

SELF-EMPLOYMENT STATEMENT
Please attach to Deed Restricted Application

Applicant Name: _____
Business Name: _____ Address: _____
Nature of Business: _____

Dates of self-employment: _____ to _____

Seasonal Year-Round AND Part-time Full-time

% of work which requires presence within the R1 School District: _____%

Hours: Total number of hours worked in the last 12 months: _____

Number of months worked a minimum of 40 hours: _____

Income: Total gross income distribution in the last 12 months: \$ _____

Paid a gross amount of \$ _____ Hourly Daily Weekly Bi-Weekly Monthly

REQUIRED DOCUMENTATION:

- Copy of current business licenses
- Copy of professional licenses (*if applicable*)
- Verification of hours
 - i.e. - **invoices, ledgers, business logs of clients with locations, dates/times/hours worked**
- Client Verification(s)
 - **third party verification is required if applicant does not submit detailed timelogs**

CERTIFICATION

I can provide names and addresses of clients, jobs, and other pertinent information to support my employment upon request. I understand that this information may be used to verify my qualification for ownership and/or occupation of deed restricted housing. I will provide other information pertaining to my qualifications under the deed restriction as requested.

Under penalty of perjury, I, the undersigned, declare that all information submitted, including attachments submitted to SMRHA verify my self-employment, are true, complete, and correct to the best of my knowledge and belief.

Signature: _____ Date: _____

STATE OF COLORADO)
)ss.
COUNTY OF SAN MIGUEL)

Acknowledged, subscribed, and sworn to before me this _____ day of _____ 2024 by

Witness my hand and official seal.

My Commission Expires: _____

Notary Public
[REQUIRED]