



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
AND PUBLIC FACILITIES

PROTECTIVE LEASE ANALYSIS

PROJECT NAME: _____

STATE PROJECT #: _____

FEDERAL-AID PROJECT #: _____

PARCEL #: _____ UNIT #: _____

Date _____

Date of Initiation of Negotiations _____

Property Owner _____

Property address _____

Type of property _____

Number of rental units on premises _____

Vacant unit # _____ Number of rooms in vacant unit _____

Vacant unit current rental amount \$ _____

Estimated number of available comparable decent, safe, and sanitary replacement units _____

Estimated time until parcel is acquired _____

Unit rental amount X time until acquisition: Months _____ X Rental \$ _____ = Lease cost \$ _____

Estimated Cost If Leased

Lease cost (from above) \$ _____

Estimated Potential Cost If Not Leased

Estimate of moving cost (use moving schedule,
Section 7.7.2) \$ _____

Estimate of potential last resort housing cost + \$ _____

Total potential cost \$ _____

Protective lease recommended: Yes No

Date: _____

Date: _____

Acquisition Agent

Relocation Agent

Approved Denied

Date: _____

Regional Chief ROW Agent