Aspen Pitkin County Housing Authority
A·P·C·H·A
210 E. Hyman, Suite 202 • Aspen, CO 81611
970-920-5050 • www.apcha.org

BID SUBMISSION FORM

Complete this form for each unit you would like to place a bid on. **All packet information must be up-to-date before a bid can be placed.** There is a $5.00 fee for each bid.

PROPERTY ADDRESS: _____

BID PRICE $ _____
(Maximum Listed Sales Price as listed on Sales Ad, or less)

"APPLICANT A"	**"APPLICANT B"**
Name: _____	_____
Primary Phone: _____	_____
Secondary Phone: _____	_____
Email : _____	_____

List the following information for all household members not listed above. Please state if you are expecting.

Name: _____ Relationship: _____ Age: _____

Name: _____ Relationship: _____ Age: _____

Name: _____ Relationship: _____ Age: _____

Name: _____ Relationship: _____ Age: _____

What is your CURRENT living situation (please check):

Do you? ☐ Own ☐ Rent **Is your current residence?** ☐ APCHA Deed Restricted ☐ Other Deed Restricted ☐ Free Market

What is your current physical address? _____
Address *City*

IN-COMPLEX BID *(current owner in property/complex being listed)***?** ☐ Yes

- I/we understand that, I/we must not own any developed residential real estate or mobile home in the Ownership Exclusion Zone.
- If buying APCHA property, any real estate owned in the Ownership Exclusion Zone must be listed for sale **prior to or simultaneously with the closing** on the employee housing unit. I/we must sell the property within 180 days of the closing on the employee housing unit; otherwise, I/we must list the employee housing unit for sale immediately as specified in the deed restriction.
- I/we understand that if I/we rent or own deed-restricted property and if I/we are found to be out of good standing with that property, I/we will be disqualified from renting/bidding/purchasing the unit within the housing program
- I/we understand that if the documentation that I/we have provided is found to be false or non-verifiable, I/we will be disqualified.
- I/we authorize APCHA to make necessary inquiries to evaluate my/our employment, assets and income. **I/we give APCHA permission to access my/our credit reports. I/we authorize APCHA to obtain a copy of the completed loan application from the lender.**

Signature: _____	Signature: _____
Date: _____	Date: _____