



MISSISSIPPI HOME CORPORATION

NOTICE OF NON-DISPLACEMENT AND TEMPORARY RELOCATION

(Resident Will Return After Work Is Completed – URA Compliant)

Date: _____

Resident Name: _____

Unit Number: _____

Property: _____

Address: _____

City, State, Zip: _____

Dear **[Resident Name]**,

This letter is to notify you that you will be **temporarily relocated** due to the planned work at **[Development Name]**. **You are not being permanently displaced.**

When the work is completed, **you will have the right to return to a comparable, decent, safe, and sanitary unit** at the property.

What This Means for You

- **You do not have to move permanently.**
- **Your housing subsidy and program eligibility remain in place.**
- **Your rent will not increase** during your temporary relocation.
- You will receive **relocation assistance**, including moving help.
- You will receive **written notice before any move occurs.**

This is **not** a notice to vacate immediately, and **you will not** be asked to move with less than **30 days' notice** before the temporary move.



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Where You Will Be Temporarily Relocated

- An available comparable unit onsite
- A comparable unit at a nearby property
- Temporary housing such as hotel accommodations

(Final location will be confirmed with you in writing.)

Relocation Assistance You Will Receive

You are eligible for the following support services at **no cost to you**:

- Help coordinating your move
- Payment or reimbursement for **moving expenses**
- Assistance with utility transfers (if applicable)
- **Right to return** to the property when work is complete

If you require special accommodations (medical, disability, accessibility, language support), please let us know so we can make necessary arrangements.

What Happens Next

A relocation coordinator will meet with you to discuss:

1. Your temporary relocation needs
2. Your household size and unit preferences
3. The estimated timeline for construction work
4. Your return to the property

You will **receive additional written notices** before any move takes place.

Your Right to Return



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Once the work is complete, you will be offered the opportunity to return to a comparable, decent, safe, and sanitary unit at [Development Name].

You **cannot be denied your right to return** because of your income, family size, or rental assistance status.

Contact Information

If you have questions at any time, please contact:

Relocation Contact Name: _____

Phone: _____

Email: _____

Office Hours: _____

We are committed to ensuring your relocation process is fair, respectful, and fully supported.

Sincerely,

[Owner/Agent/Management Representative Name]

[Title]

[Organization]