**General Information**

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| --- | --- | --- |
| Project Title: | | Parcel No.: |
| Displaced Person(s): | | Displacee No.: |
| Displacement Address: | | No. of Keys Received: |
| Replacement Address: | Phone Number: | Vacate Date: |

**Vacate Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| I personally inspected the subject property located at the site address listed above and certify that the occupant(s) has moved out. The premise is in satisfactory condition and all personal property has been removed except for the following items:   |  | | --- | |  | |  |   Based on the list above, your Moving Entitlement will be reduced by $  Specialist Comments:   |  | | --- | |  | |  | |  |   **A photograph of the vacated displacement site is attached herein.**  Relocation Specialist \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Abandonment Information**

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| I agree to abandon personal property, if any, which remains on the subject property to WSDOT. I certify that I am the owner of said personal property. I acknowledge that I will not be entitled to receive relocation assistance payments for any of the property that is abandoned, and I further acknowledge that any moving costs for the abandoned items will be deducted from my moving claim/payment as noted above.  Displaced Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

*Note: For abandoned items on nonresidential displacements refer to WSDOT form RES-548.*