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.

 OTIE OTTE OTTE OTTE OTTE OTTE OTTE OTTE	
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 electronically?	
If yes, have you read and understand the new Electronic Signature Policy? See new here policy	
or	
☐ Have you included a resolution?	
Does the resolution state that the governing body <u>PERSONALLY</u> 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 <u>ORIGINAL INK SIGNATURES</u> from the <u>MAJORITY</u> of the governing body?	
FILING METHODS	BULKI MINISHMEREDAY STORES
NEW METHOD!	

WEB PORTAL: Register 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

QUESTIONS?

Email: osa.lg@coleg.gov or Phone: 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.

n that event, AN AUDIT SHALL BE REQUIRED.

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APPLICATION FOR EXEMPTION FROM AUDIT LONG FORM

Great Western Metropolitan District No. 6
c/o Pinnacle Consulting Group, Inc
550 W. Eisenhower Blvd
Loveland, CO 80537
Brendan Campbell, CPA
(970)669-3611

For the Year Ended 12/31/2022 or fiscal year ended:

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 a	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	itv.

NAME:	Brendan Campbell, CPA	
TITLE	Director of Finance	
FIRM NAME (if applicable)	Pinnacle Consulting Group, Inc.	
ADDRESS	550 W. Eisenhower Blvd, Loveland, CO 80537	
PHONE	(970) 669-3611	
DATE PREPARED	3/8/2023	
RELATIONSHIP TO ENTITY		

PREPARER (SIGNATURE REQUIRED)

NAME OF GOVERNMENT

CONTACT PERSON PHONE

ADDRESS

EMAIL

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.]

ľ	YES	NO	
,		V	If Yes, date filed:

		P	ART 1 - FIN	ANCIAL S	TATEMENTS - BALANCE SHEET				
	Name of Fund				9 B				
NOTE: Att	tach additional sheets as necessary.	12	Governmental F	unds		Proprietary	v/Fiduciary	Funds	Committee of the later of the l
Linn (I)	Description	6	eneral Fund*	Fund*	Description	Fund*		Fund*	Please use this space to
Line #	Description	Ge	erierai runo	runu	Description.	Fullu			provide explanation of an items on this page
1	Assets				Assets				ttomo on tino page
1-1	Cash & Cash Equivalents	\$	- \$	-	Cash & Cash Equivalents	\$	- \$	=0	
1-2	Investments	\$	- \$	-	Investments	\$	- \$	-	
1-3	Receivables	\$	- \$	-	Receivables	\$	- \$	=	
1-4	Due from Other Entities or Funds	\$	2,759 \$		Due from Other Entities or Funds	\$	- \$	-	
1-5	Property Tax Receivable	\$	516,841 \$	-	Other Current Assets [specify]				
	All Other Assets [specify]					\$	- \$	-	
1-6	Lease Receivable (as Lessor)	\$	- \$	-	Total Current Assets	\$	- \$		
1-7	Specific Ownership	\$	- \$	-	Capital & Right to Use Assets, net (from Part 6-4)	\$	- \$	-	
1-8	Interest and Other	\$	- \$	-	Other Long Term Assets [specify]	\$	- \$	-	
1-9		\$	- \$	-	1	\$	- \$	-	
1-10		\$	- \$	-		\$	- \$	-	
1-11	(add lines 1-1 through 1-10) TOTAL ASSE	TS \$	519,600 \$		(add lines 1-1 through 1-10) TOTAL ASSETS	\$	- \$		
E 00 0	Deferred Outflows of Resources:				Deferred Outflows of Resources				ļ
1-12	[specify]	\$	- \$	-1	[specify]	\$	- \$		
1-13	[specify]	S	- \$	_	[specify]	\$	- \$		
1-14	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLO	-	- \$		(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS		- \$	Remark to the East	
1-15	TOTAL ASSETS AND DEFERRED OUTFLO		519,600 \$				- \$		
	Liabilities	Ψ	σ10,000 φ		Liabilities		Ψ		
1-16	Accounts Payable	\$	- \$		Accounts Payable	\$	- \$		
1-17	Accrued Payroll and Related Liabilities	\$	- \$	-	Accrued Payroll and Related Liabilities	\$	- \$		
1-18	Unearned Property Tax Revenue	\$	- \$	_	Accrued Interest Payable	\$	- \$		
1-19	Due to Other Entities or Funds	\$	2,759 \$	_	Due to Other Entities or Funds	\$	- \$		
1-20	All Other Current Liabilities	\$	- \$		All Other Current Liabilities	\$	- \$		
1-21	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILIT	-	2,759 \$		(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	All Other Liabilities [specify]	\$	- \$		Other Liabilities [specify]:	\$	- \$		
		\$	- \$		Other Liabilities [specify]:	\$	- \$		
1-24		\$	- \$			\$	- \$		
1-25		\$	- \$			\$	- \$		
1-26	(add lines 1-21 through 1-26) TOTAL LIABILIT		2,759 \$	-	(add lines 1-21 through 1-26) TOTAL LIABILITIES	<u> </u>	- \$	_	
1-27		152 \$	2,759 \$	-	Deferred Inflows of Resources	Ф	- \$		
	Deferred Inflows of Resources:		510.011		Pension/OPEB Related	\$			ĺ
1-28	Deferred Property Taxes	\$	516,841 \$		7	\$	- \$	<u>-</u>	ä
1-29	Lease related (as lessor)	\$	- \$	-	Other [specify]		- \$	-	
1-30	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLO	WS \$	516,841 \$		(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	\$	- \$		
	Fund Balance				Net Position	•			1
	Nonspendable Prepaid	\$	- \$	-	Net Investment in Capital Assets	\$	- \$		
	Nonspendable Inventory	\$	- \$	-					1
1-33	Restricted [specify]	\$	- \$	-	Emergency Reserves	\$	- \$	-	
1-34	Committed [specify]	\$	- \$	-	Other Designations/Reserves	\$	- \$	-	
1-35	Assigned [specify]	\$	- \$	-	Restricted	\$	- \$	-	
1-36	Unassigned:	\$	- \$	-	Undesignated/Unreserved/Unrestricted	\$	- \$	_	
1-37	Add lines 1-31 through 1				Add lines 1-31 through 1-36				
	This total should be the same as line 3				This total should be the same as line 3-33				
	TOTAL FUND BALAN	NCE \$	- \$		TOTAL NET POSITION	\$	- \$		
1-38	Add lines 1-27, 1-30 and 1	1-37			Add lines 1-27, 1-30 and 1-37				
	This total should be the same as line 1	1-15			This total should be the same as line 1-15				
	TOTAL LIABILITIES, DEFERRED INFLOWS, AND FL				TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET POSITION				
- L	BALAN								

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		Governme	ntal Funds		Proprietary/Fi	duciary Funds	Places was this areas to
Line #	Description	General Fund*	Fund*	Description	Fund*	Fund*	Please use this space to provide explanation of any
Т	ax Revenue			Tax Revenue			items on this page
2-1	Property [Include mills levied in Question 10-6]	\$ 655,375	\$ -	Property [Include mills levied in Question 10-6]	\$ -	\$ -	THE WAR TAKE
2-2	Specific Ownership	\$ 38,780	\$ -	Specific Ownership	\$ -	\$ -	
2-3	Sales and Use Tax	\$ -	\$ -	Sales and Use Tax	\$ -	\$ -	0
2-4	Other Tax Revenue [specify]:	\$ -	\$ -	Other Tax Revenue [specify]:	\$ -	\$ -	
2-5	i i	\$ -	\$ -		\$ -	\$ -	
2-6		\$ -	\$ -		\$ -	\$ -	
2-7		\$ -	\$ -	K V E	\$ -	\$ -	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ 694,156	\$ -	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	\$ -	\$ -	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 [specify]: Treasurer Fees		\$ -	All Other [specify]:	\$ -	\$ -	
2-23		\$ -	\$ -		\$ -	\$ -	
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ 694,156	\$ -	Add lines 2-8 through 2-23 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 TOTAL OTHER FINANCING SOURCES	•	\$ -	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES		\$ -	GRAND TOTALS
2-30	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES			Add lines 2-24 and 2-25 TOTAL REVENUES AND OTHER FINANCING SOURCES		\$ -	\$ 694,156

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.

3-32 Prior Period Adjustment (MUST explain)

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

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

3-33 Fund Balance, December 31

PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES Proprietary/Fiduciary Funds Please use this space to General Fund* Fund* provide explanation of any Expenditures Expenses items on this page **General Government** General Operating & Administrative - \$ - \$ Judicial \$ \$ Salaries \$ - | \$ 3-2 \$ Payroll Taxes 3-3 Law Enforcement \$ \$ - \$ **Contract Services** 3-4 Fire \$ -\$ \$ - \$ **Employee Benefits** 3-5 **Highways & Streets** \$ - \$ \$ - \$ Solid Waste \$ \$ Insurance \$ - \$ -3-6 Accounting and Legal Fees Contributions to Fire & Police Pension Assoc. \$ - \$ \$ - \$ 3-7 Repair and Maintenance - \$ Health -\$ \$ 3-8 Supplies 3-9 Culture and Recreation \$ - \$ \$ - | \$ Transfers to other districts 684,327 \$ Utilities - \$ \$ \$ 3-10 - \$ 9,829 \$ Contributions to Fire & Police Pension Assoc. Other [specify...]: Treasurer Fees \$ \$ 3-11 \$ - \$ Other [specify...] \$ - \$ 3-12 \$ - \$ \$ - \$ 3-13 Capital Outlay 3-14 Capital Outlay \$ - \$ \$ - \$ **Debt Service Debt Service** \$ Principal - \$ Principal (should match amount in 4-4) - \$ 3-15 (should match amount in 4-4) 3-16 Interest - \$ Interest \$ - \$ **Bond Issuance Costs** - \$ **Bond Issuance Costs** \$ - \$ 3-17 **Developer Principal Repayments** 3-18 **Developer Principal Repayments** \$ - \$ \$ - \$ **Developer Interest Repayments** \$ - \$ **Developer Interest Repayments** \$ - \$ 3-19 \$ - \$ All Other [specify...]: \$ - \$ 3-20 All Other [specify...]: 3-21 \$ - | \$ \$ - | \$ **GRAND TOTAL** Add lines 3-1 through 3-21 Add lines 3-1 through 3-21 \$ 694,156 \$ 694,156 3-22 TOTAL EXPENDITURES TOTAL EXPENSES 3-23 Interfund Transfers (In) - \$ Net Interfund Transfers (In) Out - \$ \$ \$ Other [specify...][enter negative for expense] \$ - \$ Interfund Transfers out 3-25 Other Expenditures (Revenues): - \$ Depreciation/Amortization \$ - \$ Other Financing Sources (Uses) - \$ 3-26 \$ \$ _ (from line 2-28) Capital Outlay 3-27 - \$ \$ - \$ 3-28 - \$ **Debt Principal** \$ - \$ (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, TRANSFERS AND OTHER EXPENDITURES plus 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 \$

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.

\$

Prior Period Adjustment (MUST explain)

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

Net Position, December 31

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

\$

	PART 4 - DEBT OUTSTA	nding, iss	SUED, .	AND RETIRED	
	Please answer the following questions by marking the appropriate boxes.		YES	NO	Please use this space to provide any explanations or comments:
4-1	Does the entity have outstanding debt?	1		V	
4-2	Is the debt repayment schedule attached? If no, MUST explain:	·			
		1)			
4-3	Is the entity current in its debt service payments? If no, MUST explain:				
		1			
4-4					
			tired during	Outstanding at year-end	
	amounts) beginning of year*	year	year		
	General obligation bonds \$ - \$	- \$	-	\$ -	
	Revenue bonds \$ - \$	- \$		\$ -	
	Notes/Loans \$ - \$	- \$		- \$	
	Lease Liabilities \$ - \$	- \$		- \$	
	Developer Advances \$ - \$	- \$		- \$	
	Other (specify): \$ - \$	- \$		\$ -	
	TOTAL \$ - \$	- \$		- \$	
	*must agree to prior year end	ding balance	VEO	NO.	
4.5	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.]?	dia da a del da	YES	NO	
4-5	How much? \$ 45,972,686			ь	
f yes:	Date the debt was authorized: 45,572,000				
4-6	Does the entity intend to issue debt within the next calendar year?			✓	
	How much?			_	
4-7	Does the entity have debt that has been refinanced that it is still responsible for?			ightharpoons	
f yes:	What is the amount outstanding?				
4-8	Does the entity have any lease agreements?			☑	
If yes:	What is being leased?	1			
	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?				
	A STATE OF THE PARTY OF THE PAR	LAND IND.	OTME	NITO	
	PART 5 - CASH	AND INVE	SIME	:NIS	
	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 CA	SH DEPOSITS		-	
	Investments (if investment is a mutual fund, please list underlying investments):				
		\$		-	
5-3		\$		-	
3-3		\$		-	
		\$			
		NVESTMENTS		\$ -	
	TOTAL CASH AND I	NVESTMENTS		\$ -	
En.	Please answer the following question by marking in the appropriate box	YES	NO	N/A	
5-4	Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?			V	
5-5	Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seg. C.R.S.)? If no. MUST explain:			V	

Docu	Sign Envelope ID: 87B81DDD-49B9-477C-9E3A-CE15A903B9C4	6 - CAPITAL AND RIG	GHT-T	O-USF	ASSETS	
	Please answer the following question by marking in the appropriate box	0 0, 11 11, 12, 11, 12		YES	NO	Please use this space to provide any explanations or comments:
6-1	Does the entity have capitalized assets?					reason and appear to provide any explanations of comments.
	Has the entity performed an annual inventory of capital assets in accordance with	Section 29-1-506, C.R.S.? If no.		П		
0-2	MUST explain:	, , , , , , , , , , , , , , , , , , , ,		ш	L L	
						_
6-3		Balance -				
	Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS:	beginning of the Additions	D	eletions	Year-End Balance	
		year 1				
	Land	\$ - \$	- \$	- 3		
	Buildings	\$ - \$	- \$	- 9		
	Machinery and equipment Furniture and fixtures	\$ - \$	- \$ - \$	- 9		
	Infrastructure	\$ - \$	- S	- 3		
	Construction In Progress (CIP)	\$ - \$	- \$	- 3		
	Leased Right-to-Use Assets	\$ - \$	- \$	- 8		
	Intangible Assets	\$ - \$	- \$	- \$		
	Other (explain):	\$ - \$	- \$	- 5		
	Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)	\$ - \$	- \$	- 8		
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ - \$	- \$	- 8		·
	TOTAL		- \$	- \$	· ·	
200		Balance -				
6-4	Complete the following Capital & Right-To-Use Assets table for PROPRIETARY FUNDS:	beginning of the Additions	D	eletions	Year-End Balance	
	Land	year* - \$	- \$	- 5		
	Buildings	\$ - \$	- \$	- 3		
	Machinery and equipment	\$ - \$	- \$	- 5		
	Furniture and fixtures	\$ - \$	- \$	- 5		
	Infrastructure	\$ - \$	- \$	- 5	\$	
	Construction In Progress (CIP)	\$ - \$	- \$	- 5		
	Leased Right-to-Use Assets	\$ - \$	- \$	- 8		
	Intangible Assets	\$ - \$	- \$ - \$	- 5		•
	Other (explain): Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)	\$ - \$	- \$ - \$	- 3		
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ - \$	- \$	- 9		
	TOTAL		- \$	- 3		
		* Must agree to prior year-end balance				
		- Generally capital asset additions should be				
		in accordance with the government's capita	alization po	olicy. Please exp	lain any discrepancy	
	PRINCIPLE OF THE PRINCI	PART 7 - PENSION I	NEOF	RMATIO	N	
		174117 1211818111	111 01	YES	NO	Disease was the sease to see it is a season to sea
7.4	Does the entity have an "old hire" firefighters' pension plan?				☑	Please use this space to provide any explanations or comments:
7-1	Does the entity have a volunteer firefighters' pension plan?					
	Who administers the plan?					
	Indicate the contributions from:	9				
	Tax (property, SO, sales, etc.):	\$	-			
	State contribution amount:	\$	-			
	Other (gifts, donations, etc.):	\$	-			
		TOTAL \$	_			
	What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?	\$	_			
	The state of the s	Ψ				

Docu	DocuSign Envelope ID: 87B81DDD-49B9-477C-9E3A-CE15A903B9C4								
g no	PART 8 - BUDGET INFORMATION								
16.5	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:				
8-1	Did the entity file a current year budget with the Department of Local Affairs, in accordance with	$\overline{\mathcal{Q}}$							
	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.?		П						
8-2	If no, MUST explain:	_							
If yes:	Please indicate the amount appropriated for each fund separately for the year reported								
	Governmental/Proprietary Fund Name Total Appl General Fund S	ropriations By Fund 737.965							
	Selectar und \$	707,000	-						
	\$		-						
	PART 9 - TAX PART	AVED'S DILL	OF DICHTS	(TAROR)					
	Please answer the following question by marking in the appropriate box	ATER S DILL	YES	(TABOR)	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	on 20(5)]?	✓		rease use this space to provide any explanations of comments.				
	Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 per	ercent emergency reserve							
	requirement. All governments should determine if they meet this requirement of TABOR. PART 10	- GENERAL I	NEORMATIC	N					
	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 If yes:	Is this application for a newly formed governmental entity?		7	v					
ii yes.	Date of formation:								
				v					
10-2	Has the entity changed its name in the past or current year?			ŭ					
If Yes:	NEW name	R							
	DRIOD	E.							
	PRIOR name		_						
	Is the entity a metropolitan district? Please indicate what services the entity provides:		✓						
10-4	Water, irrigation, sanitation, drainage, streets, traffic & safety controls, transportation, parks & recreation	in.							
10-5	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 are provided by Great Western Metropolitan District No. 5.		7						
10-6	Does the entity have a certified mill levy?	ji.							
If yes:	Please provide the number of mills levied for the year reported (do not enter \$ amounts):	*: *	_						
	Bond Redemption mills	0.000							
	General/Other mills Total mills	20.000	-						
1 (3)	Please use this space to provide any		tions or comments	not previously in	cluded:				

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OSA USE ONLY						
Entity Wide:	STATE OF THE PARTY OF	General Fund	Governmental Funds		Notes	
Unrestricted Cash & Investments	\$	- Unrestricted Fund Balan \$	- Total Tax Revenue	\$	694,156	
Current Liabilities	\$	2,759 Total Fund Balance \$	- Revenue Paying Debt Service	\$		
eferred Inflow	\$	516,841 PY Fund Balance \$	- Total Revenue	\$	694,156	
		Total Revenue \$	694,156 Total Debt Service Principal	\$		
		Total Expenditures \$	694,156 Total Debt Service Interest	\$		
overnmental		Interfund In \$				
otal Cash & Investments	\$	- Interfund Out \$	- Enterprise Funds			
ransfers In	\$	- Proprietary	Net Position	\$		
ransfers Out	\$	- Current Assets \$	- PY Net Position	\$		
roperty Tax	S	655,375 Deferred Outflow \$	- Government-Wide			
ebt Service Principal	\$	- Current Liabilities \$	- Total Outstanding Debt	\$		
otal Expenditures	\$	694,156 Deferred Inflow \$	- Authorized but Unissued	\$	45,972,686	
otal Developer Advances	\$	- Cash & Investments \$	- Year Authorized		11/6/2007	
Total Daveloper Penayments	9	- 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?	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 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 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 Marc Savela	I, Marc Savela DocuSigned by: have personally reviewed and approve this application for exempting from audit Signed Date: 3/1//2023 14:56:03 MDT My term Expires: May 2025 My term
Mary Colonia	Full Name	I, Ron Corsentino , attest that I am a duly elected or appointed board member, and
2	Ron Corsentino	that I have personally reviewed and approve this application for exemption from audit. Signed
	Full Name	I, John Spiegleman DocuSigned by: , attest that I am a duly elected or appointed board member, and
3	John Spiegleman	that I have personally reviewed and approve this application for exampling from audit. 13:52:47 PDT Signed Date: 3/17/2023 audit. 13:52:47 PDT My term Expires: May 2023 DE50 A470
	Full Name	I, Brian Spitter DocuSigned by: , attest that I am a duly elected or appointed board member, and
4	Brian Spittell	that I have personally reviewed and approve this application for exempting from audit 15:39:43 MDT Signed Draw Stiff Date: 3/17/2023 1 15:39:43 MDT My term Expires: May 2023 Expressions
1000	Full Name	I, attest that I am a duly elected or appointed board member, and that I have
5		personally reviewed and approve this application for exemption from audit. Signed My term Expires:
ALCOHOLD THE	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 My term Expires:
NAME OF STREET	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