

**APPLICATION FOR EXEMPTION FROM AUDIT
LONG FORM**

NAME OF GOVERNMENT
ADDRESS

**Timbers Estates Metropolitan District
c/o Pinnacle Consulting Group, Inc.**

1627 E. 18th Street

Loveland, CO 80536

Brendan Campbell, CPA

(970)669-3611

brendanc@pinnacleconsultinggroupinc.com

(970)669-3612

For the Year Ended
12/31/2016
or fiscal year ended:

120700

CONTACT PERSON
PHONE
EMAIL
FAX

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:
TITLE
FIRM NAME (if applicable)
ADDRESS
PHONE
DATE PREPARED
(Must be Completed prior to Board approval)

Brendan Campbell, CPA

District Accountant

Pinnacle Consulting Group, Inc.

1627 E. 18th Street, Loveland, CO 80538

(970)669-3611

2/21/2017

RELATIONSHIP TO ENTITY

District Accountant

PREPARER (SIGNATURE REQUIRED)



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.)

YES

NO

If Yes, date filed:

P

RECEIVED

By Justin L. Smith at 3:47 pm, Apr 07, 2017

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

Line #	Description	Governmental Funds		Description	Proprietary/Iduciary Funds	
		General	Fund*		Fund*	Fund*
Assets						
1-1	Cash & Cash Equivalents	\$ 5,337	\$ -	Cash & Cash Equivalents	\$ -	\$ -
1-2	Investments	\$ 153,626	\$ -	Investments	\$ -	\$ -
1-3	Receivables	\$ 2,700	\$ -	Receivables	\$ -	\$ -
1-4	Due from Other Entities or Funds	\$ 593	\$ -	Due from Other Entities or Funds	\$ -	\$ -
	All Other Assets (specify)			Other Current Assets		
1-5	Property Taxes Receivable	\$ 90,000	\$ -	Total Current Assets		\$ -
1-6	Prepays	\$ 4,687	\$ -	Capital Assets, net	\$ -	\$ -
1-7				Other Long Term Assets (specify)		
1-8						
1-9						
1-10						
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS	\$ 256,944	\$ -	(add lines 1-1 through 1-10) TOTAL ASSETS	\$ -	\$ -
1-12	TOTAL DEFERRED OUTFLOWS OF RESOURCES	\$ -	\$ -	TOTAL DEFERRED OUTFLOWS OF RESOURCES	\$ -	\$ -
1-13	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ 256,944	\$ -	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ -	\$ -
Liabilities						
1-14	Accounts Payable	\$ 15,902	\$ -	Accounts Payable	\$ -	\$ -
1-15	Accrued Payroll and Related Liabilities	\$ -	\$ -	Accrued Payroll and Related Liabilities	\$ -	\$ -
1-16	Accrued Interest Payable	\$ -	\$ -	Accrued Interest Payable	\$ -	\$ -
1-17	Due to Other Entities or Funds	\$ -	\$ -	Due to Other Entities or Funds	\$ -	\$ -
1-18	All Other Current Liabilities	\$ -	\$ -	All Other Current Liabilities	\$ -	\$ -
1-19	TOTAL CURRENT LIABILITIES	\$ 15,902	\$ -	TOTAL CURRENT LIABILITIES	\$ -	\$ -
1-20	All Other Liabilities (specify)			Proprietary Debt Outstanding		
1-21				Other Liabilities (specify)		
1-22						
1-23						
1-24						
1-25						
1-26						
1-27						
1-28	(add lines 1-19 through 1-27) TOTAL LIABILITIES	\$ 15,902	\$ -	(add lines 1-19 through 1-27) TOTAL LIABILITIES	\$ -	\$ -
1-29	TOTAL DEFERRED INFLOWS OF RESOURCES	\$ 90,000	\$ -	TOTAL DEFERRED INFLOWS OF RESOURCES	\$ -	\$ -
Fund Balance						
1-30	Nonspendable Prepaid	\$ 4,687	\$ -	Net Position		\$ -
1-31	Nonspendable Inventory	\$ -	\$ -	Net Investment in Capital Assets	\$ -	\$ -
1-32	Restricted (specify)	\$ 3,063	\$ -	Emergency Reserves	\$ -	\$ -
1-33	Committed (specify)	\$ -	\$ -	Other Designations/Reserves	\$ -	\$ -
1-34	Assigned (specify)	\$ -	\$ -	Restricted	\$ -	\$ -
1-35	Unassigned:	\$ 143,292	\$ -	Undesignated/Unreserved/Unrestricted	\$ -	\$ -
1-36	Add lines 1-30 through 1-35 This total should be the same as line 3-33 TOTAL FUND BALANCE	\$ 151,042	\$ -	Add lines 1-30 through 1-35 This total should be the same as line 3-33 TOTAL NET POSITION	\$ -	\$ -
1-37	Add lines 1-28, 1-29 and 1-36 This total should be the same as line 1-13 TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND BALANCE	\$ 256,944	\$ -	Add lines 1-28, 1-29 and 1-36 This total should be the same as line 1-13 TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET POSITION	\$ -	\$ -

Please use this space to provide explanation of any items on this page

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		General	Fund*		Fund*	Fund*	
	Tax Revenue			Tax Revenue			
2-1	Property	\$ 89,998	\$ -	Property	\$ -	\$ -	
2-2	Specific Ownership	7,219	-	Specific Ownership	-	-	
2-3	Sales and Use Tax	-	-	Sales and Use Tax	-	-	
2-4	Other Tax Revenue (specify):	-	-	Other Tax Revenue (specify):	-	-	
2-5		-	-		-	-	
2-6		-	-		-	-	
2-7		-	-		-	-	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	97,217	-	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	(2,372)	-	Charges for Sales and Services	-	-	
2-17	Rental Income	-	-	Rental Income	-	-	
2-18	Fines and Forfeits	-	-	Fines and Forfeits	-	-	
2-19	Interest/Investment Income	2,160	-	Interest/Investment Income	-	-	
2-20	Tap Fees	-	-	Tap Fees	-	-	
2-21	Developer Advances	-	-	Developer Advances	-	-	
2-22	All Other (specify):	-	-	All Other (specify):	-	-	
2-23		-	-		-	-	
2-24	Add lines 2-9 through 2-23 TOTAL REVENUES	97,005	-	Add lines 2-9 through 2-23 TOTAL REVENUES	-	-	
	Other Financing Sources			Other Financing Sources			
2-25	Debt Proceeds	-	-	Debt Proceeds	-	-	
2-26	Proceeds from Sale of Capital Assets	-	-	Proceeds from Sale of Capital Assets	-	-	
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	97,005	-	Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES	-	-	97,005

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.F.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		General	Fund*		Fund*	Fund*	
3-1	General Government	98,721		General Operating & Administrative			
3-2	Judicial			Salaries			
3-3	Law Enforcement			Payroll Taxes			
3-4	Fire			Contract Services			
3-5	Highways & Streets			Employee Benefits			
3-6	Solid Waste			Insurance			
3-7	Contributions to Fire & Police Pension Assoc.			Accounting and Legal Fees			
3-8	Health			Repair and Maintenance			
3-9	Culture and Recreation			Supplies			
3-10	Other (specify):			Utilities			
3-11				Contributions to Fire & Police Pension Assoc.			
3-12				Other (specify):			
3-13							
3-14	Capital Outlay			Capital Outlay			
	Debt Service			Debt Service			
3-15	Principal			Principal			
3-16	Interest			Interest			
3-17	Bond Issuance Costs			Bond Issuance Costs			
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							
3-22	Add lines 3-1 through 3-21	98,721		Add lines 3-1 through 3-21			
	TOTAL EXPENDITURES			TOTAL EXPENDITURES			
3-23	Interfund Transfers (In)			Net Interfund Transfers (In)			
3-24	Interfund Transfers Out			Net Interfund Transfers Out			
3-25	Other Expenditures (Revenues):			Depreciation			
3-26				Other Financing Sources (Uses) <small>(from line 2-28)</small>			
3-27				Capital Outlay <small>(from line 3-14)</small>			
3-28				Debt Principal <small>(from line 3-15)</small>			
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 Sources Over (Under) Expenditures			Net Increase (Decrease) in Net Position			
	Line 3-29, less line 3-22, plus line 3-29	(1,716)		Line 3-29, less line 3-22, plus line 3-29, plus line 3-23, less line 3-23			
3-31	Fund Balance, January 1 from December 31 prior year report			Net Position, January 1 from December 31 prior year report			
		152,757					
3-32	Prior Period Adjustment (MUST explain)			Prior Period Adjustment (MUST explain)			
3-33	Fund Balance, December 31			Net Position, December 31			
	Sum of Line 3-30, 3-31, and 3-32			Line 3-30 plus line 3-31			
	This total should be the same as line 1-36.	151,041		This total should be the same as line 1-36.			
							98,721

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.

PART 4 - DEBT OUTSTANDING, ISSUED, 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?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4-2	Is the debt repayment schedule attached? If no, MUST explain:			<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4-3	Is the entity current in its debt service payments? If no, MUST explain:			<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4-4	Please complete the following debt schedule, if applicable: (please only include principal amounts)	Outstanding at beginning of year	Issued during year	Retired during year	Outstanding at year-end	
	General obligation bonds	\$ -	\$ -	\$ -	\$ -	
	Revenue bonds	\$ -	\$ -	\$ -	\$ -	
	Notes/Loans	\$ -	\$ -	\$ -	\$ -	
	Leases	\$ -	\$ -	\$ -	\$ -	
	Developer Advances	\$ -	\$ -	\$ -	\$ -	
	Other (specify):	\$ -	\$ -	\$ -	\$ -	
	TOTAL	\$ -	\$ -	\$ -	\$ -	
Please answer the following questions by marking the appropriate boxes.				YES	NO	Please use this space to provide any explanations or comments:
4-5	Does the entity have any authorized, but unissued, debt?			<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	If yes: How much?	\$ 2,000,000				
	If yes: Date the debt was authorized:	5/21/1984				
4-6	Does the entity intend to issue debt within the next calendar year?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	If yes: How much?	\$ -				
4-7	Does the entity have debt that has been refinanced that it is still responsible for?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	If yes: What is the amount outstanding?	\$ -				
4-8	Does the entity have any lease agreements?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	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?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	What are the annual lease payments?	\$ -				
4-9	Does the entity have a certified mill levy?			<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	If yes: Please provide the following mills levied for the year reported:					
	Bond Redemption	0.00				
	General/Other	40.471				
	TOTAL	40.471				

PART 5 - CASH AND INVESTMENTS

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		\$ 5,337			
5-2	Certificates of deposit		\$ -			
	TOTAL CASH DEPOSITS			\$ 5,337		
	Investments (if investment is a mutual fund, please list underlying investments):					
	Colostrust		\$ 153,626			
5-3			\$ -			
			\$ -			
	TOTAL INVESTMENTS			\$ 153,626		
	TOTAL CASH AND INVESTMENTS			\$ 158,963		
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:
5-4	Are the entity's investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-5	Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq. C.R.S.)? If no, MUST explain:		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - CAPITAL ASSETS

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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
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:	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
6-3	Complete the following Capital Assets table for GOVERNMENTAL FUNDS:					
		Balance - beginning of the year	Additions		Deletions	Year-End Balance
	Land	\$ -	-		\$ -	-
	Buildings	\$ -	-		\$ -	-
	Machinery and equipment	\$ -	-		\$ -	-
	Furniture and fixtures	\$ -	-		\$ -	-
	Infrastructure	\$ 1,829,639	-		\$ -	1,829,639
	Construction In Progress (CIP)	\$ -	-		\$ -	-
	Other (explain):	\$ -	-		\$ -	-
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ (1,353,781)	\$ (56,365)		\$ -	(1,410,146)
	TOTAL	\$ 475,858	\$ (56,365)	\$ -	\$ 419,493	
6-4	Complete the following Capital Assets table for PROPRIETARY FUNDS:					
		Balance - beginning of the year	Additions		Deletions	Year-End Balance
	Land	\$ -	-		\$ -	-
	Buildings	\$ -	-		\$ -	-
	Machinery and equipment	\$ -	-		\$ -	-
	Furniture and fixtures	\$ -	-		\$ -	-
	Infrastructure	\$ -	-		\$ -	-
	Construction In Progress (CIP)	\$ -	-		\$ -	-
	Other (explain):	\$ -	-		\$ -	-
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	-		\$ -	-
	TOTAL	\$ -	\$ -	\$ -	\$ -	

PART 7 - PENSION INFORMATION

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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7-2	Does the entity have a volunteer firemen's pension plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If yes:	Who administers the plan?			
	Indicate the contributions from:			
	Tax (property, SG, 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?			\$ -

PART 12 - 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 \$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 current governing board members below.

A MAJORITY of the governing board members must complete and sign in the column below.

Board Member	Print Board Member's Name	I, _____, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed _____ Date: _____ My term Expires: _____
1	Jeff Brekke	I, Jeff Brekke, 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: 3-21-17 My term Expires: 5/2020
2	Kelly B. Croke	I, Kelly B. Croke, 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: 21 Mar 2017 My term Expires: 5/2020
3	Gaylen L. Tovrea	I, Gaylen L. Tovrea, 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: 21 MAR 2017 My term Expires: 5/2018
4	Print Board Member's Name	I, _____, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed _____ Date: _____ My term Expires: _____
5	Print Board Member's Name	I, _____, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed _____ Date: _____ My term Expires: _____
6	Print Board Member's Name	I, _____, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed _____ Date: _____ My term Expires: _____
7	Print Board Member's Name	I, _____, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed _____ Date: _____ My term Expires: _____

**Original Signatures
Verified by**

Justin L. Smith

