

**ANTI DISPLACEMENTS RELOCATION PLAN FOR
TENANTS RELOCATION DURING REHABILITATION
MANNING GARDENS APARTMENTS
214 ALFRED HENRY STREET
MANNING, SC 29102
MAY 12, 2026**

Orbach Affordable Housing Solutions LLC (“OAHS” or “Developer”), established in 2009, is an organization of highly experienced real estate professionals specializing in affordable housing, with the knowledge, skill, and expertise to utilize the industry’s financing and tax credit syndication programs to generate and achieve maximum returns to fund significant project renovations for the various assets it has acquired and developed. With more than a decade of experience in successful acquisitions, rehabilitation renovations, management services, development planning and construction programs, OAHS currently operates a portfolio of over 6,300 residential multifamily units, Orbach is applying for financing to re-syndicate and renovate an affordable family housing complex.

Project Description

Manning Gardens is a 50 unit apartment community located Manning, SC (the “Project”). The apartment complex was built in 1978 and encompasses a community space and site amenities including 78 parking spaces, and a Management office with community space. The unit mix is as follows:

Units	# Units	Rentable Area (SF)
1 bedroom / 1 bathroom	16	540
2 bedroom / 1 bathroom	20	800
3 bedroom / 1.5 bathroom	8	1050
4 bedroom / 2 bathroom	6	1150

OAHS intends to renovate all 50 units between October 2026 and September 2027. The renovations will include:

- New kitchen cabinets, countertops, microwaves, disposals, and appliances
- New bath vanities, medicine cabinets, toilets, tub reglazing and new tub surrounds.
- New kitchen and bathroom sink and faucets
- New vinyl plank flooring throughout
- Exterior and interior paint, and drywall repairs
- Electrical upgrades as needed

Due to the rehabilitation work, temporary relocation is going to be required. This Relocation Plan was prepared in accordance with the requirements of the Federal Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (URA).

Temporary relocation is defined as displacement of 12 months or less.

The scope of rehabilitation work and the concern for each tenant's health, safety, and welfare, will require residents to temporarily vacate their units. It is anticipated that most of the rehabilitation work will be completed with residents relocating out of their units to nearby hotel or rental units for a period of 18 days, and ADA units will be temporarily relocated for 45 days. The nearby hotels / rental units will be located within ten miles from the Project in the Manning area. ADA needs will be met by placing residents into hotel rooms that meet ADA requirements. OAHS will hire professional movers to pack and unpack tenant belongings. The moving company will assist tenants with their move to the nearby hotels / rental units and provide secure storage for the remainder of tenant belongings.

Construction phasing is planned to minimize the time that residents are away from their homes. No permanent displacement will be required for the improvements made to the interiors, exterior, or common areas.

The primary role of the OAHS staff is to assess the needs of residents prior to the start of renovations and assist them in all aspects of the temporary relocation necessitated by the renovations. The well-being of the residents is our highest priority, and we pledge to provide them with guidance, moving assistance, and regular communications.

Throughout the process the primary point of contact for the residents will be:

Cameka Matchett

Lead Relocation Coordinator

Orbach Affordable Management

Cell: 645-229-4763

Email: Leadrelocationcoord@oahsaffordable.com

PROJECT CHARACTERISTICS AND NEEDS

For the purposes of this Plan's initial preparation, on-site interviews will be conducted. Interviews will be conducted prior to the commencement of construction. We anticipate the interviews to commence in September 2026. Follow-up interviews with all project households will be conducted prior to the issuance of relocation notices of eligibility.

The interviews will consist of gathering information on all household occupants including demographic information (age, sex, and lawful presence), income and employment information, housing unit information (number of rooms to be moved and condition of unit), rent and utility information, and criteria for replacement or temporary housing (location, amenities, and special facilities/features).

The presence of residents with disabilities will be considered prior to the commencement of construction to the extent it may affect the physical move. The Developer pledges to provide special care for households requiring additional assistance due to potential disabilities.

The ethnic distribution in the Project is unknown at this time and will be verified at the time of personal surveys with Project households, as will be primary household language and possible disabilities affecting the relocation process.

The standard housing density utilized is two persons per bedroom and one person in a common living area for resident occupied units although this can be adjusted to include two persons in the common living area. There are no households requiring larger units based on this occupancy standard.

Relocation activities will consider individual household needs to be close to public transportation, employment, public/social services and agencies, recreational services, parks, community centers, and shopping.

Relocation assistance information and counseling will be provided in the primary language of the displaced occupants, to ensure that all temporarily displaced occupants obtain a complete understanding of the relocation program and eligible benefits.

HOUSING RESOURCES

All typical residents will be temporarily relocated to a nearby hotel / rental units for 18 days while their units are being renovated, ADA units will require a 45 day temporary relocation. Arrangements for residents will be addressed utilizing available nearby hotels/ rental units within a ten-mile radius.

A survey will be conducted during the month of September 2026, and monthly thereafter, to determine the availability of nearby rental apartments within a ten-mile radius from the Project to satisfy the temporary housing needs of the residents.

RELOCATION PROGRAM

The Developer's planned rehabilitation and scope of work will require all households to temporarily relocate. A market survey was conducted to identify available nearby hotels / rental units within a ten-mile radius.

Transportation will be coordinated by staff for residents (as needed) to/from the temporary accommodations. The residents will bring clothing, personal items, toiletries, etc. for their stay. Should the temporary units not include cooking facilities the residents will be provided with a daily food stipend for each person in the household that was relocated.

At any given time during the phased relocation activities, multiple temporary units will be required. The Developer plans to negotiate the rental of all units needed over the rehabilitation period with the owner(s) of the nearby rental units, where residents can be rotated in and out of the rented apartments at the same facility(ies) on an as-needed basis.

All residents to be temporarily relocated will continue to pay their rent and utilities to the Project owner for their current units, and the Developer will pay the full housing cost of the temporary nearby rental units. After rehabilitation has been completed, qualified residents will move back to their original units.

As an alternative to staying in a nearby rental apartment, the Developer may offer a stipend to households that are required to temporarily vacate their units if they instead choose to stay with friends or family for the duration of the relocation period.

All temporary housing will be inspected to ensure it is decent, safe and sanitary and meets the needs of the residents regarding mobility challenges. Additionally, if residents receive services or are normally transported to off-site facilities during the days they will be in temporary housing, arrangements will be made to continue the services or to transport the residents to and from the temporary housing to such off-site facilities.

The Developer understands that if the residents are required to be out of a Project unit for more than one year, permanent relocation benefits must be offered to them under federal and state relocation regulations with no reduction for temporary relocation benefits previously paid. Rehab activities are anticipated to be completed within twelve (12) months.

PROGRAM ASSURANCES AND STANDARDS

The Developer has budgeted adequate funds to temporarily relocate all households. Services will be provided to ensure that displacement does not result in different, or separate treatment of households based on race, nationality, color, religion, national origin, sex, marital status, familial status, disability, or any other basis protected by the Federal Fair Housing Amendments Act, the Americans with Disabilities Act, Title VI of The Civil Rights Act of 1964, Title VII of The Civil Rights Act of 1964, and Title VIII of The Civil Rights Act of 1968.

Prior to temporary relocation, households will receive the following information:

- General Information Notice (GIN) - Each resident will be issued a written Notice of Non-Displacement in September 2026 notifying them that OAHS is applying for financing to renovate the Project. This notice advises the residents that if financing is approved, they are eligible to remain at the Project but that their homes will be undergoing renovations and that they may need to be relocated temporarily. (See exhibit 1 for sample notices). Management will be available to answer questions and to assure residents that no one will be permanently displaced.
- At least 90 days prior to the start of renovations, the residents will receive a Notice of Temporary Relocation Assistance that will detail the temporary housing, move dates, times, expectations, packing instructions, and assistance to be provided.
- 30 days before any temporary relocation, residents will receive a reminder notice that will summarize the information contained in the 90-day notice.
- Finally, two – three days prior to the temporary relocation, the relocation manager will call each household to ensure that they are properly packed and ready for the renovation of their units.

The relocation manager will deliver all written notices to each household in the preferred language of the head of household. Each household will receive a copy of the notice, and a second copy will be placed in the resident's file. A log will be maintained tracking all relocation related activities for each household. The relocation manager will disseminate quarterly resident updates from the time of

the issuance of the GIN to help maintain transparency for the duration of construction.

The relocation program to be implemented by the Developer conforms to the standards and provisions set forth in URA, Government Code section 7260 et seq., if applicable, and all other applicable regulations and requirements.

RELOCATION ASSISTANCE PROGRAM

A representative from OAHS will assist the residents to be temporarily relocated as a consequence of the Project. OAHS staff will maintain personal contact with them until the relocation process has been completed. OAHS staff can be reached at (201) 242-4800, which is attended to from 8:00 a.m. to 5:00 p.m., Monday through Friday.

As a function of the overall relocation assistance program, technical and advisory assistance will be provided to all residents by the Developer. The following services and tasks will be undertaken:

1. Each relocated household will be personally interviewed to gather appropriate information to determine needs and preferences with regard to the replacement of existing accommodations. Inquiries made of residential occupants by relocation personnel will cover the following areas: family size, ethnic background, immigration status, age and health considerations, current employment status, family income, transportation needs, and preferences relative to replacement housing.
2. The relocation manager will explain the relocation payments and other assistance for which households and individuals may be eligible, as well as the eligibility requirements and the procedures for obtaining such assistance.
3. Assistance will be provided to complete appropriate forms and coordinate moving arrangements. Residents will be kept informed of Project timing and will receive appropriate notice to prepare for required moves. Claims for expenses associated with the move will be processed promptly and efficiently.
4. Special assistance in the form of referrals to governmental and social service agencies will be made, as appropriate.
5. Bilingual assistance will be provided, as needed.
6. Informational brochures will be distributed to the residents.

RELOCATION BENEFIT CATEGORIES - TEMPORARY

Eligibility requirements and benefit plans will be discussed with all temporarily displaced residents. In the course of personal interviews and follow-up visits, each displaced resident will be counseled as to available options and the consequences of any choice with respect to housing choices and potential financial assistance.

The relocation process includes: household interviews, needs analyses, appropriate replacement housing referrals, preparation and service of appropriate notices, file documentation, eligibility determinations, processing of claims, moving coordination, and other general services intended to assist relocated residents.

Temporarily relocated residents will be entitled to compensation for all reasonable out-of-pocket expenses incurred in connection with the temporary relocation including, but not limited to, the cost of moving to and from the temporary location, storage or security for personal property left at the Project, any temporary costs for utilities (such as phone service) to replicate the living arrangements of households at their Project units, and reasonable food allowance for the duration of displacement if cooking facilities are unavailable at the nearby rental apartments.

The Developer will make arrangements for lodging, meals and transportation, and will ensure that the residents have no out-of-pocket expenses resulting from the temporary relocation.

Regardless of the lodging option chosen by the residents, the Developer will provide transportation to/from the temporary unit, if needed, and will also provide secure storage of their personal property left behind.

No permanent displacements are expected by this project. The intent is for all relocation associated with this project to be temporary relocation. The Project is subject to Uniform Relocation Act ("URA") requirements given it is assisted by a HAP Contract. In the unlikely event that permanent relocation becomes necessary for an over-income household, we will comply with all URA laws and regulatory requirements pertaining to permanent relocation as applicable to the Project.

PAYMENT OF CLAIMS

Relocation benefit payments will be made promptly. Claims and supporting documentation for relocation benefits must be filed with the Developer within 18 months from:

Payments for legitimate claims will be made within 60 days of validation of such claim.

RELOCATION TAX CONSEQUENCES

In general, relocation payments are not considered income for the purpose of Division 2 of the Internal Revenue Code of 1954, which has been re-designated as the Internal Revenue Code of 1986 (Title 26, U. S. Code), or for the purpose of determining the eligibility or the extent of eligibility of any person for assistance under the Social Security Act (42 U. S. Code 301 et seq.) or the Personal Income Tax Law, Part 10 (commencing with Section 17001) of the Revenue and Taxation Code, or the Bank and Corporation Tax Law, Part II (commencing with Section 23001) of Division 2 of the Revenue and Taxation Code. The above statement on tax consequences is not intended as tax advice by the Developer. Relocated residents are responsible for consulting with their own tax advisors concerning the tax consequences of relocation payments.

GRIEVANCE PROCEDURES

Residents will have the right to ask for review when there is a perceived grievance regarding any of their rights to relocation and relocation assistance, such as a determination as to eligibility, the amount of payment, or the failure to provide a comparable replacement housing referral.

Within 60 days of the date of relocation or receipt of written determinations on a claim and final compensation (whichever is later), any aggrieved person may file a written appeal with the Agency in any case in which the person believes that the Agency has failed to properly consider the person's application for assistance under the URA. Such assistance may include, but is not limited to, the person's eligibility for, or a relocation payment required under the URA. The Agency shall consider a written appeal regardless of form. (49 CFR 24.10 (b)). A person has a right to legal counsel or other representation, but solely at the person's own expense. The person making the appeal or their authorized representative must be allowed to inspect and copy all pertinent material, except that which is classified as confidential by the Agency. The Agency shall promptly review appeals in accordance with the requirements of applicable law and the URA. (49 CFR Sec. 24.10 (a)) The Agency shall consider all pertinent justifications and materials submitted to ensure a fair and full review of the appeal. The Agency shall make a prompt written determination to the aggrieved person, including an explanation of the basis on which the decision was made. If full relief is not granted, the person must be informed of their right to seek a judicial review of the determination.

EVICITION POLICY

Eviction for cause must conform to applicable state and local law. Any person, who occupies the real property and is in lawful occupancy on the date of the initiation of negotiations, is presumed to be entitled to relocation payments and other assistance, unless the Developer determines that:

1. The person received an eviction notice prior to the initiation of negotiations and as a result of that notice is later evicted, or
2. The person is evicted after the initiation of negotiations for serious or repeated violation of material term(s) of the lease or occupancy agreement,

In either case, the Developer shall not initiate an eviction for the purpose of evading the obligation to make available the payments or other assistance to which a person may otherwise be entitled.

PROJECTED DATES OF RELOCATION

It is anticipated that notices of relocation will not be issued until at least October 2026 with rehabilitation work scheduled to commence in March 2027.

CITIZEN PARTICIPATION

The Developer will fully meet its obligations under the Relocation Guidelines with respect to the following activities:

1. Full and timely access to documents relevant to the relocation program;
2. Provision of technical assistance necessary to interpret elements of the Relocation Plan and other pertinent materials;
3. Distribution of a general notice concerning the availability of this Plan for public review, as required, 30 days prior to its proposed adoption. Notice to recipients will include affected Project residents and all other interested parties;
4. The opportunity to submit written or oral comments concerning the Plan and to have these comments attached to the Plan when it is forwarded to the PA Regional HUD Office.
5. Final review of the Plan to ensure its feasibility, compliance with applicable environmental standards and compatibility with the relocation guidelines.

ESTIMATED RELOCATION COSTS

The Developer will provide assistance during the temporary relocation period to help mitigate any financial hardship impacting the residents.

If circumstances arise that change either the number of residents that will need to be permanently or temporarily relocated, or the type of their tenancy, the Developer will authorize additional funds that may be needed. The Developer pledges to secure the funds necessary to ensure the successful completion of the Project, including funds necessary for last resort housing to meet its obligation under the relocation regulations.

Appendix A FORMS

Site Occupant Record - Residential	
LOCALITY/AGENCY Date of Initial Interview: _____ Interviewer: _____	Project Name: _____ Project #: _____ Relocation Case #: _____ Acquisition Parcel #: _____
NAME OF OCCUPANT _____ ADDRESS _____ TELEPHONE NUMBER _____ CENSUS TRACT _____	CHECK: ☐ FAMILY ☐ INDIVIDUAL ☐ OWNER ☐ TENANT
IS THIS ADDRESS LOCATED IN A HUD DESIGNATED RENEWAL COMMUNITY OR EMPOWERMENT ZONE? ☐ YES ☐ NO DATE OCCUPANT FIRST OCCUPIED THIS DWELLING _____	DATE OF GENERAL INFORMATION NOTICE _____ EFFECTIVE DATE OF NOTICE OF ELIGIBILITY FOR RELOCATION ASSISTANCE _____ DATE PRIVACY ACT STATEMENT EXECUTED _____ (INCLUDE COPY OF NOTICES AND SIGNED PRIVACY ACT STATEMENT IN CASE FILE)
RACIAL/ETHNIC CLASSIFICATION (CHECK ALL THAT APPLY) ☐ AMERICAN INDIAN OR ALASKAN NATIVE ☐ ASIAN ☐ BLACK OR AFRICAN AMERICAN ☐ HISPANIC OR LATINO ☐ NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER ☐ WHITE ☐ AMERICAN INDIAN OR ALASKAN NATIVE AND WHITE ☐ ASIAN AND WHITE ☐ BLACK OR AFRICAN AMERICAN AND WHITE ☐ AMERICAN INDIAN OR ALASKAN NATIVE AND BLACK OR AFRICAN AMERICAN ☐ OTHER MULTI-RACIAL	HOUSING COSTS AND CHARACTERISTICS OF DISPLACEMENT DWELLING TENANT: MONTHLY CONTRACT RENT \$ _____ AVERAGE MONTHLY UTILITY COSTS \$ _____ MONTHLY HOUSING COSTS \$ _____ OWNER: MONTHLY MORTGAGE PAYMENT (P&I) \$ _____ AVERAGE MONTHLY UTILITY COSTS \$ _____ REAL PROPERTY TAXES \$ _____ MONTHLY HOUSING COSTS \$ _____ NO. OF ROOMS _____ UNIT IS: ☐ HOUSEKEEPING ☐ NONHOUSEKEEPING NO. OF BEDROOMS _____

HOUSING REFERRALS										
Date	Address (Include Apt No.)	Census Track	Type of Unit		Size of Unit		Mo Rent + Est Avg Mo Utility Costs/Sales Price	Unit Avail Date	Low Income Or Minority Area?	Action on Referral (If refused, indicate why. Also indicate whether unit is representative comparable used as basis for pmt limit.)
			Rent	Sales	Subsidized	# of Rms				

REPLACEMENT DWELLING UNIT		CENSUS TRACT	
DATE OF MOVE _____ ADDRESS _____		IS THIS ADDRESS LOCATED IN A HUD DESIGNATED RENEWAL COMMUNITY OR EMPOWERMENT ZONE? ☐ YES ☐ NO	
MONTHLY HOUSING COST (MHC) ☐ RENTAL ☐ PURCHASE MONTHLY RENT \$ _____ MORTGAGE PAYMENT (P&I) \$ _____ EST. AVERAGE REAL ESTATE TAXES \$ _____ MONTHLY UTILITY COSTS \$ _____ EST. UTILITY COSTS \$ _____ TOTAL MHC \$ _____ TOTAL MHC \$ _____ SALES PRICE \$ _____		☐ D. S. & S ☐ NOT D. S. & S DATE OF INSPECTION _____ DATE OF REINSPECTION _____ NO. OF ROOMS _____ NO. OF BEDROOMS _____ (Include copy of Inspection Report in case file.)	
IS UNIT IN AREA OF LOW-INCOME OR MINORITY CONCENTRATION? ☐ YES ☐ NO IS UNIT SUBSIDIZED? ☐ YES ☐ NO _____ (Identify)		RELOCATION PAYMENT(S) TYPE ☐ ACTUAL ☐ RENTAL ☐ DOWNPMT ☐ 180-DAY HO AMOUNT \$ _____ DATE CLAIM FILED _____ DATE CLAIM PAID _____ (Include copy of Claim Forms in Case File)	
TEMPORARY HOUSING DATE _____ REASON _____ ADDRESS _____ RENTAL \$ _____ DATE OF MOVE TO PERMANENT DWELLING _____ OUT-OF-POCKET EXPENSES PAID: \$ _____ MOVING EXPENSES \$ _____ INCREASED HOUSING COSTS \$ _____		APPEAL FILED: ☐ YES ☐ NO IF YES, INDICATE TYPE: ☐ PAYMENT(S) ☐ HOUSING ☐ OTHER _____ (Include copy of Appeal in Case File)	

APPENDIX 10

Page 1 of 1

[illegible]

Claim for Temporary Relocation Expenses (Residential Moves)

U.S. Department of Housing and Urban Development
Office of Community Planning and Development

OMB Approval No. 2506-0016
(exp. 4/30/2018)

(Appendix A, 49 CFR 24.2(a)(9)(ii)(D))

See page 3 for Public Reporting Burden and Privacy Act Statements before completing this form

For Agency Use Only		Name of Agency		Project Name or Number		Case Number	
Instructions: This claim form is for the use of families and individuals applying for reimbursement of temporary relocation expenses. The Agency will assist you in completing the form. If the full amount of your claim is not approved, the Agency will provide you with a written explanation of the reason. If you are not satisfied with the Agency's determination, you may appeal that determination. The Agency will explain how to make an appeal. The Department of Housing and Urban Development provides information on these requirements and other guidance materials on its website at www.hud.gov/relocation .							
1a. Your Name(s) (You are the Claimant(s)) and Present Mailing Address						1b. Telephone Number(s)	
2a. Have all members of the household moved to the same dwelling? ☐ Yes ☐ No (If "No," list the names of all members and the addresses to which they moved in the Remarks Section.)				2b. Do you (or will you) receive a Federal, State, or local housing program subsidy at the dwelling you moved to? ☐ Yes ☐ No			
Dwelling		Address		When Did You Rent This Unit?	When Did You Move to This Unit?	When Did You Move Out of This Unit?	
3. Unit That You Moved From							
4. Unit That You Moved To							
5. Unit That You Returned To							
6. CERTIFICATION OF LEGAL RESIDENCY IN THE UNITED STATES (Please read instructions below before completing this section.) Instructions: To qualify for relocation advisory services or relocation payments authorized by the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, you must be a United States citizen or national, or an alien lawfully present in the United States. The certification below must be completed in order to receive any relocation assistance. (This certification may not have any standing with regard to applicable State laws providing relocation assistance.) Your signature on this claim form constitutes certification. See 49 CFR 24.208(g) and (h) for hardship exceptions.							
Please address only the category (individual or family) that describes your occupancy status. For Line (2), please fill in the correct number of persons.							
RESIDENTIAL HOUSEHOLDS (1) Individual. I certify that I am: (check one) ☐ a citizen or national of the United States ☐ an alien lawfully present in the United States (2) Family. I certify that there are _____ persons in my household and that _____ are citizens or nationals of the United States and _____ are aliens lawfully present in the United States.							
7. DETERMINATION OF MOVING EXPENSES - MOVE TO TEMPORARY UNIT Instructions: You may be eligible for reimbursement of actual and reasonable moving costs and related expenses in connection with your move to a temporary housing unit. The computation table below provides you with the ability to compute your payment.							
Move to Temporary Unit				(1) Commercial Move (Actual Costs)		(2) Self Move (Actual Costs) (Not to exceed cost paid by a commercial mover)	
				Claimant	Agency Use	Claimant	Agency Use
(a) Moving Cost Expenses (49 CFR 24.301(g)(1-7)); see page 3 (Do not include storage costs listed separately below.)				\$	\$	\$	\$
(b) Storage cost (not to exceed 12 months)				\$	\$	\$	\$
(c) Telephone re-connection				\$	\$	\$	\$
(d) Cable/Internet re-connection				\$	\$	\$	\$
(e) Other (Explain in Remarks Section)				\$	\$	\$	\$
(f) Total (Lines 7(a) - 7(e))				\$	\$	\$	\$
(g) Amount Previously Received, if any				\$	\$	\$	\$
(h) Amount Requested (Subtract Line 7(g) from Line 7(f))				\$	\$	\$	\$
(i) Total Amount Approved by Agency (for move to temporary unit)				\$	\$	\$	\$
TO BE COMPLETED BY AGENCY							
SUMMARY FOR MOVE TO TEMPORARY HOUSING UNIT							
Line No.:	Amount Claimed:	Amount Recommended:	Date Paid:	Payable To:			
(j) Line 7(i), Column (1)	\$	\$					
(k) Line 7(i), Column (2)	\$	\$					
(l) Total:	\$	\$					
Payment Action	Amount of Payment	Signature	Name (Type or Print)	Date (mm/dd/yyyy)			
(m) RECOMMENDED	\$						
(n) APPROVED	\$						
Remarks (Attach additional sheets, if necessary)							

GUIDEFORM GENERAL INFORMATION NOTICE
RESIDENTIAL TENANT NOT DISPLACED

Grantee or Agency Letterhead

(date)

Dear _____:

_____, (City, County, State, Public Housing Authority (PHA), other) _____, is interested in rehabilitating the property you currently occupy at _____ (address) _____ for a proposed project which may receive funding assistance from the U.S. Department of Housing and Urban Development (HUD) under the _____ program.

The purpose of this notice is to inform you that you will not be displaced in connection with the proposed project.

If the project application is approved and federal financial assistance provided, you may be required to move temporarily so that the rehabilitation can be completed. If you must move temporarily, suitable housing will be made available to you and you will be reimbursed for all reasonable out of pocket expenses, including moving costs and any increase in housing costs. You will need to continue to pay your rent and comply with all other lease terms and conditions.

Upon completion of the rehabilitation, you will be able to lease and occupy your present apartment or another suitable, decent, safe and sanitary apartment in the same building/complex under reasonable terms and conditions. *

If federal financial assistance is provided for the proposed project, you will be protected by a federal law known as the Uniform Relocation Assistance and Real Property Acquisition Policies Act (URA). One of the URA protections for persons temporarily relocated is that such relocations shall not extend beyond one year. If the temporary relocation lasts more than one year, you will be contacted and offered all permanent relocation assistance as a displaced person under the URA. This assistance would be in addition to any assistance you may receive in connection with temporary relocation and will not be reduced by the amount of any temporary relocation assistance previously provided. You will also have the right to appeal the agency's determination, if you feel that your application for assistance was not properly considered.

(NOTE: Pursuant to Public Law 105-117, aliens not lawfully present in the United States are not eligible for relocation assistance, unless such ineligibility would result in exceptional hardship to a qualifying spouse, parent, or child. All persons seeking relocation assistance will be required to certify that they are a United States citizen or national, or an alien lawfully present in the United States.)

We urge you not to move at this time. If you choose to move, you will not be provided relocation assistance.

Please remember:

- This is not a notice to vacate the premises.
- This is not a notice of relocation eligibility.

You will be contacted soon so that we can provide you with more information about the proposed project. If the project is approved, we will make every effort to accommodate your needs. In the meantime, if you have any questions about our plans, please contact:
(name)_____, (title)_____,
(address)_____, (phone)_____.

Sincerely,

(name and title)_____

Enclosure

NOTES.

1. The case file must indicate the manner in which this notice was delivered (e.g., personally served or certified mail, return receipt requested) and the date of delivery. (See Paragraph 2-3 I of Handbook 1378.)
2. This is a guideform. It should be revised to reflect the circumstances.

- * *Based on the applicable HUD program regulations, if "reasonable terms and conditions," are defined, one of the following statements or other language may also be required in this Notice:*
- a. *Under HOME at 24 CFR 92.353(c)(2)(C)(1): "Your new lease will be for a term of not less than one year at a monthly rent will remain the same or, if increased, your new monthly rent and estimated average utility costs will not exceed: 1) If you are low income, the total tenant payment as defined by HUD (under 24 CFR 5.628), or (2) 30% of the monthly gross household income, if you are not low income."*
 - b. *Under CDBG at 24 CFR 570.606(b)(2)(D)(1): "Your monthly rent will remain the same or, if increased, your new rent and estimated average utility costs will not exceed 30% of the household's average monthly gross income."*
 - c. *Under Section 221 Mortgage Insurance Programs under 24 CFR 221.795(i): "Your monthly rent and estimated average utility costs will not exceed the amount approved by HUD."*

GUIDEFORM NOTICE OF NONDISPLACEMENT
TO RESIDENTIAL TENANT

Grantee or Agency Letterhead

(date)

Dear _____:

On _____ (date), the _____ (City, County, State, Public Housing Authority (PHA), other), notified you of proposed plans to rehabilitate the property you currently occupy at _____ (address) for a project which could receive funding assistance from the U.S. Department of Housing and Urban Development (HUD) under the _____ program. On _____ (date), the project was approved and will receive federal funding. Repairs will begin soon.

- **This is a notice of nondisplacement.** You will not be required to move permanently as result of the rehabilitation.

This notice guarantees you the following:

1. Upon completion of the rehabilitation, you will be able to lease and occupy your present apartment or another suitable, decent, safe and sanitary apartment in the same building/complex under reasonable terms and conditions. *
2. If you must move temporarily so that the rehabilitation can be completed, you will be reimbursed for all of your extra expenses, including the cost of moving to and from temporary housing and any increased interim housing costs. The temporary unit will be decent, safe and sanitary, and all other conditions of the temporary move will be reasonable.

Since you will have the opportunity to occupy a newly rehabilitated apartment, I urge you not to move. (If you do elect to move for your own reasons, you will not receive any relocation assistance.) We will make every effort to accommodate your needs. Because federal funding is involved in this project, you are protected by the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended. Of course, you must continue to comply with the terms and conditions of your lease.

If you have any questions, please contact _____ (name) at _____ (phone),
_____. This letter is important to you and should be retained.

Sincerely,

(name and title)

Appendix B – Resident Listing

Appendix C – Relocation Budget

Manning Relocation Budget

Prepared: 4/27/2026

	COST PER UNIT	# OF UNITS	Relocation DURATION	INSTANCES	PROJECTED COST	
1BR		14	18			
1BR ADA		2	45			
2BR		19	18			
2BR ADA		1	45			
3BR		8	18			
4BR		6	18			
RELATION BUDGET						
BOXES AND SUPPLIES	Included					
PACKING/Unpacking ASSISTANCE	Included					
Temporary Hotel Accommodations	\$2,070	33	18 DAYS PER UNIT	\$115 per night	\$68,310.00	
Temporary ADA Hotel Accommodations	\$5,175	3	45 DAYS PER UNIT	\$115 per night	\$15,525.00	
Temporary Rental Accommodations	\$3,600	14	18 DAYS PER UNIT	\$200 per night	\$50,400.00	
Moving and Storage 1 BR units	\$1,500	14	1 Month		\$21,000	
Moving and Storage 1 BR ADA units	\$2,000	2	2 Month		\$4,000	
Moving and Storage 2 BR units	\$2,000	19	1 Month		\$38,000	
Moving and Storage 2 BR ADA units	\$2,500	1	2 Month		\$2,500	
Moving and Storage 3 BR units	\$2,500	8	1 Month		\$20,000	
Moving and Storage 4 BR units	\$3,000	6	1 Month		\$18,000	
Food per Diem 1 BR	\$1,800	14	2 People	\$50/person	\$25,200	
Food per Diem 1 BR ADA	\$4,500	2	2 People	\$50/person	\$9,000	
Food per Diem 2 BR	\$3,600	19	4 People	\$50/person	\$68,400	
Food per Diem 1 BR ADA	\$9,000	2	4 People	\$50/person	\$18,000	
Food per Diem 3 BR	\$4,500	8	5 People	\$50/person	\$36,000	
Food per Diem 4BR	\$6,300	6	7 People	\$50/person	\$37,800	
TRANSPORTATION per diem	\$50	47	regular units		\$42,300.00	
TRANSPORTATIO per diem ADA units	\$50	3	regular units		\$6,750.00	
PROJECTED TOTAL					\$481,185.00	