APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

NAME OF GOVERNMENT	Seibert Fire Protection District
ADDRESS	PO Box 162
	Seibert CO 80834
CONTACT PERSON	Charlene Marzolf
PHONE	970-664-2323
EMAIL	

For the Year Ended
12/31/2024
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:	Julena Critchfield
TITLE	Accountant
FIRM NAME (if applicable)	Winfrey, County & Hays PC
ADDRESS	577 14th St Burlington CO 80807
PHONE	719-346-7216
RELATIONSHIP TO ENTITY	None

PREPARER (SIGNATURE REQUIRED)	DATE PREPARED (No exemption shall be granted prior to the close of said fiscal year)

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:
	☐	☑	

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Please indicate the name of the fund (i.e., General Fund, Debt Service Fund, etc.)

NOTE: Attach additional sheets as necessary.

Line #	Description	Governmental Funds (Modified Accrual Basis) General	Fund*	Fund*	Description	Proprietary/Fiduciary Funds (Cash or Budgetary Basis) Pension	Fund*
	Assets				**Assets**		
1-1	Cash & Cash Equivalents	$ 307,362	$ -	$ -	Cash & Cash Equivalents	$ 181,888	$ -
1-2	Investments	$ 48,557	$ -	$ -	Investments	$ -	$ -
1-3	Receivables	$ -	$ -	$ -	Receivables	$ 2,527	$ -
1-4	Due from Other Entities or Funds	$ -	$ -	$ -	Due from Other Entities or Funds	$ -	$ -
1-5	Property Tax Receivable	$ -	$ -	$ -	Other Current Assets [specify...]	$ -	$ -
	All Other Assets					$ -	$ -
1-6	Lease Receivable (as Lessor)	$ -	$ -	$ -	Total Current Assets	$ 184,415	$ -
1-7	Other [specify...]	$ -	$ -	$ -	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	$ 355,919	$ -	$ -	(add lines 1-1 through 1-10) TOTAL ASSETS	$ 184,415	$ -
	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	$ 355,919	$ -	$ -	TOTAL ASSETS AND DEFERRED OUTFLOWS	$ 184,415	$ -
	Liabilities				**Liabilities**		
1-16	Accounts Payable	$ 2,527	$ -	$ -	Accounts Payable	$ -	$ -
1-17	Accrued Payroll and Related Liabilities	$ -	$ -	$ -	Accrued Payroll and Related Liabilities	$ -	$ -
1-18	Unearned 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	$ 2,527	$ -	$ -	(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 1-22 through 1-26) TOTAL LIABILITIES	$ 2,527	$ -	$ -	(add lines 1-22 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	$ -	$ -	$ -	Net Investment in Capital and Right-to Use Assets	$ -	$ -
1-32	Nonspendable Inventory	$ -	$ -	$ -			
1-33	Restricted [Emergency Reserve]	$ 2,320	$ -	$ -	Emergency Reserves	$ -	$ -
1-34	Committed [specify...]	$ -	$ -	$ -	Other Designations/Reserves	$ -	$ -
1-35	Assigned [specify...]	$ -	$ -	$ -	Restricted	$ -	$ -
1-36	Unassigned:	$ 353,599	$ -	$ -	Undesignated/Unreserved/Unrestricted	$ 184,415	$ -
1-37	Add lines 1-31 through 1-36 This total should be the same as line 3-36 TOTAL FUND BALANCE	$ 355,919	$ -	$ -	Add lines 1-31 through 1-36 This total should be the same as line 3-36 TOTAL NET POSITION	$ 184,415	$ -
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	$ 358,446	$ -	$ -	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	$ 184,415	$ -

Please use this space to provide explanation of any item on this page

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

Line #	Description	Governmental Funds: General	Governmental Funds: Fund*	Governmental Funds: Fund*	Description	Proprietary/Fiduciary Funds: Pension	Proprietary/Fiduciary Funds: Fund*
	Tax Revenue				**Tax Revenue**		
2-1	Property [include mills levied in question 10-7]	$ 57,425	$ -	$ -	Property [include mills levied in question 10-7]	$ -	$ -
2-2	Specific Ownership	$ 7,117	$ -	$ -	Specific Ownership	$ -	$ -
2-3	Sales and Use Tax	$ -	$ -	$ -	Sales and Use Tax	$ -	$ -
2-4	Other Tax Revenue [SB22-238 Reimburesement]	$ 4,600	$ -	$ -	Other Tax Revenue [specify...]	$ -	$ -
2-5		$ -	$ -	$ -		$ -	$ -
2-6		$ -	$ -	$ -		$ -	$ -
2-7		$ -	$ -	$ -		$ -	$ -
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	$ 69,142	$ -	$ -	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	$ 12,743	$ -
2-14	Grants	$ -	$ -	$ -	Grants	$ -	$ -
2-15	Donations	$ 2,500	$ -	$ -	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	$ 4,522	$ -	$ -	Interest/Investment Income	$ 3,042	$ -
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...]	$ 1,181	$ -	$ -	All Other [misc...]	$ 111	$ -
2-23			$ -	$ -		$ -	$ -
2-24	Add lines 2-9 through 2-23 TOTAL REVENUES	$ 77,345	$ -	$ -	Add lines 2-9 through 2-23 TOTAL REVENUES	$ 15,896	$ -
	Other Financing Sources				**Other Financing Sources**		
2-25	Debt Proceeds	$ -	$ -	$ -	Debt Proceeds	$ -	$ -
2-26	Lease Proceeds	$ -	$ -	$ -	Lease Proceeds	$ -	$ -
2-27	Developer Advances	$ -	$ -	$ -	Developer Advances	$ -	$ -
2-28	Other [specify...]	$ -	$ -	$ -	Other [specify...]	$ -	$ -
2-29	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES	$ -	$ -	$ -	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES	$ -	$ -
2-30	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES	$ 77,345	$ -	$ -	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES	$ 15,896	$ -
2-31						GRAND TOTALS (ALL FUNDS)	$ 93,241

IF GRAND TOTAL REVENUES AND OTHER FINANCING SOURCES FOR ALL FUNDS (LINE 2-31) 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.

Please use this space to provide explanation of any item on this page

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

Line #	Description	Governmental Funds: General	Governmental Funds: Fund*	Governmental Funds: Fund*
	Expenditures			
3-1	General Government	$ -	$ -	$ -
3-2	Judicial	$ -	$ -	$ -
3-3	Law Enforcement	$ -	$ -	$ -
3-4	Fire	$ 30,966	$ -	$ -
3-5	Highways & Streets	$ -	$ -	$ -
3-6	Solid Waste	$ -	$ -	$ -
3-7	Contributions to Fire & Police Pension Assoc.	$ -	$ -	$ -
3-8	Health	$ -	$ -	$ -
3-9	Culture and Recreation	$ -	$ -	$ -
3-10	Transfers to other districts	$ -	$ -	$ -
3-11	Other [specify...]	$ -	$ -	$ -
3-12		$ -	$ -	$ -
3-13		$ -	$ -	$ -
3-14	Capital Outlay	$ -	$ -	$ -
	Debt Service			
3-15	Principal (should match amount in 4-4)	$ -	$ -	$ -
3-16	Interest	$ -	$ -	$ -
3-17	Bond Issuance Costs	$ -	$ -	$ -
3-18	Developer Principal Repayments	$ -	$ -	$ -
3-19	Developer Interest Repayments	$ -	$ -	$ -
3-20	All Other [specify...]	$ -	$ -	$ -
3-21		$ -	$ -	$ -
3-22		$ -	$ -	$ -
3-23		$ -	$ -	$ -
3-24	Add lines 3-1 through 3-23 TOTAL EXPENDITURES	$ 30,966	$ -	$ -
3-25				
3-26	Interfund Transfers (In)	$ -	$ -	$ -
3-27	Interfund Transfers Out	$ 7,449	$ -	$ -
3-28	Other Expenditures (Revenues)	$ -	$ -	$ -
3-29		$ -	$ -	$ -
3-30		$ -	$ -	$ -
3-31		$ -	$ -	$ -
3-32	(Add lines 3-26 through 3-31) TOTAL TRANSFERS AND OTHER EXPENDITURES	$ 7,449	$ -	$ -
3-33	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures Line 2-30, less line 3-24, less line 3-32	$ 38,930	$ -	$ -
3-34	Fund Balance, January 1 from December 31 prior year report	$ -	$ -	$ -
3-35	Prior Period Adjustment (MUST explain)	$ -	$ -	$ -
3-36	Fund Balance, December 31 Sum of Lines 3-33, 3-34, and 3-35 This total should be the same as line 1-37.	$ 38,930	$ -	$ -

Description	Proprietary/Fiduciary Funds: Pension	Proprietary/Fiduciary Funds: Fund*
Expenses		
General Operating & Administrative	$ 30	$ -
Salaries	$ -	$ -
Payroll Taxes	$ -	$ -
Contract Services	$ -	$ -
Employee Benefits	$ -	$ -
Insurance	$ -	$ -
Accounting and Legal Fees	$ -	$ -
Repair and Maintenance	$ -	$ -
Supplies	$ -	$ -
Utilities	$ -	$ -
Contributions to Fire & Police Pension Assoc.	$ -	$ -
Other [specify...]	$ -	$ -
	$ -	$ -
Capital Outlay	$ -	$ -
Debt Service		
Principal (should match amount in 4-4)	$ -	$ -
Interest	$ -	$ -
Bond Issuance Costs	$ -	$ -
Developer Principal Repayments	$ -	$ -
Developer Interest Repayments	$ -	$ -
All Other [specify...]Pension Paid	$ 4,868	$ -
	$ -	$ -
	$ -	$ -
	$ -	$ -
Add lines 3-1 through 3-23 TOTAL EXPENSES	$ 4,898	$ -
GRAND TOTAL (ALL FUNDS)		$ 35,864
Net Interfund Transfers (In) Out	$ -	$ -
Other [specify...][enter negative for expense]	$ 7,449	$ -
Depreciation/Amortization	$ -	$ -
Other Financing Sources (from line 2-28)	$ -	$ -
Capital Outlay (from line 3-14)	$ -	$ -
Debt Principal (from line 3-15, 3-18)	$ -	$ -
(Add lines 3-27, 3-30, and 3-31, subtract lines 3-28 and 3-29) TOTAL GAAP RECONCILING ITEMS	$ 7,449	$ -
Net Increase (Decrease) in Net Position Line 2-30, less line 3-24, plus line 3-32, less line 3-26	$ 18,447	$ -
Net Position, January 1 from December 31 prior year report	$ 165,968	$ -
Prior Period Adjustment (MUST explain)	$ -	$ -
Net Position, December 31 Sum of Lines 3-33, 3-34, and 3-35 This total should be the same as line 1-37.	$ 184,415	$ -

IF GRAND TOTAL EXPENDITURES FOR ALL FUNDS (Line 3-25) ARE 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.

Please use this space to provide explanation of any item on this page

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:	☐	☑
4-3	Is the entity current in its debt service payments? If no, **MUST** explain:	☐	☑

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) (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 [Section 29-1-605(2) C.R.S.]?	☐	☑
If yes:	How much? $ -		
	Date the debt was authorized:		
NEW 4-6	Is the authorized but unissued debt further limited by the entity's most recent Service Plan?	☐	☑
If yes:	How much? $ -		
	Date of the most recent Service Plan:		
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 5 - CASH AND INVESTMENTS

Please use this space to provide any explanations or comments

	Please provide the entity's cash deposit and investment balances.	Amount	Total
5-1	YEAR-END Total of ALL Checking and Savings accounts	$ 263,530	
5-2	Certificates of deposit	$ 225,720	
	TOTAL CASH DEPOSITS		$ 489,250
5-3	Investments (if investment is a mutual fund, please list underlying investments):		
	Charles Swab	$ 48,556	
		$ -	
		$ -	
		$ -	
	TOTAL INVESTMENTS		$ 48,556
	TOTAL CASH AND INVESTMENTS		$ 537,806

	Please answer the following questions 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 questions by marking in the appropriate box.		Yes	No	Please use this space to provide any explanations or comments
6-1	**Does the entity have capitalized 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:**	☑	☐	

6-3

Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS:	Balance - beginning of the year*	Additions^	Deletions	Year-End Balance
Land	$ 4,000	$ -	$ -	$ 4,000
Buildings	$ 64,296	$ -	$ -	$ 64,296
Machinery and equipment	$ 417,409	$ -	$ -	$ 417,409
Furniture and fixtures	$ 10,176	$ -	$ -	$ 10,176
Infrastructure	$ -	$ -	$ -	$ -
Construction In Progress (CIP)	$ -	$ -	$ -	$ -
Leased & SBITA Right-to-Use Assets	$ -	$ -	$ -	$ -
Intangible Assets	$ -	$ -	$ -	$ -
Other (explain):	$ -	$ -	$ -	$ -
Accumulated Amortization Right to Use Assets (Enter a negative, or credit, balance)	$ -	$ -	$ -	$ -
Accumulated Depreciation (Enter a negative, or credit, balance)	$ -	$ -	$ -	$ -
TOTAL	$ 495,881	$ -	$ -	$ 495,881

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 & SBITA Right-to-Use Assets	$ -	$ -	$ -	$ -
Intangible Assets	$ -	$ -	$ -	$ -
Other (explain):	$ -	$ -	$ -	$ -
Accumulated Amortization Right to Use 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 as capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy

PART 7 - PENSION INFORMATION

Please answer the following questions by marking in the appropriate box.		Yes	No	Please use this space to provide any explanations or comments
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?	Self Administered
Indicate the contributions from:	
Tax (property, SO, sales, etc.):	$ 7,445
State contribution amount:	$ 6,104
Other (gifts, donations, etc.):	
TOTAL	$ 13,549
What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?	$ 58

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 revenues and expenditures of more than $100,000 but not more than $750,000 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 or type the names of ALL members of the governing body below.
A MAJORITY of the members of the governing body must sign below.

Board Member 1	Board Member's Name:	Gerald Guy
	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: 5/29	Signature Gerald Guy Date 3/25/25
Board Member 2	Board Member's Name:	~~Ervin Jones~~ George Babbitt
	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: 5/27	Signature Date 3/25/25
Board Member 3	Board Member's Name:	Ryan Bancroft
	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 4	Board Member's Name:	Ryan Jarnagin
	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: 5/29	Signature Ryan Jarnagin Date 3/25/2025
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:	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

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**

(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	$ 36,250
Pension	$ 5,423
	$ -
	$
	$ -

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 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 10 - GENERAL INFORMATION

	Please answer the following questions 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:	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:			

Fire Protection

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:		
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 number of mills levied for the year reported (do not report $ amounts):		

Bond redemption mills	-
General/other mills	4.812
Total mills	4.812

	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

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 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 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.

OSA USE ONLY

Entity Wide:			**General Fund**			**Governmental Funds**	
Unrestricted Cash & Investments	$	537,806	Unrestricted Fund Balan	$	353,599	Total Tax Revenue	$ 69,142
Current Liabilities	$	2,527	Total Fund Balance	$	355,919	Revenue Paying Debt Service	$ -
Deferred Inflow	$	-	PY Fund Balance	$	-	Total Revenue	$ 77,345
			Total Revenue	$	77,345	Total Debt Service Principal	$ -
			Total Expenditures	$	30,966	Total Debt Service Interest	$ -
						Total Assets	$ 355,919
			Interfund In	$	-	Total Liabilities	$ 2,527
Governmental			Interfund Out	$	7,449		
Total Cash & Investments	$	355,919	**Proprietary**			**Enterprise Funds**	
Transfers In	$	-	Current Assets	$	184,415	Net Position	$ 184,415
Transfers Out	$	7,449	Deferred Outflow	$	-	PY Net Position	$ 165,968
Property Tax	$	57,425	Current Liabilities	$	-	**Government-Wide**	
Debt Service Principal	$	-	Deferred Inflow	$	-	Total Outstanding Debt	$ -
Total Expenditures	$	30,966	Cash & Investments	$	181,888	Authorized but Unissued	$ -
Total Developer Advances	$	-	Principal Expense	$	-	Year Authorized	1/0/1900
Total Developer Repayments	$	-	Total Expenses	$	4,898		