes  
Tub or shower?: Combo  
Hot and cold water?: Yes  
Sink in good working order?: Yes  
Affords privacy?: Yes  
Well lighted?: Yes

Completed when I visited Thomas Jr. He told me he was renting this location. I did not have him sign b/c no lease.

Comments : (Please explain any variances of above)

**AGENCY CERTIFICATION**

I hereby certify that the dwelling located at the above address has been inspected by me and that it presently meets the standards for Safe and Sanitary Housing. A determination by the undersigned that a dwelling meets the standards for decent, safe and sanitary housing made solely for the purpose of determining the eligibility of relocated individuals and families for payment under the Relocation Program and is not a representation for any other purpose.

THE DEPARTMENT ASSUMES NO RESPONSIBILITY OR LIABILITY FOR ANY PROBLEMS WHICH MAY ARISE WITH THE PROPERTY.

Inspected By: [Signature]

Date: 3/22/24

**CONFORMS TO LOCAL CODE INSPECTION:**

Local Public Agency: \_\_\_\_\_ Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

**DISPLACEE ACKNOWLEDGEMENT**

I understand that this report is made solely for the purpose of determining my eligibility for a replacement housing payment; that this report, the representations, conversations, assurances or statements of the State's representative do not provide an assurance, guarantee or warranty that there are not deficiencies in the dwelling, or that its fixtures or equipment meet or conform to building codes or requirements of any political subdivision of this State which has jurisdiction over such matters. I further understand that THE OHIO DEPARTMENT OF TRANSPORTATION DOES NOT ASSUME ANY LIABILITY OR RESPONSIBILITY FOR STRUCTURAL, MECHANICAL OR UNFORESEEN PROBLEMS WHICH MAY ARISE AT ANY TIME WITH THE PROPERTY.

Displaced Person Signature: \_\_\_\_\_

Date: \_\_\_\_\_



RE-616  
5/3/2017

STATE OF OHIO  
DEPARTMENT OF TRANSPORTATION  
RELOCATION ASSISTANCE  
DWELLING INSPECTION  
(Decent, Safe & Sanitary)

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

Name of Occupant: Thomas Rodgers, Hope Miller  
Address of Dwelling to be inspected: 883 Goddard Street  
Zanesville, OH

Housing Type: 2-Story Single Family

Number of Occupants:  
# of Male Adults: 1  
# of Female Adults: 1  
# of Male Children: \_\_\_\_\_  
# of Female Children: \_\_\_\_\_

Description of Dwelling:  
Total No. of Rooms: 6  
No. of Bedrooms: 3  
No. of Bathrooms: 1

Total # of Occupants: 2

**General Conditions of the Replacement Dwelling:**

Adequate water supply?: Yes  
Adequate sewage disposal system?: Yes  
Building structurally sound?: Yes  
Adequate living space?: Yes  
Adequate heating system?: Yes  
Adequate electrical system?: Yes  
Meets egress requirements?: Yes

**Kitchen Features:**

Sink in good working order?: Yes  
Sink connected to hot/cold water?: Yes  
Utility service connections?: Yes  
Space for installing appliances?: Yes

**Bathroom Features:**

Separate bathroom area?: Yes  
Ventilated?: Yes  
Tub or shower?: Combo  
Hot and cold water?: Yes  
Sink in good working order?: Yes  
Affords privacy?: Yes  
Well lighted?: Yes

Comments : (Please explain any variances of above)

**AGENCY CERTIFICATION**

I hereby certify that the dwelling located at the above address has been inspected by me and that it presently meets the standards for Safe and Sanitary Housing. A determination by the undersigned that a dwelling meets the standards for decent, safe and sanitary housing made solely for the purpose of determining the eligibility of relocated individuals and families for payment under the Relocation Program and is not a representation for any other purpose.

THE DEPARTMENT ASSUMES NO RESPONSIBILITY OR LIABILITY FOR ANY PROBLEMS WHICH MAY ARISE WITH THE PROPERTY.

Inspected By: [Signature]

Date: 6/7/24

**CONFORMS TO LOCAL CODE INSPECTION:**

Local Public Agency: \_\_\_\_\_ Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

**DISPLACEE ACKNOWLEDGEMENT**

I understand that this report is made solely for the purpose of determining my eligibility for a replacement housing payment; that this report, the representations, conversations, assurances or statements of the State's representative do not provide an assurance, guarantee or warranty that there are not deficiencies in the dwelling, or that its fixtures or equipment meet or conform to building codes or requirements of any political subdivision of this State which has jurisdiction over such matters. I further understand that THE OHIO DEPARTMENT OF TRANSPORTATION DOES NOT ASSUME ANY LIABILITY OR RESPONSIBILITY FOR STRUCTURAL, MECHANICAL OR UNFORESEEN PROBLEMS WHICH MAY ARISE AT ANY TIME WITH THE PROPERTY.

Displaced Person Signature: \_\_\_\_\_

[Signature]

Date: 6/7/24





OHIO DEPARTMENT OF TRANSPORTATION  
 Mike DeWine, Governor Jack Marchbanks, Ph.D., Director

District 5  
 9600 Jackson Town Rd., Jackson town, OH 43030  
 740-323-4400  
 transportation.ohio.gov

*Tom Malone*

Item	Subject	Comparable #1	Comparable #2	Comparable #3
Address	8895 Gaysport Hill Rd Gaysport, OH 43720	940 Hopewell Rd N Hopewell, OH 43746	1825 Adams Lane Zanesville, OH 43701	633 Baker Street Zanesville, OH 43701
Monthly Rental Rate	\$0	\$675	\$475	\$895
Data Source: (newspaper, realtor, internet site)	Owner	Internet/Owner	Internet/Owner	Internet/Owner
Contact Information (name/phone number)	Charlie Rodgers	Clay Lattimer	Deborah Davis Graham	Tami Passwaters
Item	Subject	Description	Description	Description
Type of Dwelling (single family, duplex, multi- unit)	Single	Single	Single	Single
Exterior Finish	wood	aluminum	wood	aluminum
Age of Dwelling	1900	1996	1920	1901
Lot size, if applicable	1 acre	26 x 60	0.091 acres	40 x 60
Off Street Parking (number of spaces available to renter)	yes	yes	yes	yes
Garage (number of bays/attached or detached)	Carport/lean to	no	yes	no
Number of rooms above grade	5	6	5	7
Number of finished rooms below grade	0	0	0	0
Total number of rooms in home	5	6	5	7
Basement (Full or Partial, Finished or Unfinished)	no	no	slab	crawl
Number of Bathrooms	1	2	1	1
Gross Sq. Ft.	968 (c)	800	790	1320
Water: city water or well water	well	city	city	city
Heat: Gas, Oil, Electric, Propane	wood pellets	electric	gas	gas
Cooking: electric, gas, other	electric	electric	electric	electric
Air-conditioning	n/a	window	no	window
School District	Franklin	West Muskingum	Tri-Valley	Zanesville
Condition: (good, fair, poor)	poor	fair	average	fair
Other:	Non DS&S			
Indicated Rental Amount	\$0.00	\$675.00	\$475.00	\$895.00





Market Rent determined to be **\$475.00**

Signature of Preparer: *[Signature]* Date: January 18, 2024

*3 2 awarded 3 2 3*

**STATE OF OHIO  
DEPARTMENT OF TRANSPORTATION  
COMPARABLE PROPERTY ANALYSIS**

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

Subject	Comp#1	Comp#2	Comp#3
			
Address: 8895 Gaysport Hill Road Gaysport, OH 43720	830 Race Street Zanesville, OH 43701	1504 Carroll Street Zanesville, OH 43701	947 Moxahala Street Zanesville, OH 43701
Lot Size: 1.061 acres	0.141	0.096	0.102
Type of Dwelling: 1 Story	1 Story	2-Story Single Family	1 Story
Exterior Finish: Wood	Aluminum	Wood	Wood
Age: 123	93	121	122
Neighborhood: Rural / Residential	Residential	Residential	Residential
Garage: No	No	No	No
Car Count: 0	N/A	N/A	N/A
Att / Det: 0	N/A	N/A	N/A
Basement: Yes	Yes	Yes	Yes
Full / Part: Partial	Full	Full	Full
Fin. / Unfin. Unfinished	Unfinished	Unfinished	Unfinished
# of Rooms: 4	5	5	4
# of Bedrooms: 2	2	3	2
# of Bathrooms: 1	1	1	1
Gross SqFt: 918	688	1248	645
Water: Well	City	City	City
Sewer: Septic	City	City	City
DS&S? Yes	Yes	Yes	Yes
School District: Franklin SD	Zanesville CSD	Zanesville CSD	Zanesville CSD
Proximity to Public Transportation: 0	0	0	0
A/C? No	No	Yes	No
Proximity to Emplmt: 25	10	10	10
Listing Agent Name / Contact: <del>XXXXXXXXXX</del>	Jazzlynn Gay	Jazzlynn Gay	
Site Base / Comp Base: Site Base: \$475.00	Comp: \$850.00	Comp: \$850.00	Comp: \$1,000.00
Rent Differential Est: <del>XXXXXXXXXX</del>	\$15,750.00	\$15,750.00	\$22,050.00
Date Available: <del>XXXXXXXXXX</del>	1/1/2024	1/1/2024	1/15/2024

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: Comp 1

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

<u>Rent Differential:</u>	
A: Base Rent for Prime Comparable:	<u>\$1,058.00</u>
B: Subject Base Rental Rate:	<u>\$619.00</u>
or:	
C: 30% of Income:	<u>\$0.00</u>
D: A minus B (or C) X 42 = Estimated Supplement:	<u>\$18,438.00</u>
E: Base Rent for Replacement:	<u>\$0.00</u>
F: E minus B (or C) X 42	
G: Lesser D or F = FINAL DIFFERENTIAL:	<u>\$18,438.00</u>
<u>Downpayment Assistance:</u>	
A: Rent Differential:	<u>\$18,438.00</u>
B: LRH Maximum:	<u>\$7,200.00</u>
C: Greater of A or B:	<u>\$18,438.00</u>
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 displaced. 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: 2/1/24

**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: \$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: \_\_\_\_\_ Date: \_\_\_\_\_

# DISPLACEMENT

ALLOWANCES FOR TENANT-FURNISHED UTILITIES							
Zanesville Metropolitan Housing Authority							1/1/2023
<b>Single Family</b>							
		0 bed	1 bed	2 bed	3 bed	4 bed	5 bed
<b>Heating</b>							
a. Natural gas		\$53	\$57	\$60	\$67	\$76	\$79
b. propane		\$43	\$63	\$81	\$99	\$124	\$139
c. electric		\$27	\$37	\$48	\$58	\$71	\$81
d. fuel oil		\$45	\$70	\$82	\$102	\$127	\$149
<b>Cooking</b>							
a. natural gas		\$3	\$3	\$3	\$3	\$3	\$9
b. Propane		\$7	\$11	\$12	\$17	\$23	\$27
c. electric		\$2	\$2	\$3	\$3	\$4	\$9
<b>Other Electric</b>							
a. electric		\$18	\$24	\$26	\$31	\$36	\$38
<b>Air Conditioning</b>							
a. electric		\$11	\$11	\$14	\$16	\$21	\$24
<b>Water Heating</b>							
a. natural gas		\$9	\$9	\$13	\$14	\$19	\$21
b. Propane		\$17	\$23	\$30	\$33	\$42	\$47
c. electric		\$4	\$10	\$12	\$13	\$17	\$22
<b>Water &amp; Sewer</b>							
	Dresden	\$55	\$55	\$60	\$69	\$73	\$78
	Frazeysburg	\$58	\$58	\$58	\$58	\$58	\$58
	New Concord	\$27	\$54	\$82	\$132	\$185	\$231
	Roseville	\$80	\$80	\$94	\$138	\$169	\$213
	Zanesville	\$33	\$46	\$62	\$93	\$117	\$149
<b>Water (only)</b>							
(East)	Muskingum	\$30	\$30	\$35	\$67	\$81	\$96
	Maysville	\$25	\$32	\$45	\$74	\$103	\$131
	Philo	\$25	\$25	\$25	\$25	\$25	\$25
	So. Zanesville	\$19	\$19	\$27	\$35	\$43	\$51
	Zanesville	\$9	\$13	\$18	\$28	\$35	\$46
<b>Sewer (only)</b>							
	Muskingum County	\$48	\$48	\$48	\$48	\$48	\$48
	So. Zanesville	\$48	\$48	\$48	\$48	\$48	\$48
<b>Trash Collection</b>							
	City of Zanesville	\$22	\$22	\$22	\$22	\$22	\$22
	S. Zanesville	\$18	\$18	\$18	\$18	\$18	\$18
	Other areas	\$20	\$20	\$20	\$20	\$20	\$20
<b>Range/Microwave</b>							
		\$8	\$8	<del>\$8</del>	\$7	\$7	\$7
<b>Refrigerator</b>							
		\$6	\$6	\$6	\$9	\$10	\$10

\$ 144.00

---



# PRIME Comp (Comp #1)

ALLOWANCES FOR TENANT-FURNISHED UTILITIES								
Zanesville Metropolitan Housing Authority								1/1/2023
Single Family								
		0 bed	1 bed	2 bed	3 bed	4 bed	5 bed	
<b>Heating</b>								
a. Natural gas		\$53	\$57	\$60	\$67	\$76	\$79	
b. propane		\$43	\$63	\$81	\$99	\$124	\$139	
c. electric		\$27	\$37	\$48	\$58	\$71	\$81	
d. fuel oil		\$45	\$70	\$82	\$102	\$127	\$149	
<b>Cooking</b>								
a. natural gas		\$3	\$3	\$3	\$3	\$3	\$9	
b. Propane		\$7	\$11	\$12	\$17	\$23	\$27	
c. electric		\$2	\$2	\$3	\$3	\$4	\$9	
<b>Other Electric</b>								
a. electric		\$18	\$24	\$26	\$31	\$36	\$38	
<b>Air Conditioning</b>								
a. electric		\$11	\$11	\$14	\$16	\$21	\$24	
<b>Water Heating</b>								
a. natural gas		\$9	\$9	\$13	\$14	\$19	\$21	
b. Propane		\$17	\$23	\$30	\$33	\$42	\$47	
c. electric		\$4	\$10	\$12	\$13	\$17	\$22	
<b>Water &amp; Sewer</b>								
	Dresden	\$55	\$55	\$60	\$69	\$73	\$78	
	Frazesburg	\$58	\$58	\$58	\$58	\$58	\$58	
	New Concord	\$27	\$54	\$82	\$132	\$185	\$231	
	Roseville	\$80	\$80	\$94	\$138	\$169	\$213	
	Zanesville	\$33	\$46	\$62	\$93	\$117	\$149	
<b>Water (only)</b>								
(East)	Muskingum	\$30	\$30	\$35	\$67	\$81	\$96	
	Maysville	\$25	\$32	\$45	\$74	\$103	\$131	
	Philo	\$25	\$25	\$25	\$25	\$25	\$25	
	So. Zanesville	\$19	\$19	\$27	\$35	\$43	\$51	
	Zanesville	\$9	\$13	\$18	\$28	\$35	\$46	
<b>Sewer (only)</b>								
	Muskingum County	\$48	\$48	\$48	\$48	\$48	\$48	
	So. Zanesville	\$48	\$48	\$48	\$48	\$48	\$48	
<b>Trash Collection</b>								
	City of Zanesville	\$22	\$22	\$22	\$22	\$22	\$22	
	S. Zanesville	\$18	\$18	\$18	\$18	\$18	\$18	
	Other areas	\$20	\$20	\$20	\$20	\$20	\$20	
<b>Range/Microwave</b>								
		\$8	\$8	\$8	\$7	\$7	\$7	
<b>Refrigerator</b>								
		\$6	\$6	\$6	\$9	\$10	\$10	

\$ 208<sup>00</sup>





February 1, 2024

Thomas Rodgers, Jr.  
Hope Miller  
8895 Gaysport Hill Road  
Blue Rock, OH 43720

RE: CRS: MUS-376-5.09  
PCL: 010-1  
PID: 115989

Dear Thomas Rodgers, Jr.  
Hope Miller:

As the result of the Agency's offer to purchase all, or part of the property that you presently occupy, you are eligible for certain benefits provided for under the Relocation Assistance Program. The following is a list of benefits to which you may be entitled.

First, you are eligible to receive financial assistance in obtaining a replacement home of your choice. The maximum amount of that assistance is based on a rental unit which is comparable to your present home and is currently available for rent on the open market.

The actual amount you receive may be less than the amount noted below, depending on how much you spend for rent and utilities at your replacement dwelling. The maximum amount you **may** receive is \$18,438.00 and is based on a comparable rental located at 830 Race Street, Zanesville, OH 43701 which, including utilities, has a gross monthly rental rate of \$1050.00. If you chose to purchase a replacement home, you may be eligible to receive \$18,438.00 as downpayment assistance.

If you desire, I will supply you with referrals of rental units which are available on the open market and could provide you transportation to view these units.

Second, you will be reimbursed for the expenses you incur in moving your personal belongings and furniture to a replacement dwelling of your choice.

RE-T  
REV. 8/11

Please do not agree to purchase or rent a replacement home until that home has been inspected and approved by our personnel. Also, do not move without written authorization. If you do, you may lose your eligibility for Relocation Assistance benefits.

By law, we must provide you with at least 90 days written notice before you can be required to move. Therefore, the earliest date that you may be required to move is April 2, 2024. You may move at any time after receiving our written Move Authorization Letter, provided that your replacement home has, as noted above, been inspected and approved by the Agency. You should continue to pay rent to your landlord until you move. Should it become necessary, you will be given a Notice to Vacate when the Agency has acquired the property you occupy and you are required to move by a specific date.

If you are an "alien," not lawfully present in the United States, you are not eligible to receive relocation advisory services or relocation payments, unless such ineligibility would result in exceptional and extremely unusual hardship to a qualifying spouse, parent, or child.

I will exert my best efforts to lessen the inconvenience of your relocation to a replacement home. I have given you a Residential Relocation Assistance brochure and explained to you the specific parts which apply to your situation. I will be available at any reasonable time to answer any questions you have regarding your relocation. I may be contacted at the addresses and telephone number listed below.

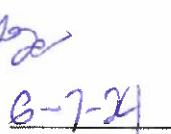
Respectfully,



Kimber L. Heim  
D5 Realty Specialist Manager  
kimber.heim@dot.ohio.gov  
740-323-5422  
9600 Jacksontown Road  
Jacksontown, OH 43030

I acknowledge receipt of this notice.

  
Signature of Displaced Person:

  
Date:

RE-T  
REV. 8/11



**MEMO TO FILE**

**Date:** January 30, 2024  
**TO:** Patty Moorman – Relocation Reviewer  
**FROM:** Kimber L. Heim, Realty  
Specialist Manager  
**RE:** Approval Requested for Market Rent,  
Supplement Payment and Use of Last Resort  
Housing

The subject property is located at 8895 Gaysport Hill Road, Blue Rock, OH 43720. The subject 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. There is limited mowable, usable lawn. The project has a take area of 1.061 acres due to the instability of the hill the property sits on in Blue Rock. There is no garage for this home, though there is a carport in poor condition and barn that sits down in the ravine. This barn is not utilized by the tenant/occupants, but by a third party.

The subject property has a room count of 4/2/1, which includes a Living Room, combination kitchen/dining room, one full bathroom, and 2 bedrooms. There also is a utility room, which is not included in the total room count, but which was considered in searching for comparables and another room utilized for storage. 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 as noted above. The appraisal also states that there is baseboard heat, but upon inspection, the owner verified there is currently 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, per the occupants and a personal inspection of the stairway leading down. Due to the lack of utility of several rooms, and the inability to enter them to measure, the estimated habitable living space of this home is 919 per measurements 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 the two rooms and basement.

An exhaustive search has been on-going since June 2023. I have utilized internet sites ZILLOW, REDFIN, FACEBOOK Marketplace, Zanesville Rentals, and driven the area looking for Owner Rental signs. I have had discussions with the three local rental/property agencies in Muskingum County. My search was for the entirety of Muskingum County from Blue Rock to South Zanesville to Zanesville. I have visited six properties and determined that Comparable 1 is a suitable relocation location for Thomas and Hope. This determination has three comparable properties utilized for this determination.

The home located at 830 Race Street, Zanesville, OH 43701 which is DS&S, currently available meets or exceeds all points of comparability which are noted on the RE 611 (T). This property is deemed to be equal to or better than the subject property due to condition of the subject, and has been chosen as the Prime Comparable for determination of the Rent Supplement Payment. See attachment of Site Description and Comparable Analysis for more information on all three comparables. Utility information was gathered from the Zanesville Metropolitan Housing Authority, 01/01/2023 published.

The subject tenants were not charged rent due to a family member owning the property. A market rent determination was made based on the information gathered from Shields Properties, Missy Brest, Chad James and Tami Passwaters, all independent owners of rental properties in Zanesville Municipal Area. Rented units range from \$475 to \$895 and a determination was made that \$475 was most comparable and equal while remaining DS&S. See Memo and grid for more information on the market rent. **Approval is requested for the Market Rent.**

30% income was not considered as the tenant occupants would not provide employment information or income information despite the process of calculating an RSP based on low income being fully explained.

The Prime Comparable is located at 830 Race Street, Zanesville OH and has a rent of \$850 plus utilities as determined using the ZMHA grid = \$208.00 for a total base rent of \$1,058.00. The subject has a market rent of \$475, plus utilities of \$144 for a total base rent of \$619.00. To calculate the Rent Supplement Payment the difference between \$1,058.00 and \$619.00 is multiplied by 42 months = **\$18,438.00** as a Rent Supplement Payment to be provided Thomas Rodgers and Hope Miller. **Approval is requested for the Calculated Rent Supplement Payment.**

The exhaustive, lengthy search of all rental properties available from Gaysport/Blue Rock through Maple Avenue in Northern Zanesville has calculated out to an amount above the \$7,200 limit. If nothing is available within the limit of \$7,200, the displacing agency will provide rental supplement payment under the provisions of Last Resort Housing. Per section 6607.01 of the ODOT Real Estate Manual, Determination to Provide Housing of Last Resort. Whenever a project or program cannot proceed on a timely basis because of comparable replacement rental properties are limited or quickly on and off the market within the monetary limits of \$7,200, the displacing agency shall provide additional or alternate assistance under the provisions of Last Resort Housing. The condition of the subject property and the added hurdle of market rent calculation being required as no rent was being paid to Property owner and the current market for rental properties in the area has caused our search to exceed the RSP monetary limit of \$7,200.00. **Therefore, I am requesting approval for use of Last Resort Housing.**

I request approval of this RSP (Rent Supplement Payment) and the use of Last Resort Housing (LRH) due to disparity between displacement site market rent and replacement site rent.



Kimber L. Heim  
Realty Specialist Manager  
Relocation Agent

Approval given for Market Rent, Rent Supplement Payment and Last Resort Housing.

*Patty Moorman* 1/30/2024

Patty Moorman  
Relocation Reviewer  
Central Office Relocation Unit Manager

Thank you in advance for your time and consideration of this request.



John R. Wooldridge,  
D5 Real Estate Administrator

*2-6-2024*

Date





RE-600  
5/3/2017

STATE OF OHIO  
DEPARTMENT OF TRANSPORTATION

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

RELOCATION ASSISTANCE  
RESIDENTIAL SITE OCCUPANCY  
INTERVIEW FORM

Is Occupant an Owner or Tenant? Tenant

Displaced Persons Name: Thomas Rodgers, Hope Miller  
Site Address: 8895 Gaysport Hill Road  
City, State and Zip: Gaysport, OH 43720  
Contact Information: Home Phone: N/A Cell Phone: 740-487-8603, 740-487-8594, 740-647-2404  
Email Address: \_\_\_\_\_

Person Interviewed: Thomas Rodgers Interview Date: 6/15/2023  
Interviewing Agent: Kimber L Heim Date of Occupancy: Jan-21  
Take Area: Total Owner Considering Retention of Home?: No

FAMILY COMPOSITION:

Occupation of Principal Wage Earner: \_\_\_\_\_ Age: 19  
Name of Employer: \_\_\_\_\_ Distance: 15  
Address of Employer: \_\_\_\_\_ Work phone: \_\_\_\_\_  
City, State and Zip: \_\_\_\_\_  
Tenant Monthly Income: Occupant #1: \$0.00 Occupant #2: \$0.00 Occupant #3: \$1,765.52  
Subsidies: No Amount: \_\_\_\_\_ Total Monthly Income: \$1,765.52  
School District: Franklin SD Distance to Schools: \_\_\_\_\_  
No. of Male Adults: 1 #1 Age: 19 #2 Age: \_\_\_\_\_ #3 Age: \_\_\_\_\_  
No. of Female Adults: 1 #1 Age: 18 #2 Age: \_\_\_\_\_ #3 Age: \_\_\_\_\_  
No. of Male Children: 0 #1 Age: \_\_\_\_\_ #2 Age: \_\_\_\_\_ #3 Age: \_\_\_\_\_  
#4 Age: \_\_\_\_\_ #5 Age: \_\_\_\_\_ #6 Age: \_\_\_\_\_  
No. of Female Children: 0 #1 Age: \_\_\_\_\_ #2 Age: \_\_\_\_\_ #3 Age: \_\_\_\_\_  
Total Occupants: 2 #4 Age: \_\_\_\_\_ #5 Age: \_\_\_\_\_ #6 Age: \_\_\_\_\_

DWELLING INFORMATION:

Type of Dwelling: 1 Story Room#1: Living Room  
Lot Size: 1.061 acres Room#2: Kitchen  
Exterior Finish: Wood Room#3: Bedroom #1  
Neighborhood Type: Rural / Residential Room#4: Bedroom #2  
Square Footage: Gross 918 Room#5: \_\_\_\_\_  
Number of Baths: 1 Room#6: \_\_\_\_\_  
Total # of Rooms: 4 # of Bedrooms 2 Room#7: \_\_\_\_\_  
Basement: Yes Partial Unfinish Room#8: \_\_\_\_\_  
Garage: No Room#9: \_\_\_\_\_  
# of Furnished Rooms (tenants only): \_\_\_\_\_ 0 Room#10: \_\_\_\_\_  
# of Unfurnished Rooms (tenants only): \_\_\_\_\_ 0 Room#11: \_\_\_\_\_  
Age of Structure: 123 A/C? No Room#12: \_\_\_\_\_  
Is Subject DS&S? Yes Water: Well Sewer: Septic

Utilities in Rental Unit:

Paid by Tenant: \_\_\_\_\_ Other: \_\_\_\_\_  
Monthly Rent of Unit: \$0.00 Utilities: Without Utilities  
Mortgage on Site Property?: No Mortgage Amount: \_\_\_\_\_ Interest Rate: \_\_\_\_\_  
Type of Loan on Site: \_\_\_\_\_ Term of Loan: \_\_\_\_\_ Remaining Life: \_\_\_\_\_  
School District Preference: Franklin LSD Location Preference: \_\_\_\_\_

Remarks: DS&S Deficiencies; Special Aid Required; Additional Information relative:  
Main Structure is a school house that has been renovated; Non-DSS bedroom blocked off as unsafe so not included in room count for relocation, questionable if entire abode can be heated to 72 degrees as only heat is by a wood pellet stove.

Interviewer's Signature: Kimber L Heim Date: 6/16/23

# The RE 95

REV. JAN 2007

C/R/S MUS-376-5.09  
 Parcel 010-WD  
 PID 115989

The purpose of the RE 95 is to identify improvements in the take area, to classify these improvements as real property or personal property and to identify who owns these improvements. Improvements classified as real property are valued in the appraisal process and ODOT will purchase these improvements. Items classified as personal property are moved in the relocation process.

Address of Property	8895 Gaysport Hill Road, Blue Rock, OH 43720
Name of Person Occupying the Property	Hope, Thomas Rodgers, and Ayden Foley, Mr. Rodgers (father of fee owner and tenant)
Fee Owner's Name:	Charlie N. RODGERS
Brief Description of Property Type:	1 story ranch on 1.061 acres,

Description of Improvements in Take Area:	Classification (Real or Personal Property)	Ownership (Fee/Tenant)
1. structure, 1 story ranch	Real	Fee
2. Shed, est 8' x 10'	Real	Fee
3. Shed contents	Personal Property	Tenant <i>ST.</i>
4. Structure contents	Personal Property	Tenant <i>Jr</i>
5. Various building materials	Personal Property	Tenant <i>Sr/Jr</i>
6. <i>slate in shed</i>	<i>PP</i> Choose an item.	<i>tenant Jr.</i> Choose an item.
7.		Choose an item.
8.		Choose an item.
Attach an Addendum if more space is needed for inventory.		

The parties signing this form understand that all items classified as real property must be present on the property when ODOT takes possession. The amount paid to the owner will be reduced by the value of any items that are not present on the property when ODOT takes possession.

Fee Owner:

Signature

Charlie N. Rodgers

Name Printed:

Charlie N. Rodgers

Date:

6/15/23 / 8/7/23

Tenant/Occupant:

Signature:

Thomas Rodgers

Name Printed:

Thomas Rodgers

Date:

6/15/23 & 8/7/23

Agent for ODOT:

Signature:

Kimber L. Hein

Name Printed:

Kimber L. Hein

Date:

6/15/23 & 8/7/23

Comment area (if needed):

The parties signing this form understand that all items classified as real property must be present on the property when ODOT takes possession. The amount paid to the owner will be reduced by the value of any items that are not present on the property when ODOT takes possession.

Tenant/Occupant: Signature Hope Miller  
Name Printed: Hope Miller  
Date: 8/7/23

Tenant/Occupant: Signature: Aydin Foley  
Name Printed: Aydin Foley  
Date: 6/15/23 to 8/7/23

Tenant/Occupant: Signature: Thomas Rodgers  
Name Printed: Mr. Rodgers, father of Charlie and Thomas  
Date: 6/15/23 to 8/7/23

Agent for ODOT: Signature: Kimber L. Heim  
Name Printed: Kimber L. Heim  
Date: 6/15/23 to 8/7/23

Comment area (if needed):