



Resale Lottery Application Form

Date here
Property address

Applying as a couple to own the property jointly? Complete the application in the person's name with the greatest verifiable longevity in the Valley.

Name: _____
Primary Applicant's First Middle Last

Physical Address: _____

Mailing Address: _____

Phone Numbers: Day _____ Evening _____

Email Address: _____ Cell Phone: _____

Name: _____
Secondary Applicant's First Middle Last

Email Address: _____ Cell Phone: _____

B. Eligibility (initial each item after completion)

1. _____ I have attached a legible copy of my current **driver's license**.
2. _____ I have secured a **mortgage prequalification** and have attached a letter from a lender stating the maximum mortgage for which I am qualified.
3. _____ I have attached a current copy of my **Homebuyer Class** certification

OR

_____ I agree to take the Homebuyer class within six months of the resale lottery drawing date. If selected in the lottery, I **will use the residence as my primary home** and maintain it as my primary residence in the future.

4. **Y/N** Do you or any immediate family members, including but not limited to spouse and children less than 18 years of age currently **own or have an ownership interest in any improved residential property in Eagle County?**

_____ I understand that if I am selected to purchase a home I intend to sell my existing residential property in Eagle County

OR

_____ I intend to apply for Town of Vail approval to deed restrict my existing residential property located in Eagle County. I understand that if accepted, the deed restriction will not be purchased by the Town.

5. _____ I am **currently working a minimum average of 30 hours per week** at the following businesses located in Eagle County and I have attached legible copies of my two most recent pay stubs.

Business Names:

OR

_____ I am aware that **75% of my income must be earned by working in Eagle County**. I have attached legible copies of my most recent tax returns. (Please provide most recent tax returns.)

C. Offer Price

I would like to place an offer on _____ (address).

My Offer Is \$_____ Preferred Closing Timeframe: _____

Date of Offer: _____ Lending: _____ % LTV or \$_____ DP

Primary Applicant's Signature

Print Name

Date

Secondary Applicant's Signature

Print Name

Date

D. Longevity

1. Employment

Begin with the most recent. Below, list each job you have had in Eagle County only. Include the name of the business, the street location and town where you worked, the duration of employment (i.e., 11/93 to 3/96), and the total number of years and months employed at that location. If your employer has several business locations in the County and for example, you worked at different locations for different seasons, list each physical location at which you worked separately.

Describe the documentation you have attached for each time period and location. Do not put phone numbers on the documentation lines. We will not verify any employment without documentation. If affidavits are used, they must be notarized by the landlord or employer. If you are applying as a couple to jointly own the property, provide the *employment history of the one person* whose record is the longest.

	Business Name w/ physical address	Job Title	Employed from:	Type of Documentation provided: (W2 or tax record, pay stub, affidavit)
1.	_____	_____	___/___ to ___/___	_____
	_____	_____		_____

2.	_____	_____	___/___ to ___/___	_____
	_____	_____		_____

3.	_____	_____	___/___ to ___/___	_____
	_____	_____		_____

4.	_____	_____	___/___ to ___/___	_____
	_____	_____		_____

5.	_____	_____	___/___ to ___/___	_____
	_____	_____		_____

6.	_____	_____	___/___ to ___/___	_____
	_____	_____		_____

Copy and add additional pages if necessary

2. Residency

Below, list each location you have lived within Eagle County. Begin with the most recent. Include the physical location (street address and town), the length of residency (i.e., 11/93 to 3/96), and the total number of years and months lived at that location. Describe the documentation you have attached for each time period and location. Do not put phone numbers on the documentation lines - we will not verify any residency without documentation. If affidavits are used, they must be notarized. If you are applying as a couple to jointly own the property, provide the residency history of the one person whose record is the longest.

	Residence address w/ physical address	Length of Residence	Total years & months	Documentation provided: (lease, utility bill, cancelled check, affidavit)
1.	_____	___/___ to ___/___	___ years ___ months	_____
	_____			_____
2.	_____	___/___ to ___/___	___ years ___ months	_____
	_____			_____
3.	_____	___/___ to ___/___	___ years ___ months	_____
	_____			_____
4.	_____	___/___ to ___/___	___ years ___ months	_____
	_____			_____
5.	_____	___/___ to ___/___	___ years ___ months	_____
	_____			_____
6.	_____	___/___ to ___/___	___ years ___ months	_____
	_____			_____
7.	_____	___/___ to ___/___	___ years ___ months	_____
	_____			_____
8.	_____	___/___ to ___/___	___ years ___ months	_____
	_____			_____
6.	_____	___/___ to ___/___	___ years ___ months	_____
	_____			_____

Copy and add additional pages if necessary

E. Certification

This application must be completed in its entirety, all claims and documentation must be accurate and verifiable. You will only receive lottery tickets based on verified information.

___ I/We affirm that the information provided is true, complete and accurate as of this ___ day of _____, 20__.

___ I/We understand that any inaccuracy or incomplete statement may disqualify me/us from eligibility for purchase of a home.

___ I/We understand that this application in its entirety will become the property of the Town of Vail.

___ I/We also understand that the deadline for submitting these materials is 5:00 PM on _____, 20__.

___ I/We have received a copy of the Deed Restriction Agreement for the Occupancy and Resale of _____ and the Town of Vail Employee Housing Guidelines and, if selected to purchase a home, I/we agree to adhere to these policies. The copy of the Guidelines that I/we have reviewed is dated _____.

The mortgage lender prequalification letter that I/we have submitted from _____ is an accurate reflection of my/our financial status. The maximum sales price for a home that I/we are qualified to purchase is \$_____. I/We are also aware that this mortgage lender prequalification letter is only valid for ___ days or until _____. After this time, I/we will supply a more current letter from my/our lender.

___ I/We understand the lottery will be held on _____, 20__, at ___ AM/PM in the _____.

___ I/We understand we do not have to be present.

___ I/We understand that I/we will have three (3) business days to decide whether to purchase the home.

___ I/We will have the ability to put 3% of the purchase price down as earnest money at the time of signing the contract.

___ **I/We understand that the Town of Vail will not be responsible for contacting me if I am out of town.**

Signed this ___ day of _____, 20__.

Primary Applicant's Signature

Print Name

Secondary Applicant's Signature

Print Name

Further, affiant sayeth naught.

By: _____ and _____
Signature of Owner Signature of Owner

STATE OF)
)
COUNTY OF) ss.

The foregoing instrument was acknowledged before me this ___ day of _____, 20__ by _____.

Witness my hand and official seal. My commission expires: _____

Signature of Notary Public: _____