



**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:

			Applicant 1	Applicant 2
Complete application, including info applicable	rmation for all sections or n	ooting as "N/A" as		
Two most recent paystubs from all j	obs, including any part-time	e or seasonal positions (see		
Section II.1) Note: If paystubs don'	t show hours worked, the a	ttached verification of		
employment must be completed by	your employer and returne	ed directly to SCHA.		
Most recent W-2s from all jobs, incluII.1)	uding any part-time or seaso	onal positions (see Section		
Employer offer letter from any jobs	started within the last three	e months (see Section II.1)		
Self-employment information for AN income (see Section II.2)	IY amount of Schedule C, pa	artnership or S Corporation		
Most recent tax returns (see Section	ı III.1)			
Additional tax returns as required (s	ee Sections III.2.a.i, III.2.b.i,	or III.2.c.i)		
Unit address (see Section IV)		,		
Colorado driver's license or state ID	and proof of legal residence	e (see Sections V.1.a and		
V.2.a)		•		
\$50.00 nonrefundable application fe	ee (see Section V.9)			
Copy of an unexpired homebuyer ed		of registration in an		
upcoming class (see Section V.6)	·	G		
Lender prequalification letter (see S	ection V.10)			
	,			1
	Administrative Use Only – T	o be Completed by SCHA		
Applicant AMI Level and Priority:		Applicant ADA Priority:		
Applicant Aivil Level and Friority.		Applicant ADA Friority.		
Applicant Approved Units:		Applicant Owns Other RE:		
Applicant Location Priority Met: (if applicable)		Applicant HBE Required:		
urisdiction Approval:				
COLUMBIA I				
SCHA Signature	Printed Name & Title		Da	te
Jurisdiction Signature	Printed Name & Title		Da	te

If you have questions about this application, please contact SCHA at <a href="mailto:info@summithousing.us">info@summithousing.us</a>.

All application materials must be submitted via the SCHA's web portal: <a href="www.summithousing.us/scha-document-upload">www.summithousing.us/scha-document-upload</a>. Upon successful submission, you will receive an email confirmation. If you do not receive this confirmation, contact us as soon as possible so that we may assist you.





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

Information must be provided for all applicants. A legal spouse or any other individual who will be on the title of the property is considered an applicant. Attach additional sheets as needed if there are more than two applicants.

		Applicant 1	Applicant 2
1.	Full Name:		
2.	Email Address:		
3.	Phone:		
4.	Mailing Address:		
5.	Street Address:		
6.	Are you a first-time homebuyer?		
	a. If so, you must provide an unexpired certificate or proof of registration (see SCHA website education page for options).		
7.	Do you own any interest in other real estate?		
	a. If so, provide the property address and note whether it is residential, commercial, or vacant		

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8. Please list all other members of your household that are not applicants above. Attach additional sheets as needed.

Age	Relationship
	Age

9.	What is	your	current	living	situation?
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	Applicant 1	Applicant 2
Renting		
Own		
Staying with family & friends:		
Other (please describe):		

### **Section II - Employment Information**

Please answer "Y" or "N" for all items listed in this section. You must include information for all jobs held in the past two years, even if they are part-time or seasonal. If you are no longer at a job, please provide the requested information but note that you are no longer there and the date your employment ceased. Attach additional sheets as needed.

By providing this information, you give SCHA permission to contact your employer(s) to confirm your income and hours worked.

#### W-2 Income

- 1. Do you receive W-2 wages? If so, complete the following section. Attach additional sheets as needed.
  - a. Primary Employer
    - i.Primary employer name:
  - ii.Primary employer *physical* address:
  - iii.Primary employer HR contact name:

Applicant 1	Applicant 2

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Applicant 1



Applicant 2

iv.Primary employer HR contact phone:		
v.Primary employer hours worked/week:		
vi.Primary employer hire date:		
vii.If your hire date was within the past 3 months, you must provide a copy of your offer letter or equivalent statement from the company detailing your salary and anticipated hours worked.		
viii.Primary employer job title:		
ix. You must provide the two most current pay stubs for this employer, even if the position is seasonal and the current season has ended.		
x.You must provide the most current Form W-2 for this employer.		
xi.If this is a seasonal position, please provide the start and end date of your normal working season.		
b. Employer #2		
i.Employer #2 name:		
ii.Employer #2 HR contact name:		
iii.Employer #2 HR contact phone:		
iv.Employer #2 hours worked/week:		
v.Employer #2 hire date:		
vi.If your hire date was within the past 3 months, you must provide a copy of your offer letter or equivalent statement from the company detailing your salary and anticipated hours worked.		
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	Applicant 1	Applicant 2
vii.Employer #2 job title: viii.You must provide the two most current pay stubs for this employer, even if the position is seasonal and the current season has ended.		
ix. You must provide the most current Form W-2 for this employer.		
x.If this is a seasonal position, please provide the start and end date of your normal working season.		
c. Employer #3		
i. Employer #3 name:		
ii. Employer #3 HR contact name:		
iii. Employer #3 HR contact phone:		
iv. Employer #3 hours worked/week:		
v. Employer #3 hire date:		
vi. If your hire date was within the past 3 months, you must provide a copy of your offer letter or equivalent statement from the company detailing your salary and anticipated hours worked.		
vii. Employer #3 job title:		
viii. You must provide the two most current pay stubs for this employer, even if the position is seasonal and the current season has ended.		
ix. You must provide the most current Form W-2 for this employer.		
x.If this is a seasonal position, please provide the start and end date of your normal		

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working season.

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Applicant 1



Applicant 2

Self-Emi	ola	ment	Income-	BE	<b>SURE</b>	то	READ	)!
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- 2. Are you a contractor or self-employed? If so, complete the following section. Attach additional sheets as needed. HINT: If you file a Schedule C or a partnership/s corporation Schedule E with your income tax return, you are considered self-employed and must complete this section, even if you also work for a W-2 employer.
  - a. How many hours/week do you work providing products or services to businesses or residents of Summit County? HINT: You must provide products or services specifically within Summit County working remotely for an out-of-county employer will likely not qualify. Please provide a letter detailing your work hours per week and explaining how your business serves Summit County.

	business serves Summit County.
b.	Business #1 name:
i.	Business #1 start date:
c.	Business #2 name:
i.	Business #2 start date:
d.	Business #3 name:
i.	Business #3 start date:

Applicant 1	Applicant 2
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<b>3</b> .	please list them here.

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Applicant 2

Applicant 1

### <u>Section III – Income Tax Information</u>

Please answer "Y" or "N" for all items listed in this section. If you have any unusual items on your income tax return that will not be received in future years, please provide this information in the notes at the end of this section; otherwise, all income items will be considered recurring and will be included in your household income calculation.

Complete the following section using information from your Form 1040 filing.	
, , , , , , , , , , , , , , , , , , , ,	
a. Was there any amount on Schedule 1 Line 3 (Business income or loss) or a Schedule C attached to the return?	
i. If so, you must ALSO provide the prior income tax return (e.g., if your most current tax return was for 2019, you must also provide your return for 2018).	
b. Was there any amount on Schedule 1 Line 5 (Rental real estate, royalties, partnerships, S corporations, trusts, etc.) or a Schedule E attached to the return?	
i. If so, you must ALSO provide the prior income tax return (e.g., if your most current tax return was for 2019, you must also provide your return for 2018).	
c. Were you an owner of a partnership or S Corporation?	
i. If so, you must provide the same two years' business return(s) for ALL businesses listed on Schedule E (Form 1065 or Form 1120S). If you don't have access to the full business returns, provide your Form K-1s received for the same two years and include a note on why you cannot provide the full return(s). For example, if you provided 2019 & 2018 personal income tax returns and you were a 50% owner of an S Corporation, you would also provide Form 1120S for 2019 & 2018.	
3. If you have any additional explanations or notes related to your income tax return(s) (e.g., one-time or unusual inability to provide business tax returns, etc.), please list them here.	items,

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### **Section IV – Unit Selection**

1.	Please provide the address of the property you wish to purchase.		
		Section V – Agreements  that the information contained in this application is complete and correct, and understand that fy them from eligibility. Each applicant must initial every item below. Attach additional sheets as an two applicants.  Applicant 1 Applicant 2  Driver's License or Colorado State ID, and I am eligible to receive opy of my Colorado Driver's License or Colorado State ID. If the United States. opy of my U.S. passport, birth certificate issued by a U.S. state, zenship, Naturalization Certificate, Permanent Resident Card, or on proving legal residence. Is/week on an average annual basis in Summit County (note: self- or individuals working remotely from their homes must provide es to Summit County businesses or residents to comply). If and understand the terms of the HOA. If irist-time homebuyer above, I have provided a copy of my or registration for a class being held within the next 60 days. Is to one Smith Ranch Phase 3 deed restriction & HOA informational HA prior to closing and occupancy. affidavit of compliance with the terms of the restrictive covenant ion request as long as I own the property. n-refundable application fee of \$50.00. also be submitted via Zelle to info@summithousing.us edit card payments are not accepted.	
	Section V – Agreements		
	inaccuracy may disqualify them from eligibility. <i>Each applicant must initial every item below</i> ded if there are more than two applicants.	. Attach additio	onal sheets as
		Applicant 1	Applicant 2
1.	I have a valid Colorado Driver's License or Colorado State ID, and I am eligible to receive public benefits		
	a. I have provided a copy of my Colorado Driver's License or Colorado State ID.		
2.	I am a legal resident of the United States.		
	a. I have provided a copy of my U.S. passport, birth certificate issued by a U.S. state,		
	Certification of Citizenship, Naturalization Certificate, Permanent Resident Card, or		
2	· · · · · · · · · · · · · · · · · · ·		
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	products and or services to Summit County businesses or residents to comply).		
4.	I have read or will read and understand the terms of the restrictive covenant.		
5.	I have read or will read and understand the terms of the HOA.		
6.	If I marked that I was a first-time homebuyer above, I have provided a copy of my		
	unexpired certificate or registration for a class being held within the next 60 days.		
7.	I agree to attend at least one Smith Ranch Phase 3 deed restriction & HOA informational		
	class to be held by SCHA prior to closing and occupancy.		
8.	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.		
9.	, , , , , , , , , , , , , , , , , , , ,		
	Fees may also be submitted via Zelle to <a href="mailto:info@summithousing.us">info@summithousing.us</a>		
	Cash or credit card payments are not accepted.		
	Please note that the application fee becomes non-refundable at the time it is submitted to		
	SCHA, even if the application is later deemed to be incomplete or otherwise ineligible for		
	the lottery.		

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10. I have provided my lender prequalification letter.

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#### Section VI - Affirmation

I, the undersigned, hereby declare, under penalty of perjury, that the information provided in this application is true, correct and complete. Attach additional sheets as needed if there are more than two applicants.					
·	.,				
Applicant #1 Signature	 Date				
3					
Applicant #1 Printed Name					
Applicant #2 Signature	 Date				
-					
Applicant #2 Printed Name					

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### SCHA VERIFICATION OF EMPLOYMENT

Applicant Name:

	orizes verification of my employment information. rm to their human resources department or manager.		
A	oplicant Signature	Date	
The individual has signed the alwill remain confidential. Please <a href="https://www.summithousing.us.">https://www.summithousing.us.</a>	bove release giving you permission e return the completed form via our /scha-document-upload/.	am that requires verification of income and hours to supply us with information. The information presecure document upload portal at:  *resentative to the SCHA. Incomplete or illegible*	
	essing of the employee's housing a		
	Employer Infor	nation	
Employer Name:			
Employer Email:	Emp	oloyer Phone:	
	Hour Informat	on	
Date of Hire:	Position:		
Is this position (check one):	☐ Full-Time Year Round	☐ Part-Time Year Round	
	☐ Full-Time Seasonal	☐ Part-Time Seasonal	
Regular Hours per Week:		urs per Week:	
Seasonal Employees (Dates sho	ould be estimated based on best info	rmation available if not known):	
Current/Next Season Start Date	(MM/DD/YYYY):	<u> </u>	
Current/Next Season End Date	(MM/DD/YYYY):	<u> </u>	





#### SCHA VERIFICATION OF EMPLOYMENT

Applicant Name: **Income Information** Base Pay: \$\_\_\_\_\_ Per (check one): ☐ Year ☐ Month ☐ Week ☐ Hour ☐ Other: \_\_\_\_\_ Year-to-Date Earnings: \$\_\_\_\_\_\_ YTD From: \_\_\_\_\_\_ YTD To: \_\_\_\_\_ Overtime Hours per Week: Overtime Pay Rate: \$\_\_\_\_\_ Average Shift Differential Hours per Week: \_\_\_\_\_ Shift Differential Rate per Hour: \$\_\_\_\_\_ Does this employee receive? (check all that apply)  $\square$  Bonuses  $\square$  Tips  $\square$  Commission  $\square$  None Average bonus/tips/commission: \$\_\_\_\_\_ Per (check one): ☐ Year ☐ Month ☐ Week ☐ Hour ☐ Other: \_\_\_\_\_ Are bonus/commissions/tips guaranteed? ☐ Yes ☐ No Explain: Date of Next Pay Increase (if known): Amount of Next Pay Increase (if known): \$\_\_\_\_\_ Additional Employer Comments: WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful, false statements of misrepresentation to any Department or Agency of the U.S. as to any matter within its jurisdiction. Signature of Employer Representative Date



Email

Printed Name, Title

Phone