APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

NAME OF GOVERNMENT	The Canyons Metropolitan District No. 1	For the Year Ended 12/31/2022 or fiscal year ended:
ADDRESS	8390 E Crescent Parkway	
	Suite 300	
	Greenwood Village, CO 80111	
CONTACT PERSON	Shelby Clymer	
PHONE	303-779-5710	
EMAIL	Shelby.Clymer@claconnect.com	

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:	Shelby Clymer
TITLE	Accountant for the District
FIRM NAME (if applicable)	CliftonLarsonAllen LLP
ADDRESS	8390 E Crescent Parkway, Suite 300, Greenwood Village, CO 80111
PHONE	303-779-5710
DATE PREPARED	3/22/2023
RELATIONSHIP TO ENTITY	CPA Firm providing accounting services to the District

PREPARER (SIGNATURE REQUIRED)

See Accountant's Compilation Report

	YES	NO	
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.]			If Yes, date filed:

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

*** Indicate Name of Fund**

NOTE: Attach additional sheets as necessary.

		Governmental Funds			Proprietary/Fiduciary Funds		
Line #	Description	General Fund	Fund*	Description	Fund*	Fund*	Please use this space to provide explanation of any items on this page
	Assets			Assets			
1-1	Cash & Cash Equivalents	$ 1,432	$ -	Cash & Cash Equivalents	$ -	$ -	
1-2	Investments	$ -	$ -	Investments	$ -	$ -	
1-3	Receivables	$ -	$ -	Receivables	$ -	$ -	
1-4	Due from Other Entities or Funds	$ 178	$ -	Due from Other Entities or Funds	$ -	$ -	
1-5	Property Tax Receivable	$ -	$ -	Other Current Assets [specify…]			
	All Other Assets [specify…]				$ -	$ -	
1-6	Prepaid Insurance	$ 10,605	$ -	Total Current Assets	$ -	$ -	
1-7		$ -	$ -	Capital & Right to Use Assets, net (from Part 6-4)	$ -	$ -	
1-8		$ -	$ -	Other Long Term Assets [specify…]	$ -	$ -	
1-9		$ -	$ -		$ -	$ -	
1-10		$ -	$ -		$ -	$ -	
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS	$ 12,215	$ -	(add lines 1-1 through 1-10) TOTAL ASSETS	$ -	$ -	
	Deferred Outflows of Resources:			Deferred Outflows of Resources			
1-12	[specify…]	$ -	$ -	[specify…]	$ -	$ -	
1-13	[specify…]	$ -	$ -	[specify…]	$ -	$ -	
1-14	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS	$ -	$ -	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS	$ -	$ -	
1-15	TOTAL ASSETS AND DEFERRED OUTFLOWS	$ 12,215	$ -	TOTAL ASSETS AND DEFERRED OUTFLOWS	$ -	$ -	
	Liabilities			Liabilities			
1-16	Accounts Payable	$ 12,252	$ -	Accounts Payable	$ -	$ -	
1-17	Accrued Payroll and Related Liabilities	$ -	$ -	Accrued Payroll and Related Liabilities	$ -	$ -	
1-18	Unearned Property Tax Revenue	$ -	$ -	Accrued Interest Payable	$ -	$ -	
1-19	Due to Other Entities or Funds		$ -	Due to Other Entities or Funds	$ -	$ -	
1-20	All Other Current Liabilities	$ -	$ -	All Other Current Liabilities	$ -	$ -	
1-21	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	$ 12,252	$ -	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	$ -	$ -	
1-22	All Other Liabilities [specify…]	$ -	$ -	Proprietary Debt Outstanding (from Part 4-4)	$ -	$ -	
1-23		$ -	$ -	Other Liabilities [specify…]:	$ -	$ -	
1-24		$ -	$ -		$ -	$ -	
1-25		$ -	$ -		$ -	$ -	
1-26		$ -	$ -		$ -	$ -	
1-27	(add lines 1-21 through 1-26) TOTAL LIABILITIES	$ 12,252	$ -	(add lines 1-21 through 1-26) TOTAL LIABILITIES	$ -	$ -	
	Deferred Inflows of Resources:			Deferred Inflows of Resources			
1-28	Deferred Property Taxes	$ -	$ -	Pension/OPEB Related	$ -	$ -	
1-29	Lease related (as lessor)	$ -	$ -	Other [specify…]	$ -	$ -	
1-30	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	$ -	$ -	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	$ -	$ -	
	Fund Balance			Net Position			
1-31	Nonspendable Prepaid	$ 10,605	$ -	Net Investment in Capital Assets	$ -	$ -	
1-32	Nonspendable Inventory	$ -	$ -				
1-33	Restricted [TABOR]	$ 950	$ -	Emergency Reserves	$ -	$ -	
1-34	Committed [specify…]	$ -	$ -	Other Designations/Reserves	$ -	$ -	
1-35	Assigned [Assigned for subsequent year expenditure]	$ 100	$ -	Restricted	$ -	$ -	
1-36	Unassigned:	$ (11,692)	$ -	Undesignated/Unreserved/Unrestricted	$ -	$ -	
1-37	Add lines 1-31 through 1-36 This total should be the same as line 3-33 TOTAL FUND BALANCE	$ (37)	$ -	Add lines 1-31 through 1-36 This total should be the same as line 3-33 TOTAL NET POSITION	$ -	$ -	
1-38	Add lines 1-27, 1-30 and 1-37 This total should be the same as line 1-15 TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND BALANCE	$ 12,215	$ -	Add lines 1-27, 1-30 and 1-37 This total should be the same as line 1-15 TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET POSITION	$ -	$ -	

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

Line #	Description	Governmental Funds: General Fund	Governmental Funds: Fund*	Description	Proprietary/Fiduciary Funds: Fund*	Proprietary/Fiduciary Funds: Fund*	Please use this space to provide explanation of any items on this page
	Tax Revenue			Tax Revenue			
2-1	Property [include mills levied in Question 10-6]	$ -	$ -	Property [include mills levied in Question 10-6]	$ -	$ -	
2-2	Specific Ownership	$ -	$ -	Specific Ownership	$ -	$ -	
2-3	Sales and Use Tax	$ -	$ -	Sales and Use Tax	$ -	$ -	
2-4	Other Tax Revenue [specify...]:	$ -	$ -	Other Tax Revenue [specify...]:	$ -	$ -	
2-5		$ -	$ -		$ -	$ -	
2-6		$ -	$ -		$ -	$ -	
2-7		$ -	$ -		$ -	$ -	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	$ -	$ -	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	$ 100	$ -	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 [Public Improvement Fees]:	$ 200,120	$ -	All Other [specify...]:	$ -	$ -	
2-23	Other Income	$ 1,574	$ -		$ -	$ -	
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES	$ 201,794	$ -	Add lines 2-8 through 2-23 TOTAL REVENUES	$ -	$ -	
	Other Financing Sources			Other Financing Sources			
2-25	Debt Proceeds	$ -	$ -	Debt Proceeds	$ -	$ -	
2-26	Lease Proceeds	$ -	$ -	Lease Proceeds	$ -	$ -	
2-27	Developer Advances	$ 55,341	$ -	Developer Advances	$ -	$ -	
2-28	Other [specify...]: Transfers from other Districts	$ 30,779	$ -	Other [specify...]:	$ -	$ -	
2-29	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES	$ 86,120	$ -	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES	$ -	$ -	GRAND TOTALS
2-30	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES	$ 287,914	$ -	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES	$ -	$ -	$ 287,914

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/EXPENSES

Line #	Description	Governmental Funds: General Fund	Governmental Funds: Fund*	Description	Proprietary/Fiduciary Funds: Fund*	Proprietary/Fiduciary Funds: Fund*	Please use this space to provide explanation of any items on this page
	Expenditures			Expenses			
3-1	General Government	$ 78,860	$ -	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	Transfers to other districts	$ 200,120	$ -	Utilities	$ -	$ -	
3-11	Other [specify...]:	$ -	$ -	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 (should match amount in 4-4)	$ -	$ -	Principal (should match amount in 4-4)	$ -	$ -	
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		$ -	$ -		$ -	$ -	GRAND TOTAL
3-22	Add lines 3-1 through 3-21 TOTAL EXPENDITURES	$ 278,980	$ -	Add lines 3-1 through 3-21 TOTAL EXPENSES	$ -	$ -	$ 278,980
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/Amortization	$ -	$ -	
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, 3-18)	$ -	$ -	
3-29	(Add lines 3-23 through 3-28) TOTAL TRANSFERS AND OTHER EXPENDITURES	$ -	$ -	(Line 3-27, plus line 3-28, less line 3-26, less line 3-25, plus line 3-24) TOTAL GAAP RECONCILING ITEMS	$ -	$ -	
3-30	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures Line 2-29, less line 3-22, less line 3-29	$ 8,934	$ -	Net Increase (Decrease) in Net Position Line 2-29, less line 3-22, plus line 3-29, less line 3-23	$ -	$ -	
3-31	Fund Balance, January 1 from December 31 prior year report	$ (8,971)	$ -	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 Lines 3-30, 3-31, and 3-32 This total should be the same as line 1-37.	$ (37)	$ -	Net Position, December 31 Sum of Lines 3-30, 3-31, and 3-32 This total should be the same as line 1-37.	$ -	$ -	

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?		
4-2	Is the debt repayment schedule attached? If no, MUST explain:		
	N/A - Developer advances will be repaid if and when funds are available		
4-3	Is the entity current in its debt service payments? If no, MUST explain:		
	N/A - Developer advances will be repaid if and when funds are available		

Please use this space to provide any explanations or comments:

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	$ -	$ -	$ -	$ -
Lease Liabilities	$ -	$ -	$ -	$ -
Developer Advances	$ 338,828	$ 55,341	$ -	$ 394,169
Other (specify):	$ -	$ -	$ -	$ -
TOTAL	$ 338,828	$ 55,341	$ -	$ 394,169

*must agree 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 [Section 29-1-605(2) C.R.S.]?			
If yes:	How much?	$ 2,260,000,000		
	Date the debt was authorized:	11/4/2014		
4-6	Does the entity intend to issue debt within the next calendar year?			
If yes:	How much?	$ -		
4-7	Does the entity have debt that has been refinanced that it is still responsible for?			
If yes:	What is the amount outstanding?	$ -		
4-8	Does the entity have any lease agreements?			
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?			
	What are the annual lease 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	$ 501	
5-2	Certificates of deposit	$ -	
	TOTAL CASH DEPOSITS		$ 501
	Investments (if investment is a mutual fund, please list underlying investments):		
5-3	CSAFE	$ 931	
		$ -	
		$ -	
		$ -	
	TOTAL INVESTMENTS		$ 931
	TOTAL CASH AND INVESTMENTS		$ 1,432

Please use this space to provide any explanations or comments:

	Please answer the following question by marking in the appropriate box	YES	NO	N/A
5-4	Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?			
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:			

PART 6 - CAPITAL AND RIGHT-TO-USE ASSETS

	Please answer the following question by marking in the appropriate box	YES	NO
6-1	Does the entity have capitalized assets?	:I	
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:	:I	

Please use this space to provide any explanations or comments:

6-3

Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS:	Balance - beginning of the year 1	Additions 2	Deletions	Year-End Balance
Land	$ 186,135	$ -	$ -	$ 186,135
Buildings	$ -	$ -	$ -	$ -
Machinery and equipment	$ -	$ -	$ -	$ -
Furniture and fixtures	$ -	$ -	$ -	$ -
Infrastructure	$ -	$ -	$ -	$ -
Construction In Progress (CIP)	$ -	$ -	$ -	$ -
Leased Right-to-Use Assets	$ -	$ -	$ -	$ -
Intangible Assets	$ -	$ -	$ -	$ -
Other (explain): Water and Sewer	$ 42,700	$ -	$ -	$ 42,700
Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)	$ -	$ -	$ -	$ -
Accumulated Depreciation (Enter a negative, or credit, balance)	$ -	$ -	$ -	$ -
TOTAL	$ 228,835	$ -	$ -	$ 228,835

6-4

Complete the following Capital & Right-To-Use 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)	$ -	$ -	$ -	$ -
Leased Right-to-Use Assets	$ -	$ -	$ -	$ -
Intangible Assets	$ -	$ -	$ -	$ -
Other (explain):	$ -	$ -	$ -	$ -
Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)	$ -	$ -	$ -	$ -
Accumulated Depreciation (Enter a negative, or credit, balance)	$ -	$ -	$ -	$ -
TOTAL	$ -	$ -	$ -	$ -

* Must agree to prior year-end balance
- Generally capital asset additions should be reported at capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy

PART 7 - PENSION INFORMATION

	*	YES	NO
7-1	Does the entity have an "old hire" firefighters' pension plan?	I	
7-2	Does the entity have a volunteer firefighters' pension plan?	I	
If yes:	Who administers the plan?	I	

Please use this space to provide any explanations or comments:

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?	$ -

PART 8 - BUDGET INFORMATION

Please answer the following question by marking in the appropriate box — YES / NO / N/A

Please use this space to provide any explanations or comments:

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:**

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 appropriated for each fund separately for the year reported**

Governmental/Proprietary Fund Name	Total Appropriations By Fund
General Fund - Amended	$ 287,150
	$ -
	$ -
	$ -

PART 9 - TAX PAYER'S BILL OF RIGHTS (TABOR)

Please answer the following question by marking in the appropriate box — YES / NO

Please use this space to provide any explanations or comments:

9-1 **Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]?**

Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent emergency reserve requirement. All governments should determine if they meet this requirement of TABOR.

PART 10 - GENERAL INFORMATION

Please answer the following question by marking in the appropriate box — YES / NO

Please use this space to provide any explanations or comments:

10-1 **Is this application for a newly formed governmental entity?**

If yes: **Date of formation:**

10-2 **Has the entity changed its name in the past or current year?**

If Yes: **NEW name**

PRIOR name

10-3 **Is the entity a metropolitan district?**

10-4 **Please indicate what services the entity provides:**

See Below

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:**

Consolidated Service Plan with The Canyons Metropolitan District Nos. 2-5 and 8-11

10-6 **Does the entity have a certified mill levy?**

If yes: **Please provide the number of mills levied for the year reported (do not enter $ amounts):**

Bond Redemption mills	0.000
General/Other mills	0.000
Total mills	0.000

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

10-4: Streets, mosquito control, water, traffic control, storm/sanitary sewer, parks & recreation, transportation, television translation, and fire protection/emergency medical services.

OSA USE ONLY

Entity Wide:			**General Fund**			**Governmental Funds**			**Notes**
Unrestricted Cash & Investments	$	1,432	Unrestricted Fund Balan	$	(11,592)	Total Tax Revenue	$	-	
Current Liabilities	$	12,252	Total Fund Balance	$	(37)	Revenue Paying Debt Service	$	-	
Deferred Inflow	$	-	PY Fund Balance	$	(8,971)	Total Revenue	$	287,914	
			Total Revenue	$	287,914	Total Debt Service Principal	$	-	
			Total Expenditures	$	278,980	Total Debt Service Interest	$	-	
Governmental			Interfund In	$	-				
Total Cash & Investments	$	1,432	Interfund Out	$	-	**Enterprise Funds**			
Transfers In	$	-	**Proprietary**			Net Position	$	-	
Transfers Out	$	-	Current Assets	$	-	PY Net Position	$	-	
Property Tax	$	-	Deferred Outflow	$	-	**Government-Wide**			
Debt Service Principal	$	-	Current Liabilities	$	-	Total Outstanding Debt	$	394,169	
Total Expenditures	$	278,980	Deferred Inflow	$	-	Authorized but Unissued	$	2,260,000,000	
Total Developer Advances	$	-	Cash & Investments	$	-	Year Authorized		11/4/2014	
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 body By signing, each individual member is certifying they are a duly elected or appointed officer of the local government. Governing members may be verified. Also by signing, the individual 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 <u>ALL</u> members of the governing body below.	A <u>MAJORITY</u> of the members of the governing body must complete and sign in the column below.
1	Full Name **Jonathan Alpert**	I, Jonathan Alpert, 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: May 2025
2	Full Name **Brian Alpert**	I, Brian Alpert, 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 DocuSigned by: Brian Alpert A7BB7F3B14E14D5... Date: 3/29/2023 My term Expires: May 2025
3	Full Name **Darren Everett**	I, Darren Everett, 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 DocuSigned by: Darren Everett 99E80B0896074EC... Date: 3/27/2023 My term Expires: May 2023
4	Full 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	Full 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	Full 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	Full 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:________

CliftonLarsonAllen LLP
8390 East Crescent Pkwy., Suite 300
Greenwood Village, CO 80111

phone 303-779-5710 fax 303-779-0348
CLAconnect.com

Accountant's Compilation Report

Board of Directors
The Canyons Metropolitan District No. 1
Douglas County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of The Canyons Metropolitan District No. 1 as of and for the year ended December 31, 2022, included in the accompanying prescribed form. 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 accompanying prescribed 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 included in the accompanying prescribed form.

The Application for Exemption from Audit is presented in accordance with the requirements of the Colorado Office of the State Auditor, which differ from accounting principles generally accepted in the United States of America.

This report is intended solely for the information and use of the Colorado Office of the State Auditor and is not intended to be and should not be used by anyone other than this specified party.

We are not independent with respect to The Canyons Metropolitan District No. 1.

CliftonLarsonAllen LLP

Greenwood Village, Colorado
March 22, 2023

DocuSign

Certificate Of Completion

Envelope Id: AC073EADC44C4B67964ACF7597A9DDC4		Status: Completed
Subject: Complete with DocuSign: CMD1 - 2022 Audit Exemption.pdf		
Client Name: The Canyons Metropolitan District No. 1		
Client Number: A520181		
Source Envelope:		
Document Pages: 10	Signatures: 2	Envelope Originator:
Certificate Pages: 5	Initials: 0	CJ Cook
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Brian Alpert brian@alperthomes.com VP 8850 Xenia LLC Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Accepted: 3/29/2023 11:34:05 AM ID: 56b0aa70-0b7d-41de-b43e-d7fc1d2fc7f2	DocuSigned by: Brian Alpert A78B7F5B14E14D9... Signature Adoption: Pre-selected Style Using IP Address: 76.14.1.154 Signed using mobile	Sent: 3/27/2023 2:17:27 PM Resent: 3/29/2023 9:31:06 AM Viewed: 3/29/2023 11:39:40 AM Signed: 3/29/2023 11:39:47 AM
Darren Everett darren@twoarrowsgroup.com Manager Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Accepted: 3/27/2023 2:20:34 PM ID: 2869e49b-8fa4-4b5d-ae22-1fa80cd7b238	DocuSigned by: Darren Everett 99E80B0696074EC... Signature Adoption: Pre-selected Style Using IP Address: 71.229.194.37	Sent: 3/27/2023 2:17:27 PM Viewed: 3/27/2023 2:20:34 PM Signed: 3/27/2023 2:20:43 PM

In Person Signer Events	Signature	Timestamp

Editor Delivery Events	Status	Timestamp

Agent Delivery Events	Status	Timestamp

Intermediary Delivery Events	Status	Timestamp

Certified Delivery Events	Status	Timestamp

Carbon Copy Events	Status	Timestamp

Witness Events	Signature	Timestamp

Notary Events	Signature	Timestamp

Envelope Summary Events	Status	Timestamps

Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	3/27/2023 2:17:28 PM
Envelope Updated	Security Checked	3/29/2023 11:47:52 AM
Certified Delivered	Security Checked	3/27/2023 2:20:34 PM
Signing Complete	Security Checked	3/27/2023 2:20:43 PM
Completed	Security Checked	3/29/2023 11:47:52 AM

Payment Events	Status	Timestamps

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