

APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

NAME OF GOVERNMENT
ADDRESS

CONTACT PERSON
PHONE
EMAIL
FAX

Silverstone Metropolitan District No. 2
2500 Arapahoe Avenue
Suite 220
Boulder, CO 80302
Steve Rane
303-442-2299
steve@cdgcolorado.com

For the Year Ended
12/31/2017
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: Kevin Collins
TITLE: Independent Accountant
FIRM NAME (if applicable): CliftonLarsonAllen LLP
ADDRESS: 8390 E Crescent Parkway, Suite 500, Greenwood Village, CO 80111
PHONE: 303-779-5710
DATE PREPARED: February 27, 2018
(Must be Completed prior to Board approval)
RELATIONSHIP TO ENTITY: Independent CPA Firm

PREPARER (SIGNATURE REQUIRED)

SEE ATTACHED ACCOUNTANT'S COMPILATION REPORT

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

* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

Line #	Description	Governmental Funds		Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		General Fund	Fund*	Fund*	Fund*	
Assets						
1-1	Cash & Cash Equivalents	\$ 432,863	-	-	-	
1-2	Investments	-	-	-	-	
1-3	Receivables	-	-	-	-	
1-4	Due from Other Entities or Funds	-	-	-	-	
	All Other Assets (specify)					
1-5	Prepaid expenses	\$ 2,112	-	-	-	
1-6	Property tax receivable	\$ 57,264	-	-	-	
1-7		-	-	-	-	
1-8		-	-	-	-	
1-9		-	-	-	-	
1-10		-	-	-	-	
1-11	TOTAL ASSETS	\$ 492,239	-	-	-	
1-12	TOTAL DEFERRED OUTFLOWS OF RESOURCES	-	-	-	-	
1-13	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ 492,239	-	-	-	
Liabilities						
1-14	Accounts Payable	-	-	-	-	
1-15	Accrued Payroll and Related Liabilities	-	-	-	-	
1-16	Accrued Interest Payable	-	-	-	-	
1-17	Due to Other Entities or Funds	\$ 1,930	-	-	-	
1-18	All Other Current Liabilities	-	-	-	-	
1-19	TOTAL CURRENT LIABILITIES	\$ 1,930	-	-	-	
1-20	All Other Liabilities (specify)	-	-	-	-	
1-21		-	-	-	-	
1-22		-	-	-	-	
1-23		-	-	-	-	
1-24		-	-	-	-	
1-25		-	-	-	-	
1-26		-	-	-	-	
1-27		-	-	-	-	
1-28	TOTAL LIABILITIES	\$ 1,930	-	-	-	
1-29	TOTAL DEFERRED INFLOWS OF RESOURCES	\$ 57,264	-	-	-	
Fund Balance						
1-30	Nonspendable Prepaid	\$ 2,112	-	-	-	
1-31	Nonspendable Inventory	-	-	-	-	
1-32	Restricted (specify): Emergency Reserve	\$ 1,900	-	-	-	
1-33	Committed (specify)	-	-	-	-	
1-34	Assigned (specify): Subsequent year's expenditures	\$ 390,731	-	-	-	
1-35	Unassigned:	\$ 38,302	-	-	-	
1-36		-	-	-	-	
	TOTAL FUND BALANCE	\$ 433,045	-	-	-	
1-37	TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND BALANCE	\$ 492,239	-	-	-	

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		General Fund	Fund*		Fund*	Fund*	
Tax Revenue							
2-1	Property	\$ 52,274	\$ -	Property	\$ -	\$ -	
2-2	Specific Ownership	\$ 4,152	\$ -	Specific Ownership	\$ -	\$ -	
2-3	Sales and Use Tax	\$ -	\$ -	Sales and Use Tax	\$ -	\$ -	
2-4	Other Tax Revenue (specify):	\$ -	\$ -	Other Tax Revenue (specify):	\$ -	\$ -	
2-5		\$ -	\$ -		\$ -	\$ -	
2-6		\$ -	\$ -		\$ -	\$ -	
2-7		\$ -	\$ -		\$ -	\$ -	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ 56,426	\$ -	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	\$ -	\$ -	
2-14	Grants	\$ -	\$ -	Grants	\$ -	\$ -	
2-15	Donations	\$ -	\$ -	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	\$ 4,202	\$ -	Interest/Investment Income	\$ -	\$ -	
2-20	Tap Fees	\$ -	\$ -	Tap Fees	\$ -	\$ -	
2-21	Developer Advances	\$ -	\$ -	Developer Advances	\$ -	\$ -	
2-22	All Other (specify):	\$ -	\$ -	All Other (specify):	\$ -	\$ -	
2-23		\$ -	\$ -		\$ -	\$ -	
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ 60,628	\$ -	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ -	\$ -	
Other Financing Sources							
2-25	Debt Proceeds	\$ -	\$ -	Debt Proceeds	\$ -	\$ -	
2-26	Proceeds from Sale of Capital Assets	\$ -	\$ -	Proceeds from Sale of Capital Assets	\$ -	\$ -	
2-27	Other (specify):	\$ -	\$ -	Other (specify):	\$ -	\$ -	
2-28	Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES	\$ -	\$ -	Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES	\$ -	\$ -	
2-29	Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ 60,628	\$ -	Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ -	\$ -	
GRAND TOTAL REVENUES AND OTHER FINANCING SOURCES for all funds (Line 2-29) are GREATER than \$750,000 - SIOE. 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.					GRAND TOTALS		60,628
					\$ -	\$ -	\$

PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES

Line #	Description	Governmental Funds		Fund*	Proprietary/Fiduciary Funds		Fund*	Fund*
		General Fund	Fund*		Fund*	Fund*		
Expenditures								
3-1	General Government	\$	4,372	\$	-	\$	-	\$
3-2	Judicial	\$	-	\$	-	\$	-	\$
3-3	Law Enforcement	\$	-	\$	-	\$	-	\$
3-4	Fire	\$	-	\$	-	\$	-	\$
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	Other (specify):	\$	-	\$	-	\$	-	\$
3-11	Transfer to Silverstone Metro District No. 1	\$	96,416	\$	-	\$	-	\$
3-12		\$	-	\$	-	\$	-	\$
3-13		\$	-	\$	-	\$	-	\$
3-14	Capital Outlay	\$	-	\$	-	\$	-	\$
	Debt Service	\$	-	\$	-	\$	-	\$
3-15	Principal	\$	-	\$	-	\$	-	\$
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	Add lines 3-1 through 3-21	\$	100,788	\$	-	\$	-	\$
	TOTAL EXPENDITURES							100,788
3-23	Interfund Transfers (In)	\$	-	\$	-	\$	-	\$
3-24	Interfund Transfers Out	\$	-	\$	-	\$	-	\$
3-25	Other Expenditures (Revenues):	\$	-	\$	-	\$	-	\$
3-26		\$	-	\$	-	\$	-	\$
3-27		\$	-	\$	-	\$	-	\$
3-28		\$	-	\$	-	\$	-	\$
3-29	(Add lines 3-23 through 3-28)	\$	-	\$	-	\$	-	\$
	TOTAL TRANSFERS AND OTHER EXPENDITURES							
3-30	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures	\$	(40,160)	\$	-	\$	-	\$
	Line 2-29, less line 3-22, plus line 3-29							
3-31	Fund Balance, January 1 from December 31 prior year report	\$	473,205	\$	-	\$	-	\$
3-32	Prior Period Adjustment (MUST explain)	\$	-	\$	-	\$	-	\$
3-33	Fund Balance, December 31	\$	433,045	\$	-	\$	-	\$
	Sum of Line 3-30, 3-31, and 3-32							
	This total should be the same as line 1-36.							

IF GRAND TOTAL EXPENDITURES for all funds (Line 3-22) 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.

PART 4 - DEBT OUTSTANDING, ISSUED, AND RETIRED

Please answer the following questions by marking the appropriate boxes.

Please use this space to provide any explanations or comments:

4-1	Does the entity have outstanding debt?	YES	NO	
4-2	Is the debt repayment schedule attached? If no, MUST explain: N/A. The District has no debt.	<input type="checkbox"/>	<input type="checkbox"/>	
4-3	Is the entity current in its debt service payments? If no, MUST explain: N/A. The District has no debt.	<input type="checkbox"/>	<input type="checkbox"/>	
4-4	Please complete the following debt schedule, if applicable: (please only include principal amounts)			
	General obligation bonds			
	Revenue bonds			
	Notes/Loans			
	Leases			
	Developer Advances			
	Other (specify):			
	TOTAL			

Please answer the following questions by marking the appropriate boxes.

4-5 Does the entity have any authorized, but unissued, debt?
If yes: How much? YES NO

4-6 Date the debt was authorized: YES NO
How much? YES NO

4-7 Does the entity have debt that has been refinanced that it is still responsible for?
If yes: What is the amount outstanding? YES NO

4-8 Does the entity have any lease agreements?
If yes: What is being leased? YES NO
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?
Does the entity have a certified mill levy?
If yes: Please provide the following mills levied for the year reported (do not enter \$ amounts):

Bond Redemption	0.00			
General/Other	50.00			
TOTAL				

PART 5 - CASH AND INVESTMENTS

Please provide the entity's cash deposit and investment balances.

5-1	YEAR-END Total of ALL Checking and Savings accounts	AMOUNT	TOTAL
5-2	Certificates of deposit	\$ -	\$ -
	TOTAL CASH DEPOSITS		
	Investments (if investment is a mutual fund, please list underlying investments):		
5-3	CSAFE	\$ 432,863	
		\$ -	
		\$ -	
		\$ -	
	TOTAL INVESTMENTS		\$ 432,863
	TOTAL CASH AND INVESTMENTS		\$ 432,863

Please answer the following question by marking in the appropriate box

5-4 Are the entity's investments legal in accordance with Section 24-75-601, et. seq., C.R.S.? YES NO N/A

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: YES NO

PART 6 - CAPITAL ASSETS

Please answer the following question 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? YES NO
- 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: YES NO
 N/A. The District has no capital assets.

6-3 Complete the following Capital Assets table for GOVERNMENTAL FUNDS:

	Balance - beginning of the year**	Additions	Deletions	Year-End Balance
Land	\$ -	\$ -	\$ -	\$ -
Buildings	\$ -	\$ -	\$ -	\$ -
Machinery and equipment	\$ -	\$ -	\$ -	\$ -
Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ -	\$ -	\$ -	\$ -
Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -

6-4 Complete the following Capital 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)	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ -	\$ -	\$ -	\$ -
Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -

**must agree to prior year ending balance

PART 7 - PENSION INFORMATION

Please answer the following question 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" firemen's pension plan? YES NO
- 7-2 Does the entity have a volunteer firemen's pension plan? YES NO

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 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: YES NO N/A
- 8-2 Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: YES NO N/A

If yes: Please indicate the amount appropriated for each fund for the year reported

Fund Name	Budgeted Expenditures
General Fund	\$ 514,902
	\$ -
	\$ -
	\$ -

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 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. YES NO

PART 10 - GENERAL INFORMATION

Please answer the following question 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? YES NO
- If yes: Date of formation:
- 10-2 Has the entity changed its name in the past or current year?
 If Yes: NEW name Silverstone Metropolitan District No. 2
 PRIOR name Miner's Village Metropolitan District No. 2
- 10-3 Is the entity a metropolitan district? YES NO
- 10-4 Please indicate what services the entity provides:
- 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:

10-4: Sanitary system, waters, streets, traffic safety controls, parks and recreation, mosquito control, fire protection, television relay, security system, and transportation.
 10-5: Town of Frederick Master IGA, District Facilities, Joint Financing, Construction and Service Agreement with Silverstone Metro Districts No. 1 and No. 3.

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

OSA USE ONLY

								Notes
Entity Wide:								
Unrestricted Cash & Investments	\$	432,863	Unrestricted Fund Balanc	\$	429,033	Total Tax Revenue	\$	56,426
Current Liabilities	\$	1,930	Total Fund Balance	\$	433,045	Revenue Paying Debt Service	\$	-
Deferred Inflow	\$	57,264	PY Fund Balance	\$	473,205	Total Revenue	\$	60,628
			Total Expenditures	\$	60,628	Total Debt Service Principal	\$	-
			Interfund In	\$	100,788	Total Debt Service Interest	\$	-
			Interfund Out	\$	-		\$	-
Governmental			- Proprietary	\$	-	Enterprise Funds	\$	-
Total Cash & Investments	\$	432,863	- Current Assets	\$	-	Net Position	\$	-
Transfers In	\$		Deferred Outflow	\$	52,274	- PY Net Position	\$	-
Transfers Out	\$		- Current Liabilities	\$	100,788	- Total Outstanding Debt	\$	-
Property Tax	\$		Deferred Inflow	\$		- Authorized but Unissued	\$	30,000,000
Debt Service Principal	\$		- Cash & Investments	\$		- Year Authorized	\$	39,574
Total Expenditures	\$		- Principal Expense	\$			\$	
Total Developer Advances	\$							
Total Developer Repayments	\$							

PART 12 - GOVERNING BODY APPROVAL

Please answer the following question by marking in the appropriate box

12-1 Have you read the new Electronic Signature Policy and do you plan on submitting signatures in accordance with this policy? YES NO

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

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 \$750,000 or less 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 the names of all current governing board members below.

Print Board Member's Name

Jon R. Lee

Print Board Member's Name

Michael Strear

Print Board Member's Name

Edward Pluss

Print Board Member's Name

Steve Rane

Print Board Member's Name

Print Board Member's Name

Print Board Member's Name

Print Board Member's Name

Print Board Member's Name

A MAJORITY of the governing board members must complete and sign in the column below.

I, Jon R. Lee, attest that 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 2020

I, Michael Strear, attest that 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 2018

I, Edward Pluss, attest that 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 2018

I, Steve Rane, attest that 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 2018

I, _____, attest that 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: _____

I, _____, attest that 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: _____

I, _____, attest that 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: _____



CliftonLarsonAllen LLP

www.cliftonlarsonallen.com

Accountant's Compilation Report

Board of Directors
Silverstone Metropolitan District No. 2
Weld County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Silverstone Metropolitan District No. 2 as of and for the year ended December 31, 2017, 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.

CliftonLarsonAllen LLP

Greenwood Village, Colorado
February 27, 2018



CliftonLarsonAllen LLP

www.cliftonlarsonallen.com

February 27, 2018

Office of the State Auditor
Local Government Audit Division
1525 Sherman St., 7th Floor
Denver, CO 80203

Enclosed are copies of the Application for Exemption from Audit for Silverstone Metropolitan District No. 2 for the year ended December 31, 2017. Please mail the Acceptance of Exemption from Audit directly to our offices at:

8390 E. Crescent Pkwy, Suite 500
Greenwood Village, CO 80111

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

Very truly yours,

A handwritten signature in cursive script that reads 'CliftonLarsonAllen LLP'.

CliftonLarsonAllen LLP
Certified Public Accountants & Consultants

Enclosures



CliftonLarsonAllen LLP

www.cliftonlarsonallen.com

February 27, 2018

**Board of Directors
Silverstone Metropolitan District No. 2
Weld County, Colorado**

Dear Board Members:

Enclosed are two (2) copies each of the Application for Exemption from Audit for 2017 for the Silverstone Metropolitan District No. 2.

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, 2018**. 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,

A handwritten signature in black ink that reads 'CliftonLarsonAllen LLP' in a cursive script.

CliftonLarsonAllen LLP
Certified Public Accountants & Consultants

Enclosures