Your Safety • Your Mobility
Your Economic Opportunity

Local Public Agency's Certificate Of Completion Of Right-Of-Way Activities

Idaho Transportation Department

ITD 1983 (Rev. 08-19)
itd.idaho.gov

Key Number	Project Number	Project Name

Local Public Agency

Complete the applicable section below and the Certification section.

Right of Way is Not Required

☐ All roadway work will be done within the existing right of way.

☐ No utilities are involved in this project and, _____, _____, _____, will be retained and protected.

☐ _____ (*Number*) utilities are impacted and agreements are in place.

Right of Way is Required

Number of ownerships acquired _____ Total amount paid $_____

☐ _____ (*Number*) Temporary Easements are required, but will be acquired by the Sponsor.

Number of parcels in condemnation or pending final settlement _____

Number of Relocations _____

☐ No utilities are involved in this project

☐ _____ (*Number*) utilities are impacted and agreements are in place for _____, _____, _____, _____, _____ utilities.

Certification

I hereby certify that all acquisitions and relocations, if any, were performed in accordance with our assurances to comply with state and federal laws and regulations related to the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and amendments thereto.

It is further certified that in all cases where the real property rights were obtained through donation, that the property owner(s) was fully informed of the right to receive just compensation and the owner has released our agency from its obligation to appraise the property in the event that the estimated value may exceed $5,000.00.

I hereby certify that I have no knowledge of any previous hazardous materials use, or contamination discovered, on any of the lands to be utilized on this project.

Agency Contact's Name (Printed)	Phone Number	E-Mail Address	
Attester's Signature (Clerk or Secretary)	Date	Chairman, President, or Mayor's Signature	Date