

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT
ADDRESS

CHERRY HILLS HEIGHTS WATER & SANITATION DISTRICT
3420 S. Clayton Boulevard
Englewood, CO 80113

For the Year Ended
12/31/19
or fiscal year ended:

CONTACT PERSON
PHONE
EMAIL
FAX

Toby Ralston
303 557-9020
toby.ralston@gmail.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

Diane Wheeler
District Accountant
Simmons & Wheeler, P.C.
304 Inverness Way South, Suite 490, Englewood CO 80112
303-689-0833
3/10/2020

PREPARER (SIGNATURE REQUIRED)


Diane Wheeler (Mar 18, 2020)

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"/>

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 (report mills levied in Question 10-6)	\$ 65,567	
2-2	Specific ownership	\$ 5,140	
2-3	Sales and use	\$ -	
2-4	Other (specify): Interest	\$ 217	
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	\$ -	
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	Miscellaneous Reimbursements	\$ 1,271	
2-23		\$ -	
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE	\$ 72,195	

PART 3 - EXPENDITURES/EXPENSES

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	\$ 775	
3-7	Accounting and legal fees	\$ 1,239	
3-8	Repair and maintenance	\$ 12,720	
3-9	Supplies	\$ -	
3-10	Utilities and telephone	\$ 1,904	
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)	\$ 43,990	
3-18	Debt service interest	\$ 1,519	
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): Treasurer's Fees	\$ 987	
3-24	Miscellaneous expenses	\$ 1,184	
3-25		\$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES/EXPENSES	\$ 64,318	

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"/> |
|-----|--|-------------------------------------|--------------------------|

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	\$ 45,573	\$ -	\$ 22,561	\$ 23,012
Leases	\$ -	\$ -	\$ -	\$ -
Developer Advances	\$ -	\$ -	\$ -	\$ -
Other (specify): 2012 Bank Loan See Note below	\$ 21,429	\$ -	\$ 21,429	\$ -
TOTAL	\$ 67,002	\$ -	\$ 43,990	\$ 23,012

*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? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If yes: | How much? | | |
| | \$ 25,000.00 | | |
| | Date the debt was authorized: | | |
| | 11/4/2004 | | |
| 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? | | |
| | \$ - | | |

Please use this space to provide any explanations or comments:

Outstanding Debt - The ending note balances at 12/31/18 were in error. The above balances are correct and based upon actual payments.

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	\$ 207,006	
5-2	Certificates of deposit	\$ -	
	Total Cash Deposits		\$ 207,006
	Investments (if investment is a mutual fund, please list underlying investments):		
		\$ -	
		\$ -	
5-3		\$ -	
		\$ -	
	Total Investments		\$ -
	Total Cash and Investments		\$ 207,006

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

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	\$ 158,000	\$ -	\$ -	\$ 158,000
Buildings	\$ -	\$ -	\$ -	\$ -
Machinery and equipment	\$ -	\$ -	\$ -	\$ -
Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ 150,535	\$ -	\$ -	\$ 150,535
Other (explain):	\$ 376,632	\$ -	\$ -	\$ 376,632
Accumulated Depreciation	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 685,167	\$ -	\$ -	\$ 685,167

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?
- 7-2 Does the entity have a volunteer firemen's pension plan?
- 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	\$ -

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.?
- _____
- 8-2 Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:
- _____

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

Fund Name	Budgeted Expenditures/Expenses
General Fund	\$ 65,563

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)]? <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"/>

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: <input style="width: 450px; height: 15px;" type="text"/>		
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 type="checkbox"/>	<input checked="" type="checkbox"/>
	Please indicate what services the entity provides:		
	<input style="width: 629px; height: 15px;" type="text"/> Water and Sanitation services.		

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:		
	<input style="width: 629px; height: 15px;" type="text"/>		

10-5	Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during the	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes:	Date Filed: <input style="width: 480px; height: 15px;" type="text"/>		

10-6	Does the entity have a certified Mill Levy?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes:	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):		

Bond Redemption mills	-
General/Other mills	6.079
Total mills	6.079

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	If you plan to submit this form electronically, have you read the new Electronic Signature Policy?	<input 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 members of current governing body below.		A MAJORITY of the members of the governing body must complete and sign in the column below.
Board Member 1	Print Board Member's Name TOBY RALSTON	I <u>TOBY RALSTON</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></u> Date: <u>Mar 11, 2020</u> My term Expires: <u>MAY, 2020</u>
Board Member 2	Print Board Member's Name JOHN ASHWORTH	I <u>JOHN ASHWORTH</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></u> Date: <u>Mar 11, 2020</u> My term Expires: <u>MAY, 2020</u>
Board Member 3	Print Board Member's Name MELISSA GROSSMAN	I <u>MELISSA GROSSMAN</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></u> Date: <u>Mar 11, 2020</u> My term Expires: <u>MAY, 2020</u>
Board Member 4	Print Board Member's Name CAMBYSE KESHA VARZ	I <u>CAMBYSE KESHA VARZ</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></u> Date: <u>Mar 11, 2020</u> My term Expires: <u>MAY, 2020</u>
Board Member 5	Print Board Member's Name JONAH STALLER	I <u>JONAH STALLER</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></u> Date: <u>Mar 11, 2020</u> My term Expires: <u>MAY, 2020</u>
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: _____



Cherry Hills Heights Water & Sanitary District
\$150,000 2.81%
7 Years with Annual Principal and Interest Payments 30/360 basis

<u>DATE</u>	<u>PMT NO.</u>	<u>PRINCIPAL</u>	<u>INTEREST</u>	<u>TOTAL PMT</u>	<u>REMAINING BALANCE</u>
06/05/12					150,000.00
10/31/13	1	21,428.58	5,912.71	27,341.29	128,571.42
10/31/14	2	21,428.58	3,612.86	25,041.44	107,142.84
10/31/15	3	21,428.58	3,010.71	24,439.29	85,714.26
10/31/16	4	21,428.58	2,408.57	23,837.15	64,285.68
10/31/17	5	21,428.58	1,806.43	23,235.01	42,857.10
10/31/18	6	21,428.58	1,204.28	22,632.86	21,428.52
10/31/19	7	21,428.52	602.14	22,030.66	0.00
	TOTAL	150,000.00	18,557.70	168,557.70	

**EXHIBIT C
WATER POLLUTION CONTROL REVOLVING FUND
LOAN REPAYMENT SCHEDULE
CHERRY HILLS HEIGHTS WATER AND SANITATION DISTRICT, COLORADO**

On or before the first of each date, commencing on November 1, 2011 the Governmental Agency shall pay the amount set forth below.

LOAN DATE:	10/29/10
LOAN AMOUNT:	\$240,000
INTEREST RATE:	2.000%
TERM (YEARS):	10

INTEREST DATE: 07/01/11

1st Amendment

PAYMENT DATES	PAYMENT	PRINCIPAL	ADDITIONAL PRINCIPAL (1)	REMAINING PRINCIPAL	CALCULATED INTEREST	INTEREST ALLOCATION FOR AUTHORITY PURPOSES ONLY	
						INTEREST	ADMIN. FEE
06/01/11				\$240,000.00			
11/1/2011			\$27,000.00	\$213,000.00			
11/1/2012	\$7,904.18	\$8,484.18		\$206,515.82	\$1,420.00	420.00	\$1,000.00
11/1/2013	\$25,301.38	\$21,171.06		\$185,344.76	\$4,130.32	130.32	\$4,000.00
11/1/2014	\$25,301.38	\$21,594.48		\$163,750.28	\$3,708.90	208.90	\$3,500.00
11/1/2015	\$25,301.38	\$22,026.37		\$141,723.91	\$3,275.01	275.01	\$3,000.00
11/1/2016	\$25,301.38	\$22,486.90		\$119,257.01	\$2,834.48	334.48	\$2,500.00
11/1/2017	\$25,301.38	\$22,916.24		\$96,340.77	\$2,385.14	135.14	\$2,250.00
11/1/2018	\$25,301.38	\$23,374.56		\$72,966.21	\$1,928.82	678.82	\$1,250.00
11/1/2019	\$25,301.38	\$23,842.06		\$49,124.15	\$1,459.32	459.32	\$1,000.00
11/1/2020	\$25,301.36	\$24,318.90		\$24,805.25	\$982.48	482.48	\$500.00
		\$24,805.25		\$0.00	\$496.11	296.11	\$200.00
Total	\$236,616.58	\$213,000.00	\$27,000.00		\$22,616.58	\$3,416.58	\$19,200.00

1. \$27,000 loan prepayment received from Cherry Hills Heights Water and Sanitation District on June 1, 2011.












Cherry Hills Heights Water & Sanitation 2019


Final Audit Report

2020-03-18

Created:	2020-03-11
By:	Kimberly Johanns (Kimberly@simmonswheeler.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAu_oU8xQBMdGPG7I5zFjwuE7uAtBWTFGI

"Cherry Hills Heights Water & Sanitation 2019" History


-  Document created by Kimberly Johanns (Kimberly@simmonswheeler.com)
2020-03-11 - 4:43:27 PM GMT- IP address: 208.187.187.252
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Signature Date: 2020-03-11 - 10:50:20 PM GMT - Time Source: server- IP address: 104.129.199.35

 Document e-signed by Diane Wheeler (diane@simmonswheeler.com)

Signature Date: 2020-03-18 - 3:34:33 PM GMT - Time Source: server- IP address: 208.187.187.252

 Signed document emailed to Melissa Grossman (melissagrossman@yahoo.com), Diane Wheeler (diane@simmonswheeler.com), Jonah Staller (jonahstaller@msn.com), Kimberly Johanns (Kimberly@simmonswheeler.com), and 3 more

2020-03-18 - 3:34:33 PM GMT