1378 CHG-5

Appendix 29

**MOVE-IN NOTICE**

**(GUIDEFORM NOTICE TO PROSPECTIVE TENANT)**

*Grantee or Agency Letterhead*

Date:

Tenant Name:

Apartment Name: Apt. #

Street Address:

City, State, Zip Code:

Dear :

On *(date)* , *(property owner)* submitted an application to the *(Grantee)* for financial assistance under a program funded by the Department of Housing and Urban Development (HUD). The proposed project involves [acquisition] [rehabilitation] [demolition] and/or [conversion] of the property located at *(address)* . Because Federal funds are planned for use in this project, the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (URA) [and/or section 104(d) of the Housing and Community Development Act of 1974, as amended] may apply to persons in occupancy at the time the application was submitted for HUD funding. However, if you choose to occupy this property subsequent to the application for federal financial assistance, as a new tenant you will not be eligible for relocation payments or assistance under the URA [and/or section 104(d)].

This notice is to inform you of the following information **before you enter into any lease agreement and/or occupy the property located at the above address**:

* You may be displaced by the project.
* You may be required to relocate temporarily.
* You may be subject to a rent increase.
* You will not be entitled to any relocation payments or assistance provided under the URA [and/or section 104(d)]. If you have to move or your rent is increased as a result of the above project, you will not be reimbursed for any such rent increase or for any costs or expenses you incur in connection with a move as a result of the project.

Please read this notification carefully prior to signing a rental agreement and moving into the project. If you should have any questions about this notice, please contact:

|  |  |
| --- | --- |
| **Important Contact Info** | |
| **Relocation Specialist**  (for questions about relocation, assistance, and to file grievances) | Name:  Mailing Address:  Phone:  Email: |
| **DCA Housing Development Relocation Team**  (to file grievances and appeals) | Online Form: <http://form.jotform.com/82054715249155>  Email: [relocationreview@dca.ga.gov](mailto:compliance@dca.ga.gov) |

Once you have read and have understood this notice, please sign the statement below if you still desire to lease the unit.

Sincerely,

*(name and title)*

\* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \*

I have read the above information and understand the conditions under which I am moving into this project.

Print Name of Tenant(s)

Signature(s)

Address and Unit Number

Date

NOTE:

This is a guideform. It should be revised to reflect the project circumstances.