APPLICATION FOR EXEMPTION FROM AUDIT - <u>SHORT FORM</u> - FOR GOVERNMENTS WITH REVENUES AND EXPENDITURES OF \$100,000 OR LESS

Name of Government:	Sweetgrass Metropolitan District No. 1	For the Fiscal Year
Address:	2500 Arapahoe Avenue, Suite 220	Ended December 31, 2012
	Boulder, CO 80302	or fiscal year ended:
Contact Person:	Lewis Holtsclaw	
Telephone:	303-442-2299	
Email:		
Fax:		

Return to:

Office of the State Auditor

Local Government Audit Division 225 E. 16th Ave., Suite 555 Denver, CO 80203

Fax: 303-866-4062 Email: OSA.LG@state.co.us

Call (303) 866-3338 if you need help completing this form.

PLEASE READ THE ABOVE INSTRUCTIONS BEFORE SUBMITTING

Section 29-1-604, C.R.S., outlines the provisions for an exemption from audit. Generally, any local government for which neither revenues nor expenditures exceed \$500,000 in any fiscal year may qualify for an exemption. If either revenues or expenditures are \$100,000 or greater, but not more than \$500,000, you may NOT use this form. Please use the LONG FORM of this application. If both revenues and expenditures are less than \$100,000 individually, use this short form application for exemption from audit.

Please review ALL instructions prior to the completion of this form.

Instructions:

Date Prepared:

- Prepare this form completely and accurately. Please note that there are 11 parts to this form, and all questions
 must be answered for the application to be considered complete.
- File this form with the Office of the State Auditor within 3 months after the end of the fiscal year.
 For years ended December 31, the form must be received by the Office of the State Auditor by March 31.
- 3. The form must be completed by a person skilled in governmental accounting.

January 25, 2013

- 4. The application must be personally reviewed and approved by a majority of the governing body as evidenced by one of the following methods:
 - a. Resolution of the governing body application may be emailed, faxed, or mailed.
 - b. Original signatures application must be mailed. Email or fax will NOT be accepted.
- 5. The <u>preparer must sign</u> the application that is submitted in order for it to be accepted.
- 6. Additional information may be attached to the exemption at the preparer's discretion.

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 Name: Kevin Collins Title: Independent Accountant Firm Name (if applicable): CliftonLarsonAllen LLP Address: 8390 E. Crescent Parkway., Suite 600, Greenwood Village, CO 80111 Telephone Number: 303-779-5710

Preparer Signature (Required): The application will be rejected if not signed by the preparer.

SEE ACCOUNTANT'S COMPILATION REPORT

Please indicate whether the following financial information is recorded	Governmental	Proprietary
using Governmental or Proprietary fund types	Y	

	PART 2 - REVENUE	
	REVENUE: All revenues for all funds must be reflected in this section, including proceeds from equipment, and proceeds from debt or lease transactions. Financial information will not include	the sale of the government's land, building, and fund equity information.
Line#	Description	(Omit cents)
2-1	Taxes: Property	\$
2-2	Specific ownership	\$
2-3	Sales and use	\$ -
2-4	Other (specify):	\$ -
2-5	Licenses and permits	\$ -
2-6	Intergovernmen/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 with line 4-3, column 2)	\$
2-16	Lease proceeds	\$
2-17	Developer Advances received (should agree with line 4-3)	\$ -
2-18	Proceeds from sale of capital assets	\$ -
2-19	Fire and police pension	\$
2-20	Donations	<u>-</u>
2-21	Other (specify):	\$ -
2-22	Transfer from Sweetgrass Metropolitan District No. 2	\$ 31,968
2-23	Transfer from Sweetgrass Metropolitan District No. 3	\$ 33,650
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE all sources	\$ 65,618

	PART 3 - EXPENDITURES		
	EXPENDITURES: All expenditures for all funds must be reflected in this section, including the p	ourchase of capital assets and principal and interest	
1	payments on long-term debt. Financial information will not include fund equity information.		
Line#	Description	(Omit cents)	
3-1	Administrative	\$ 882	
3-2	Salaries	\$ -	
3-3	Payroll taxes	\$	
3-4	Contract services	\$ -	
3-5	Employee benefits	\$	
3-6	Insurance	\$ 2,360	
3-7	Accounting and legal fees	\$ 19,956	
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	Culture and recreation	\$ -	
3-15	Utility operations	-	
3-16	Capital outlay (should agree with line 6-1, column 2		
3-17	Debt service principal (should agree with line 4-3, column 2		
3-19	Debt service interest	\$ 7,500	
3-18	Repayment of Developer Advances (should agree with line 4-3)	\$ 35,467	
3-20	Contribution to pension plan (should agree to line 7-2)	\$	
3-21	Contribution to Fire & Police Pension Assoc. (should agree to line 7-2)	\$ -	
3-22	Other (specify): Repay developer advance interest	\$ 2,033	
3-24		-	
3-25		\$	
3-26	(add lines 3-1 through 3-25) TOTAL EXPENDITURES all categories	\$ 74,671	

Note: 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 Please answer the following questions by marking				T	Yes		No
4-1	Does the entity have outstanding debt?				1	X		
4-1	Is the debt repayment schedule attached? If no, please explain:							X
	Developer advances will be paid as funds become available.							
	Developer advances will be paid do failed become dvallable.							
4-2	Is the entity current in its debt service payments? If no, please exp	olain:			L			
	N/A - There is no schedule of debt service payments, as all the de	ebt is c	comprosed of	developer				
	advances which will be paid as funds become available.							
4-3						***************************************	<u> </u>	
4-3	Please complete the following debt schedule, if applicable:	Out	tstanding at	Issued during	Ret	ired during	Out	standing
	(please only include principal amounts)	E	of prior year	fiscal year	1 .	scal year	fisc	al year-e
	General obligation bonds	\$	-	\$ -	\$	-	\$	_
	Revenue bonds	\$	-	\$ -	\$	-	\$	_
	Notes/Loans	\$	1,674,961	\$ -	\$	-	\$	1,674,9
	Leases	\$	-	\$ -	\$	-	\$	-
	Developer Advances	\$	187,647	\$ -	\$	35,467	\$	152,18
	Other (specify): Accrued interest on Notes and Advances	\$	150,733		\$	9,533	\$	283,5
	Total:	\$	2,013,341			45,000	\$	2,110,7
	Please answer the following questions by marking the appro	priate				Yes		No
4-4	Does the entity have any authorized, but unissued, debt?				\mathbf{I}^{-}	Χ	<u> </u>	
If yes:	How much?	\$		161,250,000	333333			
,	Date the debt was authorized:			2005				
4-5	Does the entity intend to issue debt within the next calendar year	(2012)	12					X
f yes:	How much?	T \$, ·	_	******			
ı yes.	How mach:	IΨ			- Haranna			****************
			h	******	T	Yes	П	No
	Please answer the following questions by marking the appro	priate	boxes.		+	162	 	X
4-6	Does the entity have debt that has been refinanced that it is still re		sible for?					
f yes:	What is the amount outstanding?	\$		-				
		:-4-	havaa		-T	Yes	т—	No
4 =	Please answer the following questions by marking the appro	priate	DUXES.			163	+	X
4-7	Does the entity have any lease agreements?	T						
If yes:	What is being leased? What is the original date of the	+-						
	Number of years of lease?	╁						
	Is the lease subject to annual appropriation?							
		I \$						
	What are the annual lease payments?	, ·						
	Please use this space to provide any explanations or comme	nis.						
4.0								
4-8								
******	PART 5 - CASH AND		ECTMENT	· · · · · · · · · · · · · · · · · · ·				
	PARTO - CASH AND	i ikiv/		2				Total
				S	_	A		
	Please provide the entity's cash deposit and investment bala			S		Amount		i Otai
5-1	Please provide the entity's cash deposit and investment bala Checking accounts			S	\$	Amount 8,561		IOLAI
5-2	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts			S	\$ \$			Total
	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit			S	\$			
5-2	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit Total Cash Deposits	nces.		S	\$ \$		\$	
5-2 5-3	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit	nces.		S	\$ \$ \$		\$	
5-2 5-3 5-4	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit Total Cash Deposits	nces.		S	\$ \$ \$		\$	
5-2 5-3 5-4 5-5	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit Total Cash Deposits	nces.		S	\$ \$ \$ \$	8,561 - - - -	\$	
5-2 5-3 5-4 5-5 5-6	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit Total Cash Deposits	nces.		S	\$ \$ \$ \$ \$		\$	8,5
5-2 5-3 5-4 5-5	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit Total Cash Deposits Investments (if investment is a mutual fund, please list underlying	nces.		5	\$ \$ \$ \$	8,561 - - - -		
5-2 5-3 5-4 5-5 5-6	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit Total Cash Deposits Investments (if investment is a mutual fund, please list underlying	nces.		5	\$ \$ \$ \$ \$	8,561 - - - -	\$	8,5
5-2 5-3 5-4 5-5 5-6	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit Total Cash Deposits Investments (if investment is a mutual fund, please list underlying	nces.		S	\$ \$ \$ \$ \$	8,561 - - - -		
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5-2 5-3 5-4 5-5 5-6 5-7	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit Total Cash Deposits Investments (if investment is a mutual fund, please list underlying Total Investments Total Cash and Investments Total Cash and Investments	inces.	itments):		\$ \$ \$ \$ \$	8,561 	\$	8,5
5-2 5-3 5-4 5-5 5-6	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit Total Cash Deposits Investments (if investment is a mutual fund, please list underlying Total Investments Total Cash and Investments Please answer the following question by marking in the app Are the entity's deposits in an eligible (Public Deposit Protection)	inces.	itments):		\$ \$ \$ \$ \$	8,561 - - - - - -	\$	8,¢.
5-2 5-3 5-4 5-5 5-6 5-7	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit Total Cash Deposits Investments (if investment is a mutual fund, please list underlying Total Investments Total Cash and Investments Please answer the following question by marking in the appropriate the entity's deposits in an eligible (Public Deposit Protection 10.5-101, et seq. C.R.S.)? If no, please explain:	inces. j inves ropria Act) pu	itments):		\$ \$ \$ \$ \$	8,561 	\$	8,¢.
5-2 5-3 5-4 5-5 5-6 5-7	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit Total Cash Deposits Investments (if investment is a mutual fund, please list underlying Total Investments Total Cash and Investments Please answer the following question by marking in the app Are the entity's deposits in an eligible (Public Deposit Protection)	inces. j inves ropria Act) pu	itments):		\$ \$ \$ \$ \$	8,561 	\$	8,5
5-2 5-3 5-4 5-5 5-6 5-7	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit Total Cash Deposits Investments (if investment is a mutual fund, please list underlying Total Investments Total Cash and Investments Please answer the following question by marking in the appropriate the entity's deposits in an eligible (Public Deposit Protection 10.5-101, et seq. C.R.S.)? If no, please explain:	inces. j inves ropria Act) pu	itments):		\$ \$ \$ \$ \$	8,561 	\$	8,¢.
5-2 5-3 5-4 5-5 5-6 5-7	Please provide the entity's cash deposit and investment bala Checking accounts Savings accounts Certificates of deposit Total Cash Deposits Investments (if investment is a mutual fund, please list underlying Total Investments Total Cash and Investments Please answer the following question by marking in the appropriate the entity's deposits in an eligible (Public Deposit Protection 10.5-101, et seq. C.R.S.)? If no, please explain:	inces. j inves ropria Act) pu	itments):		\$ \$ \$ \$ \$	8,561 	\$	8,3

	Please answer the following questions by marking in the	o annronriato hovec		Yes	No	
	Does the entity have land, buildings, and/or equipment?	e appropriate boxes.		100	X	
6-1	-	d caujament (canital can	ate) in			
yes:	Has the entity performed an annual inventory of property and accordance with Section 29-1-506, C.R.S.,? If no, please ex	a equipment (capital assi	ets) III			
	accordance with Section 29-1-500, C.N.S., Fit no, please ex	pan.				
	Complete the following table:	Balance -				
		beginning of the	Additions	Deletions	Year-End	
		year			Balance	
	Land	\$ -	\$ -	\$ -	\$ -	
	Buildings	\$ -	\$ -	\$ -	\$	
	Machinery and equipment	\$ -	\$ -	\$ -	\$ -	
	Furniture and fixtures	\$ -	\$ -	\$ -	\$ -	
	Construction In Progress (CIP)	\$ -	\$ 6,473	\$ 6,473	\$ -	
	Other (explain):	\$ -	\$ -	\$ -	\$ -	
	Accumulated Depreciation	\$ -	\$ -	\$ -	\$ -	
	Total	\$ -	\$ 6,473	\$ 6,473	\$ -	
	Please use this space to provide any explanations or co	-				
6-2						
	PART 7 - PENS	ION INFORMATION	ł			
	Please answer the following questions by marking in th	e appropriate boxes.		Yes	No	
7-1	Does the entity have an "old hire" firemen's pension plan?				Х	
7-2	Does the entity have a volunteer firemen's pension plan?				Х	
f yes:						
,	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 p	per retiree as of Jan 1?	\$ -			
	Please use this space to provide any explanations or co	omments:				
7-3						
	PART 8 - RUDO	GET INFORMATION	I			
	Please answer the following questions by marking in the		_	Yes	No	
8-1	Did the entity file a 2012 budget with the Department of Loc	cal Affairs? If no, please	explain:	Х		
8-2	Did the entity pass an appropriations resolution? In no, plea	ase explain:		X		
0-2						
0-2	İ					
0-2		Places indicate the amount appropriated for each fund for 2012:				
	Diago indicate the amount appropriated for each find for	2012				
o-z If yes:		2012: Budgeted 201	12 Expenditures			
	Fund Name	2012: Budgeted 201 \$	12 Expenditures 96,000			
		Budgeted 201 \$ \$	96,000 45,000			
	Fund Name General Fund (Amended)	Budgeted 201	96,000			

	PART 9 - TAX PAYER'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)]?	X	
	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.		
9-2	Please use this space to provide any explanations or comments:		

	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?		Х
If yes:	Date of formation:		
10-2	Has the entity changed its name in the past or current year?		Х
f Yes:	Please list the NEW name & PRIOR name:		
10-3	Is the entity a metropolitan district?	X	
10-4	Please indicate what services the entity provides:		
	Water, streets, traffic safety controls, parks and recreation, and sewer.		
10-5	Does the entity have an agreement with another government to provide services?	X	
lf yes:	List the name of the other governmental entity and the services provided:		
ii yes.	Facility Connection and Services Agreement with Sweetgrass Metropolitan District No. 2 and No. 3;		
	District covenants with City of Dacono, Colorado.		
10-6	Has the district filed a Title 32. Article 1 Special District Notice of Inactive Status d	uring the year?	
	[Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) an C.R.S.]	d 32-1-104 (3),	x
If was	Date Filed:		and the same of th
If yes: 10-7	Please use this space to provide any explanations or comments:	- Commonwell	

PART 11 - GOVERNING BODY APPROVAL

Below is the certification and approval of the governing board. By signing the board member is certifying they are a duly elected or appointed officer of the local government. Governing board members may be verified. Also by signing, the board 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 \$100,000 or less must have an application prepared by a person skilled in governmental accounting; completed to the best of their knowledge and is accurate and true. Use additional pages if needed.

	Print the names of all current	A MAJORITY of the governing board members must complete and sign in the column
Board Member 1	Jon Lee Print Board Members Name	I Jon Lee, attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit. Signed Date: My term Expires: May 2014
Board Member 2	Kim Lytle Print Board Members Name	I Kim Lytle, attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit. Signed Date: My term Expires: May 2016
Board Member 3	David Rhodes Print Board Members Name	I David Rhodes, attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit. Signed Date: My term Expires: May 2016
Board Member 4	Print Board Members Name	I, attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit. Signed Date: My term Expires:
Board Member 5	Print Board Members Name	I, attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit. Signed Date: My term Expires:
Board Member 6	Print Board Members Name	I, attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit. Signed Date: My term Expires:
Board Member 7	Print Board Members Name	I, attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit. Signed Date: My term Expires:



CliftonLarsonAllen LLP

www.cliftonlarsonallen.com

Accountant's Compilation Report

Board of Directors Sweetgrass Metropolitan District No. 1 Weld County, Colorado

We have compiled the Application for Exemption from Audit of Sweetgrass Metropolitan District No. 1 as of and for the year ended December 31, 2012, included in the accompanying prescribed form. Our compilation is limited to presenting, in the form prescribed by the Colorado State Auditor's Office, information that is the representation of management. We have not audited or reviewed the accompanying Application for Exemption from Audit and, accordingly, do not express an opinion or provide any assurance about whether the Application for Exemption from Audit is in accordance with accounting principles generally accepted in the United States of America.

Management is responsible for the preparation and fair presentation of the Application for Exemption from Audit in accordance with accounting principles generally accepted in the United States of America, and for designing, implementing and maintaining internal control relevant to the preparation and fair presentation of the Application for Exemption from Audit.

Our responsibility is to conduct the compilation of the Application for Exemption from Audit in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. The objective of a compilation is to assist management in presenting financial information within the Application for Exemption from Audit without undertaking to obtain or provide any assurance that there are no material modifications that should be made to the Application for Exemption from Audit.

The Application for Exemption from Audit is presented in accordance with the requirements of the Colorado State Auditor's Office, 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 State Auditor's Office and is not intended to be and should not be used by anyone other than this specified party.

Greenwood Village, Colorado January 25, 2013

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CliftonLarsonAllen LLP

www.cliftonlarsonallen.com

January 25, 2013

Office of the State Auditor Local Government Audit Division 255 East 16th Avenue, Suite 555 Denver, CO 80203

Enclosed are copies of the Application for Exemption from Audit for Sweetgrass Metropolitan District No. 1 for the year ended December 31, 2012. Please mail the Acceptance of Exemption from Audit directly to our offices at:

8390 E. Crescent Pkwy, Suite 600 Greenwood Village, CO 80111

If you have any questions concerning this report, please contact us at (303) 779-5710.

Very truly yours,

CliftonLarsonAllen LLP

Certified Public Accountants & Consultants

Clifton (arsan Allen (CP

enclosures



CliftonLarsonAllen LLP

www.cliftonlarsonallen.com

January 25, 2013

Board of Directors Sweetgrass Metropolitan District No. 1 Weld County, Colorado

Dear Board Members:

Enclosed are two (2) copies each of the Application for Exemption from Audit for 2012 for the Sweetgrass Metropolitan District No. 1.

These forms must be signed by the majority of members of the Board of Directors. Please return both signed copies to our office so that we may submit them to the State Auditor no later than March 31, 2013. We will send a copy to the District's attorney.

If you have any questions regarding this, please contact us at 303-779-5710.

Very truly yours,

CliftonLarsonAllen LLP

Certified Public Accountants & Consultants

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Enclosures