## **APPLICATION FOR EXEMPTION FROM AUDIT**

#### SHORT FORM

Altamira Metropolitan Dist No.1 NAME OF GOVERNMENT 304 Inverness Way South **ADDRESS** Suite 490 Englewood, CO 80112 **CONTACT PERSON** Diane Wheeler **PHONE** 303-689-0833

For the Year Ended 12/31/24 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: TITLE FIRM NAME (if applicable) **ADDRESS** 

**EMAIL** 

Diane Wheeler District Accountant Simmons & Wheeler, P.C.

Diane@simmonswheeler.com

304 Inverness Way South, Suite 490 Englewood, CO 80112

PHONE	303-689-0833	89-0833			
PREPARER (SIGNATURE REQUIRED)			(No exemption	ATE PREPARED on shall be granted prior to the se of said fiscal year)	
Qiane K Whuln		Ма	r 19, 2025		
Please indicate whether the following	9	GOVERNMENTAL (MODIFIED ACCRUAL BASIS)		PROPRIETARY (CASH OR BUDGETARY BASIS)	
using Governmental or Proprietary	fund types				

#### **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
2-1	Taxes: Property	(report mills levied in question 10-7)	\$ -	space to provide any necessary
2-2	Specific owr	nership	\$ -	explanations
2-3	Sales and us	se	\$ -	oxpidilation.
2-4	Other (speci	fy):	\$ -	
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')	\$ 12,014	
2-18	Proceeds from sale of capital ass	eets	\$ -	
2-19	Fire and police pension		\$ -	
2-20	Donations		\$ -	
2-21	Other (specify):		\$ -	
2-22	Change in Developer Advance re-	ceivable	\$ 22,587	
2-23			\$ -	
2-24			\$ -	
2-25			\$ -	]
2-26	(add I	ines 2-1 through 2-25) TOTAL REVENUES	\$ 34,601	

### **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
3-1	Administrative		\$ 1,320	space to provide
3-2	Salaries		-	any necessary explanations
3-3	Payroll taxes		-	CAPIGNATIONS
3-4	Contract services		-	
3-5	Employee benefits		-	
3-6	Insurance		\$ 2,961	]
3-7	Accounting and legal fees		\$ 15,515	]
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	(should agree to table 4-4,		]
3-19	Principal	column 'Retired during year')		
3-20	Repayment of Developer Advance	Interest	-	
3-21	Contribution to pension plan		-	
3-22	Contribution to Fire & Police Pens	ion 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	\$ 19,796	

	PART 4 - DEBT OUTSTANDING			<u> </u>			
	Please answer the following questions by marking th	e app	propriate box	es.	Yes		No
4-1	Does the entity have outstanding debt?				<b></b> ✓		
	(If 'No' is checked, skip to question 4-5) (If 'Yes' is checked, please attach a copy of the entity's debt repay.	mont	schadula)				
4-2	Is the debt repayment schedule attached? If no, MUST explai		,				7
	Developer advance subject to available funds				1		
					]		
4-3	Is the entity current in its debt service payments? If no, MUS	Гехр	lain below:				
4-4	Please complete the following debt schedule, if applicable:	Ou	tstanding at	Issued during	Retired during	Out	standing at
	(please only include principal amounts) (enter all amounts as positive numbers)		of prior year*	year	year		year-end
		Φ.		Φ.			
	General obligation bonds Revenue bonds	\$	-	\$ - \$ -	\$ - \$ -	\$   \$	-
	Notes/Loans	\$	-	\$ -	\$ -	\$	
	Lease & SBITA** Liabilities [GASB 87 & 96]	\$	-	\$ -	\$ -	\$	-
	Developer Advances	\$	416,806	\$ 12,014	\$ -	\$	428,820
	Other (specify):	\$	-	\$ -	\$ -	\$	-
**Subscrip	TOTAL stion-Based Information Technology Arrangements		416,806	\$ 12,014	<u> </u>	\$	428,820
Jubscrip	<u></u>			year-end balance			
	Please answer the following questions by marking th		•		Yes		No
4-5	Does the entity have any authorized but unissued debt as of	its fis			<b></b>		
	How much?		\$132,10		-		
	Date the debt was authorized:	41.	11/4/2		_		
NEW 4-6	Is the authorized but unissued debt further limited by the ent Plan?	ity's	most recent	Service	☑		
If yes:		\$		22,000,000.00	1		
,	Date of the most recent Service Plan:	-	10/6/2		1		
4-7	Does the entity intend to issue debt within the next calendar	vear'			, –		<b>V</b>
If yes:	How much?	\$		_	]		
4-8	Does the entity have debt that has been refinanced that it is s	till re	esponsible f	or?			7
If yes:	What is the amount outstanding?	\$		-	]		
4-9	Does the entity have any lease agreements?						<b>V</b>
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?						<b>2</b>
	What are the annual lease payments?	\$			]		
	Part 4 - Please use this space to provide any explanations/cor	nme	nts or attach	separate doc	umentation, if ı	neede	ed
	PART 5 - CASH AND	IN	VESTM	ENTS			
	Please provide the entity's cash deposit and inves	stmer	nt balances.		Amount		Total
5-1	YEAR-END Total of ALL Checking and Savings Accounts				\$ 1,581	_	
5-2	Certificates of deposit				\$ -		
			TOTAL CA	SH DEPOSITS		\$	1,581
5-3	Investments (if investment is a mutual fund, please list underlying	inves	stments):		l		
					\$ -		
					\$ -		
					\$ -	]	
					\$ -		
				NVESTMENTS		\$	-
	TOT	TAL (	CASH AND I	NVESTMENTS		\$	1,581
	Please answer the following questions by marking in the appro	opria	te boxes.	Yes	No		N/A
5-4	Are the entity's investments legal in accordance with Section	24-7	'5-601, et.	<b></b> ✓			
	seq., C.R.S.?				<b>-</b>		_
5-5	Are the entity's deposits in an eligible (Public Deposit Protect	tion /	Act) public	Į.			
	depository (Section 11-10.5-101, et seq. C.R.S.)?			_	_		_

	Please answer the following questions by marking in the	ne appr	opriate bo	xes.		١	es es	N	lo
-1	Does the entity have capital assets?							[	7
	(If 'No' is checked, skip the rest of Part 6)								
-2	Has the entity performed an annual inventory of capital assets 29-1-506, C.R.S.,? If no, MUST explain:	s in ac	cordance	with S	ection		V	[	_
-3	Complete the following capital & right-to-use assets table:	beginr	lance - ning of the rear*	Addi	itions^	Del	etions		r-End ance
	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 INFORMA	TIO	N			
	Please answer the following questions by marking in the appropriate bo		Yes	No		
7-1	Does the entity have an "old hire" firefighters' pension plan?				v	
7-2	Does the entity have a volunteer firefighters' pension plan?				<b>~</b>	
If yes:	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	INFORMA <sup>®</sup>	TION			
	Please answer the following questions by marking in the appr	opriate boxes.	Yes	No	N/A	
8-1	Did the entity file a budget with the Department of Local Affa current year in accordance with Section 29-1-113 C.R.S.? If no, MUST explain:	r in accordance with Section 29-1-113 C.R.S.?				
8-2	Did the entity pass an appropriations resolution, in accordan 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 Appropria	tions By Fund			
	General Fund	\$50,201.00				

	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)]?	Ø			
	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
<b>10-1</b> If yes:	Is this application for a newly formed governmental entity?  Date of formation:		☑
<b>10-2</b> If yes:	Has the entity changed its name in the past or current year?  Please list the NEW name:  Please list the PRIOR name:		Ø
10-3 10-4	Is the entity a metropolitan district? Please indicate what services the entity provides: Streets, water, parks and recreation	Ø	
<b>10-5</b> If yes:	Does the entity have an agreement with another government to provide services?  List the name of the other governmental entity and the services provided:		Ø
10-6	Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> 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:		
<b>10-7</b> If yes:	Does the entity have a certified mill levy?  Please provide the following mills levied for the year reported (do not report \$ amounts):	V	
	Bond redemption mills		-
	General/other mills		55.000
	Total mills		55.000
	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?	<b>☑</b>			

# 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.

	Print or type the names of <u>ALL</u> members of current governing body below.  A <u>MAJORITY</u> of the members of the governing body must sign below.						
	Board Member's Name:	David Duncan					
Board Member 1	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.	Signature David Duncan David Duncan (Mar 30, 2025 12:44 MDT)  Date					
	My term expires:2027	Date					
	Board Member's Name:	John Covert					
Board Member 2	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.	Signature					
	My term expires:2027	Date					
	Board Member's Name:	Todd Johnson					
Board Member 3	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.	Signature					
	My term expires:2027	Date Mar 19, 2025					
	Board Member's Name:	Vacant					
- 4	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.	Signature					
	My term expires:	Date					
	Board Member's Name:	Vacant					
Board Member 5	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.	Signature					
	My term expires:	Date					
	Board Member's Name:	Five member board					
Board Member 6	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.	Signature					
	My term expires:	Date					
	Board Member's Name:	Five member board					
Board Member 7	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.	Signature					
	My term expires:	Date					

# Altamira #1 2024

#### Interim Agreement Report

2025-03-31

Created: 2025-03-19

By: Diane Wheeler (diane@simmonswheeler.com)

Status: Out for Signature

Transaction ID: CBJCHBCAABAArJgnazh0hbhQJljCWpZQ2oafvuOgszb9

#### Agreement History

Agreement history is the list of the events that have impacted the status of the agreement prior to the final signature. A final audit report will be generated when the agreement is complete.

## "Altamira #1 2024" History

- Document created by Diane Wheeler (diane@simmonswheeler.com) 2025-03-19 11:05:46 PM GMT- IP address: 96.87.58.121
- Document emailed to Diane Wheeler (diane@simmonswheeler.com) for signature 2025-03-19 11:07:06 PM GMT
- Document emailed to john.covert@cushwake.com for signature 2025-03-19 11:07:06 PM GMT
- Document emailed to david@c3landllc.com for signature 2025-03-19 11:07:06 PM GMT
- Document emailed to todd@terraformas.com for signature 2025-03-19 11:07:07 PM GMT
- Document e-signed by Diane Wheeler (diane@simmonswheeler.com)

  Signature Date: 2025-03-19 11:07:12 PM GMT Time Source: server- IP address: 96.87.58.121
- Email viewed by john.covert@cushwake.com 2025-03-19 11:07:21 PM GMT- IP address: 172.203.161.82
- Email viewed by todd@terraformas.com
  2025-03-19 11:21:49 PM GMT- IP address: 172.226.137.1
- Signer todd@terraformas.com entered name at signing as Todd A. Johnson 2025-03-19 11:35:47 PM GMT- IP address: 15.181.16.199



- Document e-signed by Todd A. Johnson (todd@terraformas.com)

  Signature Date: 2025-03-19 11:35:49 PM GMT Time Source: server- IP address: 15.181.16.199
- Email viewed by david@c3landllc.com

  2025-03-28 4:30:54 PM GMT- IP address: 165.140.184.180
- Email viewed by john.covert@cushwake.com 2025-03-29 2:28:47 PM GMT- IP address: 172.200.138.255
- Email viewed by john.covert@cushwake.com 2025-03-30 2:21:42 PM GMT- IP address: 172.200.100.68
- Email viewed by david@c3landllc.com 2025-03-30 6:25:51 PM GMT- IP address: 165.140.184.180
- Signer david@c3landllc.com entered name at signing as David Duncan 2025-03-30 6:44:40 PM GMT- IP address: 165.140.184.180
- Document e-signed by David Duncan (david@c3landllc.com)

  Signature Date: 2025-03-30 6:44:42 PM GMT Time Source: server- IP address: 165.140.184.180
- Email viewed by john.covert@cushwake.com 2025-03-31 2:43:22 PM GMT- IP address: 57.151.78.25