APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

Prairie Center Metropolitan District No. 6 NAME OF GOVERNMENT 8390 East Crescent Parkway **ADDRESS** Suite 300 Greenwood Village, CO 80111-2814 **CONTACT PERSON** Gigi Pangindian **PHONE** 303-779-5710

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

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)

EMAIL

ADDRESS

Gigi Pangindian Accountant for the District CliftonLarsonAllen LLP

gigi.pangindian@claconnect.com

8390 East Crescent Parkway, Suite 300, Greenwood Village, CO 80111-2814

PHONE	303-779-5710				
PREPARER (SIGNATURE REQUIRED)			DATE PREPARED 3/16/2024		
SEE ATTACHED ACCOUNTANT'S COMPILATION REPORT					
Please indicate whether the following financial information is recorded		GOVERNI (MODIFIED ACC		PROPRIETARY (CASH OR BUDGETARY BASIS)	
using Governmental or Proprietary	fund types	7			

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: Pr	roperty	(report mills levied in Question 10-6)	\$ -	space to provide
2-2	Sı	pecific owners	ship	\$ -	any necessary
2-3	Sa	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 serv	vices		\$ -	
2-15	Debt proceeds		(should agree with line 4-4, column 2)	\$ -	
2-16	Lease proceeds			-	
2-17	Developer Advances re	eceived	(should agree with line 4-4)	\$ -	
2-18	Proceeds from sale of	capital assets	3	\$ -	
2-19	Fire and police pensio	n		\$ -	
2-20	Donations			\$ -	
2-21	Other (specify):			\$ -	
2-22				\$ -	
2-23				\$ -	
2-24		(add lin	es 2-1 through 2-23) TOTAL REVENUE	\$ -	

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.

	interest payments on long-term debt. Financial information will not include	e fund equity infori	mation.	
Line#	Description		Round to nearest Dollar	Please use this
3-1	Administrative		\$ -	space to provide
3-2	Salaries		\$ -	any necessary
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 (show	ld agree with Part 4)	\$ -	
3-18	Debt service interest		\$ -	
3-19	Repayment of Developer Advance Principal (should	d agree with line 4-4)	\$ -	
3-20	Repayment of Developer Advance Interest		\$ -	
3-21	Contribution to pension plan (sho	uld agree to line 7-2)	\$ -	
3-22	Contribution to Fire & Police Pension Assoc. (sho	uld agree to line 7-2)	\$ -	
3-23	Other (specify):			
3-24			\$ -	
3-25			\$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITUR	RES/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 - LONG FORM".

	PART 4 - DEBT OUTSTANDING	3, K	SSUE), A	ND R	ETIR	RED		
	Please answer the following questions by marking the a	approp	oriate boxes.				Yes		No
4-1					[/	
	If Yes, please attach a copy of the entity's Debt Repayment Se					_	_	_	_
4-2	Is the debt repayment schedule attached? If no, MUST explain	<u>n bel</u>	ow:			ı l		L	7
	The District has no outstanding debt.								
4-3	Le the entity compart in its debt coming permants 2 ft as MIC.	-	lain balaw			J r	\neg	г	7
4-3	Is the entity current in its debt service payments? If no, MUST The District has no outstanding debt.	ехр	iain below	:		ا		L	7
	The District has no outstanding debt.								
4-4	Please complete the following debt schedule, if applicable:	0.4				Datim	al alconios o	Outst	
	(please only include principal amounts)(enter all amount as positive		standing at of prior year*		ued during year		ed during year		inding at ir-end
	numbers)	enac	n prior year		yeai		yeai	yea	ii-eiiu
	General obligation bonds	\$	-	\$	-	\$	-	\$	-
	Revenue bonds	\$	-	\$	-	\$	-	\$	-
	Notes/Loans	\$	-	\$	-	\$	-	\$	-
	Lease & SBITA** Liabilities [GASB 87 & 96]	\$	-	\$	-	\$	-	\$	-
	Developer Advances	\$	-	\$	-	\$	-	\$	-
	Other (specify):	\$	-	\$	-	\$	-	\$	-
	TOTAL	\$	-	\$	-	\$	-	\$	-
**Subscrip	tion Based Information Technology Arrangements	*Mus	t agree to prid	or year	-end balance				
	Please answer the following questions by marking the appropriate boxes					_	Yes		No
4-5	Does the entity have any authorized, but unissued, debt?	Φ.	0.7	700.0	20,000,00	1	7		
If yes:	How much?	\$			00,000.00	ļ			
	Date the debt was authorized:			2006		ļ			_
4-6	Does the entity intend to issue debt within the next calendar	year?)			1			7
If yes:	How much?	\$			-	J	_		_
4-7	Does the entity have debt that has been refinanced that it is s	till re	sponsible	for?					√
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?					J			П
	What are the annual lease payments?	\$				1			
	Part 4 - Please use this space to provide any explanations/con		ts or attac	h ser	parate doc	ument	ation, if n	eeded	
	. a		or attao	501				.50404	

	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			\$ -	
0 0			\$ -	
			\$ -	
	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.?			V
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.)?			V

If no, MUST use this space to provide any explanations: The District has no Checking or Savings account.

7-1

	PART 6 - CAPITAL AND RIC	GHT-TO-L	ISE ASSE	TS	
	Please answer the following questions by marking in the appropriate box			Yes	No
6-1	Does the entity have capital assets?				7
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		J
	The District has no capital assets.				
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 ye			
	Part 6 - Please use this space to provide any explanations	c/comments or a	ittach documer	ntation, if neede	ed:

PART 7 - PENSION INFORMATION

Yes

No

1

Please answer the following questions by marking in the appropriate boxes.

Does the entity have an "old hire" firefighters' pension plan?

7-2 If yes:				7	
	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 a	as of Jan	\$ -		
	Part 7 - Please use this space to provide any ex	planations	or comments:	:	
	PART 8 - BUDGET INFO	ORMAT	ION		
	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 cuin accordance with Section 29-1-113 C.R.S.? If no, MUST explain:	urrent year	V		
8-2	Did the entity pass an appropriations resolution, in accordance with 29-1-108 C.R.S.? If no, MUST explain:	h Section	V		
If yes:	Please indicate the amount budgeted for each fund for the year rep	orted:			
	· · · · · · · · · · · · · · · · · · ·	al Appropriati	ons By Fund		
	General Fund \$		-		

	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.	4	Ш
If no, MI	JST 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?		V
If yes: 10-2	Date of formation: Has the entity changed its name in the past or current year?]	V
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If yes:	Please list the NEW name & PRIOR name:		
11 yes.	riedse list the NEW hame & FRIOR hame.]	
10-3	Is the entity a metropolitan district?	J	
	Please indicate what services the entity provides:	_	<u>—</u>
	See below]	
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:		
		J	
10-5	Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during	1	7
If yes:	Date Filed:		
10-6	Does the entity have a certified Mill Levy?		7
If yes:	Please provide the following mills levied for the year reported (do not report \$ amounts):		
	Bond Redemption mills		-
	General/Other mills		-
	Total mills		-
	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.		
	The state of the s		
	Please use this space to provide any additional explanations or comments not previous	usly included:	

10-3: The District was established to provide financing for the design, acquisition, installation, construction and completion of public improvements and services, including streets, transportation, drainage improvements, traffic and safety controls, park and recreation facilities, water, sewer, television relay and translation and mosquito and pest control services.

	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?	7	

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 members of current governing body below.	A MAJORITY of the members of the governing body must sign below.
Board Member 1	Print Board Member's Name Michael Tamblyn	I, Michael Tamblyn, 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 2025
Board Member 2	Print Board Member's Name Richard Merkel	I, Richard Merkel, 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
Board Member 3	Print Board Member's Name	I
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



CliftonLarsonAllen LLP 8390 East Crescent Parkway, Suite 300 Greenwood Village, CO 80111 phone 303-779-5710 fax 303-779-0348 claconnect.com

Accountant's Compilation Report

Board of Directors Prairie Center Metropolitan District No. 6 Adams County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Prairie Center Metropolitan District No. 6 as of and for the year ended December 31, 2023, 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.

We are not independent with respect to Prairie Center Metropolitan District No. 6.

Greenwood Village, Colorado

CliftonLarsonAllen LLP

March 16, 2024