

LEAVE OF ABSENCE REQUEST

*Please complete this form and forward to your Homeowner's Association.
Completed form must be returned to The Housing Office at least 30 days prior to leaving.*

Name: _____

Address: _____

Mailing Address: _____

Day Phone: _____ Eve. Phone : _____ Cell: _____

Request Dates from: _____ To: _____

Reason for Request: _____

Commitment to return to the Aspen/Pitkin County area, please explain: _____

The Aspen/Pitkin County Housing Guidelines allow for a Leave of Absence up to one year with the approval of your Homeowner's Association. The homeowner must provide clear and convincing evidence, which shows a bona fide reason for leaving and a commitment to return to the Aspen/Pitkin County area.

Local Emergency Contact Information:

Name(s): _____

Day Phone: _____ Eve. Phone : _____ Cell: _____

Address: _____

With an **approved** Leave of Absence owner may rent the unit to a qualified employee(s) for the amount of owner's monthly housing expenses: monthly mortgage principal and interest payment, association fees, utilities remaining in owner's name, taxes (if not part of mortgage payment) plus \$50, or the allowable maximum rent listed in the Guidelines for the size and category of your home, which ever is greater.

Please list MONTHLY home expenses:

| | |
|--|----------------|
| Mortgage Payment(s): | \$ _____ |
| Property taxes (if not included in mortgage payment) | \$ _____ |
| Insurance: | \$ _____ |
| Association Fees | \$ _____ |
| Average Utilities | \$ _____ |
| Plus + | \$ 50.00 _____ |
| TOTAL | \$ _____ |

Please provide copies of bills to verify the above information.

I (We) hereby verify that all information provided is accurate and true.

Signature

Date

Signature

Date

HOA PLEASE SIGN AND RETURN TO:

Aspen/Pitkin County Housing Office, 530 E. Main Aspen, CO 81611 (970) 920-5050

Approved: _____ YES _____ NO

Signature of Authorized Representative

Date

Comments:

To be completed by The Housing Office:

Approved: _____ Date: _____