

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

1197.02

NAME OF GOVERNMENT	Stone Canon Ranch Metropolitan District
ADDRESS	P.O. Box 882 Castle Rock, CO 80104-0882
CONTACT PERSON	Julie Aguilar
PHONE	303-589-8150
EMAIL	
FAX	

For the Year Ended
12/31/17
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:	Kenny Kresl
TITLE	CPA
FIRM NAME (if applicable)	Bauerle & Company, P.C.
ADDRESS	7887 E. Belleview Ave., Suite 700, Denver, CO 80111
PHONE	303-759-0089
DATE PREPARED (Must be prepared prior to Board approval)	1/29/2018

PREPARER (SIGNATURE REQUIRED)

Kenny Kresl, Bauerle & Company, P.C.

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"/>

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RECEIVED

Office of the State Auditor

February 2, 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	Please use this space to provide any necessary explanations
2-1	Taxes: Property	\$ 71,506	
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	\$ 21	
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):	\$ -	
2-22		\$ -	
2-23		\$ -	
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE	\$ 71,527	

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	\$ -	
3-2	Salaries	\$ -	
3-3	Payroll taxes	\$ -	
3-4	Contract services	\$ -	
3-5	Employee benefits	\$ -	
3-6	Insurance	\$ 1,900	
3-7	Accounting and legal fees	\$ 1,650	
3-8	Repair and maintenance	\$ 1,912	
3-9	Supplies	\$ -	
3-10	Utilities and telephone	\$ -	
3-11	Fire/Police	\$ -	
3-12	Streets and highways	\$ 3,175	
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	\$ 18,581	
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	Depreciation	\$ 35,124	
3-25		\$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES	\$ 62,343	

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? 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

- 4-3 Is the entity current in its debt service payments? If no, MUST explain: Yes No

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	\$ 380,613	\$ -	\$ 39,645	\$ 340,968
Revenue bonds	\$ -	\$ -	\$ -	\$ -
Notes/Loans	\$ -	\$ -	\$ -	\$ -
Leases	\$ -	\$ -	\$ -	\$ -
Developer Advances	\$ -	\$ -	\$ -	\$ -
Other (specify):	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 380,613	\$ -	\$ 39,645	\$ 340,968

*must tie to prior year ending balance

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? \$ -
 Date the debt was authorized: _____
- 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 (do not report \$ amounts):

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	\$ 62,442		
5-2	Certificates of deposit	\$ -		
	Total Cash Deposits			\$ 62,442
	Investments (if investment is a mutual fund, please list underlying investments):			
	_____	\$ -		
	_____	\$ -		
5-3	_____	\$ -		
	_____	\$ -		
	Total Investments			\$ -
	Total Cash and Investments			\$ 62,442

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

6-3 Complete the following capital assets table:

	Balance - beginning of the year ^a	Additions (Must be included in Part 3)	Deletions	Year-End Balance
Land	\$ 11,313	\$ -	\$ -	\$ 11,313
Buildings	\$ -	\$ -	\$ -	\$ -
Machinery and equipment	\$ -	\$ -	\$ -	\$ -
Furniture and fixtures	\$ 1,274	\$ -	\$ -	\$ 1,274
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ 526,860	\$ -	\$ (35,124)	\$ 561,984
Accumulated Depreciation (Please enter a negative, or credit, balance)	\$ (419,835)	\$ -	\$ 35,124	\$ (454,959)
TOTAL	\$ 119,612	\$ -	\$ 0	\$ 119,612

^amust tie to prior year ending balance

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.):

\$ -

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.? Yes No N/A
- If no, MUST explain:

- 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:

General Fund	\$ 67,885

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:
 Road repairs and maintenance.
- 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

Please answer the following question by marking in the appropriate box		YES	NO
12-1	Have you read the new Electronic Signature Policy and do you plan on submitting signatures in accordance with this policy?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedure

Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as DocuSign or Echosign. Required elements and safeguards are as follows:

- The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.
- The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.
- Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

- 1) Submit the application in hard copy via the US Mail including original signatures.
- 2) Submit the application electronically via email and either,
 - a. Include a copy of an adopted resolution that documents formal approval by the Board, or
 - b. Include electronic signatures obtained through a software program such as DocuSign or Echosign in accordance with the requirements noted above.

Print the names of ALL current governing board members below.
Print Board Member's Name

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

Board Member 1

Dan Aguilar

I Dan Aguilar, 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 Dan Aguilar
Date: 11/29/18
My term Expires: May 2018

Board Member 2

Print Board Member's Name
Margo Hall

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: May 2018

Board Member 3

Print Board Member's Name
Julie Aguilar

I Julie Aguilar, 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 Julie Aguilar
Date: 11-29-18
My term Expires: May 2018

Board Member 4

Print Board Member's Name
Duane Kent

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: May 2018

Board Member 5

Print Board Member's Name
Giff Cutler

I Giff Cutler, 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 Giff Cutler
Date: 11/29/18
My term Expires: May 2018

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: _____

Costs Funded \$725,000.00	Payment Rate 5.15%	20 Payments 1 per year 5.150% Rate	Level Payment \$59,246.72 Prtr=.081720	Closing Fees 7/1/2006	Average Life 12.32 years 148 months
		Commencement: May 20, 2004			
		Closing Date: May 20, 2004			

Pmt	Total Payment Due	Interest Payment Due	Principal Payment Due	After Payment Principal Balance	After Payment Termination Value	Payment Due Date
	\$0.00		\$0.00	\$725,000.00		May 20, 2004
1	\$59,246.72	\$41,589.83	\$17,656.89	\$707,343.11	\$707,343.11	Jul 1, 2005
2	\$59,246.72	\$36,428.17	\$22,818.55	\$684,524.56	\$684,524.56	Jul 1, 2006
3	\$59,246.72	\$35,253.01	\$23,993.71	\$660,530.85	\$660,530.85	Jul 1, 2007
4	\$59,246.72	\$34,017.34	\$25,229.38	\$635,301.47	\$635,301.47	Jul 1, 2008
5	\$59,246.72	\$32,718.03	\$26,528.69	\$608,772.77	\$608,772.77	Jul 1, 2009
6	\$59,246.72	\$31,351.80	\$27,894.92	\$580,877.85	\$580,877.85	Jul 1, 2010
7	\$59,246.72	\$29,915.21	\$29,331.51	\$551,546.34	\$551,546.34	Jul 1, 2011
8	\$59,246.72	\$28,404.64	\$30,842.08	\$520,704.26	\$520,704.26	Jul 1, 2012
9	\$59,246.72	\$26,816.27	\$32,430.45	\$488,273.81	\$488,273.80	Jul 1, 2013
10	\$59,246.72	\$25,146.10	\$34,100.62	\$454,173.19	\$454,173.19	Jul 1, 2014
11	\$59,246.72	\$23,389.92	\$35,856.80	\$418,316.39	\$418,316.38	Jul 1, 2015
12	\$59,246.72	\$21,543.29	\$37,703.43	\$380,612.96	\$380,612.96	Jul 1, 2016
13	\$59,246.72	\$19,601.57	\$39,645.15	\$340,967.81	\$340,967.80	Jul 1, 2017
14	\$59,246.72	\$17,559.84	\$41,686.88	\$299,280.93	\$299,280.93	Jul 1, 2018
15	\$59,246.72	\$15,412.97	\$43,833.75	\$255,447.17	\$255,447.17	Jul 1, 2019
16	\$59,246.72	\$13,155.53	\$46,091.19	\$209,355.98	\$209,355.98	Jul 1, 2020
17	\$59,246.72	\$10,781.83	\$48,464.89	\$160,891.10	\$160,891.10	Jul 1, 2021
18	\$59,246.72	\$8,285.89	\$50,960.83	\$109,930.27	\$109,930.27	Jul 1, 2022
19	\$59,246.72	\$5,661.41	\$53,585.31	\$56,344.96	\$56,344.96	Jul 1, 2023
20	\$59,246.72	\$2,901.77	\$56,344.96	\$0.00	\$1.00	Jul 1, 2024

Please Note: Sum of individual principal payments differ from total principal by one cent due to even-cent rounding.
This exhibit is a draft only and may not reflect final terms.

Wells Fargo Public Finance (WFPF) bankers are registered representatives of Wells Fargo Brokerage Services, LLC, or Wells Fargo Institutional Securities, LLC, brokerage affiliates of Wells Fargo & Company and members of the NASD and SIPC.

Investments: • NOT FDIC insured • May lose value • No bank guarantee

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