

**OFFICE OF RIGHT OF WAY
REPORT OF RELOCATION
ASSISTANCE APEAL AWARD**

County: _____

Project No. _____

Parcel No. _____

To: _____, Relocation Assistance Supervisor

We, the undersigned, being duly appointed and qualified members of the Appeal Board appointed to assess the relocation assistance payments due the owners and/pr tenants as set forth in the Uniform Relocation Assistance & Real Property Policies of the 1970 and Chapter 316 Code of Iowa respectfully report as follows:

That we proceeded to view the respective premises and comparables at the time or times fixed in the notice to persons interested and do hereby asses and affix the relocation payments which the respective persons will receive as follows:

Replacement Housing Reimbursement	Moving Costs (Loss of Business)	Incidental Transfer Costs	Total Award
\$	\$	\$	\$
\$	\$	\$	\$

Respectfully reported at _____, Iowa, this _____ day of _____, 20_____.

Signature	Title
Signature	Title
Signature	Title

Filed in my office at Ames, Iowa, this _____ day of _____, 20_____.

Relocation Assistance Supervisor