# APPLICATION FOR EXEMPTION FROM AUDIT

# **LONG FORM**

# FOR LOCAL GOVERNMENTS WITH EITHER REVENUES OR EXPENDITURES MORE THAN \$100,000 BUT NOT MORE THAN \$750,000

Under the Local Government Audit Law (Section 29-1-601, et seq., C.R.S.) any local government may apply for an exemption from audit if neither revenues nor expenditures exceed \$750,000 for the year.

If your local government has either revenues or expenditures of LESS than \$100,000, use the SHORT FORM.

# EXEMPTIONS FROM AUDIT ARE NOT AUTOMATIC

To qualify for exemption from audit, a local government must complete an Application for Exemption from Audit EACH YEAR and submit it to the Office of the State Auditor (OSA) for approval.

Any preparer of an Application for Exemption from Audit must be an independent accountant with knowledge of governmental accounting

Approval for an exemption from audit is granted only upon the review by the OSA.

#### READ ALL INSTRUCTIONS BEFORE COMPLETING AND SUBMITTING THIS FORM

ALL APPLICATIONS MUST BE FILED WITH THE OSA WITHIN 3 MONTHS AFTER THE ACCOUNTING YEAR-END. FOR EXAMPLE, APPLICATIONS MUST BE RECEIVED BY THE OSA ON OR BEFORE MARCH 31 FOR GOVERNMENTS WITH A DECEMBER 31 YEAR-END.

GOVERNMENTAL ACTIVITY SHOULD BE REPORTED ON THE MODIFIED ACCRUAL BASIS

PROPRIETARY ACTIVITY SHOULD BE REPORTED ON A BUDGETARY BASIS

#### POSTMARK DATES WILL NOT BE ACCEPTED AS PROOF OF SUBMISSION ON OR BEFORE THE STATUATORY DEADLINE

CHECKLIST

PRIOR YEAR FORMS ARE OBSOLETE AND WILL NOT BE ACCEPTED.

FOR YOUR REFERENCE, COLORADO REVISED STATUTES CAN BE FOUND AT THIS ADDRESS:

APPLICATIONS SUBMITTED ON FORMS OTHER THAN THOSE PRESCRIBED BY THE OSA WILL NOT BE ACCEPTED.

http://www.lexisnexis.com/hottopics/Colorado/

APPLICATIONS MUST BE FULLY AND ACCURATELY COMPLETED.

Has the preparer signed the application?	Checkout our new web portal. Register your account and submit
Has the entity corrected all Prior Year Deficiencies as communicated by the OSA?	electronic Applications for Exemption From Audit, Extension of Time to File requests, Audited Financial Statements, and more!
Has the application been PERSONALLY reviewed and approved by the governing body?	See the link below.
Are all sections of the form complete, including responses to all of the questions?	OSA LG Web Portal
Did you include any relevant explanations for unusual items in the appropriate spaces at the end of each section?	
Will this application be submitted via Fax or Email?	
If yes, have you read and understand the new Electronic Signature Policy? See new policy	
OF	
☐ Have you included a resolution?	
Does the resolution state that the governing body PERSONALLY reviewed and approved the resolution in an open public meeting?	
☐ Has the resolution been signed by a MAJORITY of the governing body? (See sample resolution.)	
Will this application be submitted via a mail service? (e.g. US Post Office, FedEx, UPS, courier.)	
☐ If yes, does the application include ORIGINAL INK SIGNATURES from the MAJORITY of the governing body?	
FILING METHODS	

NEW METHOD!

WEB PORTAL: Reigster and submit your Applications at our new portal:

https://apps.leg.co.gov/osa/lg

MAIL: Office of the State Auditor
Local Government Audit Division
1525 Sherman St., 7th Floor
Denver, CO 80203
FAX: 303-869-3061

EMAIL: osa.lg@state.co.us QUESTIONS? 303-869-3000

#### IMPORTANT!

All Applications for Exemption from Audit are subject to review and approval by the Office of the State Auditor.

Governmental Activity should be reported on the Modified Accrual Basis

Proprietary Activity should be reported on the Cash or Budgetary Basis -- A Budget to GAAP reconciliation is provided in Part 3

Failure to file an application or denial of the request could cause the local government to lose its exemption from audit for that year and the ensuing year.

In that event, AN AUDIT SHALL BE REQUIRED.

DocuSign Envelope ID: 20FACF43-156C-4556-A766-54A401211D67 **APPLICATION FOR EXEMPTION FROM AUDIT** LONG FORM NAME OF GOVERNMENT Brighton Crossing Metropolitan District No. 7 For the Year Ended c/o Pinnacle Consulting Group, Inc. **ADDRESS** 12/31/2020 550 W Eisenhower Blvd or fiscal year ended: Loveland, CO 80537 CONTACT PERSON Amanda Castle PHONE 970-669-3611 **EMAIL** amandac@pinnacleconsultinggroupinc.com FAX 970-669-3612

# **CERTIFICATION OF PREPARER**

I certify that I am an independent accountant with knowledge of governmental accounting and that the information in the Application is complete and accurate to the best of my knowledge. I am aware that the Audit Law requires that a pers
independent of the entity complete the application if revenues or expenditure are at least \$100,000 but not more than \$750,000, and that independent means someone who is separate from the entity

NAME:	Amanda Castle	
TITLE	District Accountant	
FIRM NAME (if applicable)	Pinnacle Consulting Group, Inc.	
ADDRESS	550 W Eisenhower Blvd, Loveland, CO 80537	
PHONE	970-669-3611	
DATE PREPARED	2/22/2021	
RELATIONSHIP TO ENTITY	District Accountant	i

PREPARER (SIGNATURE REQUIRED)

and 32-1-104 (3), C.R.S.]

Has the entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status during the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3)

YES	NO	
	<b>V</b>	If Yes, date filed:

# DocuSign Envelope ID: 20FACF43-156C-4556-A766-54A401211D67 PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

\* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

NOTE: A	ttach additional sheets as necessary.	Governme	ental Funds		Proprietary/Fidu	iciary Funds	
	B			Post Co.			Please use this space to
Line #	Description	General Fund	Debt Service Fund	Description	Fund*	Fund*	provide explanation of any
	Assets			Assets			items on this page
1-1	Cash & Cash Equivalents	\$ -	\$	- Cash & Cash Equivalents	\$ -   \$	} -	
1-2	Investments		\$	Investments	\$ - \$		
1-3	Receivables	\$ -	\$	- Receivables	\$ - \$		
1-4	Due from Other Entities or Funds	\$ 427	\$ 2,13	Due from Other Entities or Funds	\$ - \$	} <u>-</u>	
	All Other Assets [specify]			Other Current Assets	\$ - \$	} <u>-</u>	
1-5	Property Tax Receivable	\$ 84,904	\$ 424,51	Total Current Assets	\$ - \$	<del>-</del>	
1-6	. ,	\$ -		Capital Assets, net (from Part 6-4)	\$ - \$	-	
1-7		\$ -	<u> </u>	Other Long Term Assets [specify]	\$ - \$		
1-8		\$ -	<u> </u>		\$ - \$		
1-9		\$ -	· .		\$ - \$		
1-10		\$ -	<u> </u>		\$ - \$		
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS	T		(add lines 1-1 through 1-10) TOTAL ASSETS			
1-12	TOTAL DEFERRED OUTFLOWS OF RESOURCES		\$	TOTAL DEFERRED OUTFLOWS OF RESOURCES	· ·		
1-13	TOTAL ASSETS AND DEFERRED OUTFLOWS						
	Liabilities			Liabilities			
1-14	Accounts Payable	\$ -	\$	- Accounts Payable	\$ - \$	; <u>-</u>	
1-15	Accrued Payroll and Related Liabilities	\$ -	\$	- Accrued Payroll and Related Liabilities	\$ - \$	· -	
1-16	Accrued Interest Payable	\$ -	\$	- Accrued Interest Payable	\$ - \$	· -	
1-17	Due to Other Entities or Funds	\$ 427	\$ 2,13	Due to Other Entities or Funds	\$ - \$	· -	
1-18	All Other Current Liabilities	\$ -	\$	- All Other Current Liabilities	\$ - \$	· -	
1-19	TOTAL CURRENT LIABILITIES	\$ 427	\$ 2,13	TOTAL CURRENT LIABILITIES	\$ - \$	;	
1-20	All Other Liabilities [specify]	\$ -	\$	Proprietary Debt Outstanding (from Part 4-4)	\$ - \$	;	
1-21	Deferred Property Tax Revenue	\$ 84,904	\$ 424,51	Other Liabilities [specify]:	\$ - \$	;	
1-22		\$ -	\$	-	\$ - \$	; -	
1-23		\$ -	\$	-	\$ - \$	; -	
1-24		\$ -	\$	-	\$ - \$	; -	
1-25		\$ -	\$	-	\$ - \$	; -	
1-26		\$ -	\$	-	\$ - \$	; -	
1-27		\$ -	\$	-	\$ - \$	; -	
1-28	(add lines 1-19 through 1-27) TOTAL LIABILITIES		\$ 426,650			; <u>-</u>	
1-29	TOTAL DEFERRED INFLOWS OF RESOURCES	\$ -	\$	TOTAL DEFERRED INFLOWS OF RESOURCES	\$ - \$	-	
	Fund Balance			Net Position			
	Nonspendable Prepaid		\$	Net Investment in Capital Assets	\$ - \$	-	
1-31	Nonspendable Inventory	\$ -	T				
1-32	Restricted [specify]	\$ -	T	- Emergency Reserves	\$ - \$		
1-33	Committed [specify]	\$ -	T	Other Designations/Reserves	\$ - \$		
1-34	Assigned [specify]	\$ -	T	- Restricted	\$ - \$		
1-35	Unassigned:	\$ -	\$	- Undesignated/Unreserved/Unrestricted	\$ - \$	-	
1-36	Add lines 1-30 through 1-35			Add lines 1-30 through 1-35			
	This total should be the same as line 3-33			This total should be the same as line 3-33			
	TOTAL FUND BALANCE	\$ -	\$	TOTAL NET POSITION	\$ - \$	5 -	
1-37	Add lines 1-28, 1-29 and 1-36			Add lines 1-28, 1-29 and 1-36			
	This total should be the same as line 1-13			This total should be the same as line 1-13			
	TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND			TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET			
	BALANCE	\$ 85,331	\$ 426,650	POSITION	\$ - \$	;         -	

# PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

	Governmental Funds			Proprietary/Fide		<b>-</b> 1	
Line # Description		General Fund	Debt Service Fi	nd Description	Fund*	Fund*	Please use this space to provide explanation of any
1	Tax Revenue			Tax Revenue			items on this page
2-1	Property [include mills levied in Question 10-6]	\$ 78,090	\$ 390,	Property [include mills levied in Question 10-6]	\$	- \$ -	
2-2	Specific Ownership	\$ 5,73	\$ 28,	54 Specific Ownership	\$	- \$ -	
2-3	Sales and Use Tax	\$	\$	Sales and Use Tax	\$	- \$ -	
2-4	Other Tax Revenue [specify]:	\$	\$	Other Tax Revenue [specify]:	\$	- \$ -	
2-5		\$	\$	_	\$	- \$ -	
2-6		\$	·   \$	_	\$	- \$ -	
2-7		\$	\$	_	\$	- \$ -	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ 83,82	\$ 419,	Add lines 2-1 through 2- TOTAL TAX REVENU		-   \$ -	
2-9	Licenses and Permits	\$	\$	- Licenses and Permits	\$	- \$ -	
2-10	Highway Users Tax Funds (HUTF)	\$	\$	- Highway Users Tax Funds (HUTF)	\$	- \$ -	
2-11	Conservation Trust Funds (Lottery)	\$	\$	- Conservation Trust Funds (Lottery)	\$	- \$ -	
2-12	Community Development Block Grant	\$	\$	- Community Development Block Grant	\$	- \$ -	
2-13	Fire & Police Pension	\$	\$	- Fire & Police Pension	\$	- \$ -	
2-14	Grants	\$	\$	- Grants	\$	- \$ -	
2-15	Donations	\$	\$	- Donations	\$	- \$ -	
2-16	Charges for Sales and Services	\$	\$	- Charges for Sales and Services	\$	- \$ -	
2-17	Rental Income	\$	\$	- Rental Income	\$	- \$ -	
2-18	Fines and Forfeits	\$	\$	- Fines and Forfeits	\$	- \$ -	
2-19	Interest/Investment Income	\$ 4	\$	04 Interest/Investment Income	\$	- \$ -	
2-20	Tap Fees	\$	·   \$	- Tap Fees	\$	- \$ -	
2-21	Proceeds from Sale of Capital Assets	\$	·   \$	Proceeds from Sale of Capital Assets	\$	- \$ -	
2-22	All Other [specify]:	\$	\$	All Other [specify]:	\$	- \$ -	
2-23	Development Fees	\$ 170,066	\$	_	Ψ	- \$ -	
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ 253,928	\$ 419,	Add lines 2-8 through 2-2 TOTAL REVENUE:		- \$ -	
	Other Financing Sources			Other Financing Sources			
2-25	Debt Proceeds	\$	. \$	- Debt Proceeds	\$	- \$ -	
2-26	Developer Advances	\$	\$	- Developer Advances	\$	- \$ -	
2-27	Other [specify]:	\$	\$	- Other [specify]:	\$	- \$ -	
2-28	Add lines 2-25 through 2-27			Add lines 2-25 through 2-2	7		ORAND TOTAL C
	TOTAL OTHER FINANCING SOURCES	\$	\$	TOTAL OTHER FINANCING SOURCE		- \$ -	GRAND TOTALS
2-29	Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ 253,928	\$ 419,	Add lines 2-24 and 2-2 TOTAL REVENUES AND OTHER FINANCING SOURCES		- \$ -	\$ 673,238

IF GRAND TOTAL REVENUES AND OTHER FINANCING SOURCES for all funds (Line 2-29) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

3-33 Fund Balance, December 31

Sum of Line 3-30, 3-31, and 3-32

This total should be the same as line 1-36.

#### PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES Governmental Funds Proprietary/Fiduciary Funds Please use this space to Description General Fund Debt Service Fund Description provide explanation of any Expenditures Expenses items on this page **General Government** General Operating & Administrative 3-1 - | \$ - | \$ 3-2 Judicial - | \$ Salaries - | \$ 3-3 Law Enforcement \$ - \$ **Pavroll Taxes** \$ - | \$ \$ **Contract Services** 3-4 Fire - | \$ \$ - | \$ **Highways & Streets** 3-5 \$ - | \$ **Employee Benefits** \$ - | \$ Solid Waste \$ Insurance 3-6 - | \$ \$ - | \$ Contributions to Fire & Police Pension Assoc. \$ Accounting and Legal Fees 3-7 - | \$ \$ - | \$ Health \$ - | \$ Repair and Maintenance \$ - | \$ 3-8 **Culture and Recreation** 3-9 \$ - | \$ Supplies \$ \$ Transfers to other districts \$ 252,756 \$ 413,451 Utilities \$ \$ 3-10 3-11 Other [specify...]: \$ - | \$ Contributions to Fire & Police Pension Assoc. \$ - \$ 3-12 Treasurer's Fee Other [specify...] \$ 1,172 \$ 5.859 \$ - \$ \$ \$ - \$ 3-13 - | \$ 3-14 Capital Outlay \$ - \$ Capital Outlay \$ - \$ **Debt Service Debt Service** Principal Principal \$ \$ - | \$ - | \$ 3-15 3-16 Interest \$ - \$ Interest \$ - \$ **Bond Issuance Costs** \$ **Bond Issuance Costs** \$ 3-17 - | \$ - | \$ 3-18 **Developer Principal Repayments** \$ - \$ **Developer Principal Repayments** \$ \$ 3-19 **Developer Interest Repayments** \$ - \$ **Developer Interest Repayments** \$ \$ All Other [specify...]: - \$ All Other [specify...]: \$ - \$ 3-20 - \$ \$ - \$ **GRAND TOTAL** 3-21 Add lines 3-1 through 3-21 Add lines 3-1 through 3-21 253,928 \$ 419.310 \$ \$ 673.238 3-22 TOTAL EXPENDITURES **TOTAL EXPENSES** - \$ - Net Interfund Transfers (In) Out 3-23 Interfund Transfers (In) \$ \$ 3-24 Interfund Transfers out \$ - | \$ Other [specify...][enter negative for expense] \$ - | \$ Other Expenditures (Revenues): \$ - \$ Depreciation \$ - \$ 3-25 3-26 \$ - | \$ Other Financing Sources (Uses) \$ - | \$ 3-27 - | \$ Capital Outlay \$ - | \$ (from line 3-14) 3-28 \$ - | \$ **Debt Principal** (from line 3-15, 3-18) \$ - | \$ 3-29 (Add lines 3-23 through 3-28) (Line 3-26, plus line 3-27, less line 3-24, less line 3-25) TOTAL TRANSFERS AND OTHER EXPENDITURES TOTAL GAAP RECONCILING ITEMS \$ 3-30 Excess (Deficiency) of Revenues and Other Financing Net Increase (Decrease) in Net Position Sources Over (Under) Expenditures Line 2-29, less line 3-22, plus line 3-29, plus line 3-23, less Line 2-29, less line 3-22, plus line 3-29 \$ line 3-24 \$ Fund Balance, January 1 from December 31 prior year Net Position, January 1 from December 31 prior year 3-31 3-32 Prior Period Adjustment (MUST explain) Prior Period Adjustment (MUST explain) \$ - | \$

IF GRAND TOTAL EXPENDITURES for all funds (Line 3-22) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

Net Position, December 31

This total should be the same as line 1-36.

Line 3-30 plus line 3-31

	PART 4 - DEBT OUTSTANDING, ISSUED, AND RETIRED										
	Please answer the following questions by marking the a	ppropriate boxes.		YES	NO	Please use this space to provide any explanations or comments:					
4-1	Does the entity have outstanding debt?				✓						
4-2	Is the debt repayment schedule attached? If no, MUST explain:										
4-3	Is the entity current in its debt service payments? If no, MUST explain:										
4-4	Please complete the following debt schedule, if applicable: (please only include principal amounts)  General obligation bonds	Outstanding at beginning of year*	,	<b>,</b>	Outstanding at year-en	d					
	Revenue bonds	\$ - \$	-	\$ -	\$						
	Notes/Loans	\$ - \$	-	\$ -	\$						
	Leases	\$ - \$	-	\$ -	\$						
	Developer Advances	\$ - \$	-	\$ -	\$						
	Other (specify):	\$ - \$	-	\$ -	\$						
	TOTAL	\$ - \$	-		\$						
		*must agree to prior year e		•	1						
	Please answer the following questions by marking the appropriate boxes.			YES	NO						
4-5	Does the entity have any authorized, but unissued, debt?			<b>V</b>							
	How much?	\$ 16,430,000									
If yes:	Date the debt was authorized:	11/6/2018									
4-6	Does the entity intend to issue debt within the next calendar year?				$\overline{\checkmark}$						
	How much?	\$ -									
	Does the entity have debt that has been refinanced that it is still responsible				✓						
	What is the amount outstanding?	\$ -									
	Does the entity have any lease agreements?	·		П	<b>7</b>						
	What is being leased?										
n y 00.	What is the original date of the lease?										
	Number of years of lease?										
	Is the lease subject to annual appropriation?										
	What are the annual lease payments?	\$ -			_						
	The same and an annual reason payments.	-		IV/EOTAI	INTO						
		PART 5 - CAS	2H AND II	AAES LIMIE	=N15						
	Please provide the entity's cash deposit and investment balances.			AMOUNT	TOTAL	Please use this space to provide any explanations or comments:					
5-1	YEAR-END Total of ALL Checking and Savings accounts			\$ -							
5-2	Certificates of deposit			\$ -							
		TOTAL C	ASH DEPOSITS		\$	<u>.</u>					
	Investments (if investment is a mutual fund, please list underlying investments):										
				\$ -							
				\$ -							
5-3				\$ -							
				\$ -							
		TOTAL	INVESTMENTS	•	\$						
		TOTAL CASH AND			\$						
	Please answer the following question by marking in the appropriate box	TO THE GAOTI AILD	YES	NO	N/A						
- 4	21 2 2 11 1	0.000	TES								
5-4	Are the entity's Investments legal in accordance with Section 24-75-601, et. so	• •	Ш	Ш	✓						
5-5	Are the entity's deposits in an eligible (Public Deposit Protection Act) public of 11-10.5-101, et seq. C.R.S.)? If no, MUST explain:	depository (Section			<b>J</b>						

Doous	Sign Envelope ID: 20FACF43-156C-4556-A766-54A401211D67					
Docus	sign Envelope ID. 20FACF43-136C-4336-A766-34A401211D67	PART	6 - CAPITA	ASSETS	S	
	Please answer the following question by marking in the appropriate box	17001	<i>y</i>	YES	NO	Please use this space to provide any explanations or comments:
6-1	Does the entity have capitalized assets?				<b>V</b>	
6-2	Has the entity performed an annual inventory of capital assets in accordance	with Section 29-1-50	6, C.R.S.? If no,			
	MUST explain:			_		
						-
		Balance -				
6-3	Complete the following Capital Assets table for GOVERNMENTAL FUNDS:	beginning of the	Additions	Deletions	Year-End Balance	
	Loud	year*	•			
	Land Buildings	\$ - \$ -	\$ -	\$ - \$ -	\$	
	Machinery and equipment		\$ -	\$ -	1 2	_
	Furniture and fixtures	*	\$ -	1	1.	
	Infrastructure		\$ -	\$ -	1 2	
	Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -	
	Other (explain):		\$ -	Ψ	T	
	Accumulated Depreciation (Enter a negative, or credit, balance)		\$ -	\$ -	-	
	TOTAL	\$ -	\$ -	\$ -	-	
		Balance -				
6-4	Complete the following Capital Assets table for PROPRIETARY FUNDS:	beginning of the	Additions	Deletions	Year-End Balance	
	Loud	year*	Φ.		•	
	Land Buildings	\$ - \$ -	\$ - \$ -	\$ - \$ -	\$   \$	
	Machinery and equipment	\$ -	\$ -	1 2		_
	Furniture and fixtures	\$ -	\$ -	+ <del>-</del>	1 2	
	Infrastructure	\$ -	\$ -	\$ -	\$ -	
	Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -	
	Other (explain):	\$ -	\$ -	*	*	
	Accumulated Depreciation (Enter a negative, or credit, balance)		\$ -	\$ -	*	
	TOTAL	· ·	\$ -	\$ -	\$	
		*must agree to prior yea	r ending balance			
		PART 7 - P	ENSION IN	IFORMAT	TON	
	Please answer the following question by marking in the appropriate box			YES	NO	Please use this space to provide any explanations or comments:
7-1	Does the entity have an "old hire" firemen's pension plan?				✓	
7-2	Does the entity have a volunteer firemen's pension plan?				✓	
If yes:	Who administers the plan?					
	Indicate the contributions from:					

	Please answer the following question by marking in the appropriate box		YES	NO	Please use this space to provide any explanations or comments:
7-1	Does the entity have an "old hire" firemen's pension plan?			✓	
7-2	Does the entity have a volunteer firemen's pension plan?			✓	
If yes:	Who administers the plan?				
	Indicate the contributions from:				
	Tax (property, SO, sales, etc.):	\$ -			
	State contribution amount:	\$ -			
	Other (gifts, donations, etc.):	\$ -			
	TOTA	\$ -			
	What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?	\$ -			

	DADT Q BI	IDCET IN	FORMATIC	INI	
	Please answer the following question by marking in the appropriate box	YES	NO NO	N/A	Disease was this course to was ide any surface time an accomment.
8-1	Did the entity file a current year budget with the Department of Local Affairs, in accordance with	7 7	7		Please use this space to provide any explanations or comments:
0-1	Section 29-1-113 C.R.S.? If no, MUST explain: Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.?	_			
8-2	If no, MUST explain:	✓			
If yes:	Please indicate the amount budgeted for each fund for the year reported				
	Fund Name Budgeted Expenditu				
	General Fund \$ Debt Service Fund \$	545,787 471,688			
	\$	471,000			
	\$	-			
	PART 9 - TAX PAYE	R'S BILL C	OF RIGHTS	(TABOR)	
	Please answer the following question by marking in the appropriate box	(=)10	YES	NO	Please use this space to provide any explanations or comments:
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20 Note: An election to exempt the government from the spending limitations of TABOR does not exempt		✓	Ш	
				<b></b>	
	PART 10 - GE	ENERAL IN	IFORMATI	ON	
	Please answer the following question by marking in the appropriate box		YES	NO	Please use this space to provide any explanations or comments
10-1	Is this application for a newly formed governmental entity?			<b>V</b>	
If yes:	Date of formation:				
	Date of formation.				
10-2	Has the entity changed its name in the past or current year?			<b>√</b>	
If Yes	NEW name				
	PRIOR name				
10-3	Is the entity a metropolitan district?		<b>✓</b>		
10-4					
	Construction, operations and maintenance of public improvements				
	Does the entity have an agreement with another government to provide services?			<b>V</b>	
If yes:	List the name of the other governmental entity and the services provided:				
10-6	Does the entity have a certified mill levy?				
	Please provide the number of mills levied for the year reported (do not enter \$ amounts):		✓		
,	Bond Redemption mills 50.350				
	General/Other mills 10.070				
	Total mills 60.420				
	Please use this space to provide any addit	tional explanation	ons or commen	is not previously ii	iciuaea:

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OSA USE ONLY									
Entity Wide:		General Fund			Governmental Funds			Notes	
Unrestricted Cash & Investments	\$	<ul> <li>Unrestricted Fund Bala</li> </ul>	n \$	-	Total Tax Revenue	\$	502,927		
Current Liabilities	\$	2,564 Total Fund Balance	\$	-	Revenue Paying Debt Service	\$	<del>-</del>		
Deferred Inflow	\$	<ul> <li>PY Fund Balance</li> </ul>	\$	-	Total Revenue	\$	673,238		
		Total Revenue	\$	253,928	Total Debt Service Principal	\$	-		
		Total Expenditures	\$	253,928	Total Debt Service Interest	\$	<u>-</u>		
Governmental		Interfund In	\$	_					
Total Cash & Investments	\$	- Interfund Out	\$	_	Enterprise Funds				
Transfers In	\$	- Proprietary			Net Position	\$	<u>-</u>		
Transfers Out	\$	- Current Assets	\$	-	PY Net Position	\$	<u>-</u>		
Property Tax	\$	468,542 Deferred Outflow	\$	-	Government-Wide				
Debt Service Principal	\$	- Current Liabilities	\$	-	Total Outstanding Debt	\$	-		
Total Expenditures	\$	673,238 Deferred Inflow	\$	-	Authorized but Unissued	\$	16,430,000		
Total Developer Advances	\$	- Cash & Investments	\$	-	Year Authorized		11/6/2018		
Total Developer Repayments	\$	- Principal Expense	\$	_					

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### PART 12 - GOVERNING BODY APPROVAL

TARK 12 GOVERNMED BODIANTE		
Please answer the following question by marking in the appropriate box	YES	NO
12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?		

# Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedures

#### Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as Docusign or Echosign. Required elements and safeguards are as follows:

- The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.
- The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.
- Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

- 1) Submit the application in hard copy via the US Mail including original signatures.
- 2) Submit the application electronically via email and either,
- a. Include a copy of an adopted resolution that documents formal approval by the Board, or
- b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

Below is the certification and approval of the governing body By signing, each individual member is certifying they are a duly elected or appointed officer of the local government. Governing members may be verified. Also by signing, the individual member certifies that this Application for Exemption from Audit has been prepared consistent with Section 29-1-604, C.R.S., which states that a governmental agency with revenue and expenditures of \$750,000 or less must have an application prepared by an independent accountant with knowledge of governmental accounting; completed to the best of their knowledge and is accurate and true. Use additional pages if needed.

	Print the names of ALL members of the governing body below.	A <u>MAJORITY</u> of the members of the governing body must complete and sign in the column below.
1	Full Name Shannon Robbins	I,
2	Full Name  Ashley Tarufelli	I,AS New Signor shy:, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit   06:36:23 PST   Signed   ASNIE   2022   Date: 3/9/2021   06:36:23 PST   My term   Expire 16:64.79   16:45   1
3	Full Name  Neil Simpson	I,
4	Full Name	I,, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.  Signed Date:  My term Expires:
5	Full Name	I,, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.  Signed Date:  My term Expires:
6	Full Name	I,, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.  Signed Date:  My term Expires:
7	Full Name	I,, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.  Signed Date:  My term Expires:

# EXAMPLE - DO NOT FILL OUT THIS PAGE

This sample resolution/ordinance for exemption from audit is provided as an example of the documentation that is required, the wording may be used as a basis for your own local government document, if needed, however you MUST draft your own ordinance or resolution making any changes where applicable. Legal counsel should be consulted regarding any questions.

# RESOLUTION/ORDINANCE FOR EXEMPTION FROM AUDIT (Pursuant to Section 29-1-604, C.R.S.) A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR YEAR 20XX FOR THE (name of government), STATE OF COLORADO. WHEREAS, the (governing body) of (name of government) wishes to claim exex put a from the audit requirements of Section 29-1-603, C.R.S.; and WHEREAS, Section 29-1-604, C.R.S., states that any local government, where neither revenues for expenditures exceed seven hundred and fifty thousand dollars may, with the approval of the State Auditor, be exempt from the provision of Section 29-1-603, C.R.S.; and [Choose 1 or 2 below, whichever is applicable] (1) WHEREAS, neither revenue nor expenditures for (pame of coveragent) exceeded \$100,000 for Year 20XX; and WHEREAS, an application for exemption from audit for manye of government) has been prepared by (name of individual), a person skilled in governmental accounting; and (2)WHEREAS, neither revenues nor expenditures for (name of government) exceeded \$750,000 for Year 20XX; and WHEREAS, an application for exemption from such for (name of government) has been prepared by (name of individual or firm), an independent accountant with knowledge of governmental accounting; and WHEREAS, said application for exemption from south has been completed in accordance with regulations, issued by the State Auditor. NOW THEREFOR E. be it resolved/ordained by the (governing body) of the (name of government) that the application members of the (governing body) have signified their approval by signing below; and that this resolution shall be attached to, and shall become a part of, the application for exemption from audit of the (name of government) for the , 26XX. vear ended ADOPTED THIS day of , A.D. 20XX.

Mayor/President/Chairman, etc.		
ATTEST:		
Fown Clerk, Secretary, etc.		
<b>,</b>		
p nint Name of	Date	
Type or Print Names of  Members of Governing Body	Term Expres	Signature
		-
	<u> </u>	
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	2 <del>7</del>	
	8	