



820 Black Bear Road, Unit G-17
P.O. Box 840, Telluride, CO 81435
Tel: 970-728-3034 Fax: 970-728-5371
E-mail: admin@smrha.org Web: www.smrha.org

Welcome to the Deed Restriction Application Process!

Dear Applicant:

On the following pages you will be asked to provide information which will permit us, the San Miguel Regional Housing Authority (SMRHA), to determine if you are eligible to occupy a deed restricted unit.

Please read all of the information carefully and contact us with questions. We cannot process an application until it is complete.

The SMRHA is subject to the Colorado Open Records Act (CORA) Colorado Revised Statutes section 24-72-201, *et seq.* Any information that you provide becomes public record, with the exception of specific confidential information as stated in CORA. Confidential information under CORA includes items such as financial information; for example, state and federal income tax returns. However, please be aware any confidential documents or information that you choose to provide or disclose at a public meeting will become a part of the public record of that meeting, and therefore subject to disclosure pursuant to CORA.

If you have questions about the information you need to provide, or about the process, please contact us at 970-728-3034, extensions 4 or 5.

Sincerely,

SMRHA Staff

San Miguel County Covenant Purchase Application
For Persons Interested in Occupying Deed Restricted Housing
in the Telluride R-1 School District in Lawson Hill, Lower Lawson, San Bernardo, and
Aldasoro

**** This Application Needs To Be Submitted Prior To Occupying A Unit****

You must submit all of the following for an application to be considered complete:

- \$10.00 non-refundable Application Fee (make check payable to SMRHA)
- Completed application form (Please remember to have notarized where applicable)
- Copy of the complete tax return for the past 2 years (this includes all W2s/1099s, schedules, etc.) *SMRHA cannot accept income tax return extensions, Please remove SSN.*
- Copies of your most recent paystub(s) (from any/all current employers) with year to date info.
- Copies of a driver's license for each adult household member and registration for each motor vehicle you own
- Additional documentation necessary for employment verification (if applicable)
 - Multiple Certification of Employment pages
 - Local Business License (if self-employed)
 - Time logs, invoices, etc. (if self-employed)

If you believe you qualify by virtue of having a disability or meeting the retirement age guidelines, or the "Alternative Standard", please contact our office for more specific information.

HOUSEHOLD INFORMATION
(Please Print)

Please indicate the unit for which you are applying: _____ **Purchase** **# of Bedrooms:** _____

APPLICANT: _____

Mailing address: _____ Phone # (res.) _____

Phys. address: _____ Phone # (cell) _____

E-mail address: _____ Phone # (bus.) _____

CO-APPLICANT (if applicable): _____

Mailing address: _____ Phone # (res.) _____

Phys. address: _____ Phone # (cell) _____

E-mail address: _____ Phone # (bus.) _____

OTHER HOUSEHOLD MEMBERS:

_____ Relationship to Applicant(s): _____

_____ Relationship to Applicant(s): _____

Please supply this same information for additional Household Members on another sheet of paper.

How many years and months have you lived in San Miguel County? _____

When did you last live outside San Miguel County? _____

If you, your spouse, or any of your dependents own other property in San Miguel County, Montrose County, Ouray County or Dolores County, describe the type and location of each such property: _____

Where do you/will you work? _____

How many years and months have you worked there? _____

How many years and months have you been employed within the Telluride R-1 School District boundaries? _____

Capital assets at closing (if applying to purchase): What amount of any capital gains (if any) will be used at closing on this deed-restricted home? \$ _____ How much of that amount was realized from any sale of a previous home or homes (if any)? \$ _____

If you, your spouse, or any of your dependents own other property, describe the type of property, the name of the owner(s) on Title, and the address of each property: _____

(Other property ownership may require an exception-SMRHA Staff will make the determination)

Please indicate which public or community service groups are you involved with:

The following must be reported in order for SMRHA to determine how to qualify the applicant. Reporting the below information does not automatically disqualify any household and may be required to qualify an Applicant.

Please provide your total **gross income for the past 12 months**, from the following sources, whether required to be reported on IRS income forms or not:

_____ **Wages from employment within Telluride R-1 School District boundaries (TSD)** (this includes wages, tips, salaries, overtime pay, commissions, fees, and bonuses)

+ _____ **Wages from employment outside TSD boundaries**

+ _____ **Benefit Payments** (this includes Social Security, SSI, Workers' Comp., Disability pay or benefits, unemployment benefits, severance pay, annuities, pensions, retirement or death benefits)

+ _____ **Alimony and/or child support**

+ _____ **Interest, dividends, capital gains, and other income from household assets** (this includes interest from bank accounts or bonds, dividends, income distributed from trust funds, etc)

+ _____ **Rental property income**

+ _____ **Monetary gifts** recurring or otherwise.

+ _____ **Other income** (please specify)

_____ **TOTAL GROSS INCOME**

Net Asset Calculation Worksheet

Assets (What you <u>own</u>)			Check If Jointly Held
	<u>Applicant</u>	<u>Co-Applicant (if any)</u>	
Cash:			
Cash On Hand	\$ _____	\$ _____	_____
Checking Account	\$ _____	\$ _____	_____
Saving Account	\$ _____	\$ _____	_____
Money Market Funds	\$ _____	\$ _____	_____
Cash Value of Life Insurance	\$ _____	\$ _____	_____
Anticipated Gift(s) towards Down Payment	\$ _____	\$ _____	_____
Other	\$ _____	\$ _____	_____
Real Estate / Property (Fair Market Value):			
Home(s) in San Miguel County	\$ _____	\$ _____	_____
Land in San Miguel County	\$ _____	\$ _____	_____
Home(s) outside San Miguel County	\$ _____	\$ _____	_____
Land outside San Miguel County	\$ _____	\$ _____	_____
Other	\$ _____	\$ _____	_____
Investments (Market Value):			
Certificates of Deposit	\$ _____	\$ _____	_____
Stocks	\$ _____	\$ _____	_____
Bonds	\$ _____	\$ _____	_____
Mutual Funds	\$ _____	\$ _____	_____
Annuities	\$ _____	\$ _____	_____
Retirement Funds	\$ _____	\$ _____	_____
Assets in names of dependents/children	\$ _____	\$ _____	_____
Other	\$ _____	\$ _____	_____
Personal Property (Present Value):			
Automobiles	\$ _____	\$ _____	_____
Recreational Vehicle / Boat	\$ _____	\$ _____	_____
Home Furnishings	\$ _____	\$ _____	_____
Appliances and Furniture	\$ _____	\$ _____	_____
Collections	\$ _____	\$ _____	_____
Jewelry and Furs	\$ _____	\$ _____	_____
Other	\$ _____	\$ _____	_____
Business Assets (Present Value):			
All	\$ _____	\$ _____	_____
<hr/>			
Individual Assets	\$ _____	+ \$ _____	
Total Gross Household Assets	= \$ _____		

Liabilities (What you owe)

	<u>Applicant</u>	<u>Co-Applicant (if any)</u>	<u>Check If Jointly Held</u>
Current Debts:			
Household e.g., Lease Obligation	\$ _____	\$ _____	_____
Business	\$ _____	\$ _____	_____
Medical	\$ _____	\$ _____	_____
Credit Cards	\$ _____	\$ _____	_____
Department Store Cards	\$ _____	\$ _____	_____
Back Taxes	\$ _____	\$ _____	_____
Legal	\$ _____	\$ _____	_____
Other	\$ _____	\$ _____	_____
Mortgages:			
Home(s) in San Miguel County	\$ _____	\$ _____	_____
Land in San Miguel County	\$ _____	\$ _____	_____
Home(s) outside San Miguel County	\$ _____	\$ _____	_____
Land outside San Miguel County	\$ _____	\$ _____	_____
Other	\$ _____	\$ _____	_____
Loans:			
Bank / Finance Company	\$ _____	\$ _____	_____
Bank / Finance Company	\$ _____	\$ _____	_____
Automobile	\$ _____	\$ _____	_____
Recreational Vehicle / Boat	\$ _____	\$ _____	_____
Education	\$ _____	\$ _____	_____
Life Insurance loan	\$ _____	\$ _____	_____
Personal (from family and/or friends)	\$ _____	\$ _____	_____
Business	\$ _____	\$ _____	_____
Other	\$ _____	\$ _____	_____
Individual Liabilities	\$ _____	+ \$ _____	
Total Household Liabilities	= \$ _____		

Total Assets	Minus	Total Liabilities	=	Household Net Assets
\$ _____	--	\$ _____	=	\$ _____

APPLICANT’S CERTIFICATION & AUTHORIZATION

Under the penalty of perjury, the applicant certifies the following:

All information provided in this application submitted to the San Miguel Regional Housing Authority to purchase deed restricted property in San Miguel County is true and complete.

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

1. As a part of the application process to purchase deed restricted property in San Miguel County, the San Miguel Regional Housing Authority (SMRHA) may verify any and all information contained in my/our loan application and in other documents required in connection with the loan.
2. I/We authorize you to provide to the SMRHA any and all information and documentation in your care or custody that they request. Such information includes, but is not limited to, employment history and income; bank, money market, and similar account balances, and copies of income tax returns.
3. A copy of this authorization may be accepted as an original.

Check this box if you want the results letter shared with the owner/landlord.

DATED: effective this ____ day of _____, 20__.

Applicant Signature

Applicant Signature

Please print name

Please print name

The foregoing instrument was acknowledged before me this ____ day of _____
20__, by _____.

Witness my hand and official seal.
My commission expires _____

Notary Public

VERIFICATION OF EMPLOYMENT HOURS AND INCOME
RELATED TO ELIGIBILITY TO OCCUPY AFFORDABLE HOUSING

*** For use by Employer/Company Representative. This document serves to verify the employment hours & income for your Employee. It is to be completed by a Company Representative with access to personnel records.***

Employee Name: _____

Employee began employment with _____ (Company) on _____ (Date).
Company is located at _____ (physical address), which is within
the Telluride R-1 School District boundaries.

If no longer employed by you, the Employee's last date of employment was _____.

Employee is (or was) employed as (job title) _____.

Please add a brief description of job duties and location of work: _____

Is (or was) this employment **seasonal** or **year round**? (circle one)

If seasonal, Employee typically works (worked) **from** _____ **to** _____.

Employee works (worked) an average of _____ **hours per week**.

Employee works (worked) a total of _____ **weeks per year**.

Employee works (worked) a total of _____ **hours per year**.

Employee earns (earned) an **income** of \$ _____ per _____.

Employee receives _____ weeks of paid time off.

If salaried, Employee typically works (worked) **from** _____ **to** _____.

Employee works (worked) an average of _____ **hours per week**.

Employee works (worked) a total of _____ **weeks per year**.

Employee works (worked) a total of _____ **hours per year**.

Employee earns (earned) an **income** of \$ _____ per _____.

Employee receives _____ weeks of paid time off.

Percentage of work done inside the R-1 Telluride School District _____.

Percentage of work done outside of the R-1 Telluride School District _____.

Under the penalty of perjury, I/We certify that all of the information contained herein is true and correct to the best of my/our knowledge.

Employer's signature

Date

Employer's name and job title

Contact telephone number

Contact email

Note: To be completed by your employer(s) Applicant-Owner authorizes SMRHA to request additional information if necessary.

SAN MIGUEL COUNTY
CERTIFICATION OF ELIGIBILITY TO OCCUPY AFFORDABLE HOUSING

Employers Affidavit:

I, _____, hereby declare under penalty of perjury that
_____, is presently employed by _____
_____, whose principal address of business is
_____, and further certify that the above named
Employee is employed in the Telluride R-1 School District of San Miguel County, and that employment of
said Employee began/will begin on _____.

Date: _____ By: _____
(Employer)

The foregoing instrument was acknowledged before me this _____ day of _____
20____, by _____.

Witness my hand and official seal.
My commission expires _____

Notary Public

Employee's Affidavit:

I, _____, hereby declare under penalty of perjury that I am employed
by _____, whose principal address of business is
_____, that it is located within the Telluride R-1 School District of
San Miguel County, and that my employment began/will begin on _____.

Date: _____ By: _____
(Employee)

The foregoing instrument was acknowledged before me this _____ day of _____
20____, by _____.

Witness my hand and official seal.
My commission expires _____

Notary Public

SAN MIGUEL COUNTY DEED RESTRICTION
VERIFIED SELF-EMPLOYMENT STATEMENT

Date: _____

This document serves to verify the location and hours worked for: _____.
(Name)

My business began with _____ on _____.
(Company) (Date)

[If you have more than one business/job, please attach a separate page for each one]

Please describe your business and your activities: _____

Job title: _____

Business Address: _____

Business Hours: _____

Names of Employees: _____

Hours worked within the Telluride R-1 School District boundary _____ per week.

Hours worked outside of the Telluride R-1 School District boundary _____ per week.

I work approximately _____ weeks per year and receive _____ weeks of paid time off.

I work for _____ clients per week on average.

How many clients are outside of the Telluride R-1 School District boundaries? _____

Hours worked outside the Telluride R-1 School District boundary _____ per week.

Please provide business documentation to assist in verification of self-employment qualification:

- Current copy of a business license and professional licenses required for your type of work or any other permits that may be applicable.

AND

- Include verifiable hours and location of work within the Telluride R-1 School District boundary.

Tracking for _____ through _____.

- Verification may include invoices, ledgers or business logs of clients with location/dates/times/hours worked, IRS tax filings.

* Notarized Certification form on following page*

CERTIFICATION

Under penalty of perjury, I certify the following:

All information provided, including attachments, submitted to the San Miguel Regional Housing Authority are true, complete, and correct to the best of my knowledge. I will provide other information pertaining to my qualification under my deed restriction as requested.

I acknowledge that no representation has been made that I am a Qualified Household.

DATED: Effective this _____ day of _____, 20__.

Owner

Owner

STATE OF COLORADO)
) ss.
SAN MIGUEL COUNTY)

Sworn to, before me, by _____ on the ____ day of _____, 20__.

WITNESS my hand and official seal.
My commission expires: _____

Notary Public