

# APPLICATION FOR EXEMPTION FROM AUDIT

## SHORT FORM

**NAME OF GOVERNMENT** North Suburban Metropolitan District No. 1  
**ADDRESS** c/o Spencer Fane LLP  
1700 Lincoln Street, Ste. 2000  
Denver, CO 80203  
**CONTACT PERSON** George M. Rowley, Esq.  
**PHONE** 303-839-3800  
**EMAIL** growley@spencerfane.com  
**FAX** 303-839-3838

For the Year Ended  
12/31/16  
or fiscal year ended:

### PART 1 - CERTIFICATION OF PREPARER

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:** Josh Suter  
**TITLE** Board President  
**FIRM NAME (if applicable)**  
**ADDRESS** 5251 DTC Pkwy., Ste. 1001, Greenwood Village, CO  
**PHONE** 303-549-6990  
**DATE PREPARED** March 31, 2018  
(Must be prepared prior to Board approval)

**PREPARER** (SIGNATURE REQUIRED)

Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types

**GOVERNMENTAL**  
(MODIFIED ACCRUAL BASIS)

**PROPRIETARY**  
(CASH OR BUDGETARY BASIS)



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# RECEIVED

Office of the State Auditor

April 4, 2018

## 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	
2-1	Ta Property	\$	-
2-2	Specific ownership	\$	-
2-3	Sales and use	\$	-
2-4	Other (specify):	\$	-
2-5	Licenses and permits	\$	-
2-6	Intergovernment 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	\$	-
2-14	Charges for utility services	\$	-
2-15	Debt proceeds <span style="float: right;">(should agree with line 4-4, column 2)</span>	\$	-
2-16	Lease proceeds	\$	-
2-17	Developer Advances received <span style="float: right;">(should agree with line 4-4)</span>	\$	-
2-18	Proceeds from sale of capital assets	\$	-
2-19	Fire and police pension	\$	-
2-20	Donations	\$	-
2-21	Other (specify):	\$	-
2-22		\$	-
2-23		\$	-
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE	\$	-

Please use this space to provide any necessary explanations

## 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	
3-1	Administrative	\$	-
3-2	Salaries	\$	-
3-3	Payroll taxes	\$	-
3-4	Contract services	\$	-
3-5	Employee benefits	\$	-
3-6	Insurance	\$	-
3-7	Accounting and legal fees	\$	-
3-8	Repair and maintenance	\$	-
3-9	Supplies	\$	-
3-10	Utilities and telephone	\$	-
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 <span style="float: right;">(should agree with Part 4)</span>	\$	-
3-18	Debt service interest	\$	-
3-19	Repayment of Developer Advance Principal <span style="float: right;">(should agree with line 4-4)</span>	\$	-
3-20	Repayment of Developer Advance Interest	\$	-
3-21	Contribution to pension plan <span style="float: right;">(should agree to line 7-2)</span>	\$	-
3-22	Contribution to Fire & Police Pension Assoc. <span style="float: right;">(should agree to line 7-2)</span>	\$	-
3-23	Other (specify):	\$	-
3-24		\$	-
3-25		\$	-
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES	\$	-

Please use this space to provide any necessary explanations

## PART 4 - DEBT OUTSTANDING, ISSUED, AND RETIRED

Please answer the following questions by marking the appropriate boxes.

Yes                      No

- 4-1** Does the entity have outstanding debt?  Yes       No  
 If Yes, please attach a copy of the entity's Debt Repayment Schedule.
- 4-2** Is the debt repayment schedule attached? If no, MUST explain:  Yes       No  
 No debt.
- 4-3** Is the entity current in its debt service payments? If no, MUST explain:  Yes       No  
 No debt.

**4-4** Please complete the following debt schedule, if applicable: (please only include principal amounts)(enter all amount as positive numbers)

	Outstanding at end of prior year	Issued during year	Retired during year	Outstanding at year-end
General obligation bonds	\$ -	\$ -	\$ -	\$ -
Revenue bonds	\$ -	\$ -	\$ -	\$ -
Notes/Loans	\$ -	\$ -	\$ -	\$ -
Leases	\$ -	\$ -	\$ -	\$ -
Developer Advances	\$ -	\$ -	\$ -	\$ -
Other (specify):	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

Please answer the following questions by marking the appropriate boxes.

Yes                      No

- 4-5** Does the entity have any authorized, but unissued, debt?  Yes       No  
 If yes: How much? \$ 1,029,000,000.00  
 Date the debt was authorized: 11/7/2006
- 4-6** Does the entity intend to issue debt within the next calendar year?  Yes       No  
 If yes: How much? \$ -
- 4-7** Does the entity have debt that has been refinanced that it is still responsible for?  Yes       No  
 If yes: What is the amount outstanding? \$ -
- 4-8** Does the entity have any lease agreements?  Yes       No  
 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?  Yes       No  
 What are the annual lease payments? \$ -
- 4-9** Does the entity have a certified Mill Levy?  Yes       No  
 If yes: Please provide the following mills levied for the year reported:
- |                 |  |  |  |   |
|-----------------|--|--|--|---|
| Bond Redemption |  |  |  |   |
| General/Other   |  |  |  |   |
| <b>TOTAL</b>    |  |  |  | - |

Please use this space to provide any explanations or comments:

## PART 5 - CASH AND INVESTMENTS

Please provide the entity's cash deposit and investment balances.

Amount                      Total

<b>5-1</b>	YEAR-END Total of ALL Checking and Savings Accounts	\$ -		-
<b>5-2</b>	Certificates of deposit	\$ -		
	<b>Total Cash Deposits</b>			\$ -
	Investments (if investment is a mutual fund, please list underlying investments):			
<b>5-3</b>		\$ -		
		\$ -		
		\$ -		
	<b>Total Investments</b>			\$ -
	<b>Total Cash and Investments</b>			\$ -

Please answer the following questions by marking in the appropriate boxes

Yes                      No                      N/A

- 5-4** Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?  Yes       No       N/A
- 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.)?  Yes       No       N/A

If no, MUST use this space to provide any explanations:

## PART 6 - CAPITAL ASSETS

Please answer the following questions by marking in the appropriate boxes.

Yes                      No

- 6-1** Does the entity have capital assets?  Yes       No
- 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:  Yes       No

N/A

6-3	Complete the following capital assets table:	Balance - beginning of the year	Additions (Must be included in Part 3)	Deletions	Year-End Balance
	Land	\$ -	\$ -	\$ -	\$ -
	Buildings	\$ -	\$ -	\$ -	\$ -
	Machinery and equipment	\$ -	\$ -	\$ -	\$ -
	Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
	Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
	Other (explain):	\$ -	\$ -	\$ -	\$ -
	Accumulated Depreciation (Please enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
	<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

Please use this space to provide any explanations or comments:

## PART 7 - PENSION INFORMATION

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?  Yes       No
- 7-2** Does the entity have a volunteer firemen's pension plan?  Yes       No

If yes: Who administers the plan?  
Indicate the contributions from:

Tax (property, SO, sales, etc.):	\$ -
State contribution amount:	\$ -
Other (gifts, donations, etc.):	\$ -
<b>TOTAL</b>	<b>\$ -</b>

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

Please use this space to provide any explanations or comments:

## PART 8 - BUDGET INFORMATION

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 Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.? If no, MUST explain:  Yes       No       N/A

- 8-2** Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:  Yes       No       N/A

If yes: Please indicate the amount appropriated for each fund for the year reported:

Fund Name	Budgeted Expenditures
General Fund	\$ 50,001

## PART 9 - TAXPAYER'S BILL OF RIGHTS (TABOR)

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)]?



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.

If no, **MUST** explain:

## 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?



If yes: Date of formation:

**10-2** Has the entity changed its name in the past or current year?



If yes: Please list the NEW name & PRIOR name:

**10-3** Is the entity a metropolitan district?



Please indicate what services the entity provides:

Water, sanitation, streets, traffic and safety controls, transportation, security and covenant enforcement, subject to the limitations contained in the Service Plan for the District.

**10-4** Does the entity have an agreement with another government to provide services?



If yes: List the name of the other governmental entity and the services provided:

City of Evans, North Suburban District Nos. 1-4 municipal services

**10-5** 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.]



If yes: Date Filed:

Please use this space to provide any explanations or comments:

## 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 governing board members below.	A MAJORITY of the governing board members must complete and sign in the column below.
<b>Board Member 1</b>	<p><b>Print Board Member's Name</b></p> <p style="text-align: center;">Josh Suter</p>	<p>I Josh Suter, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.</p> <p>Signed: _____</p> <p>Date: <u>3/21/17</u></p> <p>My term Expires: May 2018</p>
<b>Board Member 2</b>	<p><b>Print Board Member's Name</b></p>	<p>I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.</p> <p>Signed: _____</p> <p>Date: _____</p> <p>My term Expires: _____</p>
<b>Board Member 3</b>	<p><b>Print Board Member's Name</b></p>	<p>I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.</p> <p>Signed: _____</p> <p>Date: _____</p> <p>My term Expires: _____</p>
<b>Board Member 4</b>	<p><b>Print Board Member's Name</b></p>	<p>I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.</p> <p>Signed: _____</p> <p>Date: _____</p> <p>My term Expires: _____</p>
<b>Board Member 5</b>	<p><b>Print Board Member's Name</b></p>	<p>I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.</p> <p>Signed: _____</p> <p>Date: _____</p> <p>My term Expires: _____</p>
<b>Board Member 6</b>	<p><b>Print Board Member's Name</b></p>	<p>I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.</p> <p>Signed: _____</p> <p>Date: _____</p> <p>My term Expires: _____</p>
<b>Board Member 7</b>	<p><b>Print Board Member's Name</b></p>	<p>I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.</p> <p>Signed: _____</p> <p>Date: _____</p> <p>My term Expires: _____</p>

RESOLUTION APPROVING THE EXEMPTION FROM AUDIT  
FOR FISCAL YEAR 2016 FOR THE  
NORTH SUBURBAN METROPOLITAN DISTRICT NOS. 1-4  
(revenues or expenditures of \$100,000 or less) (Pursuant to Section 29-1-604, C.R.S.)

WHEREAS, the Boards of Directors of the North Suburban Metropolitan District Nos. 1-4 (the "Districts") wish to claim exemption from the audit requirements of Section 29-1-603, C.R.S.; and

WHEREAS, neither revenues nor expenditures for the Districts exceeded \$100,000 for fiscal year 2016; and

WHEREAS, an application for exemption from audit for each District has been prepared by a person skilled in governmental accounting; and

WHEREAS, said applications for exemption from audit have been completed in accordance with regulations issued by the state auditor.

NOW THEREFORE, be it resolved by the Boards of Directors of the North Suburban Metropolitan District Nos. 1-4 that the applications for exemption from audit for the Districts for the fiscal year ended December 31, 2016, have been personally reviewed and are hereby approved by a majority of the Boards of Directors of the Districts; that those members of the Boards have signified their approval by signing below; and that this resolution shall be attached to, and shall become a part of the applications for exemption from audit of the Districts for fiscal year ended December 31, 2016.

ADOPTED this 29<sup>th</sup> day of March, 2017.

NORTH SUBURBAN METROPOLITAN  
DISTRICT NOS. 1-4

\_\_\_\_\_  
President



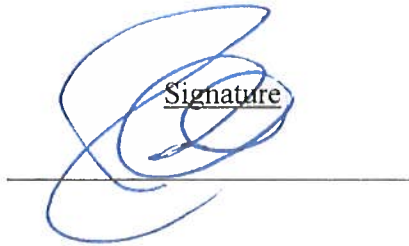
Board Member Name

Term Expires

Signature

Josh Suter

May 2018



Vacancy

May 2018

Vacancy

May 2018

Vacancy

May 2018

Vacancy

May 2018