

SAN MIGUEL REGIONAL HOUSING AUTHORITY

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

TOWN OF MOUNTAIN VILLAGE EMPLOYEE HOUSING APPLICATION

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

1. Completed **Application Form** (page 1-2 below).
2. Enclose \$50.00 nonrefundable **Application Fee** (make check payable to SMRHA).
3. Enclose a copy of a **Driver's License** or other acceptable proof of identification of the qualified Employee (mark out Driv. Lic. no.).
4. If Unit is not Owner-occupied: Enclose a copy of a signed **lease**.
5. A signed **Employer/Employee Affidavit of Employment** (page 3) or the **Affidavit of Employee Qualified by Virtue of Age, Employment, and Residency** (if applicable) (page 3); if self-employed, enclose a copy of your **business license**.

Application Form:

1. Applicant(s): _____

Marital Status: _____

Please list other intended **co-occupants** and **relationship** to Applicant(s): _____

Mailing Address: _____

Phone: _____ Phone: _____ Fax: _____

Email address: _____

2. Location of **Deed Restricted Property** Applicant wishes to inhabit:

Physical Address: _____

Building/Development Name: _____ Unit #: _____ Lot #: _____

3. Do you currently **live** within the Town of Mountain Village? Yes ____ No ____

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

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

6. 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.):

Every Applicant and adult co-occupant must sign and date the following statement:

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

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

EMPLOYEE HOUSING CERTIFICATE

EMPLOYER/EMPLOYEES AFFIDAVIT OF ELIGIBILITY TO OCCUPY EMPLOYEE HOUSING

Note: Complete this page for each occupant to be considered a qualified Employee.

Employer/Employee Affidavit of Employment

Employer's Affidavit

I, _____, hereby declare that _____
is presently employed as an employee or as an independent contractor by _____
_____ whose principal address of business is: _____
_____, and further declare that the above named employee/independent
contractor is employed 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 #: _____

Employee's Affidavit

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

Employee Signature: _____ Date: _____

Note: If self-employed, remember to enclose a copy of your business license.

OR

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

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: _____

Mountain Village Employee Housing Department Certification

The SMRHA, on behalf of the Town of Mountain Village Employee Housing Department, after diligent review, finds that _____ is qualified as an Employee eligible to occupy Employee Housing, as defined in the Employee Housing Restriction Ordinance.

Signature: _____

Date: _____

By (Name): _____

Local Housing Programs Manager
San Miguel Regional Housing Authority