APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT

ADDRESS

Silver Peaks Metropolitan District #7
c/o Spencer Fane LLP

For the Year Ended 12/31/23 or fiscal year ended:

CONTACT PERSON

PHONE EMAIL Denver, CO 80203
Russ Dykstra
303-839-3800
rdykstra@spencefane.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: TITLE

FIRM NAME (if applicable)

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

304 Inverness Way South, Suite 490, Englewood, CO 80112

03-689-0833

PHONE 303-689-0833			
PREPARER (SIGNATURE REQUIRED)			ATE PREPARED
Qione K Whale		Mar 24,	2024
Please indicate whether the following financial information is recorded	GOVERNMENTAL (MODIFIED ACCRUAL BASIS)		PROPRIETARY (CASH OR BUDGETARY BASIS)
using Governmental or Proprietary fund types	☑		

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#		De	scription	Round to nearest Dollar	Please use this
2-1	Taxes: P	roperty	(report mills levied in Question 10-6)	\$	1 space to provide
2-2	S	pecific owner	ship	\$ -	any necessary
2-3	S	ales and use		\$ -	explanations
2-4	0	ther (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 ser	vices		\$ -	
2-15	Debt proceeds		(should agree with line 4-4, column	2) \$ -	
2-16	Lease proceeds			\$ -	
2-17	Developer Advances r	eceived	(should agree with line 4	-4) \$ -	
2-18	Proceeds from sale of	capital assets	5	\$ -	
2-19	Fire and police pension	n		\$ -	
2-20	Donations			\$ -	
2-21	Other (specify):			\$ -	
2-22				\$ -	
2-23				\$ -	
2-24		(add lin	es 2-1 through 2-23) TOTAL REVENU	JE \$	1

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
3-1	Administrative		\$		space to provide
3-2	Salaries		\$	-	any necessary explanations
3-3	Payroll taxes		\$	-	explanations
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 with Part 4)	\$	-	
3-18	Debt service interest		\$	-	
3-19	Repayment of Developer Advance Principal	(should agree with line 4-4)	\$	-	
3-20	Repayment of Developer Advance Interest		\$	-	
3-21	Contribution to pension plan	(should agree to line 7-2)	\$	-	
3-22	Contribution to Fire & Police Pension Assoc.	(should agree to line 7-2)	\$	-	
3-23	Other (specify):		\$	-	
3-24			\$	-	
3-25			\$	-	
3-26	(add lines 3-1 through 3-24) TOTAL EXPEN	IDITURES/EXPENSES	\$		

If TOTAL REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER than \$100,000 - <u>STOP</u>. You may not use this form. Please use the "Application for Exemption from Audit -<u>LONG FORM</u>".

Please answer the following questions by marking the appropriate boxes. Yes No Does the entity have outstanding debt? If Yes, please attach a copy of the entity's Debt Repayment Schedule. 1-2 Is the debt repayment schedule attached? If no, MUST explain below: Stephane Please complete the following debt schedule, if applicable: (please only include principal amounts)(enter all amount as positive numbers) General obligation bonds S		DADT 4 DEDT QUITOTANDIN	<u> </u>	100	HED		ND D		ED		
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If Yes, please attach a copy of the entity's Debt Repayment Schedule. Is the debt repayment schedule attached? If no, MUST explain below:	4.4		appro	opriate	boxes.			_			No
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What is the original date of the lease?										E	1
	If yes:										
			-								
Number of years of lease? Is the lease subject to annual appropriation?									П	Б.	a .
								1		Ľ	•
What are the annual lease payments? \$ - Part 4 - Please use this space to provide any explanations/comments or attach separate documentation, if needed				nte e	r attack		arato dos	umoné	ation if	hoboor	

	PART 5 - CASH AND INVESTME	ENTS		
	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			\$ -
	Investments (if investment is a mutual fund, please list underlying investments):			
			\$ -	
5-3			\$ -	
5-3			\$ -	
			\$ -	
	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.?			Ø
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. MI	JST use this space to provide any explanations:			

	PART 6 - CAPITAL AND RI	GHT-TO-L	ISE ASSE	ETS	
	Please answer the following questions by marking in the appropriate box	es.		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:				
		Dalama	A d d'élisse /88		
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	\$ -	\$ -	\$ -	\$ -
	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 tie to prior year ending balance

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

	PART 7 - PENSION INFORMA	TIOI	N			
	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:						
	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 co	mments	:		

	PART 8 - BUDGET IN	IFORMAT	TION		
	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 t in accordance with Section 29-1-113 C.R.S.? If no, MUST explain:	he current year	☑	_	
8-2	Did the entity pass an appropriations resolution, in accordance 29-1-108 C.R.S.? If no, MUST explain:	with Section	V		
If yes:	Please indicate the amount budgeted for each fund for the year	r reported:			
	Governmental/Proprietary Fund Name	Total Appropriati	ions By Fund		
	General Fund \$;	5,003		

	PART 9 - TAXPAYER'S BILL OF RIGHTS (TAB	OR)	
	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.	<u>u</u>	

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:	1	
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?	<u></u>	
	Please indicate what services the entity provides:		
	Streets, Water and Parks and Recreation]	
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 <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during	n 🗆	☑
If yes:	Date Filed:		
10-6	Does the entity have a certified Mill Levy?		
If yes:			
-	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):		
	Bond Redemption mills		-
	General/Other mills		62.600
	Total mills		62.600
	Yes	No	N/A
40.7	NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has		
10-7	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.		
	unider 3D 21-202 [Section 32-1-207 C.R.S.]? If NO, please explain.	1	
		1	

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		
12-1	If you plan to submit this form electronically, have you read the new Electronic Signature Policy?	☑	_		

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 th	ne names of ALL members of current governing body below.	A <u>MAJORITY</u> of the members of the governing body must sign below.
Board Member 1	Print Board Member's Name David Duncan	IDavid Duncan, 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:May 2027
Board Member 2	Print Board Member's Name John Covert	IJohn Covert, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. SignedJohn_Covert Date: Mar 25, 2024 My term Expires:May 2025
Board Member 3	Print Board Member's Name Todd Johnson	ITodd Johnson, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. SignedTodd A_Johnson
Board Member 4	Print Board Member's Name	I
Board Member 5	Print Board Member's Name	I
Board Member 6	Print Board Member's Name	I
Board Member 7	Print Board Member's Name	I

Silver Peak _7 2023

Interim Agreement Report

2024-03-25

Created: 2024-03-24

By: Diane Wheeler (diane@simmonswheeler.com)

Status: Out for Signature

Transaction ID: CBJCHBCAABAA2o7zMZwKIVQs_nXMNIVXLnhG0ImbFSLI

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.

"Silver Peak _7 2023" History

- Document created by Diane Wheeler (diane@simmonswheeler.com) 2024-03-24 10:10:06 PM GMT
- Document emailed to Diane Wheeler (diane@simmonswheeler.com) for signature 2024-03-24 10:11:04 PM GMT
- Document emailed to david@c3landllc.com for signature 2024-03-24 10:11:04 PM GMT
- Document emailed to john.covert@cushwake.com for signature 2024-03-24 10:11:04 PM GMT
- Document emailed to todd@terraformas.com for signature 2024-03-24 10:11:04 PM GMT
- Document e-signed by Diane Wheeler (diane@simmonswheeler.com)
 Signature Date: 2024-03-24 10:11:11 PM GMT Time Source: server
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