QUESTIONS? Email: osa.lg@coleg.gov OR Phone: 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

Failure to file an application or denial of the request could cause the local government to lose its exemption from audit for that year and the ensuing year.

In that event, AN AUDIT SHALL BE REQUIRED.

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT	Western Fremont Fire Protection District
ADDRESS	P. O. Box 121
	Coaldale, CO 81222-0121
CONTACT PERSON	John Walker
PHONE	719-942-3687
EMAIL	walkermoore2@hotmail.com

For the Year Ended 12/31/22 or fiscal year ended:

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:	Byron Alsup
TITLE	Treasurer
FIRM NAME (if applicable)	
ADDRESS	P. O. Box 121, Coaldale, CO 81222-0121
PHONE	719-942-3689
DATE PREPARED	18 Mar 23

PREPARER (SIGNATURE REQUIRED)

Byron Alsup

Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types	GOVERNMENTAL (MODIFIED ACCRUAL BASIS)	PROPRIETARY (CASH OR BUDGETARY BASIS)
	X	

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)	$ 36,404	
2-2		Specific ownership	$ 4,825	
2-3		Sales and use	$ -	
2-4		Other (specify):	$ 1,870	Interest & Donations
2-5	Licenses and permits		$ -	
2-6	Intergovernmental:	Grants	$ 21,830	
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	uld 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		$ 64,929

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		$ 988	
3-2	Salaries		$ -	
3-3	Payroll taxes		$ -	
3-4	Contract services		$ -	
3-5	Employee benefits		$ -	
3-6	Insurance		$ 7,499	
3-7	Accounting and legal fees		$ -	
3-8	Repair and maintenance		$ 6,001	
3-9	Supplies		$ 5,987	
3-10	Utilities and telephone		$ 4,561	
3-11	Fire/Police		$ -	
3-12	Streets and highways		$ -	
3-13	Public health		$ -	
3-14	Capital outlay		$ -	
3-15	Utility operations		$ -	
3-16	Culture and recreation		$ -	
3-17	Debt service principal	ould agree with Part 4)	$ -	
3-18	Debt service interest		$ -	
3-19	Repayment of Developer Advance Principal	uld agree with line 4-4)	$ -	
3-20	Repayment of Developer Advance Interest		$ -	
3-21	Contribution to pension plan	ıould agree to line 7-2)	$ -	
3-22	Contribution to Fire & Police Pension Assoc.	ıould agree to line 7-2)	$ -	
3-23	Other (specify):		$ 2,722	SDA membership, County Commissions Fuel
3-24			$ -	
3-25			$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES/EXPENSES		$ 27,758	

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.		☒
4-2	Is the debt repayment schedule attached? If no, MUST explain: NA		
4-3	Is the entity current in its debt service payments? If no, MUST explain: NA		

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	$ -	$ -	$ -	$ -
Lease Liabilities	$ -	$ -	$ -	$ -
Developer Advances	$ -	$ -	$ -	$ -
Other (specify):	$ -	$ -	$ -	$ -
TOTAL	$ -	$ -	$ -	$ -

*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?			☒
If yes:	How much?	$ -		
	Date the debt was authorized:			
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?	Type 6 Engine (FEPP)	
	What is the original date of the lease?	2022	
	Number of years of lease?	annual	
	Is the lease subject to annual appropriation?	no	
	What are the annual lease payments?		$ 200.00

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	$ 108,565	
5-2	Certificates of deposit	$ 91,692	
	Total Cash Deposits		$ 200,257
	Investments (if investment is a mutual fund, please list underlying investments):		
5-3		$ -	
		$ -	
		$ -	
		$ -	
	Total Investments		$ -
	Total Cash and Investments		$ 200,257

	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.?			
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 use this space to provide any explanations:

PART 6 - CAPITAL AND RIGHT-TO-USE 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 & right-to-use assets table:	Balance - beginning of the year*	Additions (Must be included in Part 3)	Deletions	Year-End Balance
Land	$ -	$ -	$ -	
Buildings	$ -	$ -	$ -	$ 284,634
Machinery and equipment	$ -	$ -	$ -	$ 201,000
Furniture and fixtures	$ -	$ -	$ -	$ 400
Infrastructure	$ -	$ -	$ -	$ -
Construction In Progress (CIP)	$ -	$ -	$ -	$ -
Leased Right-to-Use Assets	$ -	$ -	$ -	$ -
Other (explain):	$ -	$ -	$ -	$ -
Accumulated Depreciation/Amortization (Please enter a negative, or credit, balance)	$ -	$ -	$ -	$ -
TOTAL	$ -	$ -	$ -	$ 486,034

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" firefighters' pension plan?		☒
7-2	Does the entity have a volunteer firefighters' 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 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.?	☒		
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:

Governmental/Proprietary Fund Name	Total Appropriations By Fund
General Operating Fund	$ 41,400
Major Improvement Fund	$ 27,040
Emergency Reserve Fund	$ 1,200

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)]?	☒	

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?		☒
If yes:	Date of formation:		
10-2	Has the entity changed its name in the past or current year?		☒
If yes:	Please list the NEW name & PRIOR name:		
10-3	Is the entity a metropolitan district?		☒
	Please indicate what services the entity provides:		
10-4	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:		
10-5	Has the district filed a *Title 32, Article 1 Special District Notice of Inactive Status* during the year?		☒
If yes:	Date Filed:		
10-6	Does the entity have a certified Mill Levy?	☒	

If yes:

Please provide the following mills levied for the year reported (do not report $ amounts):

Bond Redemption mills	-
General/Other mills	-
Total mills	3.992

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?	x	

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 **John Walker**	I John Walker, 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 JOHN WALKER Date: 3-20-23 My term Expires: May 6, 2025
Board Member 2	Print Board Member's Name **Byron Alsup**	Byron Alsup, 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 Byron Alsup Date: 3-20-23 My term Expires: May 2, 2023
Board Member 3	Print Board Member's Name **Will Biedermann**	I Will Biedermann, 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: 3-20-23 My term Expires: May 6, 2025
Board Member 4	Print Board Member's Name **Michelle Sue Smith**	I Michelle Sue Smith, 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 Michelle Sue Smith Date: 3/27/23 My term Expires: May 6, 2025
Board Member 5	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 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: _____

RESOLUTION/ORDINANCE FOR EXEMPTION FROM AUDIT

(Pursuant to Section 29-1-604, C.R.S.)

A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR FISCAL YEAR **2022** FOR THE **Western Fremont Fire Protection District (Western Fremont FPD),** STATE OF COLORADO.

WHEREAS, the **Board of Directors** of **Western Fremont FPD** wishes to claim exemption from the audit requirements of Section 29-1-603, C.R.S.; and

WHEREAS, Section 29-1-604, C.R.S., states that any local government where neither revenues nor expenditures exceed seven hundred and fifty thousand dollars may, with the approval of the State Auditor, be exempt from the provision of Section 29-1-603, C.R.S.; and

(1)WHEREAS, neither revenue nor expenditures for **Western Fremont FPD** exceeded $100,000 for Fiscal Year **2022** and

WHEREAS, an application for exemption from audit for **Western Fremont FPD** has been prepared by **Byron Alsup** a person skilled in governmental accounting; and

WHEREAS, said application for exemption from audit has been completed in accordance with regulations, issued by the State Auditor.

NOW THEREFORE, be it resolved/ordained by the **Board of Directors** of the **Western Fremont FPD** that the application for exemption from audit for **Western Fremont FPD** for the Fiscal Year ended **December 31, 2022** has been personally reviewed and is hereby approved by a majority of the **Board of Directors** of the **Western Fremont FPD** that those members of the **Board of Directors** have signified their approval by signing below; and that this resolution shall be attached to, and shall become a part of, the application for exemption from audit of the **Western Fremont FPD** for the fiscal year ended **December 31, 2022**

ADOPTED THIS **20** day of **March** A.D. **2023**

John Walker, Chairman

Mayor/President/Chairman, etc.

ATTEST:

Byron Alsup, Secretary

Town Clerk, Secretary, etc.

Type or Print Names of Members of Governing Body	Date Term Expires	Signature
John Walker	**May 6, 2025**	JOHN WALKER
Byron Alsup	**May 2, 2023**	Byron Alsup
Will Biedermann	**May 6, 2025**	
Michelle Sue Smith	**May 6, 2025**	