## **How to Calculate Your Monthly Rent Relief Eligibility**

IMPORTANT: Only page 2 of this document must be submitted each month. If you submit both pages with your monthly application, the information contained herein will become public record which can be shown to anyone who requests to see it. This worksheet should be shared with your landlord, to show the maximum amount they may reduce your rent with 50% of that amount being reimbursed by the Town of Vail.

## Complete the steps below to calculate your eligible rent relief amount

1. Enter your 2019 gross monthly sales as reported on your Town of Vail sales tax return	
2. Enter your 2020 gross monthly sales as reported on your Town of Vail sales tax return	
Your 2020 monthly sales must be lower than your 2019 sales in order to be eligible for this	s program
3. Subtract line 2 from line 1	
4. Divide line 3 by line 1	%
5. Multiply your total monthly rent & CAM Payment by the % on line 4	\$

This is your maximum rent relief eligibility amount. Your landlord may agree to reduce your rent by up to this amount and the Town of Vail will reimburse them 50% of the reduction. The maximum reimbursement for any business is \$15,000 over the course of the 4 month program. All applications are subject to audit by the Town of Vail finance department. Erroneous or false applications will result in a denial of eligibility and a revocation of funds.



**Business Name:** 

Rusiness Address

## **Commercial Rent Relief Landlord Affidavit**

Town of Vail Business License #:

Instructions: Businesses applying for rent relief must complete this form separately for each month applied. Your maximum eligible rent relief amount can be calculated by using the steps on page 1 of this document. The commercial landlord must complete the landlord acknowledgement portion of the form and sign this affidavit.

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Business Phone Number:	Business Email:	
Landlord Name:		
If landlord is a corporation or LLC, name o	f authorized signatory:	
Landlord/Signatory Address:		
Landlord/Signatory Phone Number:	Landlord/Signatory Email:	
	Rent Relief Amount	
1. Enter the business' regular monthly ren	t + CAM charges as listed on your lease:	
2. Enter the amount of rent relief your lan	dlord has agreed to. This amount	
cannot exceed your maximum eligible am	ount as calculated on pg. 1.	
3. Multiply line 2 by 50% - This is the amo	unt the Town of Vail will reimburse to	
your landlord:		
	Landlord Acknowledgement	
I (landlord name)	agree to reduce the rent of (business name) _	by
\$ for the month of	, 2020 contingent upon approval of this a	pplication by the Town of Vail.
The Town of Vail will reimburse me 50% p	ercent of this reduction or \$	
By completing and signing this affidavit in the landlord acknowledgement.	I (we) affirm that, under pains and penalties of per	jury, that I agree to all terms
Landlord Signature	Printed Name	Date

A copy of this signed affidavit must be submitted online with the business' monthly relief application at http://vailgov.com/departments/finance/commercial-rent-relief-program. Unsigned and paper applications will not be considered.