**GUIDEFORM NOTICE OF ELIGBILITY AND NONDISPLACEMENT**

**TO RESIDENTIAL TENANT**

**Must be on Grantee or Agency Letterhead**

Date:

Tenant Name:

Property Name: Unit #

Street Address:

City, State, Zip Code:

Dear :

On (*date*) , the (*City, County, State, Public Housing Authority (PHA), other*), notified you of proposed plans to (*acquire, rehabilitate, demolish or convert*) the property you currently occupy at (*address*) . On (*date*) , the project was approved and will receive funding from the Georgia Department of Community Affairs (DCA) under the Housing Tax Credit program. Construction is expected to begin on (*date*) .

This is your Notice of Eligibility for relocation assistance and Notice of Non-displacement. You will have to move out of your unit for (*# of months*) for the development. **Do not move yet.** As a result, you are considered temporarily relocated (not displaced) and have the guarantee to return. You are also being offered displacement assistance because the time period for relocation is so long.

This notice guarantees you the following:

1. Upon construction completion, you will be able to lease and occupy (*your present apartment or another suitable, decent, safe, and sanitary apartment in the same building/complex under reasonable terms and conditions*)\*
2. Your new rent will be $\_\_\_\_\_\_\_\_\_\_ per month. Utilities will cost $\_\_\_\_\_\_\_\_\_.
3. When you move, you will be reimbursed for all of your extra expenses, including the cost of moving to and from housing and any increased housing costs. The housing will be decent, safe and sanitary, and all other conditions of the move will be reasonable.

**You do not need to move now.** You will be provided with advance written notice of the date by which you will be required to move. This date will be no less than 90 days from the date comparable replacement housing has been made available to you.

RELOCATION ASSISTANCE

You can get the following relocation assistance:

Relocation Advisory Services. Including counseling and other assistance to help you find another unit and prepare to move.

Security Deposit and Credit Checks. If needed, we can (*advance funds with a repayment plan / cover deposits and receive the return*) for any security deposit and credit check required to rent a decent, safe and sanitary replacement dwelling and for a credit check.

Payment for Moving Expenses. You may choose:

1. Payment for your actual, reasonable moving and related expenses (including refundable or non-refundable utility deposits);
2. Fixed moving payment in the amount of $ based on the Fixed Residential Moving Cost Schedule; or
3. A combination of both (where reasonable and necessary).

Replacement Housing Payment. You are eligible for a replacement housing payment to rent or buy a replacement unit. The payment is based on several factors, including your current housing costs, the cost of a comparable replacement dwelling and your household income. If you ask, we will give you a detailed explanation on how your replacement housing payment was calculated.

CHOICE BETWEEN TEMPORARY AND PERMANENT

You are expected to be relocated for over 12 months. As a result, you have the right to choose to be temporary relocated (return to property when finished) or permanently displaced (to not return to property). You can choose, with assistance, to move:

1. Temporarily for an agreed upon period.
2. Permanently to the unit you temporarily move to, if it is available; or
3. Permanently to another location that is decent, safe and sanitary.

You can choose between the above options now, after 12 months, or when pre-leasing starts.If the decision is to be permanently displaced (remain at the temporary housing or move permanently elsewhere), you will have the rent and utility cost difference paid for 12 months after moving.

If you decide to return to the property after construction is complete, you can expect the following changes to your unit and the property.

* (*Describe changes to the unit)*
* *(Describe changes to the site)*
* Lease terms will (*stay the same, change*). (*If changed, describe here*.)
* Property/Community rules will (*stay the same, change*). (*If changed, describe here.)*

RENTAL ASSISTANCE

Listed below are three comparable replacement dwellings that you may wish to consider for your replacement unit. If you would like, we can arrange transportation for you to inspect these and other replacement dwellings. For details, see attachment.

Address Rent & Utility Costs Contact Info

1.

2.

3.

We believe that the unit at (address) with a monthly rent and utility cost of $ is the most similar to your present dwelling. Our replacement housing payment calculations are made based on this comparable unit. Although you can choose to move to a different unit, you must move to a decent, safe and sanitary housing to get housing assistance. If you rent a unit where the monthly rent and average estimated utility costs are less than $ per month, your rental assistance payment would be based on the actual cost of such unit. Please contact us immediately if you believe the selected unit is not similar to your current dwelling. We can discuss why we chose this and your concerns.

DOWNPAYMENT ASSISTANCE

If you choose to buy (rather than rent) a decent, safe and sanitary replacement dwelling, there are several options which may be of assistance to you. Let us know if you would prefer to buy a replacement unit and we will help you find housing that is within your means with your assistance:

Please note that all replacement housing must be inspected in order to ensure it is decent, safe and sanitary before we can make any housing payments. Payments cannot be made for a house that is not decent, safe and sanitary. **Do not commit yourself to rent or buy a replacement unit until we inspect it.**

QUESTIONS, ACCESSIBILITY, COMPLAINTS

If you know that any of the above terms do not fit your needs, please contact us immediately.

If you have any questions about this letter and your eligibility for relocation assistance and payments, please contact (*name*) , (*title*) using the information listed below. They will assist you with your move and help make sure that you continue to be eligible for all relocation payments. To help you fully participate in the relocation process, reasonable accommodations can be made for persons with disabilities and language assistance will be made available for persons with limited English proficiency. Please let us know if you need auxiliary aides, written translation, oral interpretation, or other assistance to fully participate in the relocation process.\*\*\*

You also have the right to file complaints (grievances) and appeal the determination if you feel that your application for assistance was not properly considered. If you would like to file a grievance or an appeal, please contact us or the Housing Development Relocation Team of the Department of Community Affairs (contact information below).

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| **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) |

**Remember, do not move or commit to the purchase or lease of a replacement unit before we have a chance to further discuss your relocation assistance.**

This letter is important to you and should be kept for your personal records.

Sincerely,

(name & title)

Attachment/s

*Remove from Notice before distributing to Tenant*

NOTES

\*\*\*Title VI of the Civil Rights Act of 1964 requires agencies to take reasonable steps to ensure meaningful access to their programs and activities by persons with limited English proficiency. HUD guidance is available at 72 FR 2732 to assist agencies in complying with this requirement. While the text provided regarding language assistance is not required and is provided for illustrative purposes only, providing appropriate translation and counseling for persons who are unable to read and understand required notices is mandatory. See 49 CFR 24.5.