

APPLICATION FOR HOUSING- BUSINESS OWNERSHIP



PLEASE NOTE: All information requested in this application must be provided in its entirety before SCHA can begin processing. Incomplete applications will not be processed until all information is received, and the SCHA processes all applications in the order received.

Before submitting your application, please verify that you have included the following items:

Complete application, including informapplicable Unit or property address, if available	mation for all sections or noting as "N/A" see Section II)	as		
Administrative Use Only – To be Completed by SCHA				
Applicant AMI Level:	Applicant W	ork Req. Met::		
Applicant Property:	Applicant Ov	wns Other RE:		
Applicant Basin Priority Met: (if applicable)	Applicant HE	BE Required:		
Jurisdiction Approval:				
SCHA Signature	Printed Name & Title	Date		
Jurisdiction Signature	Printed Name & Title	Date		

If you have questions about this application, please contact SCHA at (970) 668-4172 or info@summithousing.us

Applications may be dropped off at SCHA (County Commons Building: 37 Peak One Drive, Suite 224; Frisco, CO 80443), mailed to SCHA (P.O. Box 4760; Frisco, CO 80443-4760), or submitted online at www.summithousing.us/scha-document-upload

Applicants MUST provide all information requested in the application for the application to be considered complete and be entered into the processing queue.



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<u>Section I – General Information</u>

		Applicant		
1.	Business/Organization Name:			
2.	Contact Name:			
3.	Contact Email Address:			
4.	Contact Phone:			
5.	Mailing Address:			
6.	Street Address:			
7.	Business Location(s):			
8.	Number of Employees:			
Please provide the address of the property you wish to purchase below. Section III – Agreements				
All a	pplicants acknowledge that the infor	mation contained in this application is complete and correct, and un	derstand that	
any	inaccuracy may disqualify them from	eligibility. <i>The applicant must initial every item below.</i>		
1.	1. I understand that I must rent the property to an individual working at least 30 hours/week on an average annual basis in Summit County (note: self-employed individuals or individuals working remotely from their homes must provide products and or services to Summit County businesses or residents to comply).			
2.	I have read or will read and underst	and the terms of the restrictive covenant.		
	3. I have read or will read and understand the terms of the HOA.			
4.	4. I agree to complete an affidavit of compliance with the terms of the restrictive covenant upon SCHA or jurisdiction request as long as I own the property.			
5.	5. I agree to notify all tenants of the existence of the restrictive covenant and provide them with a copy of the covenant.			
6.	Notwithstanding the notification requirement above, I understand that as the property owner I will ultimately be responsible for compliance with the terms of the restrictive covenant.			

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<u>Section IV – Affirmation</u>

and complete.	t the information provided in this application is true, correct,
Applicant Signature	Date
Applicant Printed Name	Applicant Title

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