DocuSign Envelope ID: 41AF6A2A-4A1C-4A7B-82EA-7F4C4D23F7D6 APPLICATION FOR EXEMPTION FROM AUDIT LONG FORM NAME OF GOVERNMENT Brighton Crossing Metropolitan District No. 7 For the Year Ended **ADDRESS** c/o Pinnacle Consulting Group, Inc. 12/31/2023 550 W Eisenhower Blvd or fiscal year ended: Loveland, CO 80537 Tracie Kaminski **CONTACT PERSON** PHONE 970-669-3611 **EMAIL** TracieK@pcgi.com **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 person 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. Tracie Kaminski TITLE District Accountant FIRM NAME (if applicable) Pinnacle Consulting Group, Inc. 550 W Eisenhower Blvd, Loveland, CO 80537 **ADDRESS** 970-669-3611 PHONE RELATIONSHIP TO ENTITY **District Accountant** PREPARER (SIGNATURE REQUIRED) **DATE PREPARED** 3/1/2024

Has the entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status YES NO during the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-If Yes, date filed: 4 104 (3), C.R.S.]

# DocuSign Envelope ID: 41AF6A2A-4A1C-4A7B-82EA-7F4C4D23F7D6 PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

## \* Indicate Name of Fund

|        | e Name of Fund<br>ttach additional sheets as necessary.  |           |              |   |            |                   |   |
|--------|--|-----------|--------------|---|------------|-------------------|---|
|        | ·  | Governmen | tal Funds    |   | Proprietar | y/Fiduciary Funds | Diago you this areas to   |
| Line # | Description  | General   | Debt Service | Description   | Fund*      | Fund*             | Please use this space to<br>provide explanation of an<br>items on this page |
|        | 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   |           | 3,106        | Due from Other Entities or Funds  | \$         | - \$              | -   |
| 1-5    | Property Tax Receivable \$   | 152,627   | 763,148      | Other Current Assets [specify]  |            |                   |   |
|        | All Other Assets [specify]   |           |              |   | \$         | - \$              | -   |
| 1-6    | Lease Receivable (as Lessor) \$  | -   5     | -            | Total Current Assets  | \$         | - \$              | -   |
| 1-7    | Prepaid Exense \$  | -   5     | -            | Capital & Right to Use Assets, net (from Part 6-4)  | \$         | - \$              | -   |
| 1-8    | Construction in Progress \$  | -   5     | -            | Other Long Term Assets [specify]  | \$         | - \$              | -   |
| 1-9    | \$   |           |              |   | \$         | - \$              | _   |
| 1-10   | \$   | - !       | -            |   | \$         | - \$              | _   |
| 1-11   | (add lines 1-1 through 1-10) TOTAL ASSETS \$   | 153,248   | 766,254      | (add lines 1-1 through 1-10) TOTAL ASSETS   | \$         | -   \$            | -   |
|        | Deferred Outflows of Resources:  |           |              | Deferred Outflows of Resources  |            |                   |   |
| l-12   | [specify]  |           |              | [specify]   | \$         | - \$              | -   |
| 1-13   | [specify] \$   |           | -            | [specify]   | \$         | - \$              | -   |
| 1-14   | (add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS \$   |           |              | (add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS   |            | - \$              | -   |
| 1-15   | TOTAL ASSETS AND DEFERRED OUTFLOWS \$  | 153,248   | 766,254      | TOTAL ASSETS AND DEFERRED OUTFLOWS  | \$         | -   \$            | -   |
|        | Liabilities  |           |              | Liabilities   |            |                   |   |
| -16    | Accounts Payable \$  | - 3       |              | Accounts Payable  | \$         | - \$              | -   |
| -17    | Accrued Payroll and Related Liabilities \$   |           |              | Accrued Payroll and Related Liabilities   | \$         | - \$              | <u>-</u>  |
| -18    | Unearned Revenue \$  |           | -            | Accrued Interest Payable  | \$         | - \$              | -   |
| 1-19   | Due to Other Entities or Funds \$  |           | 3,106        | Due to Other Entities or Funds  | \$         | - \$              | -   |
| -20    | All Other Current Liabilities \$   |           | -            | All Other Current Liabilities   | \$         | -   \$            | -   |
| 1-21   | (add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES \$   |           | 3,106        | (add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES   |            | - \$              | -   |
| 1-22   | All Other Liabilities [specify]  |           | -            | Proprietary Debt Outstanding (from Part 4-4)  | \$         | - \$              | -   |
| 1-23   | Advance Note \$  |           | -            | Other Liabilities [specify]:  | \$         | - \$              | -   |
| 1-24   | Advance Interest Note \$   |           | -            |   | \$         | - \$              | -   |
| 1-25   | \$   |           | -            |   | \$         | - \$              | -   |
| 1-26   | \$   |           | -            |   | \$         | - \$              | -   |
| -27    | (add lines 1-21 through 1-26) TOTAL LIABILITIES \$   | 621   9   | 3,106        | · · · · · · · · · · · · · · · · · · ·   | \$         | -   \$            | -   |
|        | Deferred Inflows of Resources:   |           |              | Deferred Inflows of Resources   |            |                   |   |
| -28    | Deferred Property Taxes \$   |           |              | Pension/OPEB Related  | \$         | - \$              | -   |
| -29    | Lease related (as lessor) \$   |           |              | Other [specify]   | \$         | - \$              | -   |
| -30    | (add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS \$  | 152,627   | 763,148      | (add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS  | \$         | -   \$            | -   |
|        | Fund Balance   | 1.        | <b>.</b>     | Net Position  | •          | Φ.                | $\neg$  |
|        | Nonspendable Prepaid \$  |           |              | Net Investment in Capital and Right-to Use Assets   | \$         | -   \$            | -   |
|        | Nonspendable Inventory \$  |           |              | E   | •          |                   |   |
| 1-33   | Restricted - TABOR \$  |           | -            | Emergency Reserves  | \$         | - \$              | -   |
| 1-34   | Committed - Net Investment in Capital Assets   |           |              | Other Designations/Reserves   | \$         | - \$              | -   |
| 1-35   | Assigned [specify]   |           | -            | Restricted  | \$         | - \$              | -   |
| 1-36   | Unassigned: \$   | -   5     | -            | Undesignated/Unreserved/Unrestricted  | \$         | - \$              | -   |
| 1-37   | Add lines 1-31 through 1-36<br>This total should be the same as line 3-33  |           |              | Add lines 1-31 through 1-36<br>This total should be the same as line 3-33   |            |                   |   |
|        | TOTAL FUND BALANCE \$  | -   9     | -            | TOTAL NET POSITION  | \$         | - \$              | -   |
| 1-38   | Add lines 1-27, 1-30 and 1-37 This total should be the same as line 1-15 TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND |           |              | Add lines 1-27, 1-30 and 1-37 This total should be the same as line 1-15 TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET |            |                   |   |
|        | BALANCE &  | 153,248   | 766.254      | POSITION  | \$         | -   \$            |   |
|        | 3  | 100,240   | 100,234      |   | Ψ          | -   φ             | -   |

# PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

|        |  | Governmental Funds |              |  | Proprietary/F | iduciary Funds | Discourse their succession                          |
|--------|--|--------------------|--------------|--|---------------|----------------|---|
| Line # | Description  | General            | Debt Service | Description  | Fund*         | Fund*          | Please use this space to provide explanation of any |
| -      | Tax Revenue  |                    |              | Tax Revenue  |               |                | items on this page                                  |
| 2-1    | Property [include mills levied in Question 10-6]                   | \$ 110,518         | \$ 552,614   | Property [include mills levied in Question 10-6]                   | \$ -          | \$ -           | · ·   |
| 2-2    | Specific Ownership   | \$ 7,495           | \$ 37,475    | Specific Ownership   | \$ -          | \$ -           |   |
| 2-3    | Sales and Use Tax  | \$ -               | \$ -         | Sales and Use Tax  | \$ -          | \$ -           |   |
| 2-4    | Other Tax Revenue [specify]:                                       | \$ -               | \$ -         | Other Tax Revenue [specify]:                                       | \$ -          | \$ -           |   |
| 2-5    | Service Fees from Other Districts                                  | \$ -               | \$ -         |  | \$ -          | \$ -           |   |
| 2-6    |  | \$ -               | \$ -         |  | \$ -          | \$ -           |   |
| 2-7    |  | \$ -               | \$ -         |  | \$ -          | \$ -           |   |
| 2-8    | Add lines 2-1 through 2-7<br>TOTAL TAX REVENUE                     |                    | \$ 590,089   | Add lines 2-1 through 2-7<br>TOTAL TAX REVENUE                     | \$ -          | \$ -           |   |
| 2-9    | Licenses and Permits   | \$ -               | \$ -         | Licenses and Permits   | \$ -          | \$ -           | 1   |
| 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   | \$ 65              | \$ 323       | 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   | \$ 27,000          | \$ -         |  | \$ -          | \$ -           |   |
| 2-24   | Add lines 2-8 through 2-23<br>TOTAL REVENUES                       |                    | \$ 590,412   | Add lines 2-8 through 2-23<br>TOTAL REVENUES                       | \$ -          | \$ -           |   |
|        | Other Financing Sources  |                    |              | Other Financing Sources  |               |                | _   |
| 2-25   | Debt Proceeds  | \$ -               | \$ -         | Debt Proceeds  | \$ -          | \$ -           |   |
| 2-26   | Lease Proceeds   | \$ -               | \$ -         | Lease Proceeds   | \$ -          | \$ -           |   |
| 2-27   | Developer Advances   | \$ -               | \$ -         | Developer Advances   | \$ -          | \$ -           |   |
| 2-28   | Other [specify]:   | \$ -               | \$ -         | Other [specify]:   | \$ -          | \$ -           | ]   |
| 2-29   | Add lines 2-25 through 2-28<br>TOTAL OTHER FINANCING SOURCES       |                    | \$ -         | Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES          | ¢             | \$ -           | GRAND TOTALS  |
| 2-30   | Add lines 2-24 and 2-25 TOTAL REVENUES AND OTHER FINANCING SOURCES |                    |              | Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES | •             |                | \$ 735,490  |

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 Lines 3-30, 3-31, and 3-32

This total should be the same as line 1-37.

#### PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES Governmental Funds Proprietary/Fiduciary Funds Please use this space to Line # Description Description Debt Service provide explanation of any Expenditures Expenses items on this page 3-1 **General Government General Operating & Administrative** Judicial Salaries \$ \$ - | \$ 3-2 Law Enforcement \$ **Payroll Taxes** \$ - \$ 3-3 - | \$ **Contract Services** 3-4 \$ \$ \$ - | \$ **Highways & Streets Employee Benefits** 3-5 \$ \$ \$ 3-6 Solid Waste \$ \$ Insurance \$ Contributions to Fire & Police Pension Assoc. Accounting and Legal Fees 3-7 \$ \$ \$ Repair and Maintenance 3-8 \$ \$ \$ - | \$ Culture and Recreation \$ Supplies \$ 3-9 - | \$ - | \$ Utilities 3-10 Transfers to other districts \$ 143,419 | \$ 582,117 3-11 Other (specify...1: \$ Contributions to Fire & Police Pension Assoc. | \$ 3-12 \$ - | \$ Other [specify...] - | \$ 3-13 \$ - | \$ - | \$ **Capital Outlay** \$ - \$ **Capital Outlay** \$ - | \$ 3-14 **Debt Service Debt Service** 3-15 Principal \$ - \$ Principal (should match amount in 4-4) (should match amount in 4-4) Interest Interest 3-16 \$ - | \$ \$ - | \$ **Bond Issuance Costs Bond Issuance Costs** 3-17 \$ \$ - | \$ **Developer Principal Repayments Developer Principal Repayments** \$ \$ \$ - | \$ 3-18 **Developer Interest Repayments** \$ **Developer Interest Repayments** - \$ 3-19 \$ All Other [specify...]: 3-20 All Other [specify...]: \$ - | \$ \$ Treasurer's Fees **GRAND TOTAL** 3-21 \$ 1,659 | \$ 8,295 - | \$ Add lines 3-1 through 3-21 Add lines 3-1 through 3-2' 145,078 \$ 590,412 - | \$ 735,490 3-22 TOTAL EXPENDITURES **TOTAL EXPENSES** 3-23 Interfund Transfers (In) - \$ \$ - | \$ - Net Interfund Transfers (In) Out 3-24 Interfund Transfers Out \$ Other [specify...][enter negative for expense] \$ - | \$ - | \$ 3-25 Other Expenditures (Revenues): \$ Depreciation/Amortization \$ - | \$ - | \$ 3-26 \$ - | \$ Other Financing Sources (Uses) - | \$ 3-27 \$ - \$ **Capital Outlay** (from line 3-14) \$ - \$ **Debt Principal** 3-28 \$ - | \$ (from line 3-15, 3-18) - | \$ 3-29 (Add lines 3-23 through 3-28) (Line 3-27, plus line 3-28, less line 3-26, less line 3-25, plus TRANSFERS AND OTHER EXPENDITURES line 3-24) 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, less line 3-23 Line 2-29, less line 3-22, less line 3-29 Net Position, January 1 from December 31 prior year 3-31 Fund Balance, January 1 from December 31 prior year report \$ 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

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

This total should be the same as line 1-37.

| Docus                 | Sign Envelope ID: 41AF6A2A-4A1C-4A7B-82EA-7F4C4D23F7D6  |                       |                     |                         |  |
|-----------------------|---|-----------------------|---------------------|-------------------------|--|
|                       | PART 4 - DEBT O   | UTSTANDING, I         | SSUED, AI           | ND RETIRED              |  |
|                       | Please answer the following questions by marking the appropriate boxe   | es.                   | YES                 | NO                      | Please use this space to provide any explanations or comments: |
| 4-1<br>4-2            | Does the entity have outstanding debt? Is the debt repayment schedule attached? If no, MUST explain:  |                       |                     | <a></a>                 |  |
| 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)  Outstanding of the following debt schedule, if applicable: (please only include principal beginning of the following debt schedule). |                       | Retired during year | Outstanding at year-end |  |
|                       | General obligation bonds  Revenue bonds  Notes/Loans  \$  | - \$                  | \$ - :              | \$ -<br>\$ -            |  |
|                       | Lease & SBITA** Liabilities (GASB 87 & 96)  Developer Advances  Other (specify):  \$  | - \$ -                | \$ - :              | \$ -<br>\$ -            |  |
| **Subs                | TOTAL \$ scription Based Information Technology Arrangements *Must agree to   | - \$ -                | \$ - !              | -                       |  |
|                       | Please answer the following questions by marking the appropriate boxes.  Does the entity have any authorized, but unissued, debt [Section 29-1-605(2) C.R.S.]?  How much?  \$ 16,43   | 30,000<br>/6/2018     | YES<br>☑            | NO                      |  |
| 4-6                   | Does the entity intend to issue debt within the next calendar year?   | 70/2018               |                     | ✓                       |  |
| If yes:<br><b>4-7</b> | Does the entity have debt that has been refinanced that it is still responsible for?  |                       |                     | ✓                       |  |
| If yes:<br>4-8        | Does the entity have any lease agreements?  |                       |                     | ☑                       |  |
| If yes:               | What is being leased? 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?   | -                     |                     |                         |  |
|                       | PART 5  | - CASH AND IN         | VESTMEN             | TS                      |  |
| 5-1                   | Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts   |                       | AMOUNT<br>\$ -      | TOTAL                   | Please use this space to provide any explanations or comments: |
|                       | Certificates of deposit   | TOTAL CASH DEPOSITS   | \$ -                | \$ -                    |  |
|                       | Investments (if investment is a mutual fund, please list underlying investments):   | TOTAL GAGIT DET COTTO |                     | Ψ -                     |  |
|                       |   |                       | \$ -<br>\$ -        |                         |  |
| 5-3                   |   |                       | \$ -<br>\$ -        |                         |  |
|                       |   | TOTAL INVESTMENTS     | 7                   | \$ -                    |  |
|                       |   | ASH AND INVESTMENTS   |                     | \$ -                    |  |
| 5-4                   | Please answer the following question by marking in the appropriate box  Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?  | YES 🗆                 | NO                  | N/A<br>☑                |  |
| 5-5                   | Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 10.5-101, et seq. C.R.S.)? If no, MUST explain:   | on 11-                |                     | ☑                       |  |

|         | Sign Envelope ID: 41AF6A2A-4A1C-4A7B-82EA-7F4C4D23F7D6<br>PART   | 6 - CAPITAL                            | AND RIGH   | T-TO-US              | ΕА           | SSETS                                     |  |
|---------|--|--|--|----------------------|--------------|---|--|
|         | Please answer the following question by marking in the appropriate box   |  |  | YES                  |              | NO  | Please use this space to provide any explanations or comments: |
| 6-1     | Does the entity have capitalized assets?   |  |  |                      |              | <b></b> ✓                                 |  |
| 6-2     | Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.? If no, MUST explain: |  |  |                      |              |   |  |
|         | All CIP  |  |  |                      |              |   |  |
| 6-3     | Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS:   | Balance -<br>beginning of the<br>year* | Additions*   | Deletions            | ,            | Year-End Balance                          |  |
|         | Land   |  | \$ -   | \$ -                 | - \$         | -   |  |
|         | Buildings  |  | \$ -   | T                    |              | -   |  |
|         | Machinery and equipment  | · ·                                    | \$ -   | · '                  | . \$         | -   |  |
|         | Furniture and fixtures   |  | \$ -   | \$ -                 |              | -   |  |
|         | Infrastructure   | •                                      | \$ -   | \$ -                 |              | -   |  |
|         | Construction In Progress (CIP) Leased & SBITA Right-to-Use Assets  | •                                      | \$ -<br>\$ -   | \$ -                 |              | -   | 4  |
|         | Intangible Assets  | •                                      | \$ -   |                      |              | <u>-</u>                                  | $\exists$  |
|         | Other (explain):   | •                                      | \$ -   | -                    | ·   \$       |   | +  |
|         | Accumulated Amortization Right to Use Assets (Enter a negative, or credit, balance)  | · ·                                    | \$ -   |                      | · \$         |   | +  |
|         | Accumulated Depreciation (Enter a negative, or credit, balance)  | '                                      | \$ -   | -                    |              | -   |  |
|         | TOTAL  | \$ -                                   | \$ -   | \$ -                 | - \$         |   |  |
|         |  | Balance -                              |  |                      | i i          |   | ď  |
| 6-4     | Complete the following Capital & Right-To-Use Assets table for PROPRIETARY FUNDS:  | beginning of the year*                 | Additions*   | Deletions            |              | Year-End Balance                          |  |
|         | Land   |  | \$ -   | \$ -                 | - \$         | -   | 7  |
|         | Buildings  |  | \$ -   |                      |              | -   |  |
|         | Machinery and equipment  |  | \$ -   |                      | - \$         |   |  |
|         | Furniture and fixtures   | '                                      | \$ -   |                      | . \$         | -   |  |
|         | Infrastructure   |  | \$ -   |                      | - \$         | -   |  |
|         | Construction In Progress (CIP) Leased & SBITA Right-to-Use Assets  | · ·                                    | \$ -<br>\$ -   | · '                  | · \$<br>· \$ | <del>-</del>                              | -  |
|         | Intangible Assets  | •                                      | \$ -   | -                    | ·   \$       | <u>-</u>                                  | -  |
|         | Other (explain):   |  | \$ -   |                      | . \$         |   |  |
|         | Accumulated Amortization Right to Use Assets (Enter a negative, or credit, balance)  | · ·                                    | \$ -   | -                    |              |   |  |
|         | Accumulated Depreciation (Enter a negative, or credit, balance)  | •                                      | \$ -   | -                    | - \$         | -   |  |
|         | TOTAL  | \$ -                                   | \$ -   | \$ -                 | - \$         | _   |  |
|         |  | in accordance with the g               | t additions should be re<br>povernment's capitalizat | ion policy. Please e | explain      | line 3-14 and capitalized any discrepancy |  |
|         |  | PART 7 - PE                            | ENSION INF   | ORMATI               | <u>ON</u>    |   |  |
|         | *  |  |  | YES                  |              | NO  | Please use this space to provide any explanations or comments: |
| 7-1     | Does the entity have an "old hire" firefighters' pension plan?   |  |  |                      |              | ✓   |  |
| 7-2     | Does the entity have a volunteer firefighters' pension plan?   |  |  |                      |              | ✓   |  |
| If yes: | Who administers the plan?  |  |  |                      |              |   |  |
|         | Indicate the contributions from:   |  |  | _                    |              |   |  |
|         | Tax (property, SO, sales, etc.):   |  | \$ -   |                      |              |   |  |
|         | State contribution amount:   |  | \$ -   | 1                    |              |   |  |
|         | Other (gifts, donations, etc.):  |  | \$ -   | 1                    |              |   |  |
|         | Outer (gins, donations, etc.):   | TOTAL                                  | *  | -                    |              |   |  |
|         |  | TOTAL                                  |  |                      |              |   |  |
|         | What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?  |  | \$ -   |                      |              |   |  |
|         |  |  |  |                      |              |   |  |

| PART 8 - BU  |                      |             |                  |   |
|--|----------------------|-------------|------------------|---|
| Please answer the following question by marking in the appropriate box   | YES                  | NO          | N/A              | Please use this space to provide any explanations or comments |
| Did the entity file a current year budget with the Department of Local Affairs, in accordance with Section 29-1-113 C.R.S.? If no, MUST explain: | <b>V</b>             |             |                  |   |
| Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.?   | V                    |             |                  |   |
| If no, MUST explain:  Please indicate the amount appropriated for each fund separately for the year reported                                     |                      | _           | _                |   |
| Governmental/Proprietary Fund Name Total Appropriation   | one By Fund          |             |                  |   |
| General Fund \$  | 144,543              |             |                  |   |
| Debt Service Fund \$   | 593,543              |             |                  |   |
| \$<br>  \$   | -                    |             |                  |   |
| PART 9 - TAX PAYER   | DIS BILL O           | E DICUTS    | (TAROR)          |   |
| Please answer the following question by marking in the appropriate box   | K S BILL U           | YES         | (TABUR)<br>NO    | Please use this space to provide any explanations or comment  |
| Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]                                      | ?                    | V           |                  |   |
| Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent              | it emergency reserve |             |                  |   |
| requirement. All governments should determine if they meet this requirement of TABOR.  PART 10 - GE  | NERAL IN             | FORMATIO    | N                |   |
| Please answer the following question by marking in the appropriate box   |                      | YES         | NO               | Please use this space to provide any explanations or comments |
| Is this application for a newly formed governmental entity?  |                      |             | Ø                | riease use this space to provide any explanations of comments |
|  |                      |             |                  |   |
| Date of formation:   |                      |             |                  |   |
| . Her the settle showed to see a feether set or several set of   |                      |             | ☑                |   |
| Has the entity changed its name in the past or current year?   |                      | _           | _                |   |
| Si NEW name  |                      |             |                  |   |
| PRIOR name   |                      |             |                  |   |
|  |                      |             |                  |   |
| Is the entity a metropolitan district?   |                      | <b>4</b>    |                  |   |
| Please indicate what services the entity provides:   |                      |             |                  |   |
| Construction, operations & maintenance of public improvements  |                      | -           |                  |   |
| 5 Does the entity have an agreement with another government to provide services?   |                      | ✓           |                  |   |
| List the name of the other governmental entity and the services provided:  |                      |             |                  |   |
| All services provided by Brighton Crossing Operations Board  |                      |             | _                |   |
| 5 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 51.397   | 7                    |             |                  |   |
| General/Other mills 10.279   |                      |             |                  |   |
| Total mills 61.676   | YES                  | NO          | N/A              |   |
| NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has the entity filed its                                     |                      |             | N/A              |   |
| preceding year annual report with the State Auditor as required under SB 21-262 [Section 32-1-207  | _                    |             |                  |   |
| C.R.S.]? If NO, please explain.  |                      |             |                  |   |
|  |                      |             |                  |   |
| Places use this appear to provide any addition   | and evaloration      | no or comme | ata nat province | lahy ingludad:  |
| Please use this space to provide any addition  | лы ехрытаат          | on commer   | nis noi previou  | isiy indidded.  |

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|                                 |                                 |      | OSA USE ONLY                         |                  |   |
|---------------------------------|---------------------------------|------|--------------------------------------|------------------|---|
| Entity Wide:                    | General Fund                    |      | Governmental Funds                   | Note             | s |
| Unrestricted Cash & Investments | \$<br>- Unrestricted Fund Balar | n \$ | - Total Tax Revenue                  | \$<br>708,102    |   |
| Current Liabilities             | \$<br>3,727 Total Fund Balance  | \$   | - Revenue Paying Debt Service        | \$<br>-          |   |
| Deferred Inflow                 | \$<br>915,775 PY Fund Balance   | \$   | - Total Revenue                      | \$<br>735,490    |   |
|                                 | Total Revenue                   | \$   | 145,078 Total Debt Service Principal | \$<br>-          |   |
|                                 | Total Expenditures              | \$   | 145,078 Total Debt Service Interest  | \$<br>-          |   |
|                                 |                                 |      | Total Assets                         | \$<br>919,502    |   |
|                                 |                                 |      | Total Liabilities                    | \$<br>3,727      |   |
| Sovernmental                    | Interfund In                    | \$   |                                      |                  |   |
| otal Cash & Investments         | \$<br>- Interfund Out           | \$   | - Enterprise Funds                   |                  |   |
| ransfers In                     | \$<br>- Proprietary             |      | Net Position                         | \$<br>-          |   |
| ransfers Out                    | \$<br>- Current Assets          | \$   | - PY Net Position                    | \$<br>_          |   |
| roperty Tax                     | \$<br>663,132 Deferred Outflow  | \$   | - Government-Wide                    |                  |   |
| Debt Service Principal          | \$<br>- Current Liabilities     | \$   | - Total Outstanding Debt             | \$<br>-          |   |
| otal Expenditures               | \$<br>735,490 Deferred Inflow   | \$   | - Authorized but Unissued            | \$<br>16,430,000 |   |
| otal Developer Advances         | \$<br>- Cash & Investments      | \$   | - Year Authorized                    | 11/6/2018        |   |
| Total Developer Renayments      | \$<br>- Principal Expense       | \$   | _                                    |                  |   |

## PART 12 - GOVERNING BODY APPROVAL

| 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, 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.

| MUST Print t | he names of ALL members of the governing body below. | A MAJORITY of the members of the governing body must sign below.   |
|--------------|--|--|
| 1            |  | I,Stephen ParkerDocuSigned by hat I am a duly elected or appointed board member, and that I have personally reviewed and approve this explication for exemption from audit.  SignedMay 202537F0419EC2744BE   |
|              | Full Name  | া,Timothy Wagley DocuSigned সম্পাম । am a duly elected or appointed board member, and that I have  |
| 2            | Timothy Wagley                                       | personally reviewed and approve this application for exemption from audit.  SignedMay 202799477E7D2A4A4A9  |
|              | Full Name  | I,Chelsea DaleDocusinged by I am a duly elected or appointed board member, and that I have   |
| 3            | Chelsea Dale   | personally reviewed and approve this application for exemption from audit 25 personally reviewed and approve this application for exemption from audit 27 personally reviewed and approve this application for exemption from audit 28 personally reviewed and approve this application for exemption from audit 29:05 PST with the personal per |
|              | Full Name  | I,Cheri Skaggs, attest that I am a duly elected or appointed board member, and that I have   |
| 4            | Cheri Skaggs   | personally reviewed and approve this application for exemption from audit.  Signed Date:  My term Expires:May 2025   |
|              | Full Name  | I,Neil Matthew Simpson, attest that I am a duly elected or appointed board   |
| 5            | Neil Matthew Simpson                                 | member, and that I have personally reviewed and approve this application for exemption from audit.  Signed   |
|              | Full Name  | , attest that I am a duly elected or appointed board member, and that I have   |
| 6            |  | personally reviewed and approve this application for exemption from audit.  Signed   |
|              | Full Name  | I, , attest that I am a duly elected or appointed board member, and that I have  |
| 7            |  | personally reviewed and approve this application for exemption from audit.  Signed Date:  My term Expires:   |