# 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.

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

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:

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

APPLICATIONS MUST BE FULLY AND ACCURATELY COMPLETED

OT LOT LEG T	
Has the preparer signed the application?	Checkout our new web portal. Register your account and submit electronic Applications for Exemption From Audit, Extension of
Has the entity corrected all Prior Year Deficiencies as communicated by the OSA?	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	
Or	
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 <u>MAJORITY</u> 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: <a href="https://apps.leg.co.gov/osa/lg">https://apps.leg.co.gov/osa/lg</a>

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: A94F0CA6-A647-4ABA-9621-C3636DEF21F1 APPLICATION FOR EXEMPTION FROM AUDIT LONG FORM NAME OF GOVERNMENT **Timbers Estates Metropollitan District** 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 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 NAME: Amanda Castle

PREPARER (SIGNATURE REQUIRED)

TITLE

**ADDRESS** 

PHONE

FIRM NAME (if applicable)

RELATIONSHIP TO ENTITY

DATE PREPARED

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

District Accountant

District Accountant

970-669-3611

2/19/2021

Pinnacle Consulting Group, Inc.

550 W Eisenhower Blvd, Loveland, CO 80537

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

# DocuSign Envelope ID: A94F0CA6-A647-4ABA-9621-C3636DEF21F1 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/Fi	iduciary Funds	
Line #	Description	General Fund	Fund*	Description	Fund*	Fund*	Please use this space to
Line #	υεοσιτβιίοι	General Fund	Funa"	Description	Funa*	Funa*	provide explanation of any items on this page
	Assets			Assets			items on this page
1-1	Cash & Cash Equivalents	\$ 32,516	\$ -	Cash & Cash Equivalents	\$ -	\$ .	
1-2	Investments	\$ 168,691		Investments	\$ -	\$ .	· _
1-3	Receivables	\$ 4,234		Receivables	\$ -	\$ .	· _
1-4	Due from Other Entities or Funds	\$ 798	\$ -	Due from Other Entities or Funds	\$ -	\$	·
	All Other Assets [specify]			Other Current Assets	\$ -	\$	·_
1-5	Prepaids	\$ 5,745	\$ -	Total Current Assets	\$ -	\$	•
1-6		\$ -		Capital Assets, net (from Part 6-4)	\$ -	\$ .	_
1-7		\$ -	\$ -	Other Long Term Assets [specify]	\$ -	\$ .	_
1-8		\$ -	\$ -		\$ -	\$ .	_
1-9		\$ -	· ·		\$ -	\$ .	-
1-10		\$ -			\$ -	\$	·
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS			(add lines 1-1 through 1-10) TOTAL ASSETS		\$	·
1-12	TOTAL DEFERRED OUTFLOWS OF RESOURCES			TOTAL DEFERRED OUTFLOWS OF RESOURCES	7	\$	·
1-13	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ 211,984		TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ -	\$	•
	Liabilities			Liabilities			_
1-14	Accounts Payable	\$ 6,850		Accounts Payable		\$	·_
1-15	Accrued Payroll and Related Liabilities	\$ -	· .	Accrued Payroll and Related Liabilities	Ψ	\$	•
1-16	Accrued Interest Payable  Due to Other Entities or Funds	\$ - \$ -	•	Accrued Interest Payable  Due to Other Entities or Funds	Ψ	\$	·
1-17 1-18	All Other Current Liabilities	\$ -		All Other Current Liabilities	Ψ	\$	·
1-10	TOTAL CURRENT LIABILITIES	T		TOTAL CURRENT LIABILITIES	Ψ	\$	· -
1-19	All Other Liabilities [specify]	\$ 0,030		Proprietary Debt Outstanding (from Part 4-4)	•	\$	
1-21	All Other Elabilities [specify]	\$ -	\$ -	Other Liabilities [specify]:		\$	$\exists$
1-22		\$ -		Other Liabilities [specify].	\$ -	\$	-
1-23		\$ -			\$ -	\$	
1-24		\$ -			\$ -	\$	
1-25		\$ -	-		\$ -	\$	
1-26		\$ -			\$ -	\$	_
1-27		\$ -			\$ -	\$	_
1-28	(add lines 1-19 through 1-27) TOTAL LIABILITIES	•	· ·	(add lines 1-19 through 1-27) TOTAL LIABILITIES	Ψ	\$	
1-29	TOTAL DEFERRED INFLOWS OF RESOURCES	.,	\$ -	TOTAL DEFERRED INFLOWS OF RESOURCES	,	\$ .	
	Fund Balance	<b>.</b>	'	Net Position	<b>.</b>	1 +	
1-30	Nonspendable Prepaid	\$ 5,745	\$ -	Net Investment in Capital Assets	\$ -	\$	
	Nonspendable Inventory	L	\$ -	·		1	_
1-32	Restricted [specify]	\$ 4,338	,	Emergency Reserves	\$ -	\$	
1-33	Committed [specify]	\$ -	-	Other Designations/Reserves	\$ -	\$	
1-34	Assigned [specify]	\$ 25,000	\$ -	Restricted	\$ -	\$	
1-35	Unassigned:	\$ 170,051	\$ -	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	\$ 205,134	\$ -	TOTAL NET POSITION	\$ -	\$	
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	\$ 211,984	\$ -	POSITION	\$ -	\$	

# PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		Governmental Funds			Proprietary/F	iduciary Funds	
Line #	Description	General Fund	Fund*	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]	\$ 119,971	\$ -	Property [include mills levied in Question 10-6]	\$ -	\$ -	, ,
2-2	Specific Ownership	\$ 8,969	\$ -	Specific Ownership	\$ -	\$ -	
2-3	Sales and Use Tax	\$ -	\$ -	Sales and Use Tax	\$ -	\$ -	
2-4	Other Tax Revenue [Interest]:	\$ 7,766	\$ -	Other Tax Revenue [specify]:	\$ -	\$ -	
2-5		\$ -	\$ -		\$ -	\$ -	
2-6		\$ -	\$ -		\$ -	\$ -	
2-7		\$ -	\$ -		\$ -	\$ -	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ 136,706	\$ -	Add lines 2-1 through 2-7 TOTAL TAX REVENUE		\$ -	
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	\$ 6,720	\$ -	Charges for Sales and Services	\$ -	\$ -	
2-17	Rental Income	\$ -	\$ -	Rental Income	\$ -	\$ -	
2-18	Fines and Forfeits	\$ -	\$ -	Fines and Forfeits	\$ -	\$ -	
2-19	Interest/Investment Income	\$ -	\$ -	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 [Insurance Claim]:	\$ 1,183	\$ -	All Other [specify]:	\$ -	\$ -	
2-23		\$ -	\$ -		\$ -	\$ -	
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ 144,608	\$ -	Add lines 2-8 through 2-23 TOTAL REVENUES		\$ -	
	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 TOTAL OTHER FINANCING SOURCES	\$ -	\$ -	Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES		\$ -	GRAND TOTALS
2-29	Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ 144,608	\$ -	Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES		\$ -	\$ 144,608

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.

Line 2-29, less line 3-22, plus line 3-29

3-32 Prior Period Adjustment (MUST explain)

Sum of Line 3-30, 3-31, and 3-32 This total should be the same as line 1-36.

3-33 Fund Balance, December 31

3-31

Fund Balance, January 1 from December 31 prior year

#### PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES **Governmental Funds Proprietary/Fiduciary Funds** Please use this space to Description General Fund Description provide explanation of any Expenditures Expenses items on this page General Government 163,080 \$ **General Operating & Administrative** 3-1 - \$ 3-2 Judicial - | \$ Salaries - \$ 3-3 Law Enforcement \$ - \$ **Pavroll Taxes** \$ - \$ Fire \$ **Contract Services** 3-4 - \$ \$ - \$ **Highways & Streets Employee Benefits** 3-5 \$ - \$ \$ \$ Solid Waste \$ Insurance \$ 3-6 - \$ \$ Contributions to Fire & Police Pension Assoc. **Accounting and Legal Fees** 3-7 - \$ \$ \$ 3-8 Health - \$ Repair and Maintenance \$ \$ **Culture and Recreation** \$ Supplies 3-9 - | \$ \$ \$ 3-10 Transfers to other districts - \$ Utilities \$ \$ Contributions to Fire & Police Pension Assoc. 3-11 Other [specify...]: \$ \$ - \$ 3-12 Payment to No. 1 for Debt - \$ Other [specify...] \$ - \$ 3-13 \$ - \$ \$ - \$ 3-14 Capital Outlay \$ - | \$ **Capital Outlay** \$ - \$ **Debt Service Debt Service** Principal \$ Principal \$ 3-15 - \$ - \$ Interest \$ Interest 3-16 - \$ \$ - \$ **Bond Issuance Costs Bond Issuance Costs** 3-17 \$ - \$ \$ \$ 3-18 **Developer Principal Repayments** \$ - \$ **Developer Principal Repayments** \$ \$ \$ \$ 3-19 **Developer Interest Repayments** - \$ **Developer Interest Repayments** \$ 3-20 All Other [specify...]: \$ - \$ All Other [specify...]: \$ \$ 3-21 - \$ \$ \$ **GRAND TOTAL** Add lines 3-1 through 3-21 Add lines 3-1 through 3-21 \$ \$ 3-22 163,080 \$ \$ 163,080 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 \$ \$ \$ 3-26 - | \$ Other Financing Sources (Uses) (from line 2-28) \$ \$ 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

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 Line 3-30 plus line 3-31

Net Position, January 1 from December 31 prior year

Prior Period Adjustment (MUST explain)

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

\$

\$

line 3-24

(18,472) \$

223,606 \$

205,134 \$

\$

	General obligation bonds	- \$	- \$	-	\$	-			
	_	- \$	- \$	-	\$	-			
	Notes/Loans	- \$	- \$	-	\$	-			
	Leases	- \$	- \$	-	\$	-			
	Developer Advances	- \$	- \$	-	\$	-			
	Other (specify):	- \$	- \$	-	\$	-			
	TOTAL	- \$	- \$	-	\$	-			
	·	must agree to prior year ending bal	ance						
	Please answer the following questions by marking the appropriate boxes.			YES		NO			
4-5	Does the entity have any authorized, but unissued, debt?			✓					
If yes:		2,000,000							
ii yes.	Date the debt was authorized:	5/21/1984							
4-6	Does the entity intend to issue debt within the next calendar year?					✓			
If yes:	How much?	-							
4-7	Does the entity have debt that has been refinanced that it is still responsible for	?				✓			
If yes:	What is the amount outstanding?	-							
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 INVESTMENTS								
		PART 5 - CASH A	ND INVE	ESTME	NTS				
	Please provide the entity's cash deposit and investment balances.	PART 5 - CASH A		ESTME MOUNT		DTAL	Please use this space to provide any explanations or comments:		
5-1	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts	PART 5 - CASH A				OTAL	Please use this space to provide any explanations or comments:		
	Please provide the entity's cash deposit and investment balances.		\$ \$	MOUNT			Please use this space to provide any explanations or comments:		
	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts	PART 5 - CASH A	\$ \$	MOUNT		32,516	Please use this space to provide any explanations or comments:		
	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts		\$ \$	MOUNT	TC		Please use this space to provide any explanations or comments:		
	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit  Investments (if investment is a mutual fund, please list underlying investments):		Al \$ \$ POSITS	32,516 -	TC		Please use this space to provide any explanations or comments:		
5-2	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit		AI \$ \$ POSITS	MOUNT	TC		Please use this space to provide any explanations or comments:		
	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit  Investments (if investment is a mutual fund, please list underlying investments):		SPOSITS  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	32,516 -	TC		Please use this space to provide any explanations or comments:		
5-2	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit  Investments (if investment is a mutual fund, please list underlying investments):		POSITS  S S S S S S S S S S S S S S S S S	32,516 - 168,691	TC		Please use this space to provide any explanations or comments:		
5-2	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit  Investments (if investment is a mutual fund, please list underlying investments):	TOTAL CASH DE	S   S   S   S   S   S   S   S   S   S	32,516 - 168,691	\$	32,516	Please use this space to provide any explanations or comments:		
5-2	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit  Investments (if investment is a mutual fund, please list underlying investments):	TOTAL CASH DE	AI S S S S S S S S S S S S S S S S S S S	32,516 - 168,691	\$	32,516	Please use this space to provide any explanations or comments:		
5-2	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit  Investments (if investment is a mutual fund, please list underlying investments): Colotrust	TOTAL CASH DE  TOTAL INVEST  TOTAL CASH AND INVEST	S S S S S S S S S S S S S S S S S S S	168,691	\$ \$ \$ \$	32,516 32,516 168,691 201,207	Please use this space to provide any explanations or comments:		
5-2	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit  Investments (if investment is a mutual fund, please list underlying investments):	TOTAL CASH DE  TOTAL INVEST  TOTAL CASH AND INVEST  YE	S S S S S S S S S S S S S S S S S S S	168,691 	\$ \$ \$ \$	32,516	Please use this space to provide any explanations or comments:		
5-2	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit  Investments (if investment is a mutual fund, please list underlying investments): Colotrust	TOTAL CASH DE  TOTAL INVEST  TOTAL CASH AND INVEST  YE	S S S S S S S S S S S S S S S S S S S	168,691	\$ \$ \$ \$	32,516 32,516 168,691 201,207	Please use this space to provide any explanations or comments:		
5-3	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit  Investments (if investment is a mutual fund, please list underlying investments): Colotrust  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. Are the entity's deposits in an eligible (Public Deposit Protection Act) public de	TOTAL CASH DE  TOTAL INVEST  TOTAL CASH AND INVEST  YE , C.R.S.?	S S S S S S S S S S S S S S S S S S S	32,516 - 168,691 - - -	\$ \$ \$ \$	32,516 168,691 201,207	Please use this space to provide any explanations or comments:		
5-2	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit  Investments (if investment is a mutual fund, please list underlying investments):  Colotrust  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.	TOTAL CASH DE  TOTAL INVEST  TOTAL CASH AND INVEST  YE , C.R.S.?	S S S S S S S S S S S S S S S S S S S	168,691 	\$ \$ \$ \$	32,516 168,691 201,207	Please use this space to provide any explanations or comments:		
5-3	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit  Investments (if investment is a mutual fund, please list underlying investments): Colotrust  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. Are the entity's deposits in an eligible (Public Deposit Protection Act) public de	TOTAL CASH DE  TOTAL INVEST  TOTAL CASH AND INVEST  YE , C.R.S.?	S S S S S S S S S S S S S S S S S S S	32,516 - 168,691 - - -	\$ \$ \$ \$	32,516 168,691 201,207	Please use this space to provide any explanations or comments:		
5-3	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit  Investments (if investment is a mutual fund, please list underlying investments): Colotrust  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. Are the entity's deposits in an eligible (Public Deposit Protection Act) public de	TOTAL CASH DE  TOTAL INVEST  TOTAL CASH AND INVEST  YE , C.R.S.?	S S S S S S S S S S S S S S S S S S S	32,516 - 168,691 - - -	\$ \$ \$ \$	32,516 168,691 201,207	Please use this space to provide any explanations or comments:		

Docus	Sign Envelope ID: A94F0CA6-A647-4ABA-9621-C3636DEF21F1							
Docus	PART 6 - CAPITAL ASSETS							
	Please answer the following question by marking in the appropriate box	17411	<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		
		year*						
	Land			\$	-			
	Buildings		\$ -	Ψ.		\$ -		
	Machinery and equipment Furniture and fixtures		\$ - \$ -	Ψ.		\$ - \$ -		
	Infrastructure	\$ 1,829,639		\$		\$ 1,829,639		
	Construction In Progress (CIP)	\$ -	\$ -	+:		\$ -	-	
	Other (explain):	\$ -	\$ -	_		\$ -		
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ (1,579,240)	\$ (56,364	) \$	-	\$ (1,635,604)		
	TOTAL	\$ 250,399	\$ (56,364	) \$	-	\$ 194,035		
		Balance -						
6-4	Complete the following Capital Assets table for PROPRIETARY FUNDS:	beginning of the	Additions		Deletions	Year-End Balance		
		year*						
	Land	\$ -		\$	-			
	Buildings	\$ -	\$ -	\$		\$ -		
	Machinery and equipment Furniture and fixtures	\$ - \$ -	\$ - \$ -	Ψ.		\$ - \$ -		
	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	JF(	DRMATI	ON		
	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?					<b>V</b>	. 1000 000 time opass to provide any explanations of comments.	
	Does the entity have a volunteer firemen's pension plan?					<u>.</u>		
	Who administers the plan?				_			
	Indicate the contributions from:							
		1		_				
	Tax (property, SO, sales, etc.):		\$ -	1				

TOTAL \$

State contribution amount:
Other (gifts, donations, etc.):

What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?

ocuS	ign Envelope ID: A94F0CA6-A647-4ABA-9621-C3636DEF21F1 PART 8 - BU	IDGET INF	FORMATIC	)N	
	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:
0.4	Did the entity file a current year budget with the Department of Local Affairs, in accordance with	[7]	П		riease use this space to provide any explanations of comments.
8-1	Section 29-1-113 C.R.S.? If no, MUST explain:	_			
8-2	Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:	✓			
If yes:	Please indicate the amount budgeted for each fund for the year reported				
	Fund Name Budgeted Expenditu	ures/Expenses			
	General Fund \$	193,275			
	\$   \$	-			
	\$	-			
	PART 9 - TAX PAYE	R'S BILL C	OF RIGHTS	S (TABOR)	
	Please answer the following question by marking in the appropriate box		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	=	$\overline{\checkmark}$		
	Note: An election to exempt the government from the spending limitations of TABOR does not exem				
	PART 10 - GI	ENERAL IN	NFORMATI	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?			V	
If yes:	Date of formation:				
10-2	Has the entity changed its name in the past or current year?			<b>V</b>	
If Yes:	NEW name				
	PRIOR name				
	Is the entity a metropolitan district?		$\overline{\checkmark}$		
10-4	Please indicate what services the entity provides:				
	Streets, traffic & safety, water, sanitary sewer, storm drainage, park & recreation		П		
	Does the entity have an agreement with another government to provide services?		Ш	<b>V</b>	
ii yos.	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):		7		
11 y 00.	Bond Redemption mills				
	General/Other mills 53.023				
	Total mills 53.023			ta mat muariariatis	aludad.
	Please use this space to provide any addi	tional explanation	ons or commen	ts not previously if	iciuded:

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		OSA USE ON	LY		
Entity Wide:	General Fund		Governmental Funds		Notes
Unrestricted Cash & Investments	\$ 201,207 Unrestricted Fund Balar	\$ 195,051	Total Tax Revenue	\$ 136,706	
Current Liabilities	\$ 6,850 Total Fund Balance	\$ 205,134	Revenue Paying Debt Service	\$ -	
Deferred Inflow	\$ - PY Fund Balance	\$ 223,606	Total Revenue	\$ 144,608	
	Total Revenue	\$ 144,608	Total Debt Service Principal	\$ -	
	Total Expenditures	\$ 163,080	Total Debt Service Interest	\$ -	
Sovernmental	Interfund In	\$ -			
otal Cash & Investments	\$ 201,207 Interfund Out	\$ - 1	Enterprise Funds		
ransfers In	\$ - Proprietary	ı	Net Position	\$ -	
ransfers Out	\$ - Current Assets	\$ - 1	PY Net Position	\$ -	
roperty Tax	\$ 119,971 Deferred Outflow	\$ - (	Government-Wide		
ebt Service Principal	\$ - Current Liabilities	\$ 	Total Outstanding Debt	\$ -	
otal Expenditures	\$ 163,080 Deferred Inflow	\$ - /	Authorized but Unissued	\$ 2,000,000	
otal Developer Advances	\$ - Cash & Investments	\$ - \	Year Authorized	5/21/1984	
Total Developer Repayments	\$ - Principal Expense	\$ -			

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#### PART 12 - GOVERNING BODY APPROVAL

17411 12 33 12 14	110 000 1 7 11 11	(O V/ L
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?	V	

# 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 safequards 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 <u>ALL</u> members of the governing body below.	A MAJORITY of the members of the governing body must complete and sign in the column below.
1	Full Name  David Hartvigsen	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:May 2022
	Full Name	I, Kurt Schwartau DocuSigned by that I am a duly elected or appointed board member, and that I have
2	Kurt Schwartau	personally reviewed and approve this application for exampling from audity secreted of appointed board member, and that make personally reviewed and approve this application for exampling from audity.  Signed
	Full Name	Robert LathamDocusigned tays t that I am a duly elected or appointed board member, and that I have
3	Bob Latham	personally reviewed and approve this application for exemption from audit.  Signed
	Full Name	I, Robert Gress — DocuSigned to that I am a duly elected or appointed board member, and that I have
4	Bob Gress	personally reviewed and approve this application for exemption from audit Signed  Signed  My term Expires:  May 2023  May 2023  My term Expires:  My term Expire
	Full Name	Rob Ginieczki — Docusigned Myst that I am a duly elected or appointed board member, and that I have
5	Rob Ginieczki	personally reviewed and approve this application for exemption from audit SignedMay 2023May 2023May 2023A176De0F99D9493
	Full Name	I, , 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 Date:  My term Expires:
	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

# 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 exempted 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 soverment) exceeded \$100,000 for Year 20XX; and WHEREAS, an application for exemption from audit for (name 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 audit for (name of government) has been prepared by (name of individual or firm), an independent accountant with browledge of governmental accounting; and WHEREAS, said application for exception from so with 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 , 26.XX. vear ended ADOPTED THIS day of , A.D. 20XX.

Mayor/President/Chairman, etc.		
ATTEST:		
Town Clerk, Secretary, etc.		
T. D. i. d. N	Date	
Type or Print Names of  Members of Governing Body	Term Expres	Signature
		·
	-	
	3: <del>7</del>	
	8	
		-