



STATE OF ALASKA  
DEPARTMENT OF TRANSPORTATION  
AND PUBLIC FACILITIES

**PAYMENT EVALUATION  
(RENT SUPPLEMENT)**

PROJECT NAME: \_\_\_\_\_  
 STATE PROJECT #: \_\_\_\_\_  
 FEDERAL-AID PROJECT #: \_\_\_\_\_  
 PARCEL #: \_\_\_\_\_ UNIT #: \_\_\_\_\_

Name of Claimant: \_\_\_\_\_

Address of Subject Property: \_\_\_\_\_

ITEMS OF COMPARISON	SUBJECT PROPERTY	Catalog No.		
		COMPARABLE 1	COMPARABLE 2	COMPARABLE 3
Number of Rooms				
Number Bedrooms/Baths	/	/	/	/
Habitable Floor Space	sq. ft.	sq. ft.	sq. ft.	sq. ft.
Lot Size	sq. ft.	sq. ft.	sq. ft.	sq. ft.
Age/Condition				
Type of Neighborhood (Same/better)				
Public Service/Place of Employment (Same/better)				
Actual Rent				
Economic Rent				
Addition for Utilities if any				
Total Rent		\$	\$	\$

Dwelling unit most comparable to subject: No. \_\_\_\_\_

Remarks: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Fair Rent of the comparable           \$ \_\_\_\_\_  
 Less Subject Rent                       \$ \_\_\_\_\_  
 Rent Supplement                       \$ \_\_\_\_\_ x 42 = \$ \_\_\_\_\_

Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

Title: \_\_\_\_\_