

AFFIDAVIT IN REGARD TO SELF EMPLOYEMENT

l,	, am applying for a deed restricted nome in the Stables Village.
This is a deed restricted workforce ne	eighborhood that requires that I earn my living working for a business
(s) that is located in and serves Sumi	nit County, and that I work 30 hours a week on an annual basis in the
	I solemnly declare that I earn my living working for
and the	nat this business (s) is operating legally in Summit County, and that I
and the	acting business (s) is operating legally in summit county, and that i
work at least 30 hours a week on an	annual basis in the County for this business (s).
The undersigned affirm and atte	st that all information that has been provided to the Town of
•	our application for the Stables Village Lottery is true and complete
,	The undersigned acknowledge that the Town will rely on the
•	ed in determining eligibility for the Stables Village Lottery.
information that I have provide	d in determining enginity for the Stables village Lottery.
The undersigned further understan	d and acknowledge that under Section 6-3H-7 of the Breckenridge
_	son to obtain Town assistance, including benefits under the Town's
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	ly false statement or representation, by failing to disclose a material
fact, or by any other fraudulent devi	ce.
	-
Printed Name	
	-
Signature	
6.6.14.44.6	
	_
Date	
Date	
STATE OF COLORADO)
) ss.
COUNTY OF	,)
	,
Acknowledged, subscribed, and s	worn to before me this day of, 2025,
by	
- J	·
My commission expires:	
·	
(SEAL)	
	Notary Public