



EMPLOYEE HOUSING RESTRICTION EXCEPTION REQUEST

Planning & Development Services
455 Mountain Village Blvd. Suite A
Mountain Village, CO 81435
970-728-1392
970-728-4342 Fax
cd@mtnvillage.org

Revised 2.26.18

EXCEPTION APPLICATION		
APPLICANT INFORMATION		
Name:		E-mail Address:
Mailing Address:		Phone:
City:	State:	Zip Code:
Mountain Village Business License Number:		
PROPERTY INFORMATION		
Physical Address:		Acreage:
Zone District:	Zoning Designations:	Current Recorded Employee Housing Restriction: Please attach PDF of current recorded restriction
Legal Description:		
Existing Land Uses:		
Proposed Deed Restriction: Please provide an MS Word file of the proposed deed restriction.		
OWNER INFORMATION		
Property Owner:		E-mail Address:
Mailing Address:		Phone:
City:	State:	Zip Code:
DESCRIPTION OF REQUEST		



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**OWNER/APPLICANT
ACKNOWLEDGEMENT
OF RESPONSIBILITIES**

I, _____, the owner of Lot _____ (the "Property") hereby certify that the statements made by myself and my agents on this application are true and correct. I acknowledge that any misrepresentation of any information on the application submittal may be grounds for denial of the development application or the imposition of penalties and/or fines pursuant to the Community Development Code. We have familiarized ourselves with the rules, regulations and procedures with respect to preparing and filing the development application. We agree to allow access to the proposed development site at all times by members of Town staff, DRB members and the Town Council. We agree that if this request is approved, it is issued on the representations made in the development application submittal, and any approval or subsequently issued building permit(s) or other type of permit(s) may be revoked without notice if there is a breach of representations or conditions of approval. We further understand that I (we) are responsible for paying Town legal fees and other fees as set forth in the Community Development Code.

Signature of Owner Date

Signature of Applicant/Agent Date

OFFICE USE ONLY	
Fee Paid:	By:
	Planner:



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OWNER AGENT AUTHORIZATION FORM

I have reviewed the application and hereby authorize _____ of
_____ to be and to act as my designated representative and represent the development
application through all aspects of the development review process with the Town of Mountain Village.

(Signature)

(Date)

(Printed name)



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HOA APPROVAL LETTER

I, (*print name*) _____, the HOA president of property located at _____, provide this letter as written approval of the plans dated _____ which have been submitted to the Town of Mountain Village Planning & Development Services Department for the proposed improvements to be completed at the address noted above. I understand that the proposed improvements include (*indicate below*):

(Signature)

(Date)

(Printed name)