CHECK REQUEST Week of 04/1/2021

Project 1641-02-22 City of La Crosse, South Avenue USH 14- Green Bay St to Ward Ave La Crosse County, La Crosse, WI

PAYMENTS ARE TO BE SENT DIRECTLY TO PAYEE

Parcel	Amount	Payable to	Conveyance
31-234	\$10,707	Christine Greeno	Residential
		1202 11 th St. So.	Housing Payment
		La Crosse, WI 54601	
	1		
Total	\$10,707		
	+		

	4			
Submitted by	Maria Krueger	Date	03/26/2021	



CITY OF LA CROSSE ENGINEERING DEPARTMENT 400 LA CROSSE ST LA CROSSE, WI 54601-3396 PHONE: 608-789-7505

FAX: 608-789-8184

March 17, 2021

Project: 1641-02-22 Parcel: 31-234 County: La Crosse

RE: Tenant RHP Replacement Residential Claim (Second Installment)

Dear Ms. Johnsrud:

The following relocation claim for parcel 31-234 is enclosed and recommended for review and approval:

Parcel	Claim	Payable to	Amount
31-234	RHP-Tenant Tenant	Christine Greeno	\$10,707.00

Ms. Greeno entered into a one-year lease agreement with Kathy Miller starting July 30, 2020. The monthly rental amount for the replacement is \$790 plus \$93 a month for heat and electricity for a total of \$883 base monthly rent. As of January 31, 2021, Ms. Greeno have been at the replacement property for 6 months. The lease is enclosed for claim support.

The actual differential eligibility for Ms. Greeno for a replacement housing payment is \$18,707. September 9, 2020 a claim for the first installment of the RHP was approved in the amount of \$8,000. I verified that Ms. Greeno is still living at the replacement site and is therefore eligible for the remainder of the differential in the amount of \$10,707.

Therefore, I recommend approval of the second installment of \$10,707 for the Replacement Housing Payment. In addition to the approved Replacement Housing Payment Computation, attached is confirmation of payment for January and February rent.

Please contact me at 715/421-9049 if you have any questions.

Thank you

Maria "Izzy" Krueger Maria "Izzy" Krueger WisDOT Statewide Relocation Specialist

Attachments

RELOCATION CLAIM - APPLICATION AND RELEASE RE1527 08/2018

Wisconsin Department of Transportation

Claimant Name (print)			mitted to WisDOT
Christine Greeno Replacement Property Address		February 2 Relocation Ager	
1202 11th St. So, La Crosse WI 546	01	Maria Kruege	
Subject Property Address 2350 South Ave, La Crosse WI 54602		Actual Vacate D 07/31/2020	
The relocation program is a reimbursem necessary to receive reimbursement. A Documentation of payment and work co	Il applicable federal an	d state statutory and administ	OOT as actual, reasonable and rative code provisions apply.
	vner occupant (subject) nant occupant (subject) ndlord (subject)	Replacement - Purchase Replacement - Rental	Move Only – no displaced persons
In the event of a condemnation case, the payment. An advance payment shall be condemnation proceedings. An agency's payment shall be contingent on a person	e Agency shall promptly e made when an agend offer shall be used as th signing an affidavit of inte	cy determines the acquisition per e initial acquisition price in calcu- ent that:	alating the replacement payment. The
(a) the agency shall re-compute the through condemnation proceedings;	replacement payment us	ing the acquisition amount, as fi	nal negotiated and/or set by the court
(b) the person shall refund the excess	d for a replacement or th	e anency's determined cost of a	Comparable replacement a person is
not required to refund more than the completed when a person does not s	ne advance payment. It ign an affidavit.	ne payment shall be made afte	r the condemnation proceedings are
not required to refund more than the	ne advance payment. If ign an affidavit. CERT tis true and correct and the light of the light o	THE PAYMENT SHALL BE MADE ALE IFICATION that the damages described hereing the submitted any other claim for or expt the amounts as payment in full or commission acting in its behall.	n exist and I (we) have incurred these received payment of any compensation I for the items claimed, and release the
I (We) certify that the foregoing statement costs in the amount shown after each item. for the benefit claimed herein as shown at Wisconsin Department of Transportation a arising through this project, for the listed item.	ign an affidavit. CERT t is true and correct and t I (We) certify that I have note. I (We) agree to account any public body, boarders for which an amount	ne payment shall be made alter in payment shall be made alter in the damages described here of submitted any other claim for or spt the amounts as payment in full d or commission acting in its behall is claimed.	n exist and I (we) have incurred these received payment of any compensation I for the items claimed, and release the
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I (We) certify that the foregoing statement costs in the amount shown after each item. for the benefit claimed herein as shown at Wisconsin Department of Transportation a arising through this project, for the listed item. Claiment signature CHRISTINE S. GREE WisDOT Use Only Appropriate supporting documentation in Agent indicate items attached: BTS returned for additional explanation/d	cluded:	IFICATION that the damages described here of submitted any other claim for or opt the amounts as payment in ful d or commission acting in its beha is claimed. X Claimant Signature Print Name	n exist and I (we) have incurred these received payment of any compensation I for the items claimed, and release the If, from any and all claims for damages Date pplicable provisions of state and
I (We) certify that the foregoing statement costs in the amount shown after each item. for the benefit claimed herein as shown at Wisconsin Department of Transportation a arising through this project, for the listed it Claimant Signature WisDOT Use Only Appropriate supporting documentation in Agent indicate items attached: BTS returned for additional explanation/d I certify to the best of my knowledge the federal laws.	cluded: ocumentation, date: amount of the approved	ine payment shall be made altered the payment shall be made altered the payment and the claim for or the payment and the amounts as payment in full dor commission acting in its behalf is claimed. X	n exist and I (we) have incurred these received payment of any compensation I for the items claimed, and release the If, from any and all claims for damages Date pplicable provisions of state and

Items Claimed	Reference	Amount Claimed	Amount Approved
Residential			
Moving expenses – Actual	Adm 92.54(1); Wis. Stat. 24.301(b)	\$	\$
Moving expenses – Fixed Payment, Room Schedule	Adm 92.54(2);	\$	\$
	Wis. Stat. 24.302 Wis. Stats. 32.195 & 24.106	-13-12-1-	
The property deliberation	Wis. Stat. 32.195 (1)	\$	\$
a. Recording fees, transfer taxes, and similar conveyances		\$	\$
b. Mortgage prepayment penalty cost	Wis. Stat. 32.195(2) Wis. Stat. 32.195(3)	\$	\$
c. Real estate taxes allocated vesting date	Wis. Stat. 32.195(4)	\$	\$
d. Personal property realignment	Wis. Stat. 32.195(5)	\$	\$
e. Plans/specifications unusable from subject property	Wis. Stat. 32.195(6)	\$	\$
f. Reasonable net rental losses	Wis. Stat. 32.195(7)	\$	\$
g. Fencing cost	Wis. Stat. 32.19(3)(d);		
Replacement Housing Payment	Adm 92.70-92.88; ss.24.401(b)&(d) & 24.402(b)&(c)	\$ 10,707.	\$10,707.00
Mortgage Interest Differential Payment	Adm 92.70(5); Wis. Stat. 24.401(d)		THE REPORT OF
Incidental expenses – Closing Costs and Related Expenses	Adm 92.70(6); Wis, Stat. 24.401(e)	\$	\$
Non-Residential	VVIS. Stat. 24.401(c)		
Moving expenses – Actual	Adm 92.56 & 92.60 & 92.62 Wis. Stats. 24.301(d) & 24.303	\$	\$
	Adm 92.67; Wis. Stat. 24.304(b)	\$	\$
	Adm 92.58; Wis. Stat. 24.305	\$	\$
Fixed Payment In Lieu of Actual Moving Expenses Expenses incidental to property transfer	Wis. Stats. 32.195 & 24.106	Constitution of the last	
	Wis. Stat. 32.195(1)	\$	\$
Recording fees, transfer taxes, and similar conveyances Penalty costs for mortgage prepayment	Wis. Stat. 32.195(2)	\$	\$
The state of continu	Wis. Stat. 32.195(3)	\$	\$
d. Realignment of personal property	Wis, Stat. 32.195(4)	\$	\$
e. Plans/specifications unusable from subject property	Wis. Stat. 32.195(5)	\$	\$
f. Reasonable net rental losses	Wis. Stat. 32.195(6)	\$	\$
	Wis. Stat. 32.195(7)	\$	\$
g. Cost of fencing 1. Business Replacement Payment			
a. Tenant to Tenant – rent differential payment (48 months)	Wis. Stat. 32.19(4m)(b)(1);	\$	\$
b. Tenant to Tenant – reasonable project costs, (actual,	Adm 92.96 Wis. Stat. 32.19(4m)(b)(1)	\$	\$
c. Tenant to Owner – conversion of rent differential to down	Wis. Stat. 32.19(4m)(b)(2); Adm 92.98	\$	\$
d. Owner to Owner – includes purchase differential, increased interest, closing costs, and reasonable project	Wis. Stat. 32.19(4m)(a); Adm 92.92	\$	\$
e. Owner to Tenant – includes rent differential payment (calculated using economic rent)	Wis. Stat32.19(4m)(a); Adm 92.94	\$	\$
f. Owner to Tenant – reasonable project costs where applicable	Wis. Stat. 32.19(4m)(a)	\$	\$
Move Only Payment – No displaced persons			
ersonal Property Move Only Payment Schedule (Self Move)	Adm 92.52, Wis. Stat. 24.301(e		\$
ctual Move (includes Outdoor Advertisement Sign Move)	Adm 92.64	\$ 10,707.	\$

REPLACEMENT HOUSING PAYMENT - TENANT

Wisconsin Department of Transportation

Parcel: 31-234

Computation Form RE1948 10/2019

ddress 2350 Sout ubject PropUnit T partment Building ype of Construction rame tilities Available /ater/Trash	ype-SF, Duplex, et				1	
partment Building ype of Construction rame tilities Available	58	c.		Apartment Number	Habitable Are	a Required
ype of Construction rame tilities Available			Approximate Age			Habitable
rame tilities Available		DSS	20+/- Type of Neighborh	Good	Area 700 Number of Rooms	
		Mixed		3		
			Furnished/Unfurnis Unfurnished	shed	Number of Be	drooms
	le Comparable H	ousing - Computations are mad		A listed below		
Comparable Property	Habitable Area Sq Ft		dress or ocation	Actual Rent	Est. Avg. Utilities	Monthly Rent
A 70	00	1425 8th St S. Unit 6. La Crosse, W	T 54601	\$795 +	\$125 =	\$920
В 75	50	1425 8th St S. Unit 2. La Crosse, W	1 54601	\$795 +	\$125 =	\$920
C 90	00	3800 Cliffside Pl, La Crosse, WI 54	4601	\$769 +	\$110 =	\$879
ection B – Replac	ement Housing P	ayment Calculation				
New Monthly R	ent (from Section	A) <u>\$920</u> _per mo	onth X 48 months		\$44,160	
Less Base Mon	thly Rent (Comple	te all applicable items. If not app	olicable, specifyN/A)			
	nt Paid (Average o		\$475			
	verage of last 12 m		+ \$40			
		•		= \$515		
		OR				
b. Economic	Rent		_\$0			
Utilities (A	verage of last 12 m	nonths)	+ \$0			
·	_	·	9	= \$493.26		
Thirty (30) perc	ent of Gross Mont	hly Income (See note.)				
c. Amounts of	lesionated for She	Iter & Utilities by Public Agency	si i	S		
	Rent – Lesser of (a		\$493.26per mont	h x 48 months) =	\$23,677	
		Payment (New Monthly Rent mir		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$20,483	
y the U.S. Departmental Replacemen	ent of Housing and at Payment	ed person's average monthly gro d Urban Development's Annual S	oss household income, if the h Survey of Income Limits for th Amount of first installn	e Public Housing and	lassified as "low Section 8 progr \$ 8,000	rincome [®] ams
ne rental replacemi stallments.	ent nousing payme	ent shall be made in two	Amount of second inst		\$12,483	
ttachments			, and and or second man			
Residential Compa	rison Chart					
		ties from source of information				

Project: USH 14

County: La Crosse

Project ID: 1641-02-22

RENTAL AGREEMENT



PARTIES	TENANT(S)C	hristine 1	Greeno			·	
	LANDI ORD Name	Kathu (niller	70	7-0971		
57	LANDLORD Name: Kathy Miller 797-8871 Address: 1740 Lafond Ave La Crosse 54603						
	Landlord's Agent for a	aintenance, management	service of proce				note than one agent)
\$	Landlord's Agent for maintenance, management, service of process and collection of rent ~ (Note in "Special Conditions" if more than one agent Name:						
	Address: 16	2 Johnso	n_5t				
PREMISES	PREMISES Street Address: 1202 South 11" St.						
	City/State/Zip:	La Crosse	- WL	5460	۶L •		
TERM	Aparment/Unit/No:		RENTAL	TERM: 12 N	Aonths .	1000	
	First Day of Term:	July 30", 2	2020	Last Day of	Term:July _	30 202	
	This agreement is only for	or the stated term and it N	OT watermarker ITO	and the second	Landlord and Tenant must coment is automatically n		
	UTILITIES To	nant must pay all utility o	harges that are se	parately mete	red or subject to cost alloc	ation, as follows:	
	Utility Charges Included in Rent	Electric Heat	Water Bill	Unk Gas	Air Conditioning	Hot Water	Trush/Recycling
	Separately Metered	1	/ *				City
	Cost Allocation*			*See Special (· · · · · · · · · · · · · · · · · · ·
RENT SECURITY DEPOSIT	Rent cheeks shall be made ONE). ALL TENANTS PAYMENTS DUE UND Upon execution of this At	Figure 16 (Landlord) () IF MORE THAN ONI OUR THIS AGREEMEN Recement, Tenant agrees the	o pay a security	DINTLY AND	NET and mailed or deliver D SEVERALLY LIABLE SIMOUNT OF S 850°	E FOR THE FULI	andlord's Agent) (STRIK AMOUNT OF ALL land lord
	after Tenant surrenders the provided in this Rental Ag Premises and return, or no	reement subject to the e	reantions desemb	ad in Min A	salet new address. Surre	ider shall occur on i	he last day of the term Tenant shall vacate the
CHECK-IN REPORT	Tenant acknowledges rece rental term.	cipt of Landlord's check-	in report which is	nant agrees to	complete and return to La	andlord within 7 day	rs of the first day of the
SPECIAL CONDITIONS	Special Conditions:						
6.	Keys will	be given	out on if signe	the 29	7th in excha rantee from	ruge for	
Attachments checke	ed below are attached to this I	Rental Agreement and inc	Corporated herein	by reference.	1/2 (A)		
	Atlach	ment	✓ Che	ck	Attachmen		/ Check
Quarantes	Renewal/Assignment/Suble	ase		Nons	tandard Rental Provisions		Check
Lead-Bas	ed Paint Disclosure & Pamph	lei	1	Wasi	er/Dryer Agreement		
Drug Free	Housing Addendum		-		ddendum		
Motor Ve	hicle Policy/Parking Agreem			Other		54	-
IN WITNESS WHE	REOF, the parties have exec	uted this Rental Agreeme	nt on this	2 day	or July	-3*	20 20
LANDLORD	homas JM	ller		ENANT(S)	Christine	A. Gr	
	- 0.00						

NOTICE: You may obtain information about the sex offender registry and persons registered with the registry by contacting the Wisconsin Department of Corrections on the Internet at http://www/widocoffenders.org or by phone at 877/234-0085

Copyright 1998 by Wisconsin Resistored Association
Drafted by: Attempty Debta Peterson Contact
No representation is made to the legal validity of any provision of the adequacy of any provision in any specific transaction

To whom it may concern,

I Thomas Miller (manager for owner Kathy Miller) have received monthly rent payments in full from tenant Christine Greeno, specifically;

Money orders from Kwik Trip

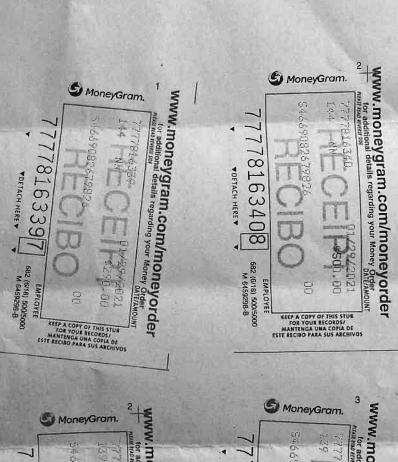
Received for Jan. 2021 #77778161912 \$500.00 #77778161912 \$290.00

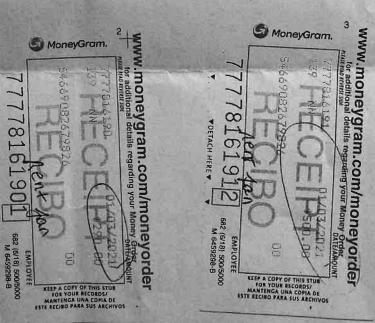
Received for Feb. 2021 #77778161901 \$500.00 #77778163397 \$290.00

Sold property Bar/duplex on Adams St. in Feb. 2021 – Contact new owner for any payment after February 2021. If you have any further questions I can be contacted using the following information.

Sincerely,

Thomas J. Miller 1612 Johnson St.. La Crosse, WI 54601 Cell: 608 792-5621 Signed: Thomas J Miller





▼DETACH HERE ▼