



820 Black Bear Road, Unit G-17
P.O. Box 840, Telluride, CO 81435
Tel: 970-728-3034 Fax: 970-728-5371
E-mail: smrha@telluridecolorado.net 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 own or rent a unit that has been deed restricted.

Please read all of the information carefully and contact us with questions. We can not 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 that 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.

We look forward to assisting you with your application.

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

Sincerely,

SMRHA Staff

TOWN OF MOUNTAIN VILLAGE EMPLOYEE HOUSING APPLICATION

Note: Incomplete applications cannot be accepted.

For those persons intending to occupy an employee housing unit in the Town of Mountain Village (TMV), either as a tenant or an owner-occupant, please submit the following to the San Miguel Regional Housing Authority located at the above address:

- Completed **Application Form** (pages 2-3 below).
- Enclose \$50.00 nonrefundable **Application Fee** (make check payable to SMRHA).
- Enclose a copy of a **Driver's License** or other acceptable proof of identification for each adult occupant (mark out Driv. Lic. no.).
- Enclose a copy of document that verifies the qualified Employee's **residence in Mountain Village**, e.g., drivers license, voter or motor vehicle registration, or pay stub (mark out any Driv. Lic. no. or Soc. Sec. no.).
- If Unit is not Owner-occupied: Enclose a copy of a signed **lease**.
- A signed **Employer/Employee Affidavit of Employment** (page 4) or the **Affidavit of Employee Qualified by Virtue of Age, Employment, and Residency** (if applicable) (page 5); and enclose a copy of your **business license** if you are self-employed.

HOUSEHOLD INFORMATION (Please Print)

Please provide the physical address of the unit: _____ (circle one)
 Lot # _____ Unit # _____ Purchase or Rent # of Bedrooms: _____
 Current Owner: _____

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): _____
 _____ Relationship to Applicant(s): _____

2. Do you currently **live** within the Town of Mountain Village? Yes ____ No ____
3. How long have you **lived** within the Telluride R-1 School District? ____ Yrs. ____ Mos.

4. How long have you been **employed** within the Telluride R-1 School District? ____ Yrs. ____ Mos.

5. For information purposes, if you, your spouse, your dependents, or other co-occupants own **other property** within the Telluride R-1 School District boundaries, list the type and location of each property (i.e., affordable housing, raw land, developed, commercial, etc.):

Each Applicant and adult co-occupant must sign and date this Certification / Affidavit:

[If necessary, please copy or request a copy of this page for submitting additional signatures.]

Under penalty of perjury, I hereby declare and certify that I understand that occupancy of this property is limited to qualified Employee(s) (and their spouse and children) whose Employee Housing Application(s) are approved, and that I intend to occupy this employee housing unit as my primary Residence.

I hereby also declare and certify that all information provided above is true and complete to the best of my knowledge. I acknowledge the Housing Authority or its designee may make inquiries to verify any information provided herein.

Signature: _____ **Date:** _____

Affidavit notarization required here if Applicant is self-employed or purchasing housing:

Subscribed and sworn to (or affirmed) before me in the County of _____, State of Colorado, this ____ day of _____, 20____, by _____.

WITNESS my hand and official seal.

My commission expires: _____.

Notary Public

(Notary Seal)

Signature: _____ **Date:** _____

Affidavit notarization required here if Applicant is self-employed or purchasing housing:

Subscribed and sworn to (or affirmed) before me in the County of _____, State of Colorado, this ____ day of _____, 20____, by _____.

WITNESS my hand and official seal.

My commission expires: _____.

Notary Public

(Notary Seal)

EMPLOYEE HOUSING CERTIFICATE OF QUALIFICATION

Instructions: Complete this page for each Applicant to be considered a qualified Employee. If Applicant is self-employed, enclose a business license copy. The Housing Authority or its designee may make inquiries to verify any information provided herein.

Employer/Employee Affidavit of Employment

Employer's Affidavit

Under penalty of perjury, I, _____, hereby declare and certify that _____ is presently employed as an employee or as an independent contractor by _____ whose principal address of business is: _____, which is located within the Telluride R-1 School District boundaries of San Miguel County and that employment of said employee/independent contractor began on _____.

Employer Signature: _____ Date: _____

Employer phone #: _____

Subscribed and sworn to (or affirmed) before me in the County of _____, State of Colorado, this _____ day of _____, 20____, by _____ (Employer).

WITNESS my hand and official seal.

My commission expires: _____.

Notary Public

(Notary Seal)

Employee's Affidavit

Under penalty of perjury, I, _____, hereby declare and certify that I am presently employed as an employee or as an independent contractor by _____ whose principal address of business is: _____, which is located within the Telluride R-1 School District boundaries of San Miguel County and that my employment began on _____.

Employee Signature: _____ Date: _____

Subscribed and sworn to (or affirmed) before me in the County of _____, State of Colorado, this _____ day of _____, 20____, by _____ (Employee).

WITNESS my hand and official seal.

My commission expires: _____.

Notary Public

(Notary Seal)

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

*****Note: To be completed by your employer(s) or, if you are self-employed, by yourself.*****

Date: _____

This document serves to verify the employment hours and income for the following Employee:

Employee began employment with _____ on (date) _____.
(Company)

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

Employee is (was) employed as _____.
(Job title)

Is (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) **income** of \$ _____ per _____.

Signed:

Employer's signature

Contact telephone number

Employer's name and job title

**Affidavit of Employee Qualifying by Virtue of Age (60+),
Employment, and Residency (if applicable)**

Under penalty of perjury, I, _____, hereby declare that I qualify as an Employee, as defined in the Mountain Village Employee Housing Restriction ordinance, by being more than 60 years of age, by having been employed within the Telluride R-1 School District boundaries, and by maintaining Residence in the Town of Mountain Village.

Signature: _____ Date: _____

Subscribed and sworn to (or affirmed) before me in the County of _____, State of Colorado, this _____ day of _____, 20____, by _____ (Employee).

WITNESS my hand and official seal.

My commission expires: _____.

Notary Public

(Notary Seal)