**Hand delivered and signed in person**

[Date]

[URA Case ID]

[Non-residential Tenant’s Name]

[Non-residential Tenant’s Mailing Address]

[City, State Zip Code]

**Re: URA – Relocation Assistance - Voluntary Opt-out Notice for Non-residential Tenants**

Dear [Non-residential Tenant’s Name],

On [Date of Non-residential Tenant’s GIN], the [CDBG-DR/CDBG-MIT] Program, administered by the Puerto Rico Department of Housing (**PRDOH**), notified you via a Tenant General Information Notice (**GIN**) that you may be eligible for relocation assistance to support the [CDBG-DR/CDBG-MIT] Program-sponsored reconstruction or acquisition of the property you currently occupy at [Property Address], and that you may be required to relocate temporarily or permanently as a part of the process. The GIN you received also informed you that you are protected as a non-residential tenant by the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (**URA**), as amended, 42 U.S.C. § 4601, *et seq.,* and Section 104(d) of the Housing and Community Development Act of 1992 (**HCDA**), as amended, 42 U.S.C. § 5304(d).

As stated in PRDOH’s Uniform Relocation Assistance Guide & Residential Anti-Displacement and Relocation Assistance Plan[[1]](#footnote-1), non-residential tenants may voluntarily opt out of receiving URA benefits. They may do so by signing a written statement certifying and acknowledging the assistance and payments they have voluntarily chosen not to accept, as well as certifying that they understand the assistance offered to them and have been informed in detail of the assistance and payments they are entitled to.

It has been duly notified that you have decided to opt out of receiving the relocation assistance that has been made available to you.

As part of the relocation process, you were offered some or all of the following assistance:

* Applicant Advisory Services
* Relocation advisory services, including referrals to suitable replacement locations, help in preparing claim forms for relocation payments, and other assistance to minimize the impact of the move.
* Comparable replacement premises
* Commercial space of last resort
* Payment for actual, reasonable moving and related expenses.
* Fixed payment.

If the information in this Relocation Assistance Voluntary Opt-out Notice for Non-residential Tenants is accurate, and you wish to decline the relocation assistance that is available to you, **please complete the attached Relocation Assistance Voluntary Opt-out Form for Non-residential Tenants and return it to your URA Case Manager** by email at [URA Case Manager’s Email] or contact your URA Case Manager to arrange delivery in person.

**If the information in this Notice is not accurate, please contact your URA Case Manager,** [URA Case Manager’s Name], at [URA Case Manager’s Telephone Number] or by email at [URA Case Manager’s Email]. Please keep this letter for your records.

Sincerely,

[URA point of contact Signature]

[URA point of contact name and title ]

[Name of Agency/Entity/Person]

**PUERTO RICO DEPARTMENT OF HOUSING**

**[CDBG-DR/MIT] PROGRAM**

**UNIFORM RELOCATION ACT (URA)**

**RELOCATION ASSISTANCE VOLUNTARY OPT-OUT FORM**

**FOR NON-RESIDENTIAL TENANTS**

Non-residential tenants who qualify to receive URA relocation assistance may choose to voluntarily decline the relocation assistance or benefits provided by URA. Non-residential tenants may opt out of their entitlements to URA assistance by signing a written statement certifying and acknowledging the assistance and payments they have voluntarily chosen not to accept. The statement must also clearly show that they have been informed of the assistance and payments they are entitled to receive. Once a non-residential tenant declares their intent to voluntarily decline their URA rights and the assistance offered, PRDOH will cease all communication with them concerning the assistance and/or payments being declined.

In consideration of this information, and as the displaced non-residential tenant of the property located at [Property Address], I, [Non-residential Tenant’s Name], acknowledge that I have received a General Information Notice of Relocation Assistance (**GIN**), and have been fully informed of the amount and type of relocation assistance that is available to me as a non-residential tenant protected by the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (**URA**), and Section 104(d) of the Housing and Community Development Act of 1974 (**HCDA**).

***If you are opting out of receiving the assistance offered to you, please complete the following section:***

I understand that I was offered the following assistance and protections and I choose to voluntarily opt out of receiving the following assistance (Please check all that apply):

☐  Applicant Advisory Services

☐  Relocation Advisory Services

☐  Comparable Replacement Dwellings

☐     Actual Cost

☐    Storage Expenses

☐    Moving Expenses

☐ Reestablishment Expenses

☐  Commercial space of last resort

☐     Fixed Payment

☐    Reimbursement of Eligible Expenses

Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**By signing this document, I acknowledge and affirm that I have received and understand all the information provided to me regarding URA, that I am voluntarily opting out of receiving URA relocation assistance offered to me as described above, and that this decision will not affect my eligibility for future assistance.**

***Please return this document to your URA Case Manager by email at [******URA Case Manager’s Email] or contact your URA Case Manager to arrange delivery in person.***

Executed this \_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_.

Signatures of Non-residential Tenant(s):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Non-residential Tenant’s Signature Non-residential Tenant’s Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Non-residential Tenant’s Name Printed Non-residential Tenant’s Name

1. See “Opt-out of Relocation Assistance” section of PRDOH’s Uniform Relocation Assistance Guide & Residential Anti-Displacement and Relocation Assistance Plan, which you may find at this link: <https://cdn.recuperacion.pr.gov/w3cacheitdg/wp-content/uploads/2022/12/URA_ADP-GUIDELINE-V.4-EN.pdf>. [↑](#footnote-ref-1)