CERTIFICATION CONCERNING LEGAL RESIDENCY IN THE UNITED STATES

North Dakota Department of Transportation, Environmental & Transportation Services

SFN 52453 (Rev. 01-2009)

Project Control Number

Project Number

Primary Parcel Number

Additional Parcel(s)

Displaced person

Address, City, State, Zip

Instructions:

1. Please address only the category (individual, family, corporation, etc.) that describes your occupancy status.
2. For items b and d, please fill in the correct number of persons.
3. The certification for a non-residential displaced person may be signed by an owner or other person authorized to sign on their behalf.
4. Your signature on this form constitutes certification.

RESIDENTIAL DISPLACED PERSON(S)

a. Individual. I certify that I am (check one)

☐ A citizen of the United States ☐ An alien lawfully present in the United States

b. Family. I certify that there are _____ persons in my household and that _____ are citizens of the United States and _____ are aliens lawfully present in the United States.

NON-RESIDENTIAL DISPLACED PERSON(S)

c. Sole Proprietorship. I certify that: (check one)

☐ I am a citizen of the United States

☐ I am an alien lawfully present in the United States

☐ I am a non-U.S. citizen not present in the United States

d. Partnership: I certify that there are _____ partners in the partnership and that _____ are citizens of the United States, _____ are aliens lawfully present in the United States, and _____ are non-U.S. citizens not present in the United States.

e. Corporation. I certify that _____ (name of corporation) is established pursuant to State law and is authorized to conduct business in the United States.

Signature

Date

Relocation Officer Signature

Date