

APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

FOR LOCAL GOVERNMENTS WITH EITHER REVENUES OR EXPENDITURES MORE THAN \$100,000 BUT NOT MORE THAN \$750,000

Under the Local Government Audit Law (Section 29-1-601, et seq., C.R.S.) any local government may apply for an exemption from audit if neither revenues nor expenditures exceed \$750,000 for the year.

If your local government has either revenues or expenditures of LESS than \$100,000, use the **SHORT FORM**.

EXEMPTIONS FROM AUDIT ARE NOT AUTOMATIC

To qualify for exemption from audit, a local government must complete an Application for Exemption from Audit **EACH YEAR** and submit it to the Office of the State Auditor (OSA) for approval.

Any preparer of an Application for Exemption from Audit must be an independent accountant with knowledge of governmental accounting.

Approval for an exemption from audit is granted only upon the review by the OSA.

READ ALL INSTRUCTIONS BEFORE COMPLETING AND SUBMITTING THIS FORM

ALL APPLICATIONS MUST BE FILED WITH THE OSA **WITHIN 3 MONTHS** AFTER THE ACCOUNTING YEAR-END. FOR EXAMPLE, APPLICATIONS MUST BE RECEIVED BY THE OSA ON OR BEFORE MARCH 31 FOR GOVERNMENTS WITH A DECEMBER 31 YEAR-END.

GOVERNMENTAL ACTIVITY SHOULD BE REPORTED ON THE **MODIFIED ACCRUAL BASIS**.
PROPRIETARY ACTIVITY SHOULD BE REPORTED ON A **BUDGETARY BASIS**.

POSTMARK DATES WILL NOT BE ACCEPTED AS PROOF OF SUBMISSION ON OR BEFORE THE STATUTORY DEADLINE.

PRIOR YEAR FORMS ARE OBSOLETE AND WILL NOT BE ACCEPTED.

FOR YOUR REFERENCE, COLORADO REVISED STATUTES CAN BE FOUND AT THIS ADDRESS:

APPLICATIONS SUBMITTED ON FORMS OTHER THAN THOSE PRESCRIBED BY THE OSA WILL NOT BE ACCEPTED.

<http://www.fors.state.co.us/reference/Colorado>

APPLICATIONS **MUST** BE FULLY AND ACCURATELY COMPLETED.

CHECKLIST

- Has the preparer signed the application?
- Has the entity corrected all Prior Year Deficiencies as communicated by the OSA?
- Has the application been **PERSONALLY** reviewed and approved by the governing body?
- Are all sections of the form complete, including responses to all of the questions?
- Did you include any relevant explanations for unusual items in the appropriate spaces at the end of each section?
- Will this application be submitted via Fax or Email?
 - If yes, have you read and understand the new Electronic Signature Policy? See new [policy](#)
- Have you included a resolution?
- Does the resolution state that the governing body **PERSONALLY** reviewed and approved the resolution in an open public meeting?
- Has the resolution been signed by a **MAJORITY** of the governing body? (See sample resolution.)
- Will this application be submitted via a mail service? (e.g. US Post Office, FedEx, UPS, courier.)
- If yes, does the application include **PERSONAL INK SIGNATURES** from the **MAJORITY** of the governing body?

Checkout our new [web portal](#). Register your account and submit electronic Applications for Exemption From Audit, Extension of Time to File requests, Audited Financial Statements, and more! See the link below.

[OSA LG Web Portal](#)

FILING METHODS

NEW METHOD!

WEB PORTAL: Register and submit your Applications at our new portal <https://apps.leg.co.gov/osa/la>

MAIL: Office of the State Auditor
Local Government Audit Division
1525 Sherman St., 7th Floor
Denver, CO 80203

FAX: 303-869-3063

EMAIL: osa.lg@state.co

QUESTIONS? 303-869-3000

IMPORTANT!

All Applications for Exemption from Audit are subject to review and approval by the Office of the State Auditor. Governmental Activity should be reported on the Modified Accrual Basis. Proprietary Activity should be reported on the Cash or Budgetary Basis. A Budgetary Basis Application is provided in Part 2. Failure to file an application or report of the required basis for local government to file a government from audit for that year and the filing year in that event, an audit **MUST** BE FILED.

**APPLICATION FOR EXEMPTION FROM AUDIT
LONG FORM**

NAME OF GOVERNMENT	Golden Gate Fire Protection District
ADDRESS	PO Box 843 Golden, CO 80402-0843
CONTACT PERSON	Paul Trost
PHONE	303-324-9408
EMAIL	treasurer@goldengatefire.org
FAX	

For the Year Ended
12/31/2020
or fiscal year ended:

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:	Robin Smith
TITLE:	CPA
FIRM NAME (if applicable):	Smith and Associates PC
ADDRESS:	405 Urban St. STE 402
PHONE:	303-274-5500
DATE PREPARED (must be completed prior to the filing date):	03/23/21
RELATIONSHIP TO ENTITY:	Accountant

PREPARER SIGNATURE: 

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:
		A	

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

Indicate Name of Fund		Governmental Funds		Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page.
Line #	Description	Fund*	Fund*	Fund*	Fund*	
Assets						
1-1	Cash & Cash Equivalents	\$ 51,934	\$ -	Cash & Cash Equivalents	\$ -	\$ -
1-2	Investments	\$ 203,827	\$ -	Investments	\$ -	\$ -
1-3	Receivables	\$ 188,850	\$ -	Receivables	\$ -	\$ -
1-4	Due from Other Entities or Funds	\$ -	\$ -	Due from Other Entities or Funds	\$ -	\$ -
	All Other Assets (specify...)			Other Current Assets	\$ -	\$ -
				Total Current Assets	\$ -	\$ -
1-5	Prepaid Expenses	\$ 2,655	\$ -	Capital Assets, net (from Part 6-4)	\$ -	\$ -
1-6	Restricted Cash (losses)	\$ 35,272	\$ -	Other Long Term Assets (specify...)	\$ -	\$ -
1-7		\$ -	\$ -		\$ -	\$ -

1-8		\$	\$	-		\$	\$	-
1-9		\$	\$	-		\$	\$	-
1-10		\$	\$	-		\$	\$	-
1-11	(add lines 1-1 through 1-10)	TOTAL ASSETS	\$	480,338	\$	(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	\$	480,338	\$	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$	- \$
Liabilities				Liabilities				
1-14		Accounts Payable	\$	-	\$	Accounts Payable	\$	- \$
1-15		Accrued Payroll and Related Liabilities	\$	125	\$	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	\$	188,140	\$	All Other Current Liabilities	\$	- \$
1-19		TOTAL CURRENT LIABILITIES	\$	188,265	\$	TOTAL CURRENT LIABILITIES	\$	- \$
1-20		All Other Liabilities (specify...)	\$	-	\$	Proprietary Debt Outstanding (from Part 4-4)	\$	- \$
1-21			\$	-	\$	Other Liabilities (specify...):	\$	- \$
1-22	Length of Service Pension		\$	33,498	\$		\$	- \$
1-23			\$	-	\$		\$	- \$
1-24			\$	-	\$		\$	- \$
1-25			\$	-	\$		\$	- \$
1-26			\$	-	\$		\$	- \$
1-27			\$	-	\$		\$	- \$
1-28	(add lines 1-19 through 1-27)	TOTAL LIABILITIES	\$	221,763	\$	(add lines 1-19 through 1-27)	TOTAL LIABILITIES	\$ - \$
1-29		TOTAL DEFERRED INFLOWS OF RESOURCES	\$	-	\$	TOTAL DEFERRED INFLOWS OF RESOURCES	\$	- \$
Fund Balance				Net Position				
1-30	Nonspendable Prepaid		\$	2,655	\$	Net Investment in Capital Assets	\$	- \$
1-31	Nonspendable Inventory		\$	-	\$		\$	- \$
1-32	Restricted (7% of 2020 Expenditures)		\$	4,454	\$	Emergency Reserves	\$	- \$
1-33	Committed (specify...)		\$	-	\$	Other Designations/Reserves	\$	- \$
1-34	Assigned (specify...)		\$	-	\$	Restricted	\$	- \$
1-35	Unassigned:		\$	251,466	\$	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	\$	258,575	\$	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	\$	480,338	\$	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	\$ - \$

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
		Fund#	Fund#		Fund#	Fund#	
Tax Revenue				Tax Revenue			
2-1	Property (include mills levied in Question 10-4)	\$	182,507	\$	Property (include mills levied in Question 10-4)	\$	- \$
2-2	Specific Ownership	\$	13,863	\$	Specific Ownership	\$	- \$
2-3	Sales and Use Tax	\$	-	\$	Sales and Use Tax	\$	- \$
2-4	Other Tax Revenue (specify...)	\$	79	\$	Other Tax Revenue (specify...)	\$	- \$
2-5		\$	-	\$		\$	- \$
2-6		\$	-	\$		\$	- \$
2-7		\$	-	\$		\$	- \$
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$	196,449	\$	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	\$	1,557	\$	Donations	\$	- \$
2-16	Charges for Sales and Services	\$	1,050	\$	Charges for Sales and Services	\$	- \$
2-17	Rental Income	\$	-	\$	Rental Income	\$	- \$
2-18	Fines and Forfeits	\$	-	\$	Fines and Forfeits	\$	- \$
2-19	Interest/Investment Income	\$	1,849	\$	Interest/Investment Income	\$	- \$
2-20	Tap Fees	\$	-	\$	Tap Fees	\$	- \$
2-21	Proceeds from Sale of Capital Assets	\$	-	\$	Proceeds from Sale of Capital Assets	\$	- \$
2-22	All Other (specify...)	\$	-	\$	All Other (specify...)	\$	- \$
2-23		\$	-	\$		\$	- \$
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES	\$	200,905	\$	Add lines 2-8 through 2-23 TOTAL REVENUES	\$	- \$
Other Financing Sources				Other Financing Sources			
2-25	Debt Proceeds	\$	-	\$	Debt Proceeds	\$	- \$
2-26	Developer Advances	\$	-	\$	Developer Advances	\$	- \$
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	\$	200,905	\$	Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$	- \$
<p>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) 859-3000 for assistance.</p>							200,905

PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		Fund#	Fund#		Fund#	Fund#	
Expenditures				Expenses			
3-1	General Government	\$	-	\$	General Operating & Administrative	\$	- \$
3-2	Judicial	\$	-	\$	Salaries	\$	- \$
3-3	Law Enforcement	\$	-	\$	Payroll Taxes	\$	- \$
3-4	Fire	\$	125,395	\$	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	Transfers to other districts	\$	-	\$	-	Utilities	\$	-	\$	-
3-11	Other (specify...):	\$	-	\$	-	Contributions to Fire & Police Pension Assoc.	\$	-	\$	-
3-12		\$	-	\$	-	Other (specify...)	\$	-	\$	-
3-13		\$	-	\$	-		\$	-	\$	-
3-14	Capital Outlay	\$	24,978	\$	-	Capital Outlay	\$	-	\$	-
	Debt Service					Debt Service				
3-15	Principal	\$	-	\$	-	Principal	\$	-	\$	-
3-16	Interest	\$	-	\$	-	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 TOTAL EXPENDITURES	\$	150,373	\$	-	Add lines 3-1 through 3-21 TOTAL EXPENSES	\$	-	\$	-
3-23	Interfund Transfers (In)	\$	-	\$	-	Net Interfund Transfers (In) Out	\$	-	\$	-
3-24	Interfund Transfers Out	\$	-	\$	-	Other (specify...)(enter negative for expense)	\$	-	\$	-
3-25	Other Expenditures (Revenues):	\$	-	\$	-	Depreciation	\$	-	\$	-
3-26		\$	-	\$	-	Other Financing Sources (Uses) (from line 2-20)	\$	-	\$	-
3-27		\$	-	\$	-	Capital Outlay (from line 3-14)	\$	-	\$	-
3-28		\$	-	\$	-	Debt Principal (from line 3-15, 3-18)	\$	-	\$	-
3-29	(Add lines 3-23 through 3-28) TOTAL TRANSFERS AND OTHER EXPENDITURES	\$	-	\$	-	(Line 3-26, plus line 3-27, less line 3-24, less line 3-25) 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, less line 3-24	\$	50,532	\$	-	Net Increase (Decrease) in Net Position Line 2-29, less line 3-22, plus line 3-29, less line 3-24	\$	-	\$	-
3-31	Fund Balance, January 1 from December 31 prior year report	\$	208,986	\$	-	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.	\$	259,498	\$	-	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.

4-1	Does the entity have outstanding debt?	YES	NO		
4-2	Is the debt repayment schedule attached? If no, MUST explain:			X	
4-3	Is the entity current in its debt service payments? If no, MUST explain:				
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	\$ -	\$ -	\$ -	\$ -
	Revenue bonds	\$ -	\$ -	\$ -	\$ -
	Notes/Loans	\$ -	\$ -	\$ -	\$ -
	Leases	\$ -	\$ -	\$ -	\$ -
	Developer Advances	\$ -	\$ -	\$ -	\$ -
	Other (specify):	\$ -	\$ -	\$ -	\$ -
	TOTAL	\$ -	\$ -	\$ -	\$ -

*must agree to prior year ending balance

Please answer the following questions by marking the appropriate boxes.

4-5	Does the entity have any authorized, but unissued, debt?	YES	NO	
	How much?			X
	Date the debt was authorized:			
4-6	Does the entity intend to issue debt within the next calendar year?			
	How much?			
4-7	Does the entity have debt that has been refinanced that it is still responsible for?			X
	What is the amount outstanding?			
4-8	Does the entity have any lease agreements?			X
	What is being leased?			
	What is the original date of the lease?			
	Number of years of lease?			
	Is the lessee subject to annual appropriation?			
	What are the annual lease payments?			

PART 5 - CASH AND INVESTMENTS

Please provide the entity's cash deposit and investment balances.

5-1	YEAR-END Total of ALL Checking and Savings accounts	AMOUNT	TOTAL
5-2	Certificates of deposit	\$ 51,934	
	TOTAL CASH DEPOSITS	\$ 51,934	
5-3	Investments (If investment is a mutual fund, please list underlying investments):		
	Colorado Trust plus Money Market	\$ 203,627	
	Colorado Trust Prime	\$ 35,272	
	TOTAL INVESTMENTS	\$ 238,899	
	TOTAL CASH AND INVESTMENTS	\$ 290,833	

Please answer the following question by marking in the appropriate box.

5-4	Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?	YES	NO	N/A
		X		
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:		X	

PART 6 - CAPITAL ASSETS

Please answer the following question by marking in the appropriate box.

6-1	Does the entity have capitalized assets?	YES	NO		
		X			
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:		X		
6-3	Complete the following Capital Assets table for GOVERNMENTAL FUNDS:	Balance - beginning of the year*	Additions	Deletions	Year-End Balance
	Land	\$ -	\$ -	\$ -	\$ -

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 25-1-604 (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:

- Submit the application in hard copy via the US Mail including original signatures.
- 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.

Below is the certification and approval of the governing body. By signing, each individual member is certifying they are a duly elected or appointed officer of the local government. Governing members may be varied. Also by signing, the individual member certifies that this Application for Exemption from Audit has been prepared consistent with Section 25-1-604, C.R.S., which states that a governmental agency with revenue and expenditures of \$150,000 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 members of the governing body below.

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

Full Name	
Sheila Carlton	I, <u>SHEILA CARLTON</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>3-25-21</u> My term Expires: <u>May 2022</u>
Sam Patton	I, <u>Sam Patton</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>3/26/21</u> My term Expires: <u>May 2022</u>
David Kinnard	I, <u>David Kinnard</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>3/26/21</u> My term Expires: <u>May 2022</u>
Paul Trost	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: _____
DANNISL AGAR	I, <u>DANNISL AGAR</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>3-26-2021</u> My term Expires: <u>3-2022</u>
	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: _____
	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: _____