

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

2513.00

NAME OF GOVERNMENT SOMERSET DOMESTIC WATER COMPANY
ADDRESS PO BOX 549
PAONIA, CO 81428
CONTACT PERSON PHILLIP BUSKIRK
PHONE 970-929-5211
EMAIL
FAX

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 JEFFREY HENION
TITLE PA, EA
FIRM NAME (if applicable) HENION TAX & ACCOUNTING SERVICES
ADDRESS PO BOX 1029, PAONIA, CO 81428
PHONE 970-527-2350
DATE PREPARED
(Must be prepared prior to Board approval) 1/31/2016

PREPARER (SIGNATURE REQUIRED)

Jeffrey Henion, PA, EA

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

By Justin L. Smith at 10:59 am, Feb 28, 2017

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 space to provide any necessary explanations
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	\$ 34,579	
2-11	Fines and forfeits	\$ -	
2-12	Special assessments	\$ -	
2-13	Investment income	\$ 120	
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)	\$ -	
2-18	Proceeds from sale of capital assets	\$ -	
2-19	Fire and police pension	\$ -	
2-20	Donations	\$ -	
2-21	Other (specify): Utility Reimb	\$ 2,749	
2-22	Office Rent	\$ 1,025	
2-23		\$ -	
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE	\$ 38,473	

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 space to provide any necessary explanations
3-1	Administrative	\$ 2,337	
3-2	Salaries	\$ 3,000	
3-3	Payroll taxes	\$ 229	
3-4	Contract services	\$ 3,100	
3-5	Employee benefits	\$ 935	
3-6	Insurance	\$ 3,114	
3-7	Accounting and legal fees	\$ 1,125	
3-8	Repair and maintenance	\$ 431	
3-9	Supplies	\$ -	
3-10	Utilities and telephone	\$ 3,460	
3-11	Fire/Police	\$ -	
3-12	Streets and highways	\$ -	
3-13	Public health	\$ -	
3-14	Culture and recreation	\$ -	
3-15	Utility operations	\$ 10,519	
3-16	Capital outlay	\$ -	
3-17	Debt service principal (should agree with Part 4)	\$ 5,274	
3-18	Debt service interest	\$ 2,750	
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	\$ 36,274	

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 OUTSTANDING, ISSUED, AND RETIRED

Please answer the following questions by marking the appropriate boxes.

		Yes	No
4-1	Does the entity have outstanding debt? If Yes, please attach a copy of the entity's Debt Repayment Schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4-2	Is the debt repayment schedule attached? If no, MUST explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4-3	Is the entity current in its debt service payments? If no, MUST explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	\$ 54,999	\$ 5,274
	Leases	\$ -	\$ -
	Developer Advances	\$ -	\$ -
	Other (specify)	\$ -	\$ -
	TOTAL	\$ 54,999	\$ 5,274

		Yes	No
4-5	Does the entity have any authorized, but unissued, debt?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes:	How much? \$ -		
	Date the debt was authorized:		
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 type="checkbox"/>	<input checked="" type="checkbox"/>
If yes:	Please provide the following mills levied for the year reported:		
	Bond Redemption		-
	General/Other		-
	TOTAL		-

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
5-1	YEAR-END Total of ALL Checking and Savings Accounts	\$ 28,712	
5-2	Certificates of deposit	\$ 59,345	
	Total Cash Deposits		\$ 88,057
	Investments (if investment is a mutual fund, please list underlying investments):		
5-3		\$ -	
	Total Investments		\$ -
	Total Cash and Investments		\$ 88,057

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.?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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.)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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?	<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:		
		Balance - beginning of the year	Additions (Must be included in Part 3)
		Deletions	Year-End Balance
	Land	\$ 7,500	\$ 7,500
	Buildings	\$ 50,350	\$ 50,350
	Machinery and equipment	\$ -	\$ -
	Furniture and fixtures	\$ -	\$ -
	Construction In Progress (CIP)	\$ -	\$ -
	Other (explain): Infrastructure	\$ 114,172	\$ 114,172
	Accumulated Depreciation (Please enter a negative, or credit, balance)	\$ -	\$ -
	TOTAL	\$ 172,022	\$ 172,022

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

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:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8-2	Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Fund Name	Budgeted Expenditures
GENERAL	\$ 28,792
DEBT SERVICE	\$ 8,024

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:

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:

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.

Board Member 1	Print Board Member's Name PHILLIP BUSKIRK	I <u>PHILLIP BUSKIRK</u> , 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 <u><i>Phillip Buskirk</i></u> Date: <u>2-21-17</u> My term Expires: <u>2018</u>
Board Member 2	Print Board Member's Name ROCKNE DUTTON	I <u>ROCKNE DUTTON</u> , 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 <u><i>Rockne Dutton</i></u> Date: <u>2/21/17</u> My term Expires: <u>2020 2018</u>
Board Member 3	Print Board Member's Name SUSAN BENSON	I <u>SUSAN BENSON</u> , 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 <u><i>Susan Benson</i></u> Date: <u>2-21-17</u> My term Expires: <u>2018</u>
Board Member 4	Print Board Member's Name MIKE NORTON	I <u>MIKE NORTON</u> , 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 <u><i>Mike Norton</i></u> Date: <u>2-21-17</u> My term Expires: <u>2020 2018</u>
Board Member 5	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 from audit. Signed _____ Date: _____ My term Expires: _____
Board Member 6	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 from audit. Signed _____ Date: _____ My term Expires: _____
Board Member 7	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 from audit. Signed _____ Date: _____ My term Expires: _____

**Original Signatures
Verified by**

Justin L. Smith



Supplemental Information for Exemption from Audit
For the year ended December 31, 2016

Entity: Somerset Domestic Waterworks Dist.

Schedule # 1

Debt schedule

The District incurred debt in 2004. The terms of the debt follows:

Original debt balance	\$100,000
Interest rate	5.0 %
Number of payments per year	1
Term of loan	20 years

The 1st payment was made September 1, 2005.

The debt is to Gunnison County Board of Commissioners.

Schedule of debt service payments:

<u>Pymnt #</u>	<u>Pymnt date</u>	<u>Payment</u>	<u>Interest</u>	<u>Prin. Reduction</u>	<u>Loan Balance</u>
					\$100,000.00
1	9/1/2005	\$8,024.26	\$3,750.00	\$4,274.26	\$95,725.74
2	9/1/2006	\$8,024.26	\$4,786.29	\$3,237.97	\$92,487.77
3	9/1/2007	\$8,024.26	\$4,624.39	\$3,399.87	\$89,087.90
4	9/1/2008	\$8,024.26	\$4,454.39	\$3,569.87	\$85,518.03
5	9/1/2009	\$8,024.26	\$4,275.90	\$3,748.36	\$81,769.67
6	9/1/2010	\$8,024.26	\$4,088.48	\$3,935.78	\$77,833.89
7	9/1/2011	\$8,024.26	\$3,891.70	\$4,132.56	\$73,701.33
8	9/1/2012	\$8,024.26	\$3,685.07	\$4,339.19	\$69,362.14
9	9/1/2013	\$8,024.26	\$3,468.11	\$4,556.15	\$64,805.99
10	9/1/2014	\$8,024.26	\$3,240.30	\$4,783.96	\$60,022.03
11	9/1/2015	\$8,024.26	\$3,001.10	\$5,023.16	\$54,998.87
12	9/1/2016	\$8,024.26	\$2,749.94	\$5,274.32	\$49,724.55
13	9/1/2017	\$8,024.26	\$2,486.23	\$5,538.03	\$44,186.52
14	9/1/2018	\$8,024.26	\$2,209.33	\$5,814.93	\$38,371.59
15	9/1/2019	\$8,024.26	\$1,918.58	\$6,105.68	\$32,265.91
16	9/1/2020	\$8,024.26	\$1,613.30	\$6,410.96	\$25,854.95
17	9/1/2021	\$8,024.26	\$1,292.75	\$6,731.51	\$19,123.44
18	9/1/2022	\$8,024.26	\$956.17	\$7,068.09	\$12,055.35
19	9/1/2023	\$8,024.26	\$602.77	\$7,421.49	\$4,633.86
20	9/1/2024	\$4,865.55	\$231.69	\$4,633.86	\$0.00