APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT	**Grandview Reserve Metropolitan District No. 2**	**For the Year Ended**
ADDRESS	**121 S Tejon Street**	**12/31/24**
	Suite 1100	**or fiscal year ended:**
	Colorado Springs, CO 80903	
CONTACT PERSON	**Carrie Bartow**	
PHONE	**719-635-0330**	
EMAIL	**carrie.bartow@claconnect.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:	Carrie Bartow
TITLE	Accountant for the District
FIRM NAME (if applicable)	CliftonLarsonAllen LLP
ADDRESS	121 S Tejon Street, Suite 1100, Colorado Springs, CO 80903
PHONE	719-635-0330

PREPARER (SIGNATURE REQUIRED)	**DATE PREPARED** (No exemption shall be granted prior to the close of said fiscal year)
See Attached Accountant's Compilation Report.	2/12/2025

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

PART 2 - REVENUES

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 the nearest dollar	Please use this space to provide any necessary explanations
2-1	Taxes:	Property	(report mills levied in question 10-7)	$ -	
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			$ -	
2-15	Debt proceeds		(should agree to table 4-4, column 'Issued during year')	$ -	
2-16	Lease proceeds			$ -	
2-17	Developer Advances received		(should agree to table 4-4, column 'Issued during year')	$ -	
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				$ -	
2-25				$ -	
2-26		(add lines 2-1 through 2-25)	TOTAL REVENUES	$ -	

PART 3 - EXPENDITURES/EXPENSES

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 the 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		$ -	
3-7	Accounting and legal fees		$ -	
3-8	Repair and maintenance		$ -	
3-9	Supplies		$ -	
3-10	Utilities and telephone		$ -	
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	(should agree to table 4-4, column 'Retired during year')	$ -	
3-18	Debt service interest		$ -	
3-19	Repayment of Developer Advance Principal	(should agree to table 4-4, column 'Retired during year')	$ -	
3-20	Repayment of Developer Advance Interest		$ -	
3-21	Contribution to pension plan		$ -	
3-22	Contribution to Fire & Police Pension Assoc.		$ -	
3-23	Other (specify):		$ -	
3-24			$ -	
3-25			$ -	
3-26			$ -	
3-27			$ -	
3-28	(add lines 3-1 through 3-27)	TOTAL EXPENDITURES/EXPENSES	$ -	

If TOTAL REVENUES (Line 2-26) or TOTAL EXPENDITURES (Line 3-28) 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 'No' is checked, skip to question 4-5)* *(If 'Yes' is checked, please attach a copy of the entity's debt repayment schedule)*	☐	☑
4-2	Is the debt repayment schedule attached? If no, **MUST** explain below: The District has no outstanding debt.	☐	☑
4-3	Is the entity current in its debt service payments? If no, **MUST** explain below: The District has no outstanding debt.	☐	☑

4-4

Please complete the following debt schedule, if applicable: (please only include principal amounts) (enter all amounts 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 & SBITA** Liabilities [GASB 87 & 96]	$ -	$ -	$ -	$ -
Developer Advances	$ -	$ -	$ -	$ -
Other (specify):	$ -	$ -	$ -	$ -
TOTAL	$ -	$ -	$ -	$ -

**Subscription-Based Information Technology Arrangements

*Must agree to prior year-end balance

	Please answer the following questions by marking the appropriate boxes.		Yes	No
4-5	Does the entity have any authorized but unissued debt as of its fiscal year-end?		☑	☐
	How much?	$ 7,650,000,000		
	Date the debt was authorized:	11/2/2021		
NEW 4-6	Is the authorized but unissued debt further limited by the entity's most recent Service Plan?		☑	☐
If yes:	How much?	$ 295,000,000		
	Date of the most recent Service Plan:	7/20/2021		
4-7	Does the entity intend to issue debt within the next calendar year?		☐	☑
If yes:	How much?	$ -		
4-8	Does the entity have debt that has been refinanced that it is still responsible for?		☐	☑
If yes:	What is the amount outstanding?	$ -		
4-9	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 4 - Please use this space to provide any explanations/comments or attach separate documentation, if needed

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	$ -	
5-2	Certificates of deposit	$ -	
	TOTAL CASH DEPOSITS		$ -
5-3	Investments (if investment is a mutual fund, please list underlying investments):		
		$ -	
		$ -	
		$ -	
		$ -	
	TOTAL INVESTMENTS		$ -
	TOTAL CASH AND INVESTMENTS		$ -

	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.)?	☐	☐	☑

Part 5 - 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? *(If 'No' is checked, skip the rest of Part 6)*	☐	☑
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: N/A	☐	☑

6-3

Complete the following capital & right-to-use assets table:	Balance - beginning of the year*	Additions^	Deletions	Year-End Balance
Land	$ -	$ -	$ -	$ -
Buildings	$ -	$ -	$ -	$ -
Machinery and equipment	$ -	$ -	$ -	$ -
Furniture and fixtures	$ -	$ -	$ -	$ -
Infrastructure	$ -	$ -	$ -	$ -
Construction In Progress (CIP)	$ -	$ -	$ -	$ -
Leased & SBITA Right-to-Use Assets	$ -	$ -	$ -	$ -
Other (explain):	$ -	$ -	$ -	$ -
Accumulated Depreciation/Amortization (Please enter a negative, or credit, balance)	$ -	$ -	$ -	$ -
TOTAL	$ -	$ -	$ -	$ -

*Must agree to prior year-end balance

^Generally capital asset additions should be reported as capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy

Part 6 - Please use this space to provide any explanations/comments or attach documentation, if needed

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?	$ -

Part 7 - 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.? 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 (Please make sure each individual fund's appropriation agrees to how the budget was adopted. Do not combine funds)

Governmental/Proprietary Fund Name	Total Appropriations By Fund
General Fund	$0.00

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 entity from the spending limitations of TABOR does not exempt the entity from the 3 percent emergency reserve requirement. All entities should determine if they meet this requirement of TABOR.*	☑	☐

Part 9 - If no, MUST use this space to provide any explanations

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:**		
	Please list the 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:** See below.		
10-6	**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:**		
10-7	**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	-

		Yes	No	N/A
10-8	**If the entity is a Title 32 Special District formed after 7/1/2000, has the entity filed its preceding year annual report with the State Auditor as required under SB 21-262 [Section 32-1-207 C.R.S.]? If NO, please explain.**	☑	☐	☐

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

10-3 To provide financing for design, acquisition, construction and installation of essential public-purpose facilities such as water,sanitation, streets, traffic and safety controls, parks and recreation, public transportation, mosquito control, television relay and translation equipment, security, fire protection, and the operation and maintenance of the district.
10-4: The District was formed in conjunction with Grandview Reserve Metropolitan Districts No. 1 and 3-4 to provide the services listed above.

PART 11 - GOVERNING BODY APPROVAL			
	Please answer the following question by marking in the appropriate box.	Yes	No
11-1	**If you plan to submit this form electronically, have you read the Electronic Signature Policy?**	☑	☐

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signature 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 two 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.

Docusign Envelope ID: AF4C4024-DB3C-4055-9131-5649144D3E26

Print or type the names of ALL members of current governing body below.
A MAJORITY of the members of the governing body must sign below.

Board Member 1	**Board Member's Name:** I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: May 2025	Katie Cloud Signature ______ Date ______
Board Member 2	**Board Member's Name:** I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: May 2027	Samuel Howard Signature DocuSigned by: Samuel Howard F6BF025A7138475... Date 3/25/2025
Board Member 3	**Board Member's Name:** I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: May 2027	Paul Howard Signature DocuSigned by: 5F9662FE38D74FC... Date 3/25/2025
Board Member 4	**Board Member's Name:** I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: ______	Vacant Signature ______ Date ______
Board Member 5	**Board Member's Name:** I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: ______	Vacant Signature ______ Date ______
Board Member 6	**Board Member's Name:** I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: ______	______ Signature ______ Date ______
Board Member 7	**Board Member's Name:** I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: ______	______ Signature ______ Date ______

CliftonLarsonAllen LLP
claconnect.com

Accountant's Compilation Report

Board of Directors
Grandview Reserve Metropolitan District No. 2
El Paso County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Grandview Reserve Metropolitan District No. 2 as of and for the year ended December 31, 2024, 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 Grandview Reserve Metropolitan District No. 2.

CliftonLarsonAllen LLP

Colorado Springs, Colorado
February 17, 2025

docusign

Certificate Of Completion

Envelope Id: AF4C4024-DB3C-4055-9131-5649144D3E26 | Status: Completed

Subject: Complete with Docusign: Grandview Reserve MD No. 2 Audit Exemption 2024.pdf

Client Name: Grandview Reserve Metro District No. 2

Client Number: A120308

Source Envelope:

Document Pages: 8	Signatures: 2	Envelope Originator:
Certificate Pages: 5	Initials: 0	Ling Chen
AutoNav: Enabled		220 S 6th St Ste 300
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Signer Events

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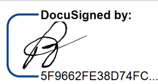
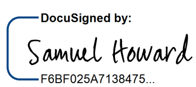
Paul Howard paulinfinity1@msn.com Manager Security Level: Email, Account Authentication (None)	 Signature Adoption: Drawn on Device Using IP Address: 174.128.255.186	Sent: 3/25/2025 11:09:46 AM Viewed: 3/25/2025 11:32:12 AM Signed: 3/25/2025 11:32:35 AM

Electronic Record and Signature Disclosure:
Accepted: 3/30/2023 1:53:19 PM
ID: eb3a4917-9151-48bb-a78e-7355306e1f6e

Signer Events	Signature	Timestamp
Samuel Howard howardsamuel3@gmail.com Land Development Company Security Level: Email, Account Authentication (None)	 Signature Adoption: Pre-selected Style Using IP Address: 184.99.35.15	Sent: 3/25/2025 11:09:46 AM Viewed: 3/25/2025 11:27:12 AM Signed: 3/25/2025 11:27:18 AM

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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	3/25/2025 11:09:46 AM
Envelope Updated	Security Checked	3/25/2025 3:58:16 PM
Certified Delivered	Security Checked	3/25/2025 11:27:12 AM
Signing Complete	Security Checked	3/25/2025 11:27:18 AM
Completed	Security Checked	3/25/2025 3:58:16 PM

Payment Events	Status	Timestamps

Electronic Record and Signature Disclosure

ELECTRONIC RECORD AND SIGNATURE DISCLOSURE

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If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

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If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

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Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

How to contact CliftonLarsonAllen LLP:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:
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To advise CliftonLarsonAllen LLP of your new email address

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ii. send us an email to BusinessTechnology@CLAconnect.com and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

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To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

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- Until or unless you notify CliftonLarsonAllen LLP as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by CliftonLarsonAllen LLP during the course of your relationship with CliftonLarsonAllen LLP.