



0800 Copper Road, # 3053
Copper Mountain, Co 80443
2023/2024

Exemption Request Form

Owner Information:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

Employee Housing Unit Information:

Building Name: _____ Unit Number: _____

Reason for Exemption:

- The occupant works a minimum of 30 hours per week for a business in Summit County and uses the unit as their primary residence.

Current Occupant Information: Please fill out completely

Name: _____ Phone Number: _____

Employer Name: _____ Supervisor Name: _____

Employer Address: _____

Work Location (If not at the address listed above): _____

Employer Phone Number: _____ Job Title: _____

Submitted On _____, 20____. (Must be submitted before November 1st)

Signature of Owner: _____

Please return the completed form to Abigail Tietjen at atietjen@copper-ra.com, or by mail:
Copper Mountain Resort Association
800 Copper Road, #3053
Copper Mountain, CO 80443

Office Use Only: Employment Verification Date: _____	<input type="checkbox"/> Grant	<input type="checkbox"/> Deny
Reason for Exemption Request Denial: _____		