

# APPLICATION FOR EXEMPTION FROM AUDIT

## SHORT FORM

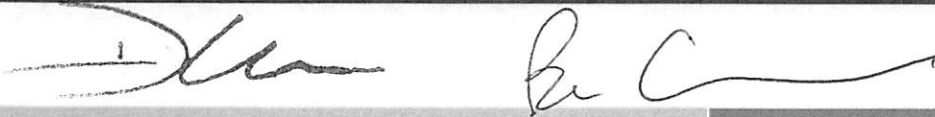
NAME OF GOVERNMENT	Pinon Water and Sanitation District	For the Year Ended 12/31/16 or fiscal year ended:
ADDRESS	109 W. Main Street Trinidad, CO 81082	
CONTACT PERSON	Bernadette Cappellucci	
PHONE	(719) 846-2080	
EMAIL	bernadette@centurysolutions.org	
FAX	(719) 845-1071	

### 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:	Dave Grove/ Bernadette Cappellucci
TITLE	President/ Audit Manager
FIRM NAME (if applicable)	Century Financial Group
ADDRESS	109 W. Main Street, Trinidad, CO 81082
PHONE	(719) 846-2080
DATE PREPARED (Must be prepared prior to Board approval)	07/31/17

### PREPARER (SIGNATURE REQUIRED)



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

GOVERNMENTAL <small>(MODIFIED ACCRUAL BASIS)</small>	PROPRIETARY <small>(CASH OR BUDGETARY BASIS)</small>
<input checked="" type="checkbox"/>	<input type="checkbox"/>



RECEIVED

*By the Office of the State Auditor at 12:50 pm, Aug 30, 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	Intergovernmental 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	\$ 322	
2-14	Charges for utility services	\$ 83,177	
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): Credit from City of Trinidad (Water & Sewer)	\$ 421	
2-22	Late Fees & Water turn on/off Fees	\$ 65	
2-23		\$ -	
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE	\$ 83,985	

## 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	\$ 455	
3-2	Salaries	\$ -	
3-3	Payroll taxes	\$ -	
3-4	Contract services	\$ -	
3-5	Employee benefits	\$ -	
3-6	Insurance	\$ 2,930	
3-7	Accounting and legal fees	\$ 9,771	
3-8	Repair and maintenance	\$ 3,511	
3-9	Supplies	\$ -	
3-10	Utilities and telephone	\$ 5,732	
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	\$ 10,681	
3-17	Debt service principal (should agree with Part 4)	\$ 12,514	
3-18	Debt service interest	\$ 1,529	
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	\$ 47,123	

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 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"/>

	Complete the following capital assets table:	Balance - beginning of the year	Additions (Must be included in Part 3)	Deletions	Year-End Balance
6-3	Land	\$ -	\$ -	\$ -	\$ -
	Buildings	\$ -	\$ -	\$ -	\$ -
	Machinery and equipment	\$ 41,179	\$ -	\$ -	\$ 41,179
	Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
	Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
	Other (explain): Infrastructure	\$ 473,422	\$ 10,681	\$ -	\$ 484,103
	Accumulated Depreciation (Please enter a negative, or credit, balance)	\$ 227,514	\$ (12,919)	\$ -	\$ 214,595
	<b>TOTAL</b>	<b>\$ 742,115</b>	<b>\$ (2,238)</b>	<b>\$ -</b>	<b>\$ 739,877</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?	<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, 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:	<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	\$ 103,642

## 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)]?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes:	Date of formation:		
10-2	Has the entity changed its name in the past or current year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes:	Please list the NEW name & PRIOR name:		
10-3	Is the entity a metropolitan district?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Please indicate what services the entity provides:		
10-4	Does the entity have an agreement with another government to provide services?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes:	List the name of the other governmental entity and the services provided:		
10-5	Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> 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.]	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes:	Date Filed:		

**Please use this space to provide any explanations or comments:**

# PART 11 - GOVERNING BODY APPROVAL

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>	<b>Print Board Member's Name</b>  Rich Holden	I <u>Rich Holden</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>[Signature]</u> Date: <u>8-30-17</u> My term Expires: <u>May 2020</u>
<b>Board Member 2</b>	<b>Print Board Member's Name</b>  Dave Shier	I <u>Dave Shier</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>[Signature]</u> Date: _____ My term Expires: <u>May 2020</u>
<b>Board Member 3</b>	<b>Print Board Member's Name</b>  Dick Laner	I <u>Dick Laner</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>[Signature]</u> Date: <u>8-23-17</u> My term Expires: <u>May 2018</u>
<b>Board Member 4</b>	<b>Print Board Member's Name</b>  Chris Furia	I <u>Chris Furia</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>[Signature]</u> Date: <u>8-25-17</u> My term Expires: <u>May 2020</u>
<b>Board Member 5</b>	<b>Print Board Member's Name</b>  Larry Robinson	I <u>Larry Robinson</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>NOT AVAILABLE</u> Date: _____ My term Expires: <u>May 2018</u>
<b>Board Member 6</b>	<b>Print Board Member's Name</b>  	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: _____
<b>Board Member 7</b>	<b>Print Board Member's Name</b>  	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: _____

**RESOLUTION/ ORDINANCE FOR EXEMPTION FROM AUDIT**  
**(Pursuant to Section 29-1-604,C.R.S.)**

A RESOLUTION/ ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR FISCAL YEAR 2016 FOR THE PINON WATER AND SANITATION DISTRICT, STATE OF COLORADO.

WHEREAS, the Board of Directors of Pinon Water and Sanitation District wishes to claim exemption from the audit requirements of Section 29-1-603, C.R.S.; and


WHEREAS, neither revenue nor expenditures for Pinon Water and Sanitation District exceeded \$100,000 for Fiscal Year 2016; and

WHEREAS, an application for exemption from audit for Pinon Water and Sanitation District has been prepared by Century Financial Group, an independent accountant with knowledge of governmental accounting; and




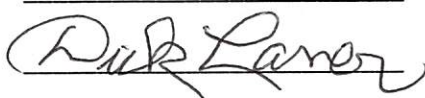
WHEREAS, said application for exemption from audit has been completed in accordance with regulations, issued by the State Auditor.

NOW THEREFORE, be it resolved/ ordained by the Board of Directors of the Pinon Water and Sanitation District that the application for exemption from audit for Pinon Water and Sanitation District for the Fiscal Year ended December 31, 2016, has been personally reviewed and is hereby approved by a majority of the Board of Directors of the Pinon Water and Sanitation District; that those members of the Pinon Water and Sanitation District have signified their approval by signing below; and that this resolution shall be attached to, and shall become part of, the application for exemption from audit of the Pinon Water and Sanitation District for the Fiscal Year ended December 31, 2016.

ADOPTED THIS 31<sup>st</sup> day of July, A.D. 2017.

 \_\_\_\_\_, President

 \_\_\_\_\_ Secretary

<b>Members of Governing Body</b>	<b>Date Term Expires</b>	<b>Signature</b>
Rich Holden	May 2020	
Dave Shier	May 2020	
Chris Furia	May 2020	
Larry Robinson	May 2018	_____
Dick Laner	May 2018	

**ENERGY/MINERAL IMPACT ASSISTANCE  
LOAN PYMTS**

Project No.	<b>03783</b>	Title:	<b>Pinon Wastewater Loan/Grant</b>
Loan Amount:	<b>\$175,000.00</b>	First Pymt Due Date:	<b>09/01/2001</b>
Interest Rate:	<b>5%</b>	Paid off Date:	
Term:	<b>20</b>	Paid off :	<b>F</b>

Pay #	Year	Payment	Principal	Interest	Extra Prin	Date Paid	Check Amt	Ending Balance
								\$175,000.00
1	2001	\$14,042.45	\$5,292.45	\$8,750.00				\$169,707.55
2	2002	\$14,042.45	\$5,557.07	\$8,485.38		08-13-02	\$14,042.45	\$164,150.48
3	2003	\$14,042.45	\$5,834.93	\$8,207.52		08-14-03	\$14,042.45	\$158,315.55
4	2004	\$14,042.45	\$6,126.67	\$7,915.78	\$0.00	09-02-04	\$14,042.45	\$152,188.88
5	2005	\$14,042.45	\$6,433.01	\$7,609.44	\$0.00	09-20-05	\$14,042.45	\$145,755.87
6	2006	\$14,042.45	\$6,754.66	\$7,287.79	\$0.00	09-14-06	\$14,042.45	\$139,001.21
7	2007	\$14,042.45	\$7,092.39	\$6,950.06	\$0.00	09-12-07	\$14,042.45	\$131,908.82
8	2008	\$14,042.45	\$7,447.01	\$6,595.44	\$0.00	08-14-08	\$14,042.45	\$124,461.81
9	2009	\$14,042.45	\$7,819.36	\$6,223.09	\$0.00	03-26-10	\$14,042.45	\$116,642.45
10	2010	\$14,042.45	\$8,210.33	\$5,832.12	\$0.00	09-20-10	\$14,042.45	\$108,432.12
11	2011	\$14,042.45	\$8,620.84	\$5,421.61	\$0.00	08-24-11	\$14,042.45	\$99,811.28
12	2012	\$14,042.45	\$9,051.89	\$4,990.56	\$0.00	08-16-12	\$14,042.45	\$90,759.39
13	2013	\$14,042.45	\$9,504.48	\$4,537.97	\$14,042.45	08-19-13	\$14,042.45	\$67,212.46
14	2014	\$14,042.45	\$10,681.83	\$3,360.62	\$14,042.45	08-19-14	\$14,042.45	\$42,488.18
15	2015	\$14,042.45	\$11,918.04	\$2,124.41	\$0.00	08-17-15	\$14,042.45	\$30,570.14
16	2016	\$14,042.45	\$12,513.94	\$1,528.51	\$0.00	09-06-16	\$14,042.45	\$18,056.20
17	2017	\$14,042.45	\$13,139.64	\$902.81				\$4,916.56
18	2018	\$5,162.39	\$4,916.56	\$245.83				\$0.00
19	2019	\$0.00	\$0.00	\$0.00				\$0.00
20	2020	\$0.00	\$0.00	\$0.00				\$0.00

**Comments:**

- 09/18/2013 Additional Principal Pymt made for \$14,042.45. Applied to Principal Bal.
- 10/22/2014 Additional Principal Pymt made for \$14,042.45. Applied to Principal Bal.
- 03/26/2010 Grantee paid \$7,819.36 for the 2009 principal portion that was due 9/1/09. Letter mailed
- 09/23/2009 Grantee paid interest only for this year of \$6,223.09 leaving current balance the same. Letter mailed
- 10/23/2003 no adjustment made to P/I for 2003 and no balance change