SUBJECT: APPROVAL OF RELOCATION CLAIM PROPERTY LOCATED AT APN 245-040-017 – TENANTS PEDRO M. AND MARIA GALVEZ

SOURCE: PUBLIC WORKS DEPARTMENT

COMMENT: On March 1, 2005 City Council approved the Relocation Plan for the property located at APN 245-040-017, for the Henderson Avenue Reconstruction Project. On April 5, 2005, City Council approved a Hardship Claim in the amount of $2,800.00 for moving expenses. At this time, the tenants have moved and are now submitting a Relocation Claim in the amount of $18,675.90, which is the balance of the total owed to Pedro M. and Maria Galvez.

RECOMMENDATION: That City Council:

1. Approve the Relocation Claim; and
2. Authorize staff to make a payment of $18,675.90 to Pedro M. & Maria Galvez, tenants.

ATTACHMENTS: 1. Claim for Relocation Assistance
CITY OF PORTERVILLE
CLAIM FOR RELOCATION ASSISTANCE - RESIDENTIAL

PERSONAL INFORMATION NOTICE
Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code Sections 1798, et seq.) notice is hereby given for the request of personal information by this form. The requested personal information is voluntary. The principal purpose of the voluntary information is to facilitate the processing of this form. The failure to provide all or any part of the requested information may delay processing of this form. No disclosure of personal information will be made unless permissible under Article 5, Section 1798.24 of the IPA of 1977. Each individual has the right upon request and proper identification, to inspect all personal information in any record maintained on the individual by an identifying particular. Direct any inquiries on information maintenance to your IPA Officer.

ALL CLAIMS MUST BE FILED WITHIN 18 MONTHS AFTER:
(a) For tenants, the date of displacement; or
(b) For owners, the date of displacement or the date of final payment for the acquisition of the real property, whichever is later.

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<tr>
<th>City of Porterville</th>
<th>Project Name: Henderson Avenue Road Improvement Project</th>
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<td>Parcel No.: 245-040-017 Case No.: 1</td>
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1. DISPLACED (Head of Household OR all adult members):
Pedro G. Galvez, et al.
Date Vacated Displacement Property: 4/28/05
Date Occupied Replacement Property: 4/28/05
Final Date to file all Claims: 10/27/07

2. DISPLACEMENT PROPERTY:
2250 W. Henderson Avenue
Porterville, CA 93705

3. REPLACEMENT PROPERTY:
1040 N. Jay Street
Porterville, CA 93705

4. REPLACEMENT HOUSING PAYMENTS BEING CLAIMED (See attached support documentation)
   For 90-day occupants - tenants & owners (including mobile homes):
   A. Rent Differential (Lump Sum) (Balance) $ 19,275.90
   B. Rent Differential (See attached worksheet) $ 19,275.90
   C. Down payment and/or Incidental $ 0
   D. Other: $ 0

   For 180-day owner-occupants - owners only (including mobile homes):
   E. Price Differential (Advance/Estimate) (Final) $ 0
   F. Mortgage Differential (Advance/Estimate) (Final) $ 0
   G. Incidental Expenses (Advance/Estimate) (Final) - (see attached worksheet) $ 0
   H. Other: $ 0

Moving Expense (For 90-day and 180-day occupants)
   I. Fixed Moving Schedule (9 Rooms) $ 2,200.00
   J. Actual Moving Expense $ 0
   K. Utility Hookups $ 0
   L. Move Cost Finding $ 0
   M. Other: $ 0

Total Claim $ 21,475.90
Less Hardship Advance Payment Received $ 2,800.00
Total Amount Claimed $ 18,675.90

I CERTIFY that I have not submitted any other claim for, or received reimbursement or compensation for, any item of expense in this claim, from the City of Porterville nor from any other public agency or private company, and that I will not accept reimbursement or compensation from any other source for any item of expense paid pursuant to this claim. I further certify that all information submitted herewith or included herein is true and correct. I understand that, in addition to the penalty provided by Penal Code Section 72, falsification of any item in this claim as submitted herewith may result in forfeiture of the entire claim.

Displacer's Signature: Pedro G. Galvez Date: 5-19-05

Displacer's Signature: Maria Galvez Date: 5-23-05

I CERTIFY that I examined this claim and substantiation documentation and have found it to conform to the applicable provisions of State of California, Title 25 Regulations. This claim is approved for a payment of $ 18,675.90.

Authorized Signature: Date:
Relocation Consultant: Date: 5-23-05

ADA Notice: For individuals with disabilities, this document is available in alternate formats. For information call (916) 954-5413 Voice, CRS: 1-800-735-2929, or write Right of Way, 1128 N Street, MS-37, Sacramento, CA 95814.