



## Employee Relocation Request Form

*Under the Tax Cuts and Jobs Act of 2017 (Public Law No. 115-97), employer paid relocation expenses are taxable to the employee regardless of the form or manner of payment, e.g., reimbursement, or direct payment to third parties. Any such payments made to or on behalf of a relocating employee on or after January 1, 2018 will be reported as taxable income to the employee.*

### Employee Information

Employee Name: \_\_\_\_\_ Date Relocation Agreement Signed: \_\_\_\_\_  
 Department Name: \_\_\_\_\_ USC ID (needed for payroll purposes): \_\_\_\_\_

### Relocation Information

Former Primary Residence: \_\_\_\_\_ New Primary Residence: \_\_\_\_\_  
 Street: \_\_\_\_\_ Street: \_\_\_\_\_  
 City/Town: \_\_\_\_\_ City/Town: \_\_\_\_\_

Maximum Reimbursement Allowed  
 (per Relocation Agreement) \$ \_\_\_\_\_

### Chartfields

Operating Unit	Department	Fund	Account	Class	PC Business Unit	Project	Activity	Cost Share

## Expenditures

### Household Goods and Personal Effects:

Common Carrier: _____	\$
Self Move: Vehicle Rental Accessories	\$
Moving/Packing Supplies	\$
Gas/Fuel (itemized receipts needed)	\$
Labor	\$
<b>Total Household Good and Personal Effects</b>	\$

### Travel and Lodging:

Travel Expenses	\$
Airfare (Coach Only)	\$
Lodging	\$
Mileage (Moving Standard Rate – 21 cents per mile)	\$
<b>Total Travel and Lodging</b>	\$

### Other Expenses:

Temporary Storage of Household Goods	\$
Temporary Housing	\$
Miscellaneous: _____	\$
<b>Total Other Miscellaneous</b>	\$
 <b>Total Expenditures</b>	 \$

*\*All receipts are required and must be attached to this request*

## Employee Certification and Agreement

*I certify the expenses listed below were incurred by me or on my behalf for the purpose of personal relocation at the request of the University of South Carolina and in accordance with the terms agreed upon in the Relocation Expense Agreement.*

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*The expenses shown on this request have been reviewed for accuracy and conformity with University of South Carolina relocation reimbursement regulations and are considered to be reasonable and proper.*

Departmental Approval: \_\_\_\_\_ Date: \_\_\_\_\_

## Relocation Expenses Reference Chart

*Itemized receipts must be attached to Relocation Request Form*

Cost Category	Notes and Restrictions	Required Documentation
<b>Transportation of Household Goods:</b>		
Commercial Carrier		Bill of Lading
		Original itemized receipts required and clearly showing amount paid
Self Move – Vehicle Rental		Rental Agreement
		Original paid itemized receipts
Self Move – Gas and Fuel		Original paid itemized receipts
Self Move – Personal Vehicle Mileage	No side trips, must be most direct route	Document miles from former residence to new residence
	IRS Moving Rate to be used	
Self Move – Labor	Labor provided for employee or employee's immediate family is not reimbursable	Receipt from labor used to include signature and amount paid
<b>Travel and Lodging: (from former primary residence to new primary residence)</b>		
Airfare	Coach only	Original passenger coupon or detailed paid invoice
	Immediate family members living in residence only	
Lodging	One night at departure location and one night at arrival location	Original itemized paid lodging receipt
Personal Vehicle Mileage	No side trips, must be most direct route	Document miles from former residence to new residence
	IRS Moving Rate to be used	
Rental Car		Rental Agreement
		Original paid itemized receipts
Fuel	Not allowed if claiming mileage at IRS rate	Original paid itemized receipts
Tolls, Taxis, Shuttle, and Parking		Original paid itemized receipts
<b>Other Expenses</b>		
Temporary Storage	Short term storage	Original paid itemized receipts
Relocation Related Supplies	Must be consumable in nature (cardboard boxes, tape, bubble wrap, etc.)	Original paid itemized receipts
	Not permitted: plastic totes, scissors, bungee cords, etc.	