Texas Department of Transportation

Form ROW-R-96
(Rev. 01/09)

RELOCATION ADVISORY ASSISTANCE - PARCEL RECORD

Use Separate Form for Each Displacee - Print or Type All Information			
Displacee's Name (Include Spouse's Name):		Parcel No: ROW CSJ No.:	County: Project No.:
Original Address (Place of Displacement): Phone No.: Site or Apt. No.:		New Address: Phone No.: Site or Apt. No.:	
Gender: ☐ Male ☐ Female ☐ Unknown		Ethnic Code: ☐ Alaskan Native ☐ Asian Indian American ☐ Asian Pacific American ☐ Black American ☐ Hispanic American ☐ Native American ☐ Other	
Type Tenure Before Displacement: ☐ Owner ☐ Tenant		Type Tenure After Relocation: ☐ Owner ☐ Tenant	
Date of Occupancy:	Date Required to Move:	Actual Date of Move:	Distance of Move:
Date Notified of Availability of Relocation Payments and Assistance (Services):			
Date Displacee Offered Assistance in Locating Replacement Housing or Operating Facility:			
Name of Official Offering Relocation Assistance:		Name of Other Agencies Assisting in Relocation:	

Business, Farm or Nonprofit Organization	
Type of Activity:	☐ Continued ☐ Terminated

Residential Displacements				
Type of Property (Single Detached, Multi-Family, etc.)		Number of Persons Actually Living in Dwelling:		
Subject's Value or Monthly Rent:		Age/Sex/Relationship of Other Household Occupants:		
Subjects Rent Includes:	YES NO			
a. Furnishings	☐ ☐			
b. Utilities	☐ ☐			
Type Utilities in Rent and Value:		ADA Considerations / Special Needs:		
Total Number of Rooms in Subject:	Number of Bedrooms:	Number of Bathrooms:	Number of Rooms Occupied:	Living Space (Sq. ft.):
Displacee Income: 1. Gross last 12 Months $ 2. Gross Last Month $ 3. Occupation (Where & What): 4. Welfare (Source & Amounts):				

Date and Substance of Follow-up Contacts (Use extra pages if necessary):

Contact / Help

Print Form