

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

2786.00

NAME OF GOVERNMENT ADDRESS

Devonshire Heights Water and Sanitation District
2070 Wagon Mound Trail
Las Cruces, NM 88012

For the Year Ended
12/31/17
or fiscal year ended:

**CONTACT PERSON
PHONE
EMAIL
FAX**

Steve Schroder
575.312.8415
smcllc3@msn.com

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:
TITLE
FIRM NAME (if applicable)
ADDRESS
PHONE
DATE PREPARED
(Must be prepared prior to Board approval)**

Steve Schroder
District Manager
Schroder Management Co., LLC
2070 Wagon Mound Trail
575.312.8415
2/7/2018

PREPARER (SIGNATURE REQUIRED)

[Handwritten Signature]

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

March 28, 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	\$ -	
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	\$ -	
2-14	Charges for utility services	\$ 20,972	
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	\$ 20,972	

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	\$ 6,600	
3-2	Salaries	\$ -	
3-3	Payroll taxes	\$ -	
3-4	Contract services	\$ 15,073	
3-5	Employee benefits	\$ -	
3-6	Insurance	\$ 1,838	
3-7	Accounting and legal fees	\$ -	
3-8	Repair and maintenance	\$ 302	
3-9	Supplies	\$ 40	
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 (should agree with Part 4)	\$ 751	
3-18	Debt service interest	\$ -	
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	\$ 24,604	

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: <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
4-3 Is the entity current in its debt service payments? If no, MUST explain: <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	<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	\$ 12,437	\$ -	\$ 751	\$ 11,686
Leases	\$ -	\$ -	\$ -	\$ -
Developer Advances	\$ -	\$ -	\$ -	\$ -
Other (specify):	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 12,437	\$ -	\$ 751	\$ 11,686

*must tie to prior year ending balance

	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 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 <u>mills</u> 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	\$ 36,040	
5-2 Certificates of deposit	\$ -	
Total Cash Deposits		\$ 36,040
Investments (if investment is a mutual fund, please list underlying investments):		
	\$ -	
	\$ -	
5-3	\$ -	
	\$ -	
Total Investments		\$ -
Total Cash and Investments		\$ 36,040

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? 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

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)	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -

*must 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	\$	27,872
Reserves	\$	29,368

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)]? Yes No

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? Yes No

If yes: Date of formation:

- 10-2 Has the entity changed its name in the past or current year? Yes No

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

- 10-3 Is the entity a metropolitan district? Yes No

Please indicate what services the entity provides:

- 10-4 Does the entity have an agreement with another government to provide services? Yes No

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

Metro Wastewater for sanitary sewer treatment, Denver Water full service contract, Hillcrest W/S district for sewer outfall line maintenance

- 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.] Yes No

If yes: Date Filed:

Please use this space to provide any explanations or comments:

**WATER POLLUTION CONTROL REVOLVING FUND
 LOAN REPAYMENT SCHEDULE
 HILLCREST WATER AND SANITATION DISTRICT
 Loan Number: #W13F311**

PAYMENT DATES	DEVONSHIRE HEIGHTS Portion	PAYMENT	PRINCIPAL	REMAINING PRINCIPAL	CALCULATED INTEREST
				\$507,047.64	
11/1/2015	\$375.63	\$16,799.12	\$11,728.64	\$495,319.00	\$5,070.48
5/1/2016	\$375.63	\$16,799.12	\$11,845.93	\$483,473.07	\$4,953.19
11/1/2016	\$375.63	\$16,799.12	\$11,964.39	\$471,508.68	\$4,834.73
5/1/2017	\$375.63	\$16,799.12	\$12,084.03	\$459,424.65	\$4,715.09
11/1/2017	\$375.63	\$16,799.12	\$12,204.87	\$447,219.78	\$4,594.25
5/1/2018	\$375.63	\$16,799.12	\$12,326.92	\$434,892.86	\$4,472.20
11/1/2018	\$375.63	\$16,799.12	\$12,450.19	\$422,442.67	\$4,348.93
5/1/2019	\$375.63	\$16,799.12	\$12,574.69	\$409,867.98	\$4,224.43
11/1/2019	\$375.63	\$16,799.12	\$12,700.44	\$397,167.54	\$4,098.68
5/1/2020	\$375.63	\$16,799.12	\$12,827.44	\$384,340.10	\$3,971.68
11/1/2020	\$375.63	\$16,799.12	\$12,955.72	\$371,384.38	\$3,843.40
5/1/2021	\$375.63	\$16,799.12	\$13,085.28	\$358,299.10	\$3,713.84
11/1/2021	\$375.63	\$16,799.12	\$13,216.13	\$345,082.97	\$3,582.99
5/1/2022	\$375.63	\$16,799.12	\$13,348.29	\$331,734.68	\$3,450.83
11/1/2022	\$375.63	\$16,799.12	\$13,481.77	\$318,252.91	\$3,317.35
5/1/2023	\$375.63	\$16,799.12	\$13,616.59	\$304,636.32	\$3,182.53
11/1/2023	\$375.63	\$16,799.12	\$13,752.76	\$290,883.56	\$3,046.36
5/1/2024	\$375.63	\$16,799.12	\$13,890.28	\$276,993.28	\$2,908.84
11/1/2024	\$375.63	\$16,799.12	\$14,029.19	\$262,964.09	\$2,769.93
5/1/2025	\$375.63	\$16,799.12	\$14,169.48	\$248,794.61	\$2,629.64
11/1/2025	\$375.63	\$16,799.12	\$14,311.17	\$234,483.44	\$2,487.95
5/1/2026	\$375.63	\$16,799.12	\$14,454.29	\$220,029.15	\$2,344.83
11/1/2026	\$375.63	\$16,799.12	\$14,598.83	\$205,430.32	\$2,200.29
5/1/2027	\$375.63	\$16,799.12	\$14,744.82	\$190,685.50	\$2,054.30
11/1/2027	\$375.63	\$16,799.12	\$14,892.26	\$175,793.24	\$1,906.86
5/1/2028	\$375.63	\$16,799.12	\$15,041.19	\$160,752.05	\$1,757.93
11/1/2028	\$375.63	\$16,799.12	\$15,191.60	\$145,560.45	\$1,607.52
5/1/2029	\$375.63	\$16,799.12	\$15,343.52	\$130,216.93	\$1,455.60
11/1/2029	\$375.63	\$16,799.12	\$15,496.95	\$114,719.98	\$1,302.17
5/1/2030	\$375.63	\$16,799.12	\$15,651.92	\$99,068.06	\$1,147.20
11/1/2030	\$375.63	\$16,799.12	\$15,808.44	\$83,259.62	\$990.68
5/1/2031	\$375.63	\$16,799.12	\$15,966.52	\$67,293.10	\$832.60
11/1/2031	\$375.63	\$16,799.12	\$16,126.19	\$51,166.91	\$672.93
5/1/2032	\$375.63	\$16,799.12	\$16,287.45	\$34,879.46	\$511.67
11/1/2032	\$375.63	\$16,799.12	\$16,450.33	\$18,429.13	\$348.79
5/1/2033	\$375.63	\$16,799.12	\$16,614.83	\$1,814.30	\$184.29
11/1/2033	\$40.97	\$1,832.44	\$1,814.30	\$0.00	\$18.14
Total	\$13,563.59	\$606,600.76	\$507,047.64		\$99,553.12

11,685.44

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 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	Dudley Morton	I <u>Dudley Morton</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>3/12/18</u> My term Expires: May, 2020
2	Kevin Valis	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, 2020
3	Bill Lucas	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, 2020
4	Scott Fisher	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
5		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: _____
6		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: _____
7		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: _____

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 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 1	Dudley Morton	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, 2020
Board Member 2	Kevin Valis	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 <u>Kevin Valis</u> Date: <u>2-27-18</u> My term Expires: May, 2020
Board Member 3	Bill Lucas	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, 2020
Board Member 4	Scott Fisher	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		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		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		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: _____

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 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 1	Dudley Morton	
Board Member 2	Kevin Valis	
Board Member 3	Bill Lucas	I <u>William B Lucas</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>William B Lucas</u> Date: <u>3-11-18</u> My term Expires: May, 2020
Board Member 4	Scott Fisher	
Board Member 5		
Board Member 6		
Board Member 7		

**Original Signatures
Verified by**
Justin L. Smith
