

MOVING EXPENSES WORKSHEET

Name: _____

Previous Address: _____

New Address: _____

Calculation of Distance in Kilometres:

Distance in KMs between your **old** home and your **new** place of work or educational institution:

Distance in KMs between your **new** home and your **new** place of work or educational institution:

Details of Move:

Date of Move:

Year	Month	Day
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Start date of new job, business or educational studies

- Be employed or carry on a business
- Study Full Time

The main reason of the move, was to:

Information about your employer, business or educational institution after the move

Name

Complete Address including Postal Code

Moving Expenses

Transportation and storage costs for household effects

Name of mover, if applicable _____

Travel expenses from old residence to new residence

Travel expenses (other than accommodations and meals:

Number of household members in move _____

Method of Travel: _____

Number of Kilometres: _____

Accommodation costs

Number of nights _____

Meal costs (maximum \$51.00 per day per person

Number of days: _____

Temporary living expenses near new or old residence (Maximum 15 Days)

Accommodation costs

Number of nights _____

Meal costs

Number of days: _____

Cost of cancelling the lease for your old residence

\$

Incidental Costs

Cost of changing address on legal documents

\$

Utility disconnections

\$

Utility connections

\$

Cost to maintain your old residence when vacant

Interest on mortgage

\$

Property Taxes

\$

Insurance Premiums

\$

Utilities

\$

Other

\$

Cost of selling Old Residence

Selling price \$ _____

Real estate commission

\$

Legal or notarial fees

\$

Advertising

\$

Other selling costs (Specify) _____

\$

Cost of purchasing new residence

Purchase Price \$ _____

Legal or notarial fees

\$

Taxes paid for the registration or transfer of title (do not include HST)

\$

Other

X _____

The above information is correct and supporting documentation is available for review

X _____

Date