

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

Name of Government:	Great Western Park Metropolitan District No. 2	For the Fiscal Year ended December 31, 2009 or fiscal year ended:
Address:	c/o Special District Management Services, Inc. 141 Union Blvd., Suite 150 Lakewood, CO 80228	
Contact Person:	AJ Beckman	
Telephone:	303-987-0835	
E-Mail:	abeckman@sdmsi.com	
Fax:	303-987-2032	

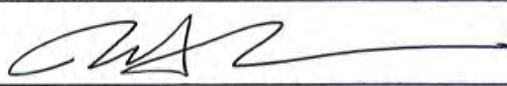
Return to: Office of the State Auditor
 Local Government Audit Division
 225 E. 16th Ave., Suite 555
 Denver, CO 80203
FAX: (303) 866-4062
 Email: OSA.LG@state.co.us
 Call (303) 866-3338 if you need help completing this form.

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

Instructions: (See "Instructions" tab for additional information)

1. Prepare this form completely and accurately. Please note that there are eleven parts to this form and all questions must be answered for the application to be considered complete.
2. 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.
4. The application must be approved by the governing body as evidenced by one of the following methods:
 - a. Resolution of the governing board - application may be e-mailed, faxed, or mailed.
 - b. Original signatures - application must be mailed. E-mail or fax will NOT be accepted.
5. The **preparer must sign** 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.

PART 1 - CERTIFICATION OF PREPARER

1-1	Name:	Michael Allen		
1-2	Title:	Accountant		
1-3	Firm (if applicable):	Special District Management Services, Inc.		
1-4	Address:	141 Union Blvd., Suite 150, Lakewood, CO 80228		
1-5	Telephone Number:	303-987-0835		
1-6	Date Prepared:	3/11/2010		
1-7	Signature:			
	The person that completes this form must be skilled in governmental accounting. (Skilled means possessing sufficient knowledge of governmental accounting to complete the exemption form.)	Check One		
		Yes	No	
1-8	Are you skilled in governmental accounting? If no, this exemption will be rejected.	X		

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	(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	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	\$ -
2-16	Lease proceeds	\$ -
2-17	Proceeds from sale of capital assets	\$ -
2-18	Fire and police pension	\$ -
2-19	Donations	\$ -
2-20	Other (specify): Developer Advance	\$ -
2-21	Transfer from District No. 1	\$ 4,421
2-22		\$ -
2-23	TOTAL REVENUE all sources	\$ 4,421

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	(Omit cents)
3-1	Administrative	\$ 3,776
3-2	Salaries	\$ -
3-3	Payroll taxes	\$ -
3-4	Contract services	\$ -
3-5	Employee benefits	\$ -
3-6	Insurance	\$ 100
3-7	Accounting and legal fees	\$ 171
3-8	Repair and maintenance	\$ -
3-9	Supplies	\$ 161
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	\$ -
3-18	Debt service interest	\$ -
3-19	Contribution to pension plan	\$ -
3-20	Contribution to FPPA	\$ -
3-21	Other (specify): Treasurer's Fees	\$ -
3-22	Election Expense	\$ -
3-23	Director's Fees	\$ -
3-24	Statutory Compliance	\$ 85
3-25	TOTAL EXPENDITURES all categories	\$ 4,292

PART 4 - DEBT OUTSTANDING, ISSUED AND RETIRED				
Please answer the following questions by marking the appropriate boxes			Yes	No
4-1	Does the entity have outstanding debt?			X
If yes:	Is the debt repayment schedule attached?			
	Please complete the following debt schedule, if applicable:	Outstanding at end of prior year	Issued during fiscal year	Retired during fiscal year
	General obligation bonds	\$ -	\$ -	\$ -
	Revenue bonds	\$ -	\$ -	\$ -
	Notes/loans	\$ -	\$ -	\$ -
	Leases	\$ -	\$ -	\$ -
	Developer Advances	\$ -	\$ -	\$ -
	Other (specify):	\$ -	\$ -	\$ -
Please answer the following questions by marking the appropriate boxes			Yes	No
4-2	Does the entity have any authorized, but unissued debt?		X	
If yes:	How much?	\$ 14,600,000		
	Date the debt was authorized:	11/4/2008		
4-3	Does the entity intend to issue debt within the next calendar year (2010)?			X
If yes:	How much?	\$ -		
Please answer the following questions by marking the appropriate boxes			Yes	No
4-4	Does the entity have debt that has been refinanced that it is still responsible for?			X
If yes:	What is the amount outstanding?	\$ -		
Please answer the following questions by marking the appropriate boxes			Yes	No
4-5	Does the entity have any lease agreements?			X
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?			
	What are the annual lease payments?	\$ -		

PART 5 - CASH AND INVESTMENTS			
Please provide the entity's cash deposit and investment balances		Amount	Total
5-1	Checking Accounts	\$ -	
5-2	Savings Accounts	\$ -	
5-3	Certificates of Deposit	\$ -	
	Total Cash Deposits		\$ -
	Investments (if investment is a mutual fund, please list underlying investments):		
5-4		\$ -	
5-5		\$ -	
5-6		\$ -	
5-7		\$ -	
	Total Investments		\$ -
	Total Cash and Investments		\$ -
Please answer the following question by marking in the appropriate box		Yes	No
5-8	Are the entity's deposits in an eligible (PDPA) public depository (Sec 11-10.5-101 et seq, C.R.S.)? If no, please explain:	N/A	

PART 6 - CAPITAL ASSETS					
Please answer the following questions by marking in the appropriate boxes		Yes	No		
6-1	Does the entity have land, buildings, and/or equipment?			X	
If yes:	Has the entity performed an annual inventory of property and equipment (capital assets) in accordance with Section 29-1-506 C.R.S.? If no, please explain:				
Complete the following table:		Balance - Beginning of the Year	Additions	Deletions	Balance - End of the Year
	Land	\$ -	\$ -	\$ -	\$ -
	Buildings	\$ -	\$ -	\$ -	\$ -
	Machinery and equipment	\$ -	\$ -	\$ -	\$ -
	Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
	Infrastructure	\$ -	\$ -	\$ -	\$ -
	Other (explain):	\$ -	\$ -	\$ -	\$ -

PART 7 - PENSION INFORMATION				
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?			X
7-2	Does the entity have a volunteer firemen's pension plan?			X
If yes:	Who administers the plan?			
	Indicate the contributions from:			
	Tax: (Property, SO, Sales, etc)	\$ -		
	State Contribution Amount	\$ -		
	Other: (Gifts, Donations, etc)	\$ -		
	What is the monthly benefit paid for 20 years of service per retiree as of Jan 1st?	\$ -		

PART 8 - BUDGET INFORMATION				
Please answer the following questions by marking in the appropriate boxes		Yes	No	
8-1	Did the entity file a 2009 budget with the Department of Local Affairs? If no, please explain:	X		
If yes:	Please indicate the amount appropriated for each fund for 2009:			
	Fund Name	Budgeted 2009 Expenditures		
	General Fund	\$ 20,000		
	Capital Projects Fund	\$ 30,000		
		\$ -		

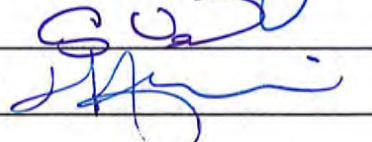
PART 9 - TABOR			
Please answer the following question by marking in the appropriate box		Yes	No
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution Article X, Section 20 (5)]? If no, please explain:	X	
	Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3% emergency reserve requirement. All governments should determine if they meet this requirement of TABOR.		

PART 10 - GENERAL INFORMATION			
Please answer the following questions by marking in the appropriate boxes		Yes	No
10-1	Is the entity a newly formed governmental entity?		X
If yes:	Date of formation:		
10-2	Is the entity a metropolitan district?	X	
10-3	The District will be the "Residential Financing District" organized to finance, construct, own, manage and operate public improvements in a three district development, including Districts No. 1 and No. 3. Services include construction, installation, perpetual maintenance and financing of certain water, sanitation, street, safety protection, part and recreation, transportation, television relay and translation facilities, mosquito control and limited fire protection		
10-4	Does the entity have an agreement with another government to provide services?	X	
If yes:	List the name of the other government entity and the services provided: City and County of Broomfield, Colorado - To provide certain public improvements as outlined in the service plan.		

PART 11 - GOVERNING BODY APPROVAL

We, the undersigned, certify that this Application for Exemption from Audit has been:
 Prepared consistent with Section 29-1-604, C.R.S., which states that an Application with revenues and expenditures of \$100,000 or less **must be prepared by a person skilled in governmental accounting**;
 Completed to the best of our knowledge and is **accurate and true**;
 Reviewed and approved by a **majority of the governing body**.

Note: Please list all current members of the governing body. Original signatures must be provided for a majority of the governing body if the application is mailed, or a resolution may be provided in lieu of original signatures.

	Name (print names of all current members of the governing body)	Date Term Expires	Original Signature (unless resolution is attached)
1	Gregg A. Bradbury	May, 2012	
2	Brain Daly	May, 2010	
3	Charles Church McKay	May, 2012	
4	Craig Veldhuizen	May, 2012	
5	Jeff L. Nading	May, 2010	
6			
7			