|  |  |  |  |
| --- | --- | --- | --- |
| **Relocatee:** | enter text | **Project No.** | enter text |
| **Address:** | address | **Designation:** | enter text |
| **Telephone No.:** | enter text | **Parcel No.:** | enter text |

Choose either Business/Non-Profit or Farm/Ranch

**DETERMINATION OF PAYMENT**

***\* The term “average annual net earnings” means one-half of net earnings before Federal, State, and local income taxes during the 2 taxable years immediately preceding the taxable year in which the business is relocated.***

|  |  |  |  |
| --- | --- | --- | --- |
| ½ of Annual Net Income | Year enter year | $enter income | Attach verification |
| ½ of Annual Net Income | Year enter year | $enter year | Attach verification |
| **Total for 2-year period = $enter $ divided by 2 = $enter $** | | | |
| *(If average net 2-year income is less than $1,000, pay $1,000. If average net 2-year income is between $1,000 and $40,000, pay the average net income. In no case may the payment be less than $1,000 nor more than $40,000.)* | | | |

I understand that this determination is to be used in conjunction with a Federal-aid highway project. I have no direct or indirect, present or contemplated, personal interest in this transaction, nor will I derive any benefit from the supplemental payment.

***ELECTRONIC SIGNATURE CONSENT***

*By my signature/typewritten name, I declare under penalty of perjury and the laws of the State of Montana that the foregoing is true and correct and contains no willful falsifications or misrepresentations.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Signature (Typed Name)** |  | **Date** |  | **Place of Signature (City, State)** |
|  |  |  |  |  |

MDT Relocation Agent

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Signature (Typed Name)** |  | **Date** |  | **Place of Signature (City, State)** |
|  |  |  |  |  |

MDT Acquisition Manager

NOTE: Include all necessary attachments and histories.