## **APPLICATION FOR EXEMPTION FROM AUDIT**

### SHORT FORM

NAME OF GOVERNMENT	Lake of the Rockies Metropolitan District	For the Year Ended
ADDRESS	102 S Tejon Street	12/31/16
	Suite 350	or fiscal year ended:
	Colorado Springs, CO 80903	
CONTACT PERSON	Carrie Bartow	
PHONE	719-635-0330	
EMAIL	Carrie.Bartow@claconnect.com	
AX	719-473-3630	
	PART 1 - CERTIFICATION OF PREPARE	R

I certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to the best of my knowledge.

NAME:	Carrie Bartow
TITLE	Accountant for the District
FIRM NAME (if applicable)	CliftonLarsonAllen LLP
ADDRESS	102 S Tejon Street Suite 350 Colorado Springs, CO 80903
PHONE	719-635-0330
DATE PREPARED	
(Must be prepared prior to	3/16/2017
Board approval)	

# PREPARER (SIGNATURE REQUIRED)

#### SEE ACCOUNTANT'S COMPILATION REPORT

Please indicate whether the following financial information is recorded	GOVERNMENTAL (MODIFIED ACCRUAL BASIS)	PROPRIETARY (CASH OR BUDGETARY BASIS)
using Governmental or Proprietary fund types	<b>✓</b>	

#### **PART 2 - REVENUE**

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

Line#	Description		Round to nearest Dollar	Please use this
2-1	Ta Property	\$	6,399	space to provide
2-2	Specific ownership	\$	736	any necessary
2-3	Sales and use	\$		explanations
2-4	Other (specify):	\$		
2-5	Licenses and permits	\$		
2-6	Intergovernmen Grants	\$		
2-7	Conservation Trust Funds (Lottery)	\$		
2-8	Highway Users Tax Funds (HUTF)	\$		
2-9	Other (specify):	\$		
2-10	Charges for services	\$		
2-11	Fines and forfeits	\$		
2-12	Special assessments	\$		
2-13	Investment income	\$	3	
2-14	Charges for utility services	\$		
2-15	Debt proceeds (should agree with line 4-4, column 2)	\$		
2-16	Lease proceeds	\$		
2-17	Developer Advances received (should agree with line 4-4)	\$	35,039	
2-18	Proceeds from sale of capital assets	\$		
2-19	Fire and police pension	\$		
2-20	Donations			
2-21	Other (specify):	\$	224	
2-22	Homeowner's fees	\$	2,960	
2-23		\$	CENTRAL PROPERTY OF THE PARTY OF	
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE	\$	45,361	

#### **PART 3 - EXPENDITURES**

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

Line#	Description	Round to nearest Dollar	Please use this
3-1	Administrative	\$ 26,250	space to provide
3-2	Salaries	\$	any necessary
3-3	Payroll taxes	\$	explanations
3-4	Contract services	\$	
3-5	Employee benefits	\$	
3-6	Insurance	\$ 3,087	
3-7	Accounting and legal fees	\$ 23,996	
3-8	Repair and maintenance	\$	
3-9	Supplies	\$	
3-10	Utilities and telephone	\$ 1,015	
3-11	Fire/Police	\$	
3-12	Streets and highways	\$	
3-13	Public health	\$	
3-14	Culture and recreation	\$	
3-15	Utility operations	\$	
3-16	Capital outlay	\$	
3-17	Debt service principal (should agree with Part 4)	\$	
3-18	Debt service interest	\$	
3-19	Repayment of Developer Advance Principal (should agree with line 4-4)	\$	
3-20	Repayment of Developer Advance Interest	\$	
3-21	Contribution to pension plan (should agree to line 7-2)		
3-22	Contribution to Fire & Police Pension Assoc. (should agree to line 7-2)	\$	
3-23	Other (specify):	\$	
3-24		\$	
3-25		\$	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES	\$ 54,348	

If TOTAL REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER than \$100,000 - STOP. You may not use this form. Please use the "Application for Exemption from Audit - LONG FORM".

	PART 4 - DEBT OUTSTANDII				AND	RE	TIR	RED		
	Please answer the following questions by marking t	he app	ropriate boxe	s.		82	Yes		940	No
4-1	Does the entity have outstanding debt?  If Yes, please attach a copy of the en	tity's	Deht Rena	ımar	t Schedul	6	7			
4-2	Is the debt repayment schedule attached? If no, MUST explanation		Debt Nepa	yiiici	Concad					V
	Developer advances are not general obligation debt and no debt service sch	nedule is		ayme	nt of					
	advances is subject to annual appropriation if and when eligible funds become	ne avail	lable.							
4-3	Is the entity current in its debt service payments? If no, MUS	Т ехр	lain:							7
	Repayment of advances is subject to annual appropriation if	and w	vhen eligible	func	s become					
	available.									
4-4	Please complete the following debt schedule, if applicable:									
	(please only include principal amounts)(enter all amount as positive		anding at end	Issi	ed during	Re	etired o			tstanding at
	numbers)	of prior year year				yea	r		year-end	
	General obligation bonds	\$		\$		\$			\$	
	Revenue bonds	\$		\$		\$			\$	
	Notes/Loans				\$		4	\$		
	Leases	\$		\$		\$			\$	
	Developer Advances	\$	38,902	\$	35,039	*			\$	73,941
	Other (specify):	\$		\$		\$			\$	
	TOTAL	\$	38,902	\$	35,039	\$			\$	73,941
	Please answer the following questions by marking the appropriate	boxes.		West			Yes	3		No
4-5	Does the entity have any authorized, but unissued, debt?						1			
If yes:	How much?	\$			0,000.00					
4.0	Date the debt was authorized:		November	2, 20	)10					
4-6	Does the entity intend to issue debt within the next calendar	year?								<b>V</b>
If yes:	How much?	otill ro	ananaihla fa	-2						
4-7	Does the entity have debt that has been refinanced that it is What is the amount outstanding?	\$ Still re	sponsible ic	OF ?						<b>V</b>
If yes:	Does the entity have any lease agreements?	φ								
If yes:	What is being leased?									
Hall Contain	What is the original date of the lease?									
	Number of years of lease?			11-15-1						
	Is the lease subject to annual appropriation?	Φ.								
4-9	What are the annual lease payments?  Does the entity have a certified Mill Levy?	\$								
If yes:	Please provide the following mills levied for the year reported:	Bond	Redemptio	n			V			
ii yos.	r leade provide the following filling levied for the year reported.		ral/Other							50.000
		TOTA								50.000
	Please use this space to provide a	ny ex	planations	or co	mments:		THE !	P4-17	1918	
	4									
	PART 5 - CASH AN	DI	<b>NVEST</b>	ME	NTS					
	Please provide the entity's cash deposit and investment balances.					NAME OF	Amou	int		Total
5-1	YEAR-END Total of ALL Checking and Savings Accounts					\$		6,999		
5-2	Certificates of deposit					\$		-		
	Total Cash Deposits								\$	6,999
	Investments (if investment is a mutual fund, please list under	rlying i	investments	):						
						\$		•		
5-3						\$		-		
						\$		-		
	Total Investments				The same	\$			\$	
	Total Cash and Investments			745					\$	6,999
		to pulled to	hoves	32.61	Vac	THE	W.	Carlotte State	φ	
5-4	Please answer the following questions by marking in the appr Are the entity's Investments legal in accordance with Section				Yes		No			N/A
-	seq., C.R.S.?	2 1-7	0 001, 61.							<b>V</b>
5-5	Are the entity's deposits in an eligible (Public Deposit Protect	tion A	ct) public							
0-5	depository (Section 11-10.5-101, et seq. C.R.S.)?	WIT A	ot) public		<b>V</b>					
If no MII	ST use this space to provide any explanations:	PA PER	ALC: UNIVERSITY OF							
	or the three to provide ally explanations.									

100	PART 6 - C	APITAL	ASSE	TS					
Mark Mark	Please answer the following questions by marking in the app	ropriate boxes					Yes		No
6-1	Does the entity have capital assets?								7
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:								
6-3						5'			
0-3	Complete the following capital assets table:		- beginning ne year	be incl	ns (Must luded in rt 3)	De	eletions	Year-End Balance	
	Land	\$		\$	2 12 13	\$		\$	
	Buildings	\$		\$		\$	<u>.</u>	\$	
	Machinery and equipment	\$	-	\$	-	\$	- 1	\$	
	Furniture and fixtures	\$		\$	-	\$	-	\$	
	Construction In Progress (CIP)	\$	-	\$	-	\$		\$	
	Other (explain):	\$	-	\$	-	\$	- 1	\$	-
	Accumulated Depreciation (Please enter a negative, or credit, balance)	\$	-	\$	-	\$	-	\$	-
	TOTAL	\$	-	\$	1	\$		\$	-
	Please use this space to prov	ide any expl	anations	or com	ments:	1,200			

	PART 7 - PENSION INFORM	IATI	ON		A SAME OF THE	
	Please answer the following questions by marking in the appropriate boxes.			Yes	No	
7-1	Does the entity have an "old hire" firemen's pension plan?					
7-2	Does the entity have a volunteer firemen's pension plan?					
If yes:	Who administers the plan?					
	Indicate the contributions from:					
	Tax (property, SO, sales, etc.):	\$	-			
	State contribution amount:	\$	-			
	Other (gifts, donations, etc.):	\$	-			
	TOTAL	\$				
	What is the monthly benefit paid for 20 years of service per retiree as of Jan	\$				
	1?	Ф				
	Please use this space to provide any explanations	or con	nments:			

RES.	Please answer the following questions by marking in the	appropriate boxes.	Yes	No	N/A
8-1	Did the entity file a budget with the Department of current year in accordance with Section 29-1-113 (If no, MUST explain:		v		
20	Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:				
8-2	Did the entity pass an appropriations resolution, in 29-1-108 C.R.S.? If no, MUST explain:	accordance with Section	on 🗸		
8-2		accordance with Section	on 🔽		
<b>8-2</b> yes:	29-1-108 C.R.S.? If no, MUST explain:  Please indicate the amount appropriated for each for	fund for the year report	ed:		
	29-1-108 C.R.S.? If no, MUST explain:  Please indicate the amount appropriated for each for European Name	und for the year report	ed: ed Expenditures		
	29-1-108 C.R.S.? If no, MUST explain:  Please indicate the amount appropriated for each for	fund for the year report	ed:		

	PART 9 - TAXPAYER'S BILL OF RIGHTS (TA		
	Please answer the following question by marking in the appropriate box	Yes	No
9-1	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 emergency reserve requirement. All governments should determine if they meet this requirement of TABOR.		
f no, Ml	JST explain:	ARTENANCE.	
	PART 10 - GENERAL INFORMATION  Please answer the following questions by marking in the appropriate boxes.	Yes	No
10-1	Is this application for a newly formed governmental entity?		V
If yes:	Date of formation:		A Create - A Maria Control
10-2	Has the entity changed its name in the past or current year?		<b>V</b>
If yes:	Please list the NEW name & PRIOR name:	The Control of the Co	
10-3	Is the entity a metropolitan district?	V	
	Please indicate what services the entity provides:		
	To construct, acquire, install, and/or operate public infrastructure related to streets, water, and sanitary sewer.		
10-4	Does the entity have an agreement with another government to provide services?		V
If yes:	List the name of the other governmental entity and the services provided:		
10-5	Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during the		
10-5	year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and		<b>V</b>
	32-1-104 (3), C.R.S.]		
If yes:	Date Filed:		
	Please use this space to provide any explanations or comments		
	1/15 Application for Exemption from audit had zero outstanding developer advances in Section	on 4-4. That number	er has been
corrected	d to 38,902 in the 12/31/16 filing.		

### **PART 11 - GOVERNING BODY APPROVAL**

Below is the certification and approval of the governing board. By signing the board member is certifying they are a duly elected or appointed officer of the local government. Governing board members may be verified. Also by signing, the board 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 \$100,000 or less must have an application prepared by a person skilled in governmental accounting; completed to the best of their knowledge and is accurate and true. Use additional pages if needed.

	Print the names of ALL current	A <u>MAJORITY</u> of the governing board members must complete and sign in the column below.
	governing board members below.	
Board	Print Board Member's Name	I, Jerry Biggs, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Member 1	Jerry Biggs	Signed Date: My term Expires: May 2018
Board	Print Board Member's Name	I, Jeff Powles, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Board Member 2	Jeff Powles	Date: 3·2·/7 My term Expires: May 2018
Board Member 3	Print Board Member's Name	I, Charlie Williams, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
	Charlie Williams	Signed Date: My term Expires: May 2018
Board	Print Board Member's Name	I, Mike Fenton, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Member 4	Mike Fenton	Signed Date: My term Expires: May 2020
Board	Print Board Member's Name	I, Ken Rabel , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Member 5	Ken Rabel	Signed Date: My term Expires: May 2020
Board	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption
Member 6		from audit. Signed Date:
		My term Expires:
Board	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption
Member 7		from audit. Signed
		Date: My term Expires:

### PART 11 - GOVERNING BODY APPROVAL

Below is the certification and approval of the governing board. By signing the board member is certifying they are a duly elected or appointed officer of the local government. Governing board members may be verified. Also by signing, the board 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 \$100,000 or less must have an application prepared by a person skilled in governmental accounting; completed to the best of their knowledge and is accurate and true. Use additional pages if needed.

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Member 2	Jeff Powles	Signed Date: My term Expires: May 2018
Board	Print Board Member's Name	I, Charlie Williams, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.  Signed
Member 3	Charlie Williams	My term Expires: May 2018
Board	Print Board Member's Name	I, Mike Fenton, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.  Signed
Member 4	Mike Fenton	Date: 3-23-17 My term Expires: May 2020
Board	Print Board Member's Name	I, Ken Rabel, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Member 5	Ken Rabel	Signed Date: My term Expires: May 2020
Board	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption
Member 6		from audit. Signed
		Date: My term Expires:
	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption
Board Member		from audit. Signed
7		Date: My term Expires:

#### **Accountant's Compilation Report**

Board of Directors Lake of the Rockies Metropolitan District El Paso County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Lake of the Rockies Metropolitan District as of and for the year ended December 31, 2016, included in the accompanying prescribed form. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the American Institute of Certified Public Accountants. We did not audit or review the financial statements included in the accompanying prescribed form nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the financial statements included in the accompanying prescribed form.

The Application for Exemption from Audit is presented in accordance with the requirements of the Colorado Office of the State Auditor, which differ from accounting principles generally accepted in the United States of America.

This report is intended solely for the information and use of the Colorado Office of the State Auditor and is not intended to be and should not be used by anyone other than this specified party.

We are not independent with respect to Lake of the Rockies Metropolitan District.

Colorado Springs, Colorado

Clifton Larson allen LLG

March 16, 2017