PROPERTY OWNER'S CLAIM FOR PAYMENT INCIDENTAL EXPENSES OF PURCHASE OF REPLACEMENT DWELLING

1. Name of Claimant(s)	Parcel No.: 52	County: Will	iameon			
Larry Kemp	1 4 6 6 1 1 6 52	Project: CR 2				
2. Occupancy of County-Acquired Property:	3. Controlling Dates	Mo.	Day	Yr.		
From (Date): 1997 To (Date):	a. First Offer in Negotiations	05	19	2023		
4. Address of Replacement Property:	b. Property Acquired by County	03	19	2024		
d 1	c. Replacement Property Acquire	ed 05	03	2024		
	d. Occupancy of Replacement Property	06	07	2024		
5. Expenses (List below each item included in claim - attach receipts or closing documents to support each cost.)						
Item		05.00	Amount			
E-file fee to Key Title Group		\$5.33				
Recording Fee Deed		\$37.00				
Settlement Fee to Key Title Group		\$500.00				
HOA transfer Fee to RealManage		\$250.00				
		\$				
		\$				
		\$				
P		\$				
		\$				
		\$				
		\$				
		\$				
		Total \$79	2.33			
6. Payment of this claim in the amount shown in Block 5 above is requested. I certify these incidental expenses were necessary in the purchase of my replacement dwelling and that I have not and will not accept reimbursement or payment from any other source for these expenses. I further certify that all information shown above is true and correct, and that the replacement dwelling I now occupy meets the standards of decent, safe and sanitary housing to the best of my knowledge and belief.						
7/23/24	James	Devi	of			
Date of Claim		Claimant	1			
Spaces Below to be Completed by Williamson County						
7. The dwelling at the address under Block 4 above has been inspected and in		decent, safe and	sanitary ho	using.		
7-23-2024		1		J		
Date of Inspection Legrify that I have everyined this claim and found it to conform to the applic	Inspected By Si	gnature	2000 0000	ento I forther		
I certify that I have examined this claim and found it to conform to the applicable laws and regulations governing relocation assistance payments. I further certify the computation of the payment and the information shown herein is correct. This claim is recommended for payment.						
Amount of \$ 792.33 7-25-2024						
Date	Relocation Agen					
Aug 6, 2024	13:10 31					
Date	Williamson Cour	nty Judge				

Key Title Group 605 Riverbend Drive Ste. 105 Georgetown, TX 78628 (512) 354-2558

S6801 - Cat Hollow Sec C Ph 1, BLOCK E, Lot 14

Buyer Larry D. Kemp, Sr

1 Each hamy are e Georgetown, TX 78633

Seller The Estate of Hildegarde

Anne Kothmann by Rodney D

Kothmann EXE 2604 Chowan Way Round Rock, TX 78681

Lender

Seller			Buyer	
Debit	Credit		Debit	Credit
		Financial		
	\$410,000.00	Sales Price of Property	\$410,000.00	
		Deposit		\$4,150.0
		Prorations/Adjustments		
\$2,137.44 \$150.		County Taxes 01/01/2024 to 05/03/2024		\$2,137.4
	\$150,66	HOA Assessment 05/03/2024 to 01/01/2025	\$150.66	
		Other Charges		
		E-File Fee to Key Title Group	\$5.33	
\$30.00		Notice to Purchaser to Texas NTP		
\$125.00		Preparation of Warranty Deed to The Blackburn Law Firm, PLLC		
\$78.70		Reimbursement to Key Title Group for Probate Dpocuments to Key Title Group		
		Government Recording and Transfer Charges	407.00	
		Recording Fees	\$37.00	
		Deed; \$37.00		
		Mortgage: \$0.00	ļ	
		Release of Lien: \$	1	
		Commission		
\$12,300.00		Listing Agent Commission to Compass RE Texas, LLC		
\$12,300.00		Selling Agent Commission to Spyglass Realty		
		Title Charges & Escrow / Settlement Charges		
\$500.00		Title - Settlement Fee to Key Title Group	\$500.00	
\$85,00		Title - Tax Certificate Fee to Domestic Data, LLC		
\$246.60		Title - Owner's T-19.1 Endorsement to Key Title Group		
\$2,466.00		Title - Owner's Title Policy to Key Title Group		
\$2.00		Title - State of Texas Policy Guaranty Fee (Owner's Policy) to Texas Title Insurance Guaranty Association		
		Miscellaneous		
\$149.45		HOA Advanced Assessments to Cat Hollow at Brushy Creek Owners Association, Inc.		

Selle	r		Buye	r
Debit	Credit		Debit	Credit
\$75.00		HOA Transfer Fee to RealManage	\$250.00	
\$30.00		MUD Notice to Texas Real Tax		
Selle			Buye	
Selle Debit			Buye Debit	r Credit
Selle				
Selle Debit	r Credit		Debit	Credit
Selle Debit	r Credit	Subtotals	Debit	CredIt \$6,287.44

See signature addendum

Signature Addendum

Acknowl	lad	gamant
ACKIIOWI	eu	gement

We/I have carefully reviewed the Settlement Statement and find it to be a true and accurate statement of all receipts and disbursements made on my account or by me in this transaction and further certify that I have received a copy of the Settlement Statement.

We/I authorize Key Title Group to cause the funds to be disbursed in accordance with this statement.

Larry D. Kemp, Sr

The Estate of Hildegarde Anne Kothmann by Rodney D Kothmann EXE LLC, a Texas Limited Liability Company

Settlement Agent

CERTIFICATION OF ELIGIBILITY

Project: CR 255 Parcel: 52				
Displacee: Larry Kemp				
Individuals, Families and Unincorporated Businesses or Farming Operations				
I certify that myself and any other party(ies) with a financial interest in this relocation assistance claim are either:				
Citizens or Nationals of the United States				
Aliens lawfully present in the United States				
* If an Alien lawfully present in the United States, supporting documentation will be required.				
Claimant Date: 5/19/23				
Date:				
Incorporated Business, Farm or Nonprofit Organizations				
I certify that I have signature authority for this entity and such entity is lawfully incorporated under the applicable state's laws and authorized to conduct business within the United States.				
N/A Claimant Date: N/A				

REPLACEMENT HOUSING INSPECTION

Name of Claimant:	Parcel No.: 51	County: Williamson			
Larry Kemp	Project: CR 255				
Address:	*	•			
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μ <u>, , , , , , , , , , , , , , , , , , ,</u>					
Apt No.: Site No.:					
Number of Displaced Persons in Family: 1 Purchase Price or Monthly Rent: \$410,000					
Replacement Dwelling					
House Duplex Duplex		Sleeping Room			
Mobile Home: Width: Length:	Other:				
Floor Space: 1585 sq. ft. No. Rooms: 6	No. Bedrooms: 3	No. Baths: 2			
	Dwelling Inspection				
Yes No	Yes No				
Yes No 1. Meets all applicable building codes		or artificial lighting in each room			
2. Has required potable water	7. Is structurally sou	and, in good repair and adequately			
3. Has required kitchen facilities	722 5	8. Has required safe means of egress			
4. Has required heating system 9. Has required habitable floor space					
5. Has required bathroom facilities					
Comments:					
The dwelling at the address above has been inspected and, in my opinion, meets the standards for-decent, safe and sanitary housing.					
7-23-2024					
Date of Inspection	Inspectedate	Signature			

