APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT	Silverstone Metropolitan District No. 3	For the Year Ended
ADDRESS	2500 Arapahoe Avenue	12/31/19
	Suite 220	or fiscal year ended:
	Boulder CO 80302	
CONTACT PERSON	Steve Rane	
PHONE	303-442-2299	
EMAIL	steve@cdgcolorado.com	
FAX		

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

my knowledge.	
NAME:	Shelby Clymer
TITLE	Independent Accountant
FIRM NAME (if applicable)	CliftonLarsonAllen LLP
ADDRESS	8390 E Crescent Parkway, Suite 300, Greenwood Village, CO 80111
PHONE	303-779-5710
DATE PREPARED	March 11, 2020

PREPARER (SIGNATURE REQUIRED)

SEE ATTACHED ACCOUNTANT'S COMPILATION REPORT

Please indicate whether the following financial information is recorded	GOVERNMENTAL (MODIFIED ACCRUAL BASIS)	PROPRIETARY (CASH OR BUDGETARY BASIS)
using Governmental or Proprietary fund types	J	

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#			Description	Round to nearest Dollar	Please use this
2-1	Taxes:	Property	(report mills levied in Question 10-6)	\$ 6,886	space to provide
2-2		Specific own	ership	\$ 459	any necessary
2-3	:	Sales and us	e	\$ -	explanations
2-4	(Other (specif	y):	\$ -	
2-5	Licenses and permits	6		\$ -	
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	i		\$ -	
2-13	Investment income			\$ 1,387	
2-14	Charges for utility se	rvices		\$ -	
2-15	Debt proceeds		(should agree with line 4-4, column 2)	\$ -	
2-16	Lease proceeds			\$ -	
2-17	Developer Advances	received	(should agree with line 4-4)	\$ -	
2-18	Proceeds from sale of	of capital ass	ets	\$ -	
2-19	Fire and police pensi	on		\$ -	
2-20	Donations			\$ -	
2-21	Other (specify):			\$ -	
2-22	Transfer from Silvers	tone Metrop	olitan District No. 1	\$-]
2-23				\$ -]
2-24		(add	lines 2-1 through 2-23) TOTAL REVENUE	\$ 8,732	

PART 3 - EXPENDITURES

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		\$ 274	space to provide
3-2	Salaries		\$ -	any necessary
3-3	Payroll taxes		\$ -	explanations
3-4	Contract services		\$ -	_
3-5	Employee benefits		\$ -	
3-6	Insurance		\$ 1,903	
3-7	Accounting and legal fees		\$ 1,550	
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		\$ -	
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	County Treasurer's Fees		\$ 106	
3-25	Transfer to Silverstone Metropolitan District No. 1		\$ 56,287]
3-26	(add lines 3-1 through 3-24)	TOTAL EXPENDITURES	\$ 60,120	

form. Please use the "Application for Exemption from Audit - LONG FORM".

	PART 4 - DEBT OUTSTANDING	G. ISSUED	. AND RE	ETIRED	
	Please answer the following questions by marking the		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	No
4-1	Does the entity have outstanding debt?				7
	If Yes, please attach a copy of the entity's Debt Repayment S			_	_
4-2	4-2 Is the debt repayment schedule attached? If no. MUST explain:				
	N/A. The District has no debt.				
4-3	4-3 Is the entity current in its debt service payments? If no, MUST explain:				
	N/A. The District has no debt.				
4-4	Please complete the following debt schedule, if applicable:				
	(please only include principal amounts)(enter all amount as positive	Outstanding at end of prior year*	Issued during	Retired during	Outstanding at vear-end
	numbers)	end of prior year	year	year	year-end
	General obligation bonds	\$-	\$-	\$-	\$-
	Revenue bonds	\$ -	\$ -	\$ -	\$ -
	Notes/Loans	\$ -	\$ -	\$ -	\$-
	Leases	\$ -	\$ -	\$ -	\$-
	Developer Advances	\$ -	\$ -	\$ -	\$ -
	Other (specify):	\$ -	\$ -	\$ -	\$-
	TOTAL	\$ -	\$-	\$ -	\$-
		*must tie to prior ye	ar ending balance		
	Please answer the following questions by marking the appropriate boxes	•	-	Yes	No
4-5	Does the entity have any authorized, but unissued, debt?			7	
If yes:			00,000,000.00		
	Date the debt was authorized:	5/6/2	006		
4-6	Does the entity intend to issue debt within the next calendar	year?			1
If yes:	How much?	\$	-		
4-7	Does the entity have debt that has been refinanced that it is s	till responsible	for?		Л
If yes:	What is the amount outstanding?	\$	-		
4-8	Does the entity have any lease agreements?				1
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?	L			
	What are the annual lease payments?	\$			-
	Please use this space to provide any	explanations or	comments:		

	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):				
	CSAFE		\$ 5,056]	
5-3			\$ -		
5-5			\$ -		
			\$ -		
	Total Investments			\$	5,056
	Total Cash and Investments			\$	5,056
	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.	7			
	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.)?				Ľ
If no, M	UST use this space to provide any explanations:				

	PART 6 - CAPIT	AL ASSET	S		
	Please answer the following questions by marking in the appropriate box	es.		Yes	No
6-1	Does the entity have capital assets?				L
6-2	Has the entity performed an annual inventory of capital asset 29-1-506, C.R.S.,? If no, MUST explain:	s in accordance	with Section		
	N/A. The District has no capital assets.				
6-3	Complete the following capital 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)	\$-	\$ -	\$-	\$ -
	Other (explain):	\$-	\$ -	\$-	\$ -
	Accumulated Depreciation	\$ -	\$ -	\$-	\$ -
	TOTAL	\$ -	\$-	\$-	\$-

Please use this space to provide any explanations or comments:

	PART 7 - PENSION INFORMA	TIO	N		
	Please answer the following questions by marking in the appropriate boxes.			Yes	No
7-1	Does the entity have an "old hire" firemen's pension plan?				J
7-2	Does the entity have a volunteer firemen's pension plan?				4
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		-		
	Please use this space to provide any explanations or	comn	nents:		

	PART 8 - BUDGET INFORMA	ΓΙΟΝ		
	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 the current year in accordance with Section 29-1-113 C.R.S.?	/		
8-2	Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:	v		

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

General Fund (as Amended)	\$ 63,833

	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, 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.	~	
lf no, M	UST explain:		
	PART 10 - GENERAL INFORMATION		
	Please answer the following questions by marking in the appropriate boxes.	Yes	No
	Is this application for a newly formed governmental entity?		7
10-1			—
If yes:	Date of formation:	_	_
10-2	Has the entity changed its name in the past or current year?	1	
If yes:	Please list the NEW name & PRIOR name:		
, ,	New: Silverstone Metropolitan District No.3; Prior: Miner's Village Metropolitan District No. 3		
10-3	Is the entity a metropolitan district?	1	
	Please indicate what services the entity provides:		
	See below.		
10-4	Does the entity have an agreement with another government to provide services?	1	
If yes:	List the name of the other governmental entity and the services provided:		
	See below.	_	
10-5	Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during		4
If yes:	Date Filed:		
10-6	Does the entity have a certified Mill Levy?	4	
If yes:			
	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):		
	Bond Redemption mills		-
	General/Other mills		55.275
	Total mills		55.275

Please use this space to provide any explanations or comments:

10-3: Sanitary sewer, water, streets, traffic safety control, parks and recreation, mosquito control, fire protection, television relay, security systems, and transportation.

10-4: Town of Frederick Master IGA, District Facilities, Joint Financing, Construction and Service Agreement with Silverstone Metro Districts No. 1 and No. 2

	PART 11 - GOVERNING BODY APPROVAL		
	Please answer the following question by marking in the appropriate box	YES	NO
40.4	If you plan to submit this form electronically, have you read the new Electronic Signature	7	

12-1 Policv?

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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 the names of ALL current governing board members below.	A MAJORITY of the governing board members must complete and sign in the column below.	
Board Member	Print Board Member's Name Jon R. Lee	I, Jon R. Lee, attest I am a duly elected or appointed board member, and that I have personally reviewed and approximating application for exemption from audit.	
1		Date: 3/17/2020 My term Expires: May 2020 ^{0D56E84E07B04E7}	
Board	Print Board Member's Name	I, Michael Strear, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.	
Member 2	Michael Strear	Signed Date: 3/19/2020 Michael Stream My term Expires: May 2022 809B4DC702EE460	
Board	Print Board Member's Name	I, Edward Pluss, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.	
Member 3	Edward Pluss	Signed Date: My term Expires: May 2020	
Descrit	Print Board Member's Name	I, Steve Rane, attest I am a duly elected or appointed board member, and that I have personally reviewed and approxistic states application for exemption from audit.	
Board Member 4	Steve Rane	Signed Date: <u>3/17/2020</u> My term Expires: May 2022 C20B7EDF6DA34ED	
Board Member 5	Print Board Member's Name	I, 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:	
Board Member 6	Print Board Member's Name	I, 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:	
Board Member 7	Print Board Member's Name	I, 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:	



CliftonLarsonAllen LLP

Accountant's Compilation Report

Board of Directors Silverstone Metropolitan District No. 3 Weld County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Silverstone Metropolitan District No. 3 as of and for the year ended December 31, 2019, 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.

Clifton Larson allen LLG

Greenwood Village, Colorado March 11, 2020



Certificate Of Completion

Envelope Id: 7E2B497EB3244A7EACC56F0A8447B8B0 Subject: Please DocuSign: Silverstone Metropolitan District No. 3 - 2019 Audit Exemption.pdf Client Name: Silverstone Metropolitan District No. 3 Client Number: 011-043440-00 Source Envelope: Document Pages: 8 Certificate Pages: 5 AutoNav: Enabled EnvelopeId Stamping: Enabled

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Signer Events

Jon R. Lee jonrlee@cdgcolorado.com

Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure: Accepted: 3/17/2020 4:49:41 PM

ID: af344b54-8e9e-42b7-9bfb-0b495a5501f7

Michael Strear

mike@strearcos.com

MANAGER

STREAR COMPANIES LLC

Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure: Accepted: 3/19/2020 11:41:48 AM

ID: bf29fc81-264b-4a2b-a7e5-35c2a90c94c5

Steve Rane

Steve@cdgcolorado.com

Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure: Accepted: 3/17/2020 4:47:36 PM

ID: 4ac482f1-b32b-4181-9a63-eaa506256548

SyLuc.Vo@claconnect.com

Signature

Holder: SyLuc Vo

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— Docusigned by: Michael Strear — 809B4DC702EE460...

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Steve Kane

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