



RELOCATION CLAIM PACKAGE COVERSHEET

4/1/2026
DATE

City of Fresno
AGENCY

BNSF Grade Separation Project
PROJECT

446-232-36
APN(S)

DISPLACEE: Genuine Parts Company

RESIDENTIAL NON-RESIDENTIAL

CLAIM TYPE: MOVING EXPENSES

Table with 3 columns: Item Number, Status (checkbox), and Document Description. Sections include: Documents should be in order with this cover sheet first, All Claims Require Proof of Vacancy, PAYMENT REQUEST DOCUMENTS (items 1-3), PAYMENT JUSTIFICATION DOCUMENTS (items 4-5), and RAP ELIGIBILITY DOCUMENTS (items 6-9).

The above checked documents are included in the following claim package.

Barbie Barnes

Barbie Barnes, SR/WA, RW-RAC
Project Manager, Universal Field Services

4/1/2026
Date

Summary of requirements for different payment types: Rent Differential Payments, Purchase Differential Payments, Self-Move Payments, Fixed Move Payments, In-Lieu Payments, and Reestablishment Payments.

Claim for Relocation Assistance - Nonresidential

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ALL CLAIMS MUST BE FILED WITHIN 18 MONTHS AFTER:

- (a) For tenants, the date of displacement; or
- (b) For owners, the date of displacement or the date of the final payment for the acquisition of the real property, whichever is later.

| | | |
|--|--|-------------------|
| DISPLACEE (sole proprietor, corporate officer, or all partners): Genuine Parts Company | Date Vacated Displacement Property: | 6/13/2025 |
| dba NAPA Auto Parts | Date Occupied Replacement Property: | 6/1/2025 |
| DISPLACEMENT PROPERTY Address: 1632 N. Blackstone Avenue Fresno, CA 93703 | Final Date to file all Claims: | 12/13/2026 |
| | REPLACEMENT PROPERTY Address: 2701 N. Blackstone Avenue Fresno, CA 93703 | |

A. Nonresidential Moving Expenses (Supporting documentation attached)

| | |
|--|--------------------|
| 1. Transportation of displaced person and personal property within 50 miles | \$ |
| 2. Packing, crating, unpacking and uncrating of the personal property | \$ |
| 3. Dismantling, disconnecting, reassembly and reinstallation (Reconnection of Data lines) | \$741.79 |
| 4. Utility and Service line reconnection (including telephone) | \$9,340.00 |
| 5. Connection to available nearby utilities from the right-of-way to improvements at the replacement site. | \$ |
| 6. Modifications to personalty (with prior approval) | \$ |
| 7. Physical changes at the replacement property to accommodate the personalty | \$ |
| 8. Storage for _____ months (not to exceed 12 months; prior approval needed) | \$ |
| 9. Replacement Value Insurance and/or damaged, lost or stolen property | \$ |
| 10. Licenses, permits and certifications fees for the business operation | \$2,599.79 |
| 11. Relettering signs and replacing stationary on hand at time of displacement made obsolete due to displacement | \$ |
| 12. Loss of tangible personal property /substitute property (Paint Booth) | \$28,505.98 |
| 13. Cost to sell personal property not relocated | \$ |
| 14. Search fees (\$2,500 maximum) | \$ |
| 15. Self-Move (per attached Self-Move Agreement) | \$ |
| 16. Feasibility surveys, soil testing and marketing studies (prior approval needed) | \$ |
| 17. Professional services performed (Electrical Services for Paint Booth) | \$33,689.35 |
| 18. Low value / high bulk | \$ |
| 19. Impact fees or one-time assessments for anticipated heavy utility usage (prior approval) | \$ |
| 20. Other: Replacement Shelving (Sub Pers Prop) | \$55,118.28 |

B. Nonresidential Reestablishment* Expenses (Maximum \$25,000 for Items B1 through B12)

(Supporting documentation attached)

| | |
|---|----|
| 1. Repairs or improvements required by federal, state, local law, code or ordinance | \$ |
| 2. Modifications to accommodate the business operation (Prior approval) | \$ |
| 3. Construction and installation cost for exterior signage to advertise the business | \$ |
| 4. Redecoration or replacement of soiled or worn surfaces at replacement site | \$ |
| 5. Licenses, fees and permits not paid as moving expenses based on useful life of permit, license, etc. | \$ |
| 6. Advertisement of replacement location | \$ |
| 7. Estimated increased costs of operation during the first two years at the replacement site for lease or rental charges, personal and property taxes, insurance premiums, and/or utility charges (excluding impact fees) | \$ |
| 8. Other items considered essential for reestablishment: _____ | \$ |

TOTAL CLAIM \$129,995.19

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OR in lieu of A and B above (IRS Tax Transcripts verified by Agent)

In-Lieu Payment based on average annual net earnings

Tax Year _____ for \$ _____ and

Tax Year _____ for \$ _____

TOTAL IN-LIEU CLAIM N/A

I CERTIFY that I have not submitted any other claim for, or received reimbursement or compensation for, any item of expense in this claim, from the CITY OF FRESNO nor from any other public agency or private company, and that I will not accept reimbursement or compensation from any other source for any item of expense paid pursuant to this claim. I further certify that all information submitted herewith or included herein is true and correct. I understand that only lawful U.S. residents are entitled to claim relocation benefits. I understand that, in addition to the penalty provided by Penal Code Section 72, falsification of any item in this claim as submitted herewith may result in forfeiture of the entire claim.

| | |
|-------------------------|--|
| DATE <u>12 /2026</u> | DISPLACEE'S SIGNATURE(S) <i>Peter Troup</i> |
| DATE | DISPLACEE'S SIGNATURE(S) |

I CERTIFY that I examined this claim and substantiation documentation and found it to conform to the applicable provisions of State and Federal law and the Code of Federal Regulations, Title 49, Part 24. This claim is approved for a moving payment of **\$129,995.19** for eligible moving, moving related and reestablishment expenses (not to exceed \$25,000), or for an in-lieu payment of \$ N/A.

4/1/2026
DATE

Barbie Barnes
BARBIE BARNES
Project Manager
Universal Field Services, Inc

DATE

GEORGEANNE A. WHITE
City Manager
CITY OF FRESNO