



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