

RIGHT OF WAY PROFESSIONALS, INC.

PROJECT MANAGEMENT, ACQUISITION, RELOCATION & PROPERTY MANAGEMENT

November 10, 2020

VIA EMAIL

Scott Dunnum
City of La Crosse
400 La Crosse Street, 4th Floor
La Crosse, WI 54601

Re: Project ID: 5220-04-24, West Avenue (King Street and Badger Street)
City of La Crosse, La Crosse County
Parcel 4

Dear Mr. Dunnum:

Enclosed is a signed copy of the conveyance, Nominal Payment Parcel-Waiver of Appraisal form, Statement to Construction Engineer form and W9 form for Parcel 4 on the West Avenue project ID: 5220-04-24.

The amount of the offer was based on the approved Nominal Payment Parcel Report on 10-8-20. If you are in agreement, please return a check payable to the following individuals for the following amount:

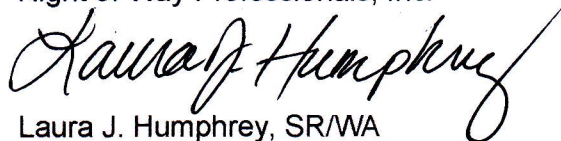
Parcel	Check Payable To	Amount of Payment
4	The Housing Authority of the City of La Crosse P.O. Box 1053 La Crosse, WI 54602	\$100.00

Please return the check, waiver of appraisal form & statement to construction engineer form to me:
Right of Way Professionals, Inc.
1030 Oak Ridge Drive, Suite E
Eau Claire, WI 54701

I will distribute the check to the owner, following receipt of the check, Nominal Payment Parcel Waiver of Appraisal form and Statement to Construction Engineer form.

If you have questions, please call me at (715) 830-0544, ext. 200. Thank you!

Sincerely,
Right of Way Professionals, Inc.


Laura J. Humphrey, SR/WA

Attachments

TEMPORARY LIMITED EASEMENT

Exempt from fee: s. 77.25(2r) Wis. Stats.
Exempt from filing transfer form [s. 77.21(1), 77.22(1) Wis. Stats.]
RE1577 03/2019

THIS EASEMENT, made by **The Housing Authority of the City of La Crosse**, GRANTOR, conveys a temporary limited easement as described below to the **City of La Crosse**, GRANTEE, for the sum of **One Hundred and 00/100 Dollars (\$100.00)** for the purpose of **Sloping**.

Any person named in this conveyance may make an appeal from the amount of compensation within six months after the date of recording of this conveyance as set forth in s. 32.05(2a) Wisconsin Statutes. For the purpose of any such appeal, the amount of compensation stated on the conveyance shall be treated as the award, and the date the conveyance is recorded shall be treated as the date of taking and the date of evaluation.

Other persons having an interest of record in the property:

LEGAL DESCRIPTION IS ATTACHED AND MADE A PART OF THIS DOCUMENT BY REFERENCE.

This space is reserved for recording data

Return to
City of La Crosse
c/o Right of Way Professionals, Inc.
Attn: Laura J. Humphrey
1030 Oak Ridge Drive, Suite E
Eau Claire, WI 54701

Parcel Identification Number/Tax Key Number
17-20131-10

The Housing Authority of the City of La Crosse

SS 11/5/2020
Signature Date
STEVE SCHAUK, EXECUTIVE DIRECTOR
Print Name

11/5/2020
Date
State of Wisconsin)
)
) SS.
La Crosse County)

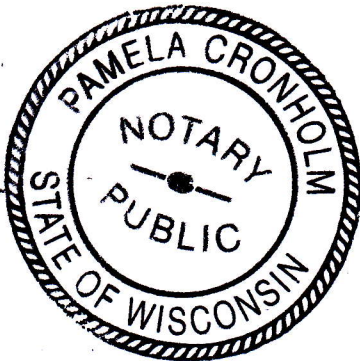
On the above date, this instrument was acknowledged before me by the named person(s).

The signer was: ☒ Physically in my presence. OR
☐ In my presence involving the use of communication technology.

Pamela Cronholm
Signature, Notary Public, State of Wisconsin

Pamela Cronholm
Print or Type Name, Notary Public, State of Wisconsin

8/6/2023
Date Commission Expires



Project ID
5220-04-24

This instrument was drafted by
Laura J. Humphrey, SR/WA for
Right of Way Professionals, Inc.

Parcel No.
4

LEGAL DESCRIPTION

Temporary Limited Easement for the right to construct side slopes, including for such purpose the right to operate the necessary equipment thereon and the right of ingress and egress as long as required for such public purpose, including the right to preserve, protect, remove, or plant thereon any vegetation that the highway authorities may deem necessary or desirable, in and to the following tract of land in La Crosse County, State of Wisconsin, described as follows:

That part of the Northwest 1/4 of the Southeast 1/4 of Section 32, Town 16 North, Range 7 West, in the City of La Crosse, La Crosse County, described as follows:

Commencing at the Southwest corner of the Southeast 1/4 of said section; thence along the West line of said 1/4 section North 02°16'23" West 1599.96 feet to a point; thence South 85°48'34" East 81.59 feet to a point on the Easterly line of West Avenue South and the point of beginning of lands to be described; thence North 52°32'34" East along said Easterly line 14.71 feet to a point on the South line of Badger Street; thence North 89°45'14" East along said South line 8.27 feet to a point; thence South 52°32'34" West 25.14 feet to a point on the Easterly line of West Avenue South; thence North 00°06'22" East along said Easterly line 6.31 feet to the point of beginning.

This parcel contains 0.002 Acres, more or less.

The above Temporary Limited Easement is to terminate upon the completion of this project or on the day the highway is open to the traveling public, whichever is later.

NOMINAL PAYMENT PARCEL - WAIVER OF APPRAISAL RECOMMENDATION AND APPROVAL

RE1897 10/2018 Ch. 32 Wis. Stats.

Owner name(s) The Housing Authority of the City of La Crosse	Area and interest required 0.002 acres of Temporary Limited Easement (TLE)
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Allocation

Allocation	Description	Size	Unit	Per Unit	Value (\$)
Temporary Limited Easement (TLE)	0.002 acres x \$435,600/acre x .00546 x 18 months	0.002	Acres	\$43,000.00	\$86.00

Total Allocation \$86.00
Rounded To \$100.00

The undersigned owner(s), having been fully informed of the right to have the property appraised, and to receive just compensation based upon an appraisal, have decided to waive the right to an appraisal and agree to accept settlement in the above-stated amount as full payment for the parcel stated, subject to approval by City of La Crosse.

The undersigned owner(s) further state that the decision to waive the right of an appraisal was made without undue influences or coercive action of any nature.

It is intended that the instrument of conveyance will be executed upon presentation by City of La Crosse agents or representatives.

The Housing Authority of the City of La Crosse

X SA SE 11/5/2020
Owner Signature Date
EXECUTIVE DIRECTOR

X _____
Owner Signature Date

Approved for City of La Crosse

For Office Use Only

City of La Crosse Signature

Date



Q J 8 3 0 3 5 7

This instrument was drafted by
Laura J. Humphrey, SR/WA
Right of Way Professionals, Inc.

Project ID
5220-04-24

Parcel No
4

STATEMENT TO CONSTRUCTION ENGINEER

RE1528 10/2018 s. 84.09 Wis. Stats.

Copies to: project engineer and owner

Owner Name(s) The Housing Authority of the City of La Crosse	Property Address 1230 Badger Street La Crosse, WI 54601 Mailing Address PO Box 1053, La Crosse, WI 54602	Area code - phone Home: Cell: Work: 608-782-2264 Ext 228
Tenant, if any	Property Address 1230 Badger Street La Crosse, WI 54601 Mailing Address	Area code - phone Home: Cell: Work:

- All commitments agreed upon between negotiator and property owner are listed below.
- All commitments are subject to approval of City of La Crosse.
- Basic concepts of construction project have been explained to owner.
- No other commitments, either verbal or implied, are valid.

Commitments made (fences, driveways, trees, drainage or other items):

- NONE IRRIGATION IN THAT AREA.

Other matters of interest and owner concerns:

- NONE

	EXECUTIVE DIRECTOR 11/5/2020		11/10/20
Property Owner Signature	Date	Negotiator Signature	Date
Property Owner Signature	Date	Laura J. Humphrey	Print Negotiator Name

Commitments Approved:

Approving Authority Signature and Title

Date

Print Approving Authority Name



Q J 8 3 0 3 7 1

Project ID
5220-04-24

County
La Crosse

Parcel No.
4

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. The Housing Authority of the City of LaCrosse	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ►	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
	5 Address (number, street, and apt. or suite no.) See instructions. 1307 Backer St. PO Box 1053	Requester's name and address (optional) City of La Crosse, Parcel 4 • \$100.00
	6 City, state, and ZIP code La Crosse WI 54602	Project ID: 5220-04-24 La Crosse County
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number	
or	
Employer identification number	
39	6006967

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ► SL	Date ► 11/5/2020
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.