WETTERHORN HOMES RIDGWAY

APPLICATION CHECKLIST

	\$25 non-refundable Application Fee (Check made payable to Impact Development Services or pay online at impactdf.org/impactdevelopmentservices – cash will not be accepted)
	Completed Application
	Mortgage Pre-Qualification Letter (only required if purchasing a housing unit)
	Copy of unexpired legal ID (including driver's license, identification card, or passport)
	Copies of complete & filed most recent Federal Tax Returns (Please black out Social Security Number)
	Copies of all most recent year's W-2's and 1099's (Please black out Social Security Number)
	Copies of most recent paystub from all current employers with year-to-date information (Also include any previous employers from the prior 12 months)
	6 most recent months statements from all checking accounts
	Most recent month statement from all other asset accounts (including, but not limited to savings, money market, retirement, investments, mutual funds, Paypal, Venmo, CashApp, virtual currency)
	Verification of Employment (Please provide one complete form from each current W2 employer)
If [,]	you are Self-Employed, please include:
	Copy of Business License
	Verification of Hours worked in Ouray County
	(invoices, ledgers, etc.)
	Profit and Loss Statement (From the past 12 months as of the date on this application)
	Client Verification of Income and Hours Form (Third Party Verification is preferred. Form can be found at impactdf.org/impactdevelopmentservices)

COMPLETE APPLICATIONS WILL BE ACCEPTED ON A ROLLING BASIS

If you have questions, please contact:

Jim Kolnik at 970-541-2617

between the hours of 7:30am and 4:00pm Monday – Friday

You may also reach out via email lottery@impactdf.org

Return Completed Applications Via:

lottery@impactdf.org - EMAIL SUBMISSION IS STRONGLY ENCOURAGED

Should you need to deliver a hardcopy of your application, please email lottery@impactdf.org to coordinate submission

WETTERHORN HOMES RIDGWAY

HOME APPLICATION

HOUSEHOLD INFORMATION

ДΡΙ	PLICANT:				
		Phone # (res.):			
		Phone # (cell):			
E-m	nail address:	Phone # (bus.):			
co.	-APPLICANT:				
		Phone # (res.):			
Phy	ys. address:	Phone # (cell):			
E-m	nail address:	Phone # (bus.):			
<u></u>	HER HOUSEHOLD MEMBERS:	Relationship:			
		Relationship:			
_	Household?	asonable Accommodation* for yourself or a member of the nges which may be necessary in order for a person with a			
	PROPER	TY OWNERSHIP			
 How long have you lived in your current home? Years Months Do you own your home? YES NO Do any or any members of your Household own improved residential property within 150 mil YES NO If yes, please describe the type (free market, Deed Restricted) and address of property: 					

If you own a property within 150 miles of Wetterhorn Homes Ridgway, you must sign an Agreement to Sell Property and sell your home within eight (8) months of purchasing a Wetterhorn Homes Ridgway unit. Please include the Agreement to Sell Property with this application.

EMPLOYMENT

AF	PPLICANT						
5.	All Current Employer(s):						
6. Do you currently work within the boundaries of Ouray County?							
	a. YES Go to question #7 b. NO Go to question #8						
7.	If yes: a. How many hours per week? b. How many hours per year? c. Do you plan to continue that employment? YES NO						
8.	If no, do you have employment that will begin within the boundaries of Ouray County for a minimum of 40 hours per month and 1200 hours per year?						
	YES NO						
CC	D-APPLICANT (IF APPLICABLE)						
9.	All Current Employer(s):						
10.	. Do you currently work within the boundaries of Ouray County?						
	a. YES Go to question #11 b. NO Go to question #12						
11.	. If yes:						
	 a. How many hours per week? b. How many hours per year? c. Do you plan to continue that employment? YES NO 						
12.	If no, do you have employment that will begin within the boundaries of Ouray County for a minimum of 40 hours per month and 1200 hours per year?						
	YES NO						

INCOME

Please total your **Gross Household income** of the <u>past 12 months</u> from the following sources:

\$ Income from Employment
Includes income on W-2 and 1099 forms such as wages, salaries, overtime pay,
commissions, fees, tips and bonuses, and any other employment income from
partnerships or S corporations
\$ Benefit Payments
Includes Social Security, SSI, Workers' Compensation, Disability pay or benefits,
unemployment benefits, severance pay, annuities, pensions, retirement or death benefits
\$ Alimony and/or Child Support
\$ Interest, dividends, and other income from Household Assets
Includes interest from bank accounts or bonds, dividends from stocks or mutual funds,
income distributed from trust funds, etc.
\$ Re-occurring/ and/or One-Time Monetary Gifts from family members
\$ Rental Income
Includes income from renters/roommates
\$ Other Capital Income
Includes multiple-year capital gains, royalties
\$ Other Income
Please specify Please specify
\$ TOTAL GROSS HOUSEHOLD INCOME

HOUSEHOLD NET ASSETS

Include cumulative assets and liabilities for all Household Members.

HOUSEHOLD GROSS ASSETS

Cash/Cash Equivalents	Real Estate		
Cash on Hand	\$ Residential		\$
Checking Account	\$ Land		\$
Saving Account	\$ Other:		\$\$
Money Market Funds	\$ 		
Cash Value of Life Insurance	\$ 		
Other	\$ 		
Investments	Personal Pro	perty	
Certificates of Deposit	\$ Automobiles		\$
Stocks	\$ Recreational	Vehicle/Boat	\$
Bonds	\$ Home Furnis	hings	\$
Mutual Funds	\$ Appliances/F	urniture	\$
Annuities	\$ Collections		\$
Retirement Funds	\$ Jewelry		\$
Funds in names of dependents	\$ Other		\$
Other			
Business Assets (if applicable)	\$ 		
Total Household Assets	\$ 		
	HOUSEHOLD GROSS LIABILIT	<u>ries</u>	
Current Debts	Outstanding	Loans	
Household (e.g. rent)	\$ Bank/Financ	e Company	\$
Business	\$ Automobile		\$
Medical	\$ Recreational	Vehicle/Boat	\$
Credit Cards	\$ Education		\$
Department Store Cards	Life Insuranc	e	\$
Legal	\$ Personal (far	mily/friends)	\$
Taxes Owed	\$ Business		\$
Other	\$ Other		\$
Mortgages			
Residential			
Land			
Other	\$ 		
Total Household Liabilities \$	<u></u>		
	HOUSEHOLD NET ASSETS	}	
\$	LESS \$	-	
	TOTAL LIABILITIES		

APPLICANT(S) CERTIFICATION

Under penalty of perjury, the Applicant(s) certifies the following:

- 1. All information provided in this application, including attachments, submitted to the Impact Development Services to purchase Wetterhorn Homes Ridgway Deed Restricted Property are true, complete, and correct to the best of the Applicant(s) knowledge;
- 2. The Applicant(s) has/have been given a standard application; and,
- 3. The Applicant(s), on the basis of the application presented, believes the Household qualifies to occupy the Housing Unit(s) in question according to the Deed Restriction, the Guidelines and all other applicable procedures, rules and regulations.

Any material misstatement of fact or deliberate fraud by the Household in connection with any information supplied to Impact Development Services shall be cause for immediate expulsion from the application process and/or forced sale of the Housing Unit.

Applicant Signature	Date	Co-Applicant Signature	Date	
Print Name		Print Name		

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

- 1. As part of the application process to purchase a Wetterhorn Homes Ridgway Deed-Restricted property, the Impact Development Services may request any combination of documentation reasonably related to proof of income, assets, and employment. Impact Development Services may also 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 the Impact Development Services any and all information and documentation in your care or custody upon request by Impact Development Services. Such information includes, but is not limited to, employment history and income; bank, money market, and similar account balances, and copies of federal income tax returns.
- 3. I/We authorize you to contact current and previous employers to verify employment dates, hours and pay rate.
- 4. I/We understand(s) that information may be shared with the San Miguel Regional Housing Authority ("SMRHA") staff who may act as advisor and provide administrative support to Impact Development Services.
- 5. A copy of this authorization may be accepted as an original.
- 6. This authorization continues throughout the application process and ownership period, if any, and expires when I/we have sold and vacated the deed-restricted property.

Applicant Signature	Date	Co-Applicant Signature	Date	
Print Name		Print Name		

DISCLAIMER: All personal information collected by Wetterhorn Homes Ridgway, LLC and Impact Development Services is done so exclusively with your consent, by means of the signed completion of this form and the Release of Information form. The personal information collected is only used for the purposes of qualifying you for the Wetterhorn Homes Ridgway Project. We will not, under any circumstances, share your personal information with other individuals or organizations without your permission, including public organizations, corporations, or individuals. We do not sell, communicate, or divulge your information to any mailing lists. We store your file ourselves and we use and apply the appropriate security measures to preserve the confidentiality of your information.

FAIR HOUSING: Wetterhorn Homes Ridgway, LLC and Impact Development Services are committed to compliance with all federal, state, and local fair housing laws. We will not discriminate against any person because of race, color, religion, national origin, sex, familial status, disability, or any other specific classes protected by applicable laws. Norwood Homes, LLC will allow any reasonable accommodation or reasonable modification based upon a disability-related need. The person requesting any reasonable modification may be responsible for the related expenses.

CORA: SMRHA is subject to the Colorado Open Records Act (CORA) Colorado Revised Statutes section 24-72-201, *et seq*. Any information that you provide to Impact Development Services that is shared with SMRHA becomes public record, with the exception of specific confidential information as stated in CORA. Confidential information under CORA includes 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.

REQUEST FOR VERIFICATION OF EMPLOYMENT

SECTION A: APPLICANT Please fill out Section A then give this form to your employer to complete Sections B and C.					
Applicant Name:		mployer Na		ons b una c.	
Address:	A	ddress:			
City, State, Zip Code	C	ity, State, Z	Zip Code		
Phone:	P	hone:			
I authorize you to release my employment infor	rmation to Ir	npact Deve	elopmen	t Services.	
Employee's Signature:				Date:	
SECTION B: EMPLOYER					
Please provide the following information for the	above listed	l employee	e, then se	end <u>the completed form</u> to the	
email at bottom of page. Please call 970-541-26		•		•	
Present position:	Da	tes of emp	oloyment	: :	
Probability of continued employment:	<u> </u>				
Current gross pay (per pay period): Rate per	hour:		Average l	hours worked per week:	
Please check the frequency of pay: □ Hourly □ Weekly □ 2X / month (24X /	year) 🗆 B	i-weekly	☐ Mor	nthly Dther:	
Average hours worked per year: Percent of work	inside Ouray Co	ounty:	Percent	of work outside Ouray County:	
Overtime rate per hour:	Av	erage num	ber of o	vertime hours per week:	
Commissions earned per week:	<u> </u>				
Tips earned per week:	An	nual bonu	ses:		
Date and amount of applicant's last pay increas	e: Da	te:		Amount:	
Is the employee a seasonal worker:				Average weeks worked per year:	
Additional information (please explain seasonal	Additional information (please explain seasonal work cycles and other pertinent information)				
Employee's total gross annual income: \$				Please include any paid holida and paid time off in annual tot	-
SECTION C: EMPLOYER AUTHORIZED SIGNATURE					
Signature:	Ti	tle:			
Printed Name:	Pł	none & Em	ail Addre	ess:	

Under penalty of perjury, I declare that all information contained herein is true, correct, and complete to the best of my knowledge and belief.