

APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

1274.00

NAME OF GOVERNMENT
ADDRESS

| |
|--|
| HYLAND VILLAGE METROPOLITAN DISTRICT |
| C/O SPECIAL DISTRICT MANAGEMENT SERVICES, INC. |
| 141 UNION BLVD, SUITE 150 |
| LAKEWOOD, CO 80228 |
| LISA JOHNSON |
| 303-987-0835 |
| ljohnson@sdmsi.com |
| 303-987-2032 |

For the Year Ended
12/31/2017
or fiscal year ended:

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)
RELATIONSHIP TO ENTITY

| |
|--|
| SUSAN OPALINSKI |
| DISTRICT ACCOUNTANT |
| FISCAL FOCUS PARTNERS, LLC |
| 12136 W. BAYAUD AVENUE, SUITE 300 LAKEWOOD, CO 80228 |
| 303-202-1800 |
| 5-Mar-18 |
| |

PREPARER (SIGNATURE REQUIRED)

SEE ACCOUNTANT'S COMPILATION REPORT

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: |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

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RECEIVED
Office of the State Auditor
March 30, 2018

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

| Line # | Description | Governmental Funds | | Description | Proprietary/Fiduciary Funds | |
|---------------------|---|--------------------|--------------------|---|-----------------------------|-------|
| | | General Fund* | Debt Service Fund* | | Fund* | Fund* |
| Assets | | | | Assets | | |
| 1-1 | Cash & Cash Equivalents | \$ 16,543 | \$ 49,907 | Cash & Cash Equivalents | \$ - | \$ - |
| 1-2 | Investments | \$ - | \$ - | Investments | \$ - | \$ - |
| 1-3 | Receivables | \$ 20,955 | \$ 107,208 | Receivables | \$ - | \$ - |
| 1-4 | Due from Other Entities or Funds | \$ - | \$ - | Due from Other Entities or Funds | \$ - | \$ - |
| | All Other Assets (specify) | | | Other Current Assets | \$ - | \$ - |
| 1-5 | | \$ - | \$ - | Total Current Assets | \$ - | \$ - |
| 1-6 | | \$ - | \$ - | Capital Assets, net (from Part 6-4) | \$ - | \$ - |
| 1-7 | | \$ - | \$ - | Other Long Term Assets (specify) | \$ - | \$ - |
| 1-8 | | \$ - | \$ - | | \$ - | \$ - |
| 1-9 | | \$ - | \$ - | | \$ - | \$ - |
| 1-10 | | \$ - | \$ - | | \$ - | \$ - |
| 1-11 | (add lines 1-1 through 1-10) TOTAL ASSETS | \$ 37,498 | \$ 157,115 | (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 | \$ 37,498 | \$ 157,115 | TOTAL ASSETS AND DEFERRED OUTFLOWS | \$ - | \$ - |
| Liabilities | | | | Liabilities | | |
| 1-14 | Accounts Payable | \$ 21,305 | \$ - | 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 | \$ 21,305 | \$ - | TOTAL CURRENT LIABILITIES | \$ - | \$ - |
| 1-20 | All Other Liabilities (specify) | \$ - | \$ - | Proprietary Debt Outstanding (from Part 4-4) | \$ - | \$ - |
| 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 | \$ 21,305 | \$ - | (add lines 1-19 through 1-27) TOTAL LIABILITIES | \$ - | \$ - |
| 1-29 | TOTAL DEFERRED INFLOWS OF RESOURCES | \$ 20,836 | \$ 83,337 | TOTAL DEFERRED INFLOWS OF RESOURCES | \$ - | \$ - |
| Fund Balance | | | | Net Position | | |
| 1-30 | Nonspendable Prepaid | \$ - | \$ - | Net Investment in Capital Assets | \$ - | \$ - |
| 1-31 | Nonspendable Inventory | \$ - | \$ - | | \$ - | \$ - |
| 1-32 | Restricted (specify): | \$ 789 | \$ 73,778 | Emergency Reserves | \$ - | \$ - |
| 1-33 | Committed (specify) | \$ - | \$ - | Other Designations/Reserves | \$ - | \$ - |
| 1-34 | Assigned (specify) | \$ - | \$ - | Restricted | \$ - | \$ - |
| 1-35 | Unassigned: | \$ (5,432) | \$ - | 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 | \$ (4,643) | \$ 73,778 | 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 | \$ 37,498 | \$ 157,115 | 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* | Debt Service Fund* | | Fund* | Fund* | |
| Tax Revenue | | | | Tax Revenue | | | |
| 2-1 | Property | \$ 12,581 | \$ 50,325 | Property | \$ - | \$ - | |
| 2-2 | Specific Ownership | \$ 1,577 | \$ 6,309 | Specific Ownership | \$ - | \$ - | |
| 2-3 | Sales and Use Tax | \$ - | \$ - | Sales and Use Tax | \$ - | \$ - | |
| 2-4 | Other Tax Revenue (specify): | \$ - | \$ - | Other Tax Revenue (specify): | \$ - | \$ - | |
| 2-5 | WEDA Reimbursement | \$ - | \$ 17,933 | | \$ - | \$ - | |
| 2-6 | | \$ - | \$ - | | \$ - | \$ - | |
| 2-7 | | \$ - | \$ - | | \$ - | \$ - | |
| 2-8 | Add lines 2-1 through 2-7 TOTAL TAX REVENUE | \$ 14,158 | \$ 74,567 | 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 | \$ - | \$ - | Charges for Sales and Services | \$ - | \$ - | |
| 2-17 | Rental Income | \$ - | \$ - | Rental Income | \$ - | \$ - | |
| 2-18 | Fines and Forfeits | \$ - | \$ - | Fines and Forfeits | \$ - | \$ - | |
| 2-19 | Interest/Investment Income | \$ 58 | \$ - | Interest/Investment Income | \$ - | \$ - | |
| 2-20 | Tap Fees | \$ - | \$ - | Tap Fees | \$ - | \$ - | |
| 2-21 | Developer Advances | \$ - | \$ - | Developer Advances | \$ - | \$ - | |
| 2-22 | All Other (specify): Administrative Fee | \$ 12,082 | \$ - | All Other (specify): | \$ - | \$ - | |
| 2-23 | Facility Fees | \$ - | \$ 81,000 | | \$ - | \$ - | |
| 2-24 | Add lines 2-8 through 2-23 TOTAL REVENUES | \$ 26,298 | \$ 155,567 | Add lines 2-8 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 | \$ - | \$ - | |
| 2-29 | Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES | \$ 26,298 | \$ 155,567 | Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES | \$ - | \$ - | |
| | | | | | | 181,865 | GRAND TOTALS |

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.R.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* | Debt Service Fund* | | Fund* | Fund* | |
| 3-1 | General Government | \$ 28,127 | \$ 1,293 | 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 | \$ - | \$ 271,000 | 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 | \$ 28,127 | \$ 272,293 | Add lines 3-1 through 3-21 | \$ - | \$ - | GRAND TOTAL |
| | TOTAL EXPENDITURES | | | TOTAL EXPENDITURES | | | \$ 300,420 |
| 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) (from line 2-28) | \$ - | \$ - | |
| 3-27 | | \$ - | \$ - | Capital Outlay (from line 3-14) | \$ - | \$ - | |
| 3-28 | | \$ - | \$ - | Debt Principal (from line 3-15) | \$ - | \$ - | |
| 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 Line 2-29, less line 3-22, plus line 3-29 | \$ (1,829) | \$ (116,726) | Net Increase (Decrease) in Net Position Line 2-29, less line 3-22, plus line 3-29, plus line 3-23, less line 3-24 | \$ - | \$ - | |
| 3-31 | Fund Balance, January 1 from December 31 prior year report | \$ (2,814) | \$ 190,504 | Net Position, January 1 from December 31 prior year report | \$ - | \$ - | |
| 3-32 | Prior Period Adjustment (MUST explain) | \$ - | \$ - | Prior Period Adjustment (MUST explain) | \$ - | \$ - | |
| 3-33 | Fund Balance, December 31 Sum of Line 3-30, 3-31, and 3-32 This total should be the same as line 1-36. | \$ (4,643) | \$ 73,778 | Net Position, December 31 Line 3-30 plus line 3-31 This total should be the same as line 1-36. | \$ - | \$ - | |

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 |
|---|-------------------------------------|-------------------------------------|
| 4-1 Does the entity have outstanding debt? | <input checked="" type="checkbox"/> | <input 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 | \$ 4,770,000 | \$ - | \$ - | \$ 4,770,000 |
| Revenue bonds | \$ - | \$ - | \$ - | \$ - |
| Notes/Loans | \$ - | \$ - | \$ - | \$ - |
| Leases | \$ - | \$ - | \$ - | \$ - |
| Developer Advances | \$ 208,100 | \$ - | \$ - | \$ 208,100 |
| Other (specify): | \$ - | \$ - | \$ - | \$ - |
| TOTAL | \$ 4,978,100 | \$ - | \$ - | \$ 4,978,100 |

*must agree to prior year ending balance

Please use this space to provide any explanations or comments:

4-2 Due to the uncertainty of future principal and interest payments, no schedule for debt is presented.
 4-3 In 2010 the District was notified it was in default under the 2008 bond covenants, the letter of credit provider purchased the bonds outstanding under the letter of credit agreement and the District's swap agreement was terminated. The letter of credit provider sold the bonds in 2014 to investors. Currently the debt service mill levy and the collection of development fees is used to pay interest on the bonds.

| | YES | NO |
|--|-------------------------------------|-------------------------------------|
| 4-5 Does the entity have any authorized, but unissued, debt? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If yes: How much? | \$ 1,100,000 | |
| Date the debt was authorized: | 11/7/2006 | |
| 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 (do not enter \$ amounts): | | |
| Bond Redemption | 20.00 | |
| General/Other | 5.00 | |
| TOTAL | 25.00 | |

PART 5 - CASH AND INVESTMENTS

| | AMOUNT | TOTAL |
|--|-----------|------------------|
| 5-1 YEAR-END Total of ALL Checking and Savings accounts | \$ 66,451 | |
| 5-2 Certificates of deposit | \$ - | |
| TOTAL CASH DEPOSITS | | \$ 66,451 |
| Investments (if investment is a mutual fund, please list underlying investments): | | |
| 5-3 | \$ - | |
| | \$ - | |
| | \$ - | |
| | \$ - | |
| TOTAL INVESTMENTS | | \$ - |
| TOTAL CASH AND INVESTMENTS | | \$ 66,451 |

Please use this space to provide any explanations or comments:

| | 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.)? 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? 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 for GOVERNMENTAL FUNDS: | | Balance - beginning of the year* | Additions | Deletions | Year-End Balance |
|---|--|----------------------------------|-----------|-----------|------------------|
| Land | | \$ - | \$ - | \$ - | \$ - |
| Buildings | | \$ - | \$ - | \$ - | \$ - |
| Machinery and equipment | | \$ - | \$ - | \$ - | \$ - |
| Furniture and fixtures | | \$ - | \$ - | \$ - | \$ - |
| Infrastructure | | \$ - | \$ - | \$ - | \$ - |
| Construction In Progress (CIP) | | \$ 3,666,907 | \$ - | \$ - | \$ 3,666,907 |
| Other (explain): | | \$ - | \$ - | \$ - | \$ - |
| Accumulated Depreciation (Enter a negative, or credit, balance) | | \$ - | \$ - | \$ - | \$ - |
| TOTAL | | \$ 3,666,907 | \$ - | \$ - | \$ 3,666,907 |

| 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 | | \$ - | \$ - | \$ - | \$ - |

*must agree to prior year ending balance

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? 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, 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?

PART 8 - BUDGET INFORMATION

| Please answer the following question by marking in the appropriate box | YES | NO | N/A | |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 8-1 Did the entity file a current year budget with the Department of Local Affairs, in accordance with Section 29-1-113 C.R.S.? If no, MUST explain: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Please use this space to provide any explanations or comments: |
| 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 Fund (Amended) | \$ 30,000 |
| Debt Service Fund (Amended) | \$ 275,000 |
| | \$ - |
| | \$ - |

PART 9 - TAX PAYER'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)]? <small>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.</small> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Please use this space to provide any explanations or comments: |

PART 10 - GENERAL INFORMATION

| Please answer the following question by marking in the appropriate box | YES | NO | |
|--|-------------------------------------|-------------------------------------|--|
| 10-1 Is this application for a newly formed governmental entity? If yes: Date of formation: <input style="width: 150px;" type="text"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Please use this space to provide any explanations or comments: 10-4 The District was formed to finance and construct public improvements for the use and benefit of the citizens of the District. |
| 10-2 Has the entity changed its name in the past or current year? If Yes: NEW name <input style="width: 350px;" type="text"/> PRIOR name <input style="width: 350px;" type="text"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 10-3 Is the entity a metropolitan district? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 10-4 Please indicate what services the entity provides: <input style="width: 400px;" type="text"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 10-5 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: <input style="width: 400px;" type="text"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Please use this space to provide any additional explanations or comments not previously included:

OSA USE ONLY

| Entity Wide: | | General Fund | | Governmental Funds | | Notes |
|---------------------------------|------------|---------------------------|------------|------------------------------|--------------|-------|
| Unrestricted Cash & Investments | \$ 66,451 | Unrestricted Fund Balance | \$ (5,432) | Total Tax Revenue | \$ 88,725 | |
| Current Liabilities | \$ 21,305 | Total Fund Balance | \$ (4,643) | Revenue Paying Debt Service | \$ 155,567 | |
| Deferred Inflow | \$ 104,173 | PY Fund Balance | \$ (2,814) | Total Revenue | \$ 181,865 | |
| | | Total Revenue | \$ 26,298 | Total Debt Service Principal | \$ - | |
| | | Total Expenditures | \$ 28,127 | Total Debt Service Interest | \$ 271,000 | |
| | | Interfund In | \$ - | | | |
| Governmental | | Interfund Out | \$ - | Enterprise Funds | | |
| Total Cash & Investments | \$ 66,450 | | | Net Position | \$ - | |
| Transfers In | \$ - | - Proprietary | \$ - | - PY Net Position | \$ - | |
| Transfers Out | \$ - | - Current Assets | \$ - | - Government-Wide | | |
| Property Tax | \$ 62,906 | Deferred Outflow | \$ - | - Total Outstanding Debt | \$ 4,978,100 | |
| Debt Service Principal | \$ - | - Current Liabilities | \$ - | - Authorized but Unissued | \$ 1,100,000 | |
| Total Expenditures | \$ 300,420 | Deferred Inflow | \$ - | - Year Authorized | \$ 39,028 | |
| Total Developer Advances | \$ - | - Cash & Investments | \$ - | | | |
| Total Developer Repayments | \$ - | - Principal Expense | \$ - | | | |

PART 12 - GOVERNING BODY APPROVAL

Please answer the following question by marking in the appropriate box

YES

NO

12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?

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

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.

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 | Davis B. Reinhart | I, <u>Davis B. Reinhart</u> , 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 <u>[Signature]</u> Date: <u>3/16/18</u> My term Expires: <u>May 2020</u> |
| 2 | Scott Sinelli | I, <u>Scott Sinelli</u> , 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: <u>May 2018</u> |
| 3 | Kevin Puccio | I, <u>Kevin Puccio</u> , 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: <u>May 2018</u> |
| 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: _____ |

PART 12 - GOVERNING BODY APPROVAL

Please answer the following question by marking in the appropriate box

YES NO

12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?

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- 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 signed 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.

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

**Original Signatures
Verified by**

Justin L. Smith



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. |
|--------------|---------------------------|---|
| 1 | Davis B. Reinhart | Signed _____ Date: _____ My term Expires: May 2020 |
| 2 | Scott Sinelli | Signed <i>Scott Sinelli</i> Date: <i>3/16/2018</i> My term Expires: May 2018 |
| 3 | Kevin Puccio | Signed _____ Date: _____ My term Expires: May 2018 |
| 4 | | Signed _____ Date: _____ My term Expires: _____ |
| 5 | | Signed _____ Date: _____ My term Expires: _____ |
| 6 | | Signed _____ Date: _____ My term Expires: _____ |
| 7 | | Signed _____ Date: _____ My term Expires: _____ |



ACCOUNTANT'S COMPILATION REPORT

To the Board of Directors
Hyland Village Metropolitan District
Jefferson County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit (the Form) of Hyland Village Metropolitan District as of and for the year ended December 31, 2017. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the American Institute of Certified Public Accountants. We did not audit or review the financial statements included in the Form nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the financial statements or other information included in the Form.

The Form is presented in accordance with the requirements of the Colorado Office of the State Auditor (State Auditor), which differ from accounting principles generally accepted in the United States of America.

This report is intended solely for the use of the State Auditor and is not intended to be and should not be used by parties other than the State Auditor.

Fiscal Focus Partners, LLC

Fiscal Focus Partners, LLC
Lakewood, Colorado
March 5, 2018

Fiscal Focus Partners, LLC

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