



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
AND PUBLIC FACILITIES

**RECORD OF RELOCATION
CONTACTS**

PROJECT NAME: _____

STATE PROJECT #: _____

FEDERAL-AID PROJECT #: _____

PARCEL #: _____ UNIT #: _____

Name _____

Address _____

Telephone Number _____

Addresses of available comparable replacement housing offered:

- | | | |
|----------|----------|----------|
| 1) _____ | 2) _____ | 3) _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

RELOCATION CONTACTS

Include Parties Present; Items Discussed; Question Raised and Resolved; and Benefits Offered

AGENT/DATE	NARRATIVE