

# STATE OF ARIZONA DEPARTMENT OF HOUSING

1110 WEST WASHINGTON, SUITE 280 PHOENIX, ARIZONA 85007 (602) 771-1000 FAX: 602-771-1002 WWW.HOUSING.AZ.GOV

### RELOCATION FUND ASSISTANCE INFORMATION FOR CHANGE IN USE DUE TO REDEVELOPMENT OR CLOSURE OF A MOBILE/MANUFACTURED HOME/RECREATIONAL VEHICLE PARK

Pursuant to Arizona Revised Statutes ("A.R.S.") § 33-2149 if a homeowner/tenant is required to move due to a change in use resulting in closure or redevelopment of the mobile home/RV park, the homeowner/tenant may do any of the following:

- 1. **Relocate the park trailer or park model to a new location.** Payment from the Mobile Home Relocation Fund ("Fund") is available for the lesser of the actual moving expenses of relocating the park trailer or park model to a new location that is within a one hundred mile radius of the vacated mobile/manufactured home/recreational vehicle park or the maximum of \$6,000
  - 2. **Abandon the park trailer or park model** in the mobile/manufactured home/recreational vehicle park and collect an amount equal to Forty Percent of the maximum allowable moving expense \$2,400

#### **Additional Information**

Enclosed you will find detailed information regarding the options as listed above:

- Application packet for the relocation of a park trailer or park model.
- Application packet for abandonment of a park trailer or park model.

Thank You.

# RELOCATE PARK TRAILER OR PARK MODEL

#### ARIZONA DEPARTMENT OF HOUSING

#### REQUEST FOR RELOCATION ASSISTANCE

I hereby request assistance from the Mobile Home Relocation Fund as set forth in A.R.S. § 33-1476.01. By signing this form, I certify that I am a tenant as defined in A.R.S. § 33-1409.29 and eligible to receive assistance.

(Signature of Tenant)		(Date)
TENANTS NAME:		
	(Please Print)	
PARK NAME:		
UNIT ADDRESS:		
CITY/ STATE/ ZIP CODE:		Space No.
		SINGLE-WIDEDOUBLE-WIDE
UNIT SIZE:YEAR:	MANUFACTURER	
PHONE:	EMAIL:	

# Please Attach the Following Documents:

- 1. Copy of your Personal Property Tax Statement from the County reflecting a ZERO balance
- 2. If moving the home out of the County, must include Form 504 Tax Clearance from County Assessor
- 3. Copy of one of the Following:
  - a. Front Page of your Title; or
  - b. A Notarized Document Showing Ownership
- 4. Copy of the Contract for Relocation of the Home

# This Form must be Completed and Returned along with all Requested Documents to:

Via e-mail or USPS
<a href="mailto:kimberly.merrill@azhousing.gov">kimberly.merrill@azhousing.gov</a>
Relocation Fund Department
ARIZONA DEPARTMENT OF HOUSING
1110 W. Washington Ave., Suite #280
Phoenix, Arizona 85007

# INSTRUCTIONS FOR THE ATTACHED SAMPLE CONTRACT

Step One: Attached is a sample contract for you to give to the Installer licensed and bonded through the Department, or Contractor licensed and bonded through the Arizona Registrar of Contractors, to move and install your Mobile/Manufactured Home at your new location. This sample contract contains all the information required for the licensed and bonded installer or contractor to include in a contract with the mobile home owner.

**Step Two**: Once you have determined the installer or licensed contractor you want contract with to move your Mobile/Manufactured Home mail, e-mail, fax or deliver in person a copy of the signed contract to the Department of Housing, along with all other information noted in the opening page.

The Assistant Deputy Director will approve, or disapprove the contract. You must receive the approval letter from the Department <u>first</u> to assure payment can be made out of the Relocation Fund. Do not move your home until you receive the **approval letter** from the Assistant Deputy Director of the Department of Housing, or the State may not pay for your move from the Relocation Fund.

#### THE MOBILE HOME RELOCATION FUND

#### **Required Elements in a Relocation Contract**

NOTE: This is a **SAMPLE ONLY**, all contracts must contain at least the information shown below.

- 1. NAME OF INSTALLER
- 2. ADDRESS OF INSTALLER
- 3. TELEPHONE NUMBER OF INSTALLER
- 4. INSTALLER'S FEDERAL ID NUMBER
- 5. DATE OF CONTRACT & SIGNATURES
- 6. INSTALLER'S LICENSE NUMBER

HOME OWNER INFORMATION  NAME:	CURRENT LOCATION OF MOBILE HOME  ADDRESS & SPACE NUMBER:				
ADDRESS: PHONE NUMBER:					
DESCRIPTION OF HOME	NEW RELOCATION ADDRESS				
SINGLE OR MULTI-WIDE: SIZE: MANUFACTURER: SERIAL NUMBER: YEAR MANUFACTURED: HUD LABEL IF ANY:	ADDRESS & SPACE NUMBER: ESTIMATED NUMBER OF MILES TO BE MOVED				

#### LISTING OF APPURTENANCES ATTACHED TO THE HOME. INCLUDING ESTIMATE OF SIZE:

(Awnings, Skirting, Coolers or Air Conditioners, Sheds, Porches, Carport, etc.)

**NOTE:** The relocation fund covers only the moving expenses: including the taking down, transporting and setting up the mobile home with the identical or substantially similar improvements as were originally attached to the tenant's mobile home.

#### **DETAIL OF WORK TO BE PERFORMED AND CHARGES:**

**NOTE:** Must include all disassembly, transportation and installation of mobile/manufactured home.

#### **INSTALLATION PERMIT NUMBERS:**

**NOTE:** Obtaining the installation permits are the **responsibility of the homeowner**, **but may be included in the contract pricing with the installer/contractor**.

#### **MOVING DATE**:

**NOTE:** The contract must be submitted, mailed or delivered to THE DEPARTMENT OF HOUSING, within 180 days after the effective date of the change in the age restricted community's use.

# HOMEOWNER'S SIGNATURE & DATE AND INSTALLERS' SIGNATURE & DATE MUST BE INCLUDED IN EVERY CONTRACT.

**NOTE:** All of the above information <u>MUST</u> be included in every contract for approval: upon completion of the relocation, a check will be issued directly to the Installer, in the Installer's name only. Proof of completion of the relocation will require the Installer to submit the following documents to the Department:

- 1) A copy of the Permit to move the mobile/manufactured home (504 from County Assessor)
- 2) A copy of the installation permit for installing the mobile/manufactured home at the new location
- 3) A copy of approval documentation from the local jurisdiction for installation, utilities, accessories as appropriate and approval for occupancy following the inspection(s) of the mobile/manufactured home at its new location.
- 4) A Final Invoice

#### Updated and Effective as of March 2023

#### ARIZONA REVISED STATUTE ("A.R.S.") § 33-2149

Change in use; notices; compensation for moving expenses; payments by the landlord

For recreational vehicles that are park trailers or park models only:

- 1. The landlord shall notify the director and all tenants in writing of a change in use at least one hundred eighty days before the change in use. The landlord may not increase rent within ninety days before giving notice of a change in use.
- 2. The landlord shall inform all tenants in writing about the mobile home relocation fund established by section 33-1476.02.
- 3. If a tenant is required to move due to a change in use or redevelopment of the park, the tenant may do any of the following:
- (a) Collect payment from the mobile home relocation fund for the lesser of the actual moving expenses of relocating the park trailer or park model to a new location that is within a one hundred-mile radius of the vacated park or the maximum of six thousand dollars (\$6,000). Moving expenses include the cost of stabilizing, taking down, moving and setting up the park trailer or park model in the new location.
- (b) Abandon the park trailer or park model in the park and collect an amount equal to one-fourth FORTY PERCENT of the maximum allowable moving expense for that park trailer or park model from the mobile home relocation fund. To qualify for abandonment payment pursuant to this subdivision, the tenant shall deliver to the landlord the current title to the park trailer or park model with the notarized endorsement of the owner of record together with complete releases of all liens that are shown on the title and proof that all taxes owing have been paid to date. The tenant shall provide a copy of these documents to the Arizona department of housing in support of the tenant's application for payment. If the tenant chooses to abandon the park trailer or park model pursuant to this subdivision, the landlord is exempt from making the payments to the fund prescribed in paragraph 4 of this section.
- (c) If a park trailer or park model is relocated to a location outside of the vacated park and, in the sole judgment of the director, the park trailer or park model was ground set in the park from which it was removed, the tenant may collect additional monies not to exceed \$2,500 for the incremental costs of removing a ground-set park trailer or park model. These monies are in addition to any monies provided pursuant to subdivision (a) of this paragraph.
- **4.** Except as provided in paragraph 3, subdivision (b) and paragraph 6 of this section, if there is a change in use the landlord shall pay \$250 for each park trailer or park model relocated to the fund for each tenant filing for relocation assistance with the director.
- **5.** If a change in use occurs and the landlord does not comply with paragraph 1 of this section, the landlord shall pay to the fund in addition to the monies prescribed in paragraph 4 of this section \$250 for each space occupied by a park trailer or park model.
- **6.** The landlord is not required to make the payments prescribed in paragraphs 4 and 5 of this section for moving a park trailer or park model owned by the landlord or for moving a park trailer or park model under a contract with the tenant if the tenant does not file for relocation assistance with the director.
- 7. The tenant shall submit a contract for relocation of a park trailer or park model for approval to the director within sixty days after the relocation to be eligible for payment of relocation expenses. The director must approve or disapprove the contract within fifteen days after receipt of the contract, or the contract is deemed to be approved.
- 8. If the contract is approved, the payment of relocation expenses shall be made to the installer when both of the following are complete:
- (a) The installer obtains valid permits to move the park trailer or park model to a new location.
- (b) The installer provides documentation to the department that the installation of the park trailer or park model at the new location is complete and has been inspected by the department or its designee and is approved for occupancy.
- **9.** If the contract is not approved, the tenant may appeal to an administrative law judge pursuant to title 41, chapter 37, article 5. The tenant shall provide notice pursuant to section 33-2105, subsection I, if the tenant relocates.
- **10.** If this state or a political subdivision of this state exercises eminent domain and the park is sold or a sale is made to this state or a political subdivision of this state that intends to exercise eminent domain, the state or political subdivision is responsible for the relocation costs of the tenants.
- **11.** If a tenant is vacating the premises and has informed the landlord or manager before the change-in-use notice has been given, the tenant is not eligible for compensation under this section.
- **12.** A person who purchases a park trailer or park model already situated in a park or moves a park trailer or park model into a park in which a change-in-use notice has been given is not eligible for compensation under this section.
- 13. This section does not apply to a change in use if the landlord moves a tenant to another space in the park at the landlord's expense.

Rev (03/2023) JJ

# ABANDON PARK TRAILER OR PARK MODEL



# STATE OF ARIZONA DEPARTMENT OF HOUSING

1110 WEST WASHINGTON, SUITE 280 PHOENIX, ARIZONA 85007 (602) 771-1000 FAX: 602-771-1002 WWW.AZHOUSING.GOV

### **ABANDONMENT FUND INFORMATION**

The Arizona Department of Housing, the state agency that administers the Arizona Mobile Home Parks Residential Landlord Tenant Act ("Act"), has made an initial determination that your home may be qualified for relocation or abandonment expense reimbursement under the Act.

Enclosed is a Request for Abandonment Assistance Form. Please <u>fill this form out completely</u>, and return to the department along <u>with a copy of your paid personal property tax</u> showing proof of zero balance due on taxes, and <u>a notarized copy of your title</u>, <u>front and back</u>, <u>or a notarized document showing ownership</u>. Also enclosed is a form W-9. Please complete and return this form. Completion of this form is required for the allocation of funds.

After <u>all the above</u> information has been received, and approved, you should receive your check within FOUR (4) to SIX (6) weeks.

Should you have any questions, please contact the Relocation Fund Department at (602) 771-1000.

Submit via e-mail or USPS

Kimberly.Merrill@azhousing.gov

RELOCATION FUND

ARIZONA DEPARTMENT OF HOUSING
1110 W. Washington, Suite #280

Phoenix. Arizona 85007

# REQUEST FOR ABANDONMENT ASSISTANCE FROM THE RELOCATION FUND

,			iund as set forth in A.R.S. §33 defined in A.R.S. §33-1409-29
, ,	•		t of a mobile home park.
(Signature o	f Tenant)		(Date)
(Mobile Home Title N	lumber)	(Mobile Home	Vehicle Identification Number)
TENANTS NAME:			
	(P	lease Print)	
UNIT ADDRESS:			
			(Space No.)
CITY/STATE/ZIP CODE	: <u> </u>		
PHONE:	E-MAIL:		
To be eligible, the home fully endorsed be to the mobile home part of these documents,	ne tenant shall de y the owner of rec rk, together with v front and back, s . Washington, \$	liver to the landlord ord and <u>notarized,</u> s alid releases of all lid hall be delivered to Suite 280, Phoenix	the current title to the mobile howing assignment of the title ens shown on the title. A copy the Arizona Department o c, AZ 85007, Or via e-mai
Tenant's Signature:			
Dated this(Day)	day of(Mov		(Year)
(Day)	(IOIVI)	1U1 <i>j</i>	( i Cai )



# State of Arizona Substitute W-9: Request for Taxpayer Identification Number and Certification

Submit completed form to the State of Arizona Agency with whom you are doing business with for review and authorization.

	Type of Request (Must select at least ONE)										
1		Location cional Address (	Change - Sele type(s) of chan the following:	ge from	Tax ID Main A			Entity Type [ Address [	Minority Bu	usiness Indic mation	ator
۱ ،	Taxpayer Identification Numbe	r (TIN) (Provide	ONE Only)								
۷	TIN		OR	SS	SN						
3	Entity Name (As it appears on IRS EIN records, IRS Letter CP575, IRS Letter 147C or Social Security Administration Records, Social Security Card. If Individual, Sole Proprietor, Single Member LLC, enter First, Middle, Last Name.)										
	Legal Name										
	DBA Name										
	Entity Type (Must select ONE of										
,	Individual/Sole Proprietor or Sir	ngle-Member LLC						or instrumenta			
4	Corporation Partnership		A state, a possessio instrumentalities		ession of the US, or any of their political subdivisions or						
	Limited Liability Company (LLC)	including Corporation	ins &	-		r: Tax Reportable Entity		f			
	Partnerships	metading corporatio			r: Tax Exer			Description			
	Minority Business Indicator (Mu	ust select ONE of	the following)								
	Small Business		Small, Woman Ow	ned Busine	ss- Hispanic			v Owned Busine	ss- African Ameri	can	$\neg$
	Small Business- African American		Small, Woman Ow			nerican	$\sim$	y Owned Busine		-	-
	Small Business- Asian		Small, Woman Ow	ned Busine	ss- Other Mir	nority		y Owned Busine	ss- Hispanic		_
5	Small Business - Hispanic		Woman Owned Bu	usiness			Minorit	y Owned Busine	Business- Native American		_
ا ر	Small Business- Native American		Woman Owned Bu	ısiness- African American (		Minority Owned Business- Other Minority Non-Profit, IRC \$501(c)					
	Small Business- Other Minority		Woman Owned Business- Asian								
	Small, Woman Owned Business		Woman Owned Bu	usiness- His	panic		Non-Small, Non-Minority or Non-Woman Owned				
	Small, Woman Owned Business- Africa	ın American	Woman Owned Business- Native American Woman Owned Business- Other Minority		1	Business					
	Small, Woman Owned Business- Asian				Individual, Non-Business				l		
6	Veteran Owned Business YES NO					<u> </u>					
	Entity Address (Where the information	and ganaral carross	aandansa is ta ba m	aailad)	Domillon	<b>A</b> d dr (\)	Mhara naum	ant is to be me	ع الممان		
,	Main Address (Where tax information	and general corresp	bondence is to be in	iaileu)		`	where payin	ent is to be ma	iitea) Sa	ame as Main	
<b>/</b>	Address Line 1			Address Line 1							
	Address Line 2		Address Line 2		ine 2						
	City	State	Zip code	Zip code City			State Zip code				
	Vendor Contact Information										
8	Name					Title					
	Phone Ext.		Fax		Email						
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Exemption from Backup Withholding and FATCA Reporting  Exemption Code for Backup Withholding			A keponing: Con	<u> </u>				u. see instru	ctions for mo	ore details	
			Exemption Code for FATCA R		eporting						
	Certification Under penalties of perjury, I certify that:										
	1. The number shown on this form is my co										
	2. I am not subject to Backup Withholding because: (a) I am exempt from Backup Withholding, or (b) I have not been notified by the 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 3. I am a US citizen or other US person, and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.							a			
	The Internal Revenue Service does not requ	uire your consent to ar	ny provision of this doc	ument othe	r than the ce	ertifications requ	ired to avoid	backup withhold	ing.		
	Certification instructions: You must cross interest and dividends on your tax return. F debt, contributions to an individual retirem provide your correct TIN.	or real estate transact	ions, item 2 does not a	pply. For mo	ortgage inter	est paid, acquisi	tion or aband	onment of secure	ed property, canc	ellation of	
	Signature Print No.			ame			Date				

#### The State of Arizona Substitute W-9 Form Instructions

The State of Arizona (State), like all organizations that file an information return with the IRS, must obtain your correct Taxpayer Identification Number (TIN) to report income paid to you or your organization. The State uses the Substitute W-9 Form to obtain certification of your TIN in order to ensure accuracy of information contained in its payee/vendor system and to avoid Backup Withholding as mandated by the IRS. According to IRS regulations, the State must withhold 28% of all payments if a vendor/payee fails to provide the State its certified TIN. The Substitute Form W-9 certifies a vendor/payee's TIN. Any vendor/payee who wishes to do business with the State must complete the Substitute W-9 Form.

Part 1 - Type of Request: Select only one.

**Part 2** - **Taxpayer Identification Number (TIN):** Enter your nine-digit TIN. The TIN is either your nine-digit Social Security Number (SSN) assigned by the Social Security Administration (SSA) or Employer Identification Number (EIN) assigned by the Internal Revenue Service (IRS).

**Part 3** - **Entity Name**: Enter the legal name as it appears on IRS EIN records, IRS Letter CP575, IRS Letter 147C or Social Security Administration Records, Social Security Card. If Individual, Sole Proprietor, Single Member LLC, enter First, Middle, Last Name. Enter your DBA in the designated line if applicable.

Part 4 - Entity Type: Select only one for TIN given.

Part 5 - Minority Business Indicator: Select only one for TIN given.

Part 6 - Veteran Owned Business: Select only one for TIN given.

Part 7 - Entity Address: List the locations for tax reporting purposes and where payments should be mailed.

Part 8 - Entity Contact Information: List the contact information.

**Part 9** - **Backup Withholding and FATCA Exemptions**: If you are exempt from Backup Withholding and/or FATCA reporting, enter in the Exemptions box, any code(s) that may apply to you.

<u>Backup Withholding Exemption Codes</u>: Generally, Individuals (including Sole Proprietors) are not exempt from Backup Withholding. Additionally, Corporations are not exempt from Backup Withholding when supplying legal or medical services. If you do not fall under the categories below, leave this field blank. The following codes identify payees that are exempt from Backup Withholding:

Code 1: An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b) (7) if the account satisfies the requirements of section 401(f) (2)

Code 2: The United States or any of its agencies or instrumentalities

Code 3: A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or Instrumentalities

Code 4: A foreign government or any of its political subdivisions, agencies, or instrumentalities

Code 5: A corporation

<u>Code 6</u>: A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States <u>Code 7</u>: A futures commission merchant registered with the Commodity Futures Trading Commission

Code 8: A real estate investment trust

Code 9: An entity registered at all times during the tax year under the Investment Company Act of 1940

<u>Code 10</u>: A common trust fund operated by a bank under section 584(a)

Code 11: A financial institution

Code 12: A middleman known in the investment community as a nominee or custodian

Code 13: A trust exempt from tax under section 664 or described in section 4947

<u>FATCA Exemption Codes</u>: The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. If you are only submitting this form for an account you hold in the United States, leave this field blank. The following codes identify payees that are exempt from FATCA Reporting:

Code A: An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a) (37)

Code B: The United States or any of its agencies or instrumentalities

Code C: A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities

Code D: A corporation the stock of which is regularly traded on one or more established securities markets, as described in Reg. section 1.1472-1(c)(1)(i)

Code E: A corporation that is a member of the same expanded affiliated group as a corporation described in Reg. section 1.1472-1(c) (1) (i)

<u>Code F</u>: A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

Code G: A real estate investment trust

Code H: A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

Code I: A common trust fund as defined in section 584(a)

Code J: A bank as defined in section 581 Code K: A broker

Code L: A trust exempt from tax under section 664 or described in section 4947(a) (1)

Code M: A tax-exempt trust under a section 403(b) plan or section 457(g) plan

Part 10 - Certification: Please sign, date and provide preparer's name in appropriate space.