SERVICE DELIVERY STRATEGY UPDATE **CERTIFICATIONS**

Instructions:

This two page form must, at a minimum, be signed by an authorized representative of the following governments: 1) the county; 2) the city serving as the county seat; 3) all cities having a 2000 population of over 9,000 residing within the county; and 4) no less than 50% of all other cities with a 2000 population of between 500 and 9,000 residing within the county. Cities with a 2000 population below 500 and local authorities providing services under the strategy are not required to sign this form, but are encouraged to do so.

	UPDATED SERVICE DELIVERY STRATEGY FOR	Monroe	COUNTY
We.	, the undersigned authorized representatives of the jurisdic	ctions listed below, certify that:	
1.	We have reviewed our existing Service Delivery Strategy (Check only one box for question #1)	and have determined that:	
	A. Our Strategy continues to accurately reflect ou county and no changes in our Strategy are need	r preferred arrangements for provided at this time; or	ling local services throughout our
	B. Our Strategy has been revised to reflect our pre	ferred arrangements for providing l	local services.
lf O	option A is selected, only this form, signed by the appropria	ate local government representative	s must be provided to DCA.
If O with	Option B is selected, this form, signed by the appropriate lo	cal government representatives, mu	ust be submitted to DCA along
	 an updated "Summary of Service Arrangements" fo any supporting local agreements pertaining to each of an updated service area map depicting the agreed upprovider for each service that has been revised/update coincide with local political boundaries. 	of these services that has been revis	ed/updated; and
2.	Each of our governing bodies (County Commission and C resolutions agreeing to the Service Delivery arrangements implementation of our service delivery strategy (O.C.G.A	s identified in our strategy and have	s strategy have adopted executed agreements for
3.	Our service delivery strategy continues to promote the del and responsive manner for all residents, individuals and p	livery of local government services property owners throughout the countries throughout the countries of the	in the most efficient, effective, nty (O.C.G.A. 36-70-24(1));
4.	Our service delivery strategy continues to provide that was geographic boundaries of a service provider are reasonable located within the geographic boundaries of the service provider are reasonable.	e and are not arbitrarily higher than	ners located outside the the the fees charged to customers
	Our service delivery strategy continues to ensure that the those jointly funded by the county and one or more munic county are borne by the unincorporated area residents, ind 36-70-24 (3));	cipalities) primarily for the benefit of	of the unincorporated area of the
	All referenced maps	Ve	refied
2	dated 08.99.	age 1 of 2	

- 6. Our Service Delivery Strategy continues to ensure that the officially adopted County and City land use plans of all local governments located in the County are compatible and nonconflicting (O.C.G.A. 36-70-24 (4)(A));
- 7. Our Service Delivery Strategy continues to ensure that the provision of extraterritorial water and sewer services by any jurisdiction is consistent with all County and City land use plans and ordinances (O.C.G.A. 36-70-24 (4)(B)); and
- 8. Our Service Delivery Strategy continues to contain an agreed upon process between the county government and each city located in the county to resolve land use classification disputes when the county objects to the proposed land use of an area to be annexed into a city within the county (O.C.G.A. 36-70-24 (4)(C))¹ and;
- 9. DCA has been provided a copy of this certification and copies of all forms, maps and supporting agreements needed to accurately depict our agreed upon strategy (O.C.G.A. 36-70-27).

If the County does not have an Annexation/Land Use dispute resolution process with each of its cities, list the cities where no agreed upon process exists:

SIGNATURE:	NAME: (Please print or type)	TITLE:	JURISDICTION:	DATE:
he Peter	James Peters	County Commission Vice-Chairman	Monroe County	10-14-07
June 100	James Pace	Mayor	City of Forsyth	10-16-67
SOL	Steve Eller	Mayor	City of Culloden	10.20-07

RESOLUTION CITY OF CULLODEN

WHEREAS, the Georgia State Legislature adopted during its 1997 Legislative Session the Service Delivery Strategy Act: and

WHEREAS, this act requires each and every county within the State of Georgia to adopt a Service Delivery Strategy which identifies the methods, funding sources, service provider, and geographic service area of each public service activity provided within the county; and

WHEREAS, the Service Delivery Strategy must be officially adopted and verified by the Georgia Department of Community Affairs by October 31, 2007; and

WHEREAS, city and county officials have worked diligently to revise the county's Service Delivery Strategy and authorizing the Mayor to sign the requisite documents acknowledging approval of the Service Delivery Strategy; and

NOW THEREFORE, BE IT RESOLVED by the City of Culloden that the attached *Monroe County- City of Culloden Service Delivery Strategy* is hereby adopted as the official Service Delivery Strategy, to be updated from time-to-time as required in the Title 36 of the Official Code of Georgia Annotated 36-70-1 et al; and

BE IT FURTHER RESOLVED that the City of Culloden is hereby authorized to place the Service Delivery Strategy on the appropriate forms prescribed by the Georgia Department of Community Affairs, to execute those forms in the proper places, and to submit the Service Delivery Strategy to the Department of Community Affairs for verification in compliance with O.C.G.A. 36-70-26.

Adopted this October 20 day of 2007 at the city's regular council meeting.

Mayor, City of Culloden

dity Clerk, City of Culloden



MONROE COUNTY BOARD OF COMMISSIONERS RESOLUTION

- Whereas, the Georgia State Legislature adopted during its 1997 Legislative Session the Service Delivery Strategy Act: and
- Whereas, this act requires each and every county within the State of Georgia to adopt a Service Delivery Strategy which identifies the methods, funding sources, service provider, and geographic service area of each public service activity provided within the county; and
- Whereas, the Service Delivery Strategy must be officially adopted and verified by the Georgia Department of Community Affairs by October 31, 2007; and
- Whereas, city and county officials have worked diligently to revise the county's Service Delivery Strategy and authorizing the Chairman to sign the requisite documents acknowledging approval of the Service Delivery Strategy; and
- Now Therefore, Be It Resolved by the Monroe County Board of Commissioners that the attached Monroe County- City of Forsyth Service Delivery Strategy is hereby adopted as the official Service Delivery Strategy, to be updated from time-to-time as required in the Title 36 of the Official Code of Georgia Annotated 36-70-1 et al; and
- Be It Further Resolved that the Monroe County Board of Commissioners is hereby authorized to place the Service Delivery Strategy on the appropriate forms prescribed by the Georgia Department of Community Affairs, to execute those forms in the proper places, and to submit the Service Delivery Strategy to the Department of Community Affairs for verification in compliance with O.C.G.A. 36-70-26.

Adopted this October 16 of 2007 at the county's regular Commission meeting.

Vice Chairman James C. Peters

County Clerk Cindy Crowley

RESOLUTION CITY OF FORSYTH

WHEREAS, the Georgia State Legislature adopted during its 1997 Legislative Session the Service Delivery Strategy Act: and

WHEREAS, this act requires each and every county within the State of Georgia to adopt a Service Delivery Strategy which identifies the methods, funding sources, service provider, and geographic service area of each public service activity provided within the county; and

WHEREAS, the Service Delivery Strategy must be officially adopted and verified by the Georgia Department of Community Affairs by October, 2007; and

WHEREAS, city and county officials have worked diligently to revise the county's Service Delivery Strategy and authorizing the Mayor to sign the requisite documents acknowledging approval of the Service Delivery Strategy; and

NOW THEREFORE, BE IT RESOLVED by the City of Forsyth that the attached *Monroe County- City of Forsyth Service Delivery Strategy* is hereby adopted as the official Service Delivery Strategy, to be updated from time-to-time as required in the Title 36 of the Official Code of Georgia Annotated 36-70-1 et al; and

BE IT FURTHER RESOLVED that the City of Forsyth is hereby authorized to place the Service Delivery Strategy on the appropriate forms prescribed by the Georgia Department of Community Affairs, to execute those forms in the proper places, and to submit the Service Delivery Strategy to the Department of Community Affairs for verification in compliance with O.C.G.A. 36-70-26.

Adopted this October 16 day of 2007 at the city's regular council meeting.

Layor, City of Forsyth

City Clerk, City of Forsyth

local resolution. The law is intended to guide the process but should be done so under legal counsel from each municipality. This law has not been incorporated into this document as it subject to change.

SECTION C

Adoption of the Strategy (O.C.G.A. 36-70-21, 36-70-25)

"Local governments within each county must execute an agreement for the implementation of a Service Delivery Strategy by July 1, 1999. Adoption of the Strategy must be accomplished by adoption of a resolution by:

- the county government authority;
- the governing authority of each city located within the county which has a population of 9,000 or greater within the county;
- the city which serves as the county seat; and
- no less than half of the remaining cities which have a population of at least 500 persons within the county " (et al., page 14).

In Monroe County, the following jurisdictions are required to adopt the Monroe County Service Delivery Strategy – Monroe County and the City of Forsyth.

Completion of this final Service Delivery Strategy indicates that all jurisdictions required to adopt the Strategy for Monroe County, as outlined above, have reviewed and adopted the strategy through the legal mechanism identified in Section C. A copy of the executed resolution for each jurisdiction adopting the strategy is attached as Appendix F.

The parties involved have agreed that this agreement will expire on December 31, 2008 unless reapproved prior to that date by all required parties.

- 2. Within ten (10) working days following receipt of the above information, the local government receiving the notice of water/sewer line extension will forward to the local government proposing the extension a statement either (a) indicating that the proposal is compatible with that community's land use plan and all applicable ordinances; or (b) a description of why the proposal is inconsistent with the land use plan or ordinances and supporting documentation. If the community proposing the service extension does not receive a response in writing within ten (10) days, the proposal will be determined to be consistent with the community's land use plan or land use ordinances.
- 3. If the community desiring to extend the water and sewer services receives a notification that the proposal is incompatible with the land use plan, the community may respond in writing within ten (10) days of receiving the notification of land use inconsistency by (a) requesting a meeting to discuss a formal change to the land use plan, or (b) agreeing with the content of the notification and stopping action on the proposed service extension.
- 4. In the event the respective jurisdictions seek mediation, the governments will agree on a mediator, mediation schedule, and determine the persons who will participate in the mediation. Any costs associated with the mediation will be shared equally between the disputing parties.
- 5. A proposal to extend extraterritorial water and sewer services shall not be implemented until any bona fide land use plan or land use ordinance inconsistencies are resolved pursuant to this agreement.

In addition to the previously listed requirements, both Monroe County and/or the City of Forsyth must provide written notification prior to:

- 1. Application to all water permitting authorities;
- 2. Securing financing of water expansion such as bonds or state loans;
- 3. Any construction pertaining to water line expansion.

Resolution of Annexation Dispute Over Land Use

State law now governs the dispute resolution process and therefore has eliminated the need for a



Instructions:	
listed on page 1. Answer each question below, att	r each service listed on page 1, Section III. Use exactly the same service names taching additional pages as necessary. If the contact person for this service (listed at eported to the Department of Community Affairs.
County: Monroe	Service: Ambulance
1. Check the box that best describes the	agreed upon delivery arrangement for this service:
	ride (i.e., including all cities and unincorporated areas) by a single ted, identify the government, authority or organization providing the
Service will be provided only in the (If this box is checked, identify the generate.):	ne unincorporated portion of the county by a single service provider overnment, authority or organization providing the
will not be provided in unincorporate	is service only within their incorporated boundaries, and the service ad areas. (If this box is checked, identify the government(s), ne service:
	is service only within their incorporated boundaries, and the county rated areas. (If this box is checked, identify the government(s), ne service.):
Other (If this box is checked, attacprovider, and identify the government each service area.):	ch a legible map delineating the service area of each service nt, authority, or other organization that will provide service within
2. In developing the strategy, were over of this service identified? ☐ Yes ✓ No	rlapping service areas, unnecessary competition and/or duplication
arrangement (i.e., overlapping but high	the strategy, attach an explanation for continuing the her levels of service (See O.C.G.A. 36-70-24(1)), overriding hat overlapping service areas or competition cannot be eliminated).
If these conditions will be eliminated up step or action that will be taken to elimi- completing it.	nder the strategy, attach an implementation schedule listing each inate them, the responsible party and the agreed upon deadline for

Local Government or Authority:	Fundin	g Method:
Ionroe County	General Fund and User Fees	
		W. C. D. Ali
4. How will the strategy change the p the county?	revious arrangements for providin	g and/or funding this service within
This strategy does not alter the me continue to provide the service cou Delivery Strategy document contai	intywide through general fund	revenues. The attached Service
5. List any formal service delivery ag implement the strategy for this serv		ntracts that will be used to
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
6. What other mechanisms (if any) w	ill be used to implement the strate	
6. What other mechanisms (if any) w	ill be used to implement the strate at Assembly, rate or fee changes, on to use resolutions adopted by each of this service will be carried sage of the adoption resolution	gy for this service (e.g., ordinances, etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized
6. What other mechanisms (if any) w resolutions, local acts of the General The county and city have elected a Service Delivery Strategy. Provisi by the governing bodies upon pasoutlined above will govern the deli	ill be used to implement the strate al Assembly, rate or fee changes, on the use resolutions adopted by each on of this service will be carried sage of the adoption resolution very of this service.	gy for this service (e.g., ordinances etc.), and when will they take effect each governing body to initiate the out as outlined and authorized and Additionally, any agreements
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6. What other mechanisms (if any) w resolutions, local acts of the General The county and city have elected a Service Delivery Strategy. Provisi by the governing bodies upon pasoutlined above will govern the deli	ill be used to implement the strate al Assembly, rate or fee changes, on the use resolutions adopted by each on of this service will be carried sage of the adoption resolution very of this service. Date completed:	gy for this service (e.g., ordinances etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized and Additionally, any agreements



Instructions:	
Make copies of this form and complete one for listed on page 1. Answer each question below, att the bottom of the page) changes, this should be re	each service listed on page 1, Section III. Use exactly the same service names aching additional pages as necessary. If the contact person for this service (listed at ported to the Department of Community Affairs.
County: Monroe	Service: Building Inspection & Code Enforcement
1. Check the box that best describes the	agreed upon delivery arrangement for this service:
Service will be provided countyw service provider. (If this box is check service.): Monroe County	ide (i.e., including all cities and unincorporated areas) by a single ed, identify the government, authority or organization providing the
Service will be provided only in the (If this box is checked, identify the goservice.):	e unincorporated portion of the county by a single service provider overnment, authority or organization providing the
One or more cities will provide thi will not be provided in unincorporate authority or organization providing the	s service only within their incorporated boundaries, and the service d areas. (If this box is checked, identify the government(s), se service:
One or more cities will provide thi will provide the service in unincorpor authority or organization providing the	s service only within their incorporated boundaries, and the county rated areas. (If this box is checked, identify the government(s), se service.):
Other (If this box is checked, attac provider, and identify the government each service area.):	ch a legible map delineating the service area of each service at, authority, or other organization that will provide service within
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If these conditions will be eliminated un step or action that will be taken to elimin completing it.	der the strategy, attach an implementation schedule listing each nate them, the responsible party and the agreed upon deadline for

Local Government or Auth	ority: Funding	ig Method:
fonroe County	User Fees	
City of Forsyth	User Fees	
4. How will the strategy chang	e the previous arrangements for providing	ng and/or funding this service within
the county?		
continue to provide the servi	the method of service delivery for this ice countywide through general fund contains additional information relate	revenues. The attached Service
5. List any formal service deli	very agreements or intergovernmental co	ontracts that will be used to
implement the strategy for the Agreement Name:	his service: Contracting Parties:	Effective and Ending Dates:
implement the strategy for t		Effective and Ending Dates:
Agreement Name: 6. What other mechanisms (if		egy for this service (e.g., ordinances
6. What other mechanisms (if resolutions, local acts of the Service Delivery Strategy. by the governing bodies up	any) will be used to implement the strate General Assembly, rate or fee changes, ected to use resolutions adopted by Provision of this service will be carried on passage of the adoption resolution	egy for this service (e.g., ordinances etc.), and when will they take effect each governing body to initiate the out as outlined and authorized
6. What other mechanisms (if resolutions, local acts of the Service Delivery Strategy. by the governing bodies up	any) will be used to implement the strate General Assembly, rate or fee changes, ected to use resolutions adopted by Provision of this service will be carried on passage of the adoption resolution he delivery of this service.	egy for this service (e.g., ordinances etc.), and when will they take effect each governing body to initiate the out as outlined and authorized n. Additionally, any agreements
6. What other mechanisms (if resolutions, local acts of the Service Delivery Strategy. by the governing bodies upoutlined above will govern to 7. Person completing form: Phone number: 478-751-6160	any) will be used to implement the strate General Assembly, rate or fee changes, ected to use resolutions adopted by Provision of this service will be carrie on passage of the adoption resolution he delivery of this service.	egy for this service (e.g., ordinances, etc.), and when will they take effect each governing body to initiate the out as outlined and authorized n. Additionally, any agreements



Instructions:	
listed on page 1. Answer each question below,	for each service listed on page 1, Section III. Use exactly the same service names attaching additional pages as necessary. If the contact person for this service (listed at e reported to the Department of Community Affairs.
County: Monroe	Service: Cemetery
1. Check the box that best describes t	he agreed upon delivery arrangement for this service:
	wide (i.e., including all cities and unincorporated areas) by a single cked, identify the government, authority or organization providing the
Service will be provided only in (If this box is checked, identify the service.):	the unincorporated portion of the county by a single service provider government, authority or organization providing the
One or more cities will provide will not be provided in unincorpora authority or organization providing	this service only within their incorporated boundaries, and the service ated areas. (If this box is checked, identify the government(s), the service: Cities of Forsyth and Culloden
	this service only within their incorporated boundaries, and the county porated areas. (If this box is checked, identify the government(s), the service.):
Other (If this box is checked, att provider, and identify the governmeach service area.):	tach a legible map delineating the service area of each service ment, authority, or other organization that will provide service within
2. In developing the strategy, were ov of this service identified? ☐ Yes ☑ No	verlapping service areas, unnecessary competition and/or duplication
arrangement (i.e., overlapping but h	er the strategy, attach an explanation for continuing the igher levels of service (See O.C.G.A. 36-70-24(1)), overriding a that overlapping service areas or competition cannot be eliminated).
If these conditions will be eliminated step or action that will be taken to elicompleting it.	under the strategy, attach an implementation schedule listing each minate them, the responsible party and the agreed upon deadline for

Local Government or Author	ority: Fundin	g Method:
Monroe County	General Fund	
City of Culloden	General Fund	
4. How will the strategy change the county?	the previous arrangements for providing	ng and/or funding this service within
continue to provide the service Delivery Strategy document of	ne method of service delivery for this e countywide through general fund contains additional information relate ery agreements or intergovernmental co	revenues. The attached Service ed to the provision of this service
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Agreement Name:	Contracting Parties:	Effective and Ending Dates:
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Agreement Name: 6. What other mechanisms (if a		egy for this service (e.g., ordinances.
6. What other mechanisms (if a resolutions, local acts of the County and city have ele Service Delivery Strategy. P	ny) will be used to implement the strate General Assembly, rate or fee changes, cted to use resolutions adopted by crovision of this service will be carried passage of the adoption resolution	egy for this service (e.g., ordinances, etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized
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Instructions:	
listed on page 1. Answer each question below,	or each service listed on page 1, Section III. Use exactly the same service names attaching additional pages as necessary. If the contact person for this service (listed at reported to the Department of Community Affairs.
County: Monroe	Service: Child Advocacy
1. Check the box that best describes th	ne agreed upon delivery arrangement for this service:
Service will be provided county service provider. (If this box is checkervice.):	wide (i.e., including all cities and unincorporated areas) by a single cked, identify the government, authority or organization providing the
Service will be provided only in (If this box is checked, identify the service.):	the unincorporated portion of the county by a single service provider government, authority or organization providing the
One or more cities will provide t will not be provided in unincorpora authority or organization providing	his service only within their incorporated boundaries, and the service ted areas. (If this box is checked, identify the government(s), the service:
One or more cities will provide t will provide the service in unincorp authority or organization providing	his service only within their incorporated boundaries, and the county orated areas. (If this box is checked, identify the government(s), the service.):
Other (If this box is checked, att provider, and identify the governmeach service area.):	each a legible map delineating the service area of each service ment, authority, or other organization that will provide service within
2. In developing the strategy, were ov of this service identified? Yes No	erlapping service areas, unnecessary competition and/or duplication
arrangement (i.e., overlapping but hi	r the strategy, attach an explanation for continuing the gher levels of service (See O.C.G.A. 36-70-24(1)), overriding that overlapping service areas or competition cannot be eliminated).
	under the strategy, attach an implementation schedule listing each ninate them, the responsible party and the agreed upon deadline for

	Fundin	g Method:
Local Government or Authority: Monroe County	General Fund, State and Federal Gran	
4. How will the strategy change the the county?	previous arrangements for providir	g and/or funding this service within
This strategy does not alter the metontinue to provide the service continuery Strategy document contains	untywide through general fund	revenues. The attached Service
5. List any formal service delivery a implement the strategy for this ser Agreement Name:		ntracts that will be used to Effective and Ending Dates:
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Instructions: Make copies of this form and complete one	for each service listed on page 1, Section III. Use exactly the same service names
	attaching additional pages as necessary. If the contact person for this service (listed a e reported to the Department of Community Affairs.
County: Monroe	Service: Coroner
1. Check the box that best describes t	he agreed upon delivery arrangement for this service:
	wide (i.e., including all cities and unincorporated areas) by a single cked, identify the government, authority or organization providing the
	the unincorporated portion of the county by a single service provide government, authority or organization providing the
	this service only within their incorporated boundaries, and the service ated areas. (If this box is checked, identify the government(s), the service:
	this service only within their incorporated boundaries, and the county porated areas. (If this box is checked, identify the government(s), the service.):
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2. In developing the strategy, were over of this service identified? Yes No	verlapping service areas, unnecessary competition and/or duplication
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	under the strategy, attach an implementation schedule listing each iminate them, the responsible party and the agreed upon deadline for

Local Government or Author	rity: Fundin	ng Method:
Monroe County	General Fund	
4. How will the strategy change the county?	the previous arrangements for providing	ng and/or funding this service withi
continue to provide the service	e method of service delivery for this e countywide through general fund ontains additional information relate	revenues. The attached Service
5. List any formal service deliver implement the strategy for this	ry agreements or intergovernmental co	ontracts that will be used to
and the second second		Effective and Ending Dates.
Agreement Name:	Contracting Parties:	Effective and Ending Dates
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Agreement Name: 6. What other mechanisms (if an resolutions, local acts of the Grand County and city have elected Service Delivery Strategy. Pro	y) will be used to implement the strate eneral Assembly, rate or fee changes, ted to use resolutions adopted by envision of this service will be carrie passage of the adoption resolution delivery of this service.	egy for this service (e.g., ordinances etc.), and when will they take effect each governing body to initiate t d out as outlined and authorized n. Additionally, any agreements



Instructions

County: Monroe	Service: Courts
1. Check the box that best describ	pes the agreed upon delivery arrangement for this service:
Service will be provided conservice provider. (If this box is service.):	untywide (i.e., including all cities and unincorporated areas) by a single checked, identify the government, authority or organization providing the
	y in the unincorporated portion of the county by a single service provider. the government, authority or organization providing the
One or more cities will prov will not be provided in unincor authority or organization provide	ide this service only within their incorporated boundaries, and the service porated areas. (If this box is checked, identify the government(s), ding the service:
	ide this service only within their incorporated boundaries, and the county corporated areas. (If this box is checked, identify the government(s), ding the service.):
	l, attach a legible map delineating the service area of each service ernment, authority, or other organization that will provide service within
2. In developing the strategy, wer of this service identified? ☐ Yes ☑ No	re overlapping service areas, unnecessary competition and/or duplication
arrangement (i.e., overlapping b	under the strategy, attach an explanation for continuing the ut higher levels of service (See O.C.G.A. 36-70-24(1)), overriding sons that overlapping service areas or competition cannot be eliminated).

If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it.

Local Government or Autho	rity: Fundin	g Method:
Ionroe County	General Fund and State Fees	
City of Forsyth	General Fund	
4. How will the strategy change the county?	the previous arrangements for providing	ng and/or funding this service within
continue to provide the service	e method of service delivery for this e countywide through general fund ontains additional information relate	revenues. The attached Service
implement the strategy for thi		
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
6. What other mechanisms (if an	ny) will be used to implement the strate General Assembly, rate or fee changes,	egy for this service (e.g., ordinances,
6. What other mechanisms (if ar resolutions, local acts of the C The county and city have electory strategy. Presented the county and city have electory strategy.	ny) will be used to implement the strate General Assembly, rate or fee changes, cted to use resolutions adopted by crovision of this service will be carried a passage of the adoption resolution	egy for this service (e.g., ordinances, etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized
6. What other mechanisms (if ar resolutions, local acts of the C The county and city have electorice Delivery Strategy. Property the governing bodies upor outlined above will govern the	ny) will be used to implement the strate General Assembly, rate or fee changes, cted to use resolutions adopted by crovision of this service will be carried a passage of the adoption resolution edelivery of this service.	egy for this service (e.g., ordinances, etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized h. Additionally, any agreements
6. What other mechanisms (if ar resolutions, local acts of the County and city have elected Service Delivery Strategy. Property the governing bodies upor outlined above will govern the Phone number: 478-751-6160	ny) will be used to implement the strate General Assembly, rate or fee changes, cted to use resolutions adopted by crovision of this service will be carried passage of the adoption resolution edelivery of this service.	egy for this service (e.g., ordinances, etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized h. Additionally, any agreements



Instructions:		
Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names listed on page 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed the bottom of the page) changes, this should be reported to the Department of Community Affairs.		
County: Monroe	Service: Drug Task Force	
1. Check the box that best describes the	agreed upon delivery arrangement for this service:	
Service will be provided countywi service provider. (If this box is checke service.):	ide (i.e., including all cities and unincorporated areas) by a single ed, identify the government, authority or organization providing the	
	e unincorporated portion of the county by a single service provider overnment, authority or organization providing the	
One or more cities will provide this will not be provided in unincorporated authority or organization providing the	s service only within their incorporated boundaries, and the service d areas. (If this box is checked, identify the government(s), e service:	
	s service only within their incorporated boundaries, and the county ated areas. (If this box is checked, identify the government(s), e service.):	
Other (If this box is checked, attace provider, and identify the government each service area.):	th a legible map delineating the service area of each service at, authority, or other organization that will provide service within	
2. In developing the strategy, were over of this service identified? ☐ Yes ✓ No	lapping service areas, unnecessary competition and/or duplication	
arrangement (i.e., overlapping but high	he strategy, attach an explanation for continuing the ner levels of service (See O.C.G.A. 36-70-24(1)), overriding nat overlapping service areas or competition cannot be eliminated).	
	der the strategy, attach an implementation schedule listing each nate them, the responsible party and the agreed upon deadline for	

Local Government of	· Authority: Fun	nding Method:
Monroe County	General Fund and State and Fed	
City of Forsyth	General Fund and State and Fed	eral Grants
4. How will the strategy	change the previous arrangements for prov	viding and/or funding this service withi
continue to provide the	alter the method of service delivery for service countywide through general furners and the contains additional information re	ind revenues. The attached Service
5 1 int now Commel name		1
implement the strategy		
implement the strategy Agreement Name	for this service:	Effective and Ending Dates Bi-Annually Renewed
Agreement Name Orug Task Force 6. What other mechanism resolutions, local acts The county and city has Service Delivery Strate	for this service: Contracting Parties:	Effective and Ending Dates Bi-Annually Renewed grategy for this service (e.g., ordinances tes, etc.), and when will they take effective, and governing body to initiate the tried out as outlined and authorized



Instructions

Thisti uctions.	
	nch service listed on page 1, Section III. Use exactly the same service names thing additional pages as necessary. If the contact person for this service (listed at orted to the Department of Community Affairs.
County: Monroe	Service: E-911 Communications
1. Check the box that best describes the ag	greed upon delivery arrangement for this service:
	e (i.e., including all cities and unincorporated areas) by a single I, identify the government, authority or organization providing the
	unincorporated portion of the county by a single service provider ernment, authority or organization providing the
	service only within their incorporated boundaries, and the service areas. (If this box is checked, identify the government(s), service:
	service only within their incorporated boundaries, and the county ted areas. (If this box is checked, identify the government(s), service.):
	a legible map delineating the service area of each service authority, or other organization that will provide service within
2. In developing the strategy, were overla of this service identified? ☐ Yes ☑ No	pping service areas, unnecessary competition and/or duplication
arrangement (i.e., overlapping but highe	e strategy, attach an explanation for continuing the r levels of service (See O.C.G.A. 36-70-24(1)), overriding t overlapping service areas or competition cannot be eliminated).
	er the strategy, attach an implementation schedule listing each ate them, the responsible party and the agreed upon deadline for

	Fundin	g Method:
Monroe County	General Fund and User Fees	
4. How will the strategy change the pr	evious arrangements for providir	ng and/or funding this service within
This strategy does not alter the met continue to provide the service cou Delivery Strategy document contain	ntywide through general fund	revenues. The attached Service
5. List any formal service delivery agr implement the strategy for this servi		ntracts that will be used to Effective and Ending Dates:
6. What other mechanisms (if any) will resolutions, local acts of the Genera	If be used to implement the strate Assembly, rate or fee changes,	gy for this service (e.g., ordinances, etc.), and when will they take effect
6. What other mechanisms (if any) will resolutions, local acts of the General The county and city have elected to Service Delivery Strategy. Provision by the governing bodies upon passoutlined above will govern the deliv	Assembly, rate or fee changes, or use resolutions adopted by each of this service will be carried age of the adoption resolution	etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized
The county and city have elected to Service Delivery Strategy. Provision by the governing bodies upon pass	Assembly, rate or fee changes, or use resolutions adopted by each of this service will be carried age of the adoption resolution very of this service.	etc.), and when will they take effect each governing body to initiate the d out as outlined and authorized a. Additionally, any agreements



Instructions

instructions:		
Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service name listed on page 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (list the bottom of the page) changes, this should be reported to the Department of Community Affairs.		
County: Monroe	Service: Economic Development/Tourism	
1. Check the box that best describes the ag	greed upon delivery arrangement for this service:	
Service will be provided countywide service provider. (If this box is checked, service.):	e (i.e., including all cities and unincorporated areas) by a single identify the government, authority or organization providing the	
Service will be provided only in the u (If this box is checked, identify the gove service.):	unincorporated portion of the county by a single service provider ernment, authority or organization providing the	
One or more cities will provide this s will not be provided in unincorporated a authority or organization providing the s	ervice only within their incorporated boundaries, and the service areas. (If this box is checked, identify the government(s), service:	
One or more cities will provide this swill provide the service in unincorporate authority or organization providing the s	ervice only within their incorporated boundaries, and the county ed areas. (If this box is checked, identify the government(s), service.):	
Other (If this box is checked, attach a provider, and identify the government, a each service area.): Monroe County, City of Forsyth, City of Culloden	a legible map delineating the service area of each service authority, or other organization that will provide service within	
2. In developing the strategy, were overlap of this service identified? ☐ Yes ✓ No	pping service areas, unnecessary competition and/or duplication	
arrangement (i.e., overlapping but higher	strategy, attach an explanation for continuing the levels of service (See O.C.G.A. 36-70-24(1)), overriding overlapping service areas or competition cannot be eliminated).	
If these conditions will be eliminated unde step or action that will be taken to eliminat completing it.	or the strategy, attach an implementation schedule listing each te them, the responsible party and the agreed upon deadline for	

Local Government or Author	ority: Funding	Method:
Monroe County	General Fund	
City of Forsyth	General Fund, Hotel/Motel Tax,	
Downtown Development Authority	Revenues from the City	
Development Authority	Various Revenue Sources	
the county?	e the previous arrangements for providing	
continue to provide funds for Likewise, the City of Forsyth Development Authority. Each The Downtown Development	the method of service delivery for this the operation of the Development Au will continue to provide funds for the Authority seeks seeks to develop ed Authority will continue to operate wit a greements or intergovernmental contiss service:	thority of Monroe County. operation of the Downtown conomic growth within the count hin the municipal limits of
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Economic Development	Monroe, Forsyth, Chamber, Development Authority	Annually Renewed
resolutions, local acts of the The county and city have ele	any) will be used to implement the strateg General Assembly, rate or fee changes, e ected to use resolutions adopted by e	tc.), and when will they take effect ach governing body to initiate the
resolutions, local acts of the The county and city have ele Service Delivery Strategy. F	General Assembly, rate or fee changes, e ected to use resolutions adopted by e Provision of this service will be carried on passage of the adoption resolution.	tc.), and when will they take effect ach governing body to initiate the out as outlined and authorized
The county and city have ele Service Delivery Strategy. F by the governing bodies upo	General Assembly, rate or fee changes, elected to use resolutions adopted by elected to use resolutions adopted by elected to use resolutions adopted by elected to use resolution passage of the adoption resolution are delivery of this service.	tc.), and when will they take effect ach governing body to initiate the out as outlined and authorized Additionally, any agreements
resolutions, local acts of the The county and city have ele Service Delivery Strategy. F by the governing bodies upcoutlined above will govern the 7. Person completing form: Chi Phone number: 478-751-6160 8. Is this the person who should	General Assembly, rate or fee changes, elected to use resolutions adopted by elected to use resolutions adopted by elected to use resolutions adopted by elected to use resolution and passage of the adoption resolution are delivery of this service.	ach governing body to initiate the out as outlined and authorized. Additionally, any agreements



Instructions:	
listed on page 1. Answer each question below,	for each service listed on page 1, Section III. Use exactly the same service names attaching additional pages as necessary. If the contact person for this service (listed at e reported to the Department of Community Affairs.
County: Monroe	Service: Electricity
1. Check the box that best describes t	the agreed upon delivery arrangement for this service:
	wide (i.e., including all cities and unincorporated areas) by a single cked, identify the government, authority or organization providing the
	the unincorporated portion of the county by a single service provider government, authority or organization providing the
	this service only within their incorporated boundaries, and the service ated areas. (If this box is checked, identify the government(s), at the service: City of Forsyth
	this service only within their incorporated boundaries, and the county porated areas. (If this box is checked, identify the government(s), the service.):
	tach a legible map delineating the service area of each service nent, authority, or other organization that will provide service within
2. In developing the strategy, were over of this service identified? ☐ Yes ✓ No	verlapping service areas, unnecessary competition and/or duplication
arrangement (i.e., overlapping but h	er the strategy, attach an explanation for continuing the higher levels of service (See O.C.G.A. 36-70-24(1)), overriding s that overlapping service areas or competition cannot be eliminated).
	under the strategy, attach an implementation schedule listing each minate them, the responsible party and the agreed upon deadline for

A. How will the strategy change the previous arrangements for providing and/or funding this service we the county? This strategy does not alter the method of service delivery for this service. The county will continue to provide the service countywide through general fund revenues. The attached Ser Delivery Strategy document contains additional information related to the provision of this service implement the strategy for this service: **Agreement Name:** Contracting Parties:** Effective and Ending Date of the General Assembly, rate or fee changes, etc.), and when will they take of the county and city have elected to use resolutions adopted by each governing body to initiat Service Delivery Strategy. Provision of this service will be carried out as outlined and authoric by the governing bodies upon passage of the adoption resolution. Additionally, any agreement outlined above will govern the delivery of this service.		Fundin	ng Method:
This strategy does not alter the method of service delivery for this service. The county will continue to provide the service countywide through general fund revenues. The attached Ser Delivery Strategy document contains additional information related to the provision of this service. 5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service: **Agreement Name:** **Contracting Parties:** **Effective and Ending Date of the General Assembly, rate or fee changes, etc.), and when will they take effective Delivery Strategy. Provision of this service will be carried out as outlined and authorically the governing bodies upon passage of the adoption resolution. Additionally, any agreement.	City of Forsyth		
This strategy does not alter the method of service delivery for this service. The county will continue to provide the service countywide through general fund revenues. The attached Ser Delivery Strategy document contains additional information related to the provision of this service. 5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service: **Agreement Name:** **Contracting Parties:** **Effective and Ending Date of the General Assembly, rate or fee changes, etc.), and when will they take effective Delivery Strategy. Provision of this service will be carried out as outlined and authorizely the governing bodies upon passage of the adoption resolution. Additionally, any agreement.			
This strategy does not alter the method of service delivery for this service. The county will continue to provide the service countywide through general fund revenues. The attached Ser Delivery Strategy document contains additional information related to the provision of this service. 5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service: **Agreement Name:** **Contracting Parties:** **Effective and Ending Date of the General Assembly, rate or fee changes, etc.), and when will they take effective Delivery Strategy. Provision of this service will be carried out as outlined and authorizely the governing bodies upon passage of the adoption resolution. Additionally, any agreement.			
Continue to provide the service countywide through general fund revenues. The attached Ser Delivery Strategy document contains additional information related to the provision of this service. 5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service: Agreement Name: Contracting Parties: Effective and Ending Date of the General Assembly, rate or fee changes, etc.), and when will they take effective Delivery Strategy. Provision of this service will be carried out as outlined and authorize by the governing bodies upon passage of the adoption resolution. Additionally, any agreement		evious arrangements for providir	ng and/or funding this service within
Agreement Name: Contracting Parties: Effective and Ending Date 6. What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinan resolutions, local acts of the General Assembly, rate or fee changes, etc.), and when will they take effective Delivery Strategy. Provision of this service will be carried out as outlined and authorize the governing bodies upon passage of the adoption resolution. Additionally, any agreement	continue to provide the service coul	ntywide through general fund	revenues. The attached Service
6. What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinan resolutions, local acts of the General Assembly, rate or fee changes, etc.), and when will they take ef. The county and city have elected to use resolutions adopted by each governing body to initiat Service Delivery Strategy. Provision of this service will be carried out as outlined and authorize by the governing bodies upon passage of the adoption resolution. Additionally, any agreement	implement the strategy for this servi	ice:	
resolutions, local acts of the General Assembly, rate or fee changes, etc.), and when will they take effective the county and city have elected to use resolutions adopted by each governing body to initiat Service Delivery Strategy. Provision of this service will be carried out as outlined and authorize by the governing bodies upon passage of the adoption resolution. Additionally, any agreement	Agreement Name:	Comracting Farites:	Effective und Ending Dates:
resolutions, local acts of the General Assembly, rate or fee changes, etc.), and when will they take effective the county and city have elected to use resolutions adopted by each governing body to initiat Service Delivery Strategy. Provision of this service will be carried out as outlined and authorize the governing bodies upon passage of the adoption resolution. Additionally, any agreement			
resolutions, local acts of the General Assembly, rate or fee changes, etc.), and when will they take effectively and city have elected to use resolutions adopted by each governing body to initiat Service Delivery Strategy. Provision of this service will be carried out as outlined and authorize by the governing bodies upon passage of the adoption resolution. Additionally, any agreement			
resolutions, local acts of the General Assembly, rate or fee changes, etc.), and when will they take effectively and city have elected to use resolutions adopted by each governing body to initiat Service Delivery Strategy. Provision of this service will be carried out as outlined and authorize by the governing bodies upon passage of the adoption resolution. Additionally, any agreement			
Service Delivery Strategy. Provision of this service will be carried out as outlined and authorize the governing bodies upon passage of the adoption resolution. Additionally, any agreement			
	Service Delivery Strategy. Provision by the governing bodies upon pass	on of this service will be carrie sage of the adoption resolution	d out as outlined and authorized
7. Person completing form: Chan Layson, Middle Georgia RDC Phone number: 478-751-6160 Date completed: 5/9/2006			5/9/2006
8. Is this the person who should be contacted by state agencies when evaluating whether proposed loca government projects are consistent with the service delivery strategy? ☐ Yes ☑ No		Date completed:	



Instructions:		
Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names listed on page 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed the bottom of the page) changes, this should be reported to the Department of Community Affairs.		
County: Monroe	Service: Emergency Management	
1. Check the box that best describes the agr	reed upon delivery arrangement for this service:	
Service will be provided countywide service provider. (If this box is checked, service.):	(i.e., including all cities and unincorporated areas) by a single identify the government, authority or organization providing the	
Service will be provided only in the un (If this box is checked, identify the gover service.):	nincorporated portion of the county by a single service provider.	
One or more cities will provide this se will not be provided in unincorporated ar authority or organization providing the se	ervice only within their incorporated boundaries, and the service reas. (If this box is checked, identify the government(s), ervice:	
One or more cities will provide this se will provide the service in unincorporated authority or organization providing the se	ervice only within their incorporated boundaries, and the county d areas. (If this box is checked, identify the government(s), ervice.):	
Other (If this box is checked, attach a provider, and identify the government, a each service area.):	legible map delineating the service area of each service uthority, or other organization that will provide service within	
2. In developing the strategy, were overlapped of this service identified? ☐ Yes ☑No	oing service areas, unnecessary competition and/or duplication	
arrangement (i.e., overlapping but higher l	strategy, attach an explanation for continuing the levels of service (See O.C.G.A. 36-70-24(1)), overriding overlapping service areas or competition cannot be eliminated).	
If these conditions will be eliminated under step or action that will be taken to eliminate completing it.	the strategy, attach an implementation schedule listing each them, the responsible party and the agreed upon deadline for	

Local Government or Authority	; Funding	g Method:
lonroe County	General Fund and State Grants	3
4. How will the strategy change the the county?	e previous arrangements for providin	g and/or funding this service within
ontinue to provide the service c	method of service delivery for this countywide through general fund that and additional information relate	revenues. The attached Service
5. List any formal service delivery implement the strategy for this se	agreements or intergovernmental coe	ntracts that will be used to
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
	will be used to implement the strate	gy for this service (e.g., ordinances,
6. What other mechanisms (if any) resolutions, local acts of the Gen	neral Assembly, rate or fee changes, e	etc.), and when will they take effect
resolutions, local acts of the Gen The county and city have electe Service Delivery Strategy. Prov	ed to use resolutions adopted by existence of this service will be carried assage of the adoption resolution	each governing body to initiate the
The county and city have electe Service Delivery Strategy. Prov by the governing bodies upon p	eral Assembly, rate or fee changes, enteral Assembly, rate or fee changes, enter to use resolutions adopted by exision of this service will be carried assage of the adoption resolution delivery of this service.	each governing body to initiate the dout as outlined and authorized a. Additionally, any agreements



completing it.

Instructions:		
Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names listed on page 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.		
County: Monroe	Se	ervice: Fire Protection
1. Check the box	x that best describes the agreed upon del	ivery arrangement for this service:
service provid	ill be provided countywide (i.e., includin der. (If this box is checked, identify the g	ng all cities and unincorporated areas) by a single government, authority or organization providing the
Service will (If this box is service.):	Il be provided only in the unincorporated checked, identify the government, autho	d portion of the county by a single service provider ority or organization providing the
will not be pro	re cities will provide this service only wind ovided in unincorporated areas. (If this by rganization providing the service:	ithin their incorporated boundaries, and the service pox is checked, identify the government(s),
will provide the	re cities will provide this service only wi he service in unincorporated areas. (If the rganization providing the service.):	ithin their incorporated boundaries, and the county is box is checked, identify the government(s),
provider, and each service a	l identify the government, authority, or o	delineating the service area of each service other organization that will provide service within
2. In developing of this service ☐Yes ☑No	the strategy, were overlapping service a identified?	areas, unnecessary competition and/or duplication
arrangement (i.	ns will continue under the strategy, attace.e., overlapping but higher levels of serviuplication, or reasons that overlapping se	ch an explanation for continuing the ice (See O.C.G.A. 36-70-24(1)), overriding ervice areas or competition cannot be eliminated).
If these conditionstep or action the	ns will be eliminated under the strategy, at will be taken to eliminate them, the re-	attach an implementation schedule listing each sponsible party and the agreed upon deadline for

Local Government or Authoronoe County ity of Forsyth	Insurance Premium Tax, LOST, and Ge	g Method:
		eneral Fund
ity of i orayur	General Fund	
ity of Culloden	General Fund	
4. How will the strategy change the county?	e the previous arrangements for providing	g and/or funding this service withi
continue to provide the service evenues from insurance precontinue to provide the service map is attached due to	ne method of service delivery for this ce in the unincorporated areas and in mium tax and the local option sales to ces in its municipal area through generate the service areas are clearly ery agreements or intergovernmental consistency.	a the City of Culloden through eax. The City of Forsyth will eral fund revenues. No service defined. The attached Service
Agreement Name:	Contracting Parties:	Effective and Ending Dates
ire Protection	Culloden with Monroe	
		Part and the second second
resolutions, local acts of the The county and city have ele Service Delivery Strategy. F	General Assembly, rate or fee changes, e ected to use resolutions adopted by e Provision of this service will be carried in passage of the adoption resolution	etc.), and when will they take effecture. each governing body to initiate to the court as outlined and authorized
7. Person completing form: Chi Phone number: 478-751-6160	ne delivery of this service.	
	Date completed:	31 31 2 3 3 U
Phone number. 475-731-0160		
PHONE HUMBEL. 476-751-6160		



Instructions:	
listed on page 1. Answer each question below	for each service listed on page 1, Section III. Use exactly the same service names, attaching additional pages as necessary. If the contact person for this service (listed at the reported to the Department of Community Affairs.
County: Monroe	Service: Health Services
1. Check the box that best describes	the agreed upon delivery arrangement for this service:
Service will be provided county service provider. (If this box is che service.): Monroe County	ywide (i.e., including all cities and unincorporated areas) by a single ecked, identify the government, authority or organization providing the
Service will be provided only in (If this box is checked, identify the service.):	n the unincorporated portion of the county by a single service provider government, authority or organization providing the
One or more cities will provide will not be provided in unincorporauthority or organization providing	this service only within their incorporated boundaries, and the service ated areas. (If this box is checked, identify the government(s), g the service:
One or more cities will provide will provide the service in unincor authority or organization providing	this service only within their incorporated boundaries, and the county porated areas. (If this box is checked, identify the government(s), g the service.):
Other (If this box is checked, at provider, and identify the government service area.):	tach a legible map delineating the service area of each service ment, authority, or other organization that will provide service within
2. In developing the strategy, were or of this service identified? ☐ Yes ✓ No	verlapping service areas, unnecessary competition and/or duplication
arrangement (i.e., overlapping but h	er the strategy, attach an explanation for continuing the higher levels of service (See O.C.G.A. 36-70-24(1)), overriding s that overlapping service areas or competition cannot be eliminated).
If these conditions will be eliminated step or action that will be taken to eli completing it.	under the strategy, attach an implementation schedule listing each minate them, the responsible party and the agreed upon deadline for

Local Government or Authority: Funding Method:			
lonroe County	General Fund		
4. How will the strategy change th the county?	e previous arrangements for providing	ng and/or funding this service withi	
ontinue to provide the service	method of service delivery for thi countywide through general fund ntains additional information relate	revenues. The attached Servic	
		ontwests that will be used to	
implement the strategy for this s Agreement Name:	agreements or intergovernmental conservice: Contracting Parties:	Effective and Ending Dates	
implement the strategy for this s	service:		
implement the strategy for this s	service:		
implement the strategy for this s	service:		
6. What other mechanisms (if any resolutions, local acts of the Ge	Contracting Parties: Contracting Parties:) will be used to implement the stratemeral Assembly, rate or fee changes, ed to use resolutions adopted by vision of this service will be carried passage of the adoption resolution.	egy for this service (e.g., ordinance etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized	
Agreement Name: 6. What other mechanisms (if any resolutions, local acts of the Ge The county and city have elected Service Delivery Strategy. Propy the governing bodies upon poutlined above will govern the county and city have elected to the county and city have elected to the governing bodies upon poutlined above will govern the county and city have elected to the city have electe	Contracting Parties: Contracting Parties:) will be used to implement the stratemeral Assembly, rate or fee changes, ed to use resolutions adopted by vision of this service will be carried by the car	egy for this service (e.g., ordinance etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized en. Additionally, any agreements	
Agreement Name: Agreement Name: 6. What other mechanisms (if any resolutions, local acts of the Gerote Delivery Strategy. Propy the governing bodies upon poutlined above will govern the county and city have elected to the governing bodies upon poutlined above will govern the county and city have elected to the governing bodies upon poutlined above will govern the county and city have elected to the governing bodies upon poutlined above will govern the county and city have elected to the governing bodies upon poutlined above will govern the county and city have elected to the governing bodies upon poutlined above will govern the county and city have elected to the governing bodies upon poutlined above will govern the county and city have elected to the governing bodies upon poutlined above will govern the county and city have elected to the governing bodies upon poutlined above will govern the county and city have elected to the governing bodies upon poutlined above will govern the county and city have elected to the governing bodies upon poutlined above will govern the county and city have elected to the governing bodies upon poutlined above will govern the county and city have elected to the governing bodies upon poutlined above will govern the county and city have elected to the governing t	Ontracting Parties: Contracting Parties:) will be used to implement the stratemeral Assembly, rate or fee changes, ed to use resolutions adopted by vision of this service will be carried passage of the adoption resolution delivery of this service.	egy for this service (e.g., ordinance etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized en. Additionally, any agreements	



	Service: Juvenile Delinquency Programs
. Check the box that best describes the ag	reed upon delivery arrangement for this service:
	(i.e., including all cities and unincorporated areas) by a single identify the government, authority or organization providing the
	inincorporated portion of the county by a single service provider ernment, authority or organization providing the
	ervice only within their incorporated boundaries, and the service treas. (If this box is checked, identify the government(s), service:
	ervice only within their incorporated boundaries, and the county ed areas. (If this box is checked, identify the government(s), service.):
	a legible map delineating the service area of each service authority, or other organization that will provide service within
	pping service areas, unnecessary competition and/or duplication

If these conditions will be eliminated under the strategy, **attach an implementation schedule** listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it.

Local Government or Authority:	Fundir	ng Method:
onroe County	General Fund, Fees from fines, State Grants (as available)	
4. How will the strategy change the pr the county?	evious arrangements for providi	ng and/or funding this service within
This strategy does not alter the met continue to provide the service cou Delivery Strategy document contain	ntywide through general fund	revenues. The attached Service
5. List any formal service delivery agr implement the strategy for this servi		ontracts that will be used to Effective and Ending Dates
resolutions, local acts of the Genera The county and city have elected to Service Delivery Strategy. Provision	I Assembly, rate or fee changes, o use resolutions adopted by on of this service will be carrie	etc.), and when will they take effective and when will they take effective according to the second s
resolutions, local acts of the Genera The county and city have elected to Service Delivery Strategy. Provision the governing bodies upon pass	Assembly, rate or fee changes, o use resolutions adopted by on of this service will be carrie sage of the adoption resolution	etc.), and when will they take effective and when will they take effective according to the second sec
resolutions, local acts of the General The county and city have elected to Service Delivery Strategy. Provision the governing bodies upon passoutlined above will govern the delivery Person completing form: Chan Layson.	Assembly, rate or fee changes, o use resolutions adopted by on of this service will be carried age of the adoption resolution very of this service.	etc.), and when will they take effective each governing body to initiate the dout as outlined and authorized n. Additionally, any agreements
6. What other mechanisms (if any) will resolutions, local acts of the General The county and city have elected to Service Delivery Strategy. Provision by the governing bodies upon passoutlined above will govern the delivery Phone number: 6. What other mechanisms (if any) will resolute any solutions and service and s	Assembly, rate or fee changes, o use resolutions adopted by on of this service will be carrie sage of the adoption resolutio very of this service. Middle Georgia RDC Date completed ntacted by state agencies when e	etc.), and when will they take effective to the doubt as outlined and authorized in. Additionally, any agreements 15/9/2006



Instructions:		
Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names isted on page 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.		
County: Monroe	Service: Library	
1. Check the box that best describes	s the agreed upon delivery arrangement for this service:	
	ntywide (i.e., including all cities and unincorporated areas) by a single hecked, identify the government, authority or organization providing the	
	in the unincorporated portion of the county by a single service provider he government, authority or organization providing the	
	the this service only within their incorporated boundaries, and the service orated areas. (If this box is checked, identify the government(s), and the service:	
	the this service only within their incorporated boundaries, and the county orporated areas. (If this box is checked, identify the government(s), and the service.):	
Other (If this box is checked, a provider, and identify the governeach service area.): Monroe County, City of Forsyth, City of Culloder	attach a legible map delineating the service area of each service nment, authority, or other organization that will provide service within	
2. In developing the strategy, were of this service identified? ☐ Yes ☑ No	overlapping service areas, unnecessary competition and/or duplication	
arrangement (i.e., overlapping but	der the strategy, attach an explanation for continuing the higher levels of service (See O.C.G.A. 36-70-24(1)), overriding ons that overlapping service areas or competition cannot be eliminated).	
If these conditions will be eliminate	ed under the strategy, attach an implementation schedule listing each	

step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it.

	: Fundi	ng Method:
Monroe County		he Board from the Board of Education & City of Forsyt
How will the strategy change the the county?	previous arrangements for providi	ng and/or funding this service within
the Board of Education, the City will continue to provide the service available countywide. Therefore, 5. List any formal service delivery a	ountywide through an existing in of Forsyth, and the County Librace through the general fund revenous service area map has been agreements or intergovernmental control of the county with the	ntergovernmental agreement with ary Board. The City of Culloden enues. Library services are attached. The attached Service
implement the strategy for this se Agreement Name:	ervice: Contracting Parties:	Effective and Ending Dates:
Library Agreement	Monroe, Forsyth, BOE, Library Board	Oral Agreement- Annual
		egy for this service (e.g., ordinances, etc.), and when will they take effect?
	ision of this service will be carrie	each governing body to initiate the
		n. Additionally, any agreements
Service Delivery Strategy. Provi by the governing bodies upon pa	elivery of this service.	
Service Delivery Strategy. Provi by the governing bodies upon pa outlined above will govern the de 7. Person completing form: Chan Lays Phone number: 478-751-6160	son, Middle Georgia RDC Date completed	: 5/9/2006 evaluating whether proposed local



completing it.

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS PAGE 2

Instructions:		
Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names listed on page 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.		
County: Monroe	Service: Recreation	
1. Check the box that best describe	es the agreed upon delivery arrangement for this service:	
	ntywide (i.e., including all cities and unincorporated areas) by a single checked, identify the government, authority or organization providing the	
	in the unincorporated portion of the county by a single service provider the government, authority or organization providing the	
	de this service only within their incorporated boundaries, and the service orated areas. (If this box is checked, identify the government(s), ing the service:	
	de this service only within their incorporated boundaries, and the county corporated areas. (If this box is checked, identify the government(s), ing the service.):	
	attach a legible map delineating the service area of each service rnment, authority, or other organization that will provide service within	
2. In developing the strategy, were of this service identified? ☐ Yes ☑ No	e overlapping service areas, unnecessary competition and/or duplication	
arrangement (i.e., overlapping bu	nder the strategy, attach an explanation for continuing the at higher levels of service (See O.C.G.A. 36-70-24(1)), overriding ons that overlapping service areas or competition cannot be eliminated).	
	ted under the strategy, attach an implementation schedule listing each eliminate them, the responsible party and the agreed upon deadline for	

Local Government or Author	ority: Fundin	ng Method:
Monroe County	General Fund, User Fees, State and F	
City of Forsyth	General Fund, User Fees, State and F	
ity of Culloden	General Fund, State and Federal Gran	
4. How will the strategy change the county?	e the previous arrangements for providir	ng and/or funding this service within
continue to provide the service	he method of service delivery for this ce countywide through general fund contains additional information relate	revenues. The attached Service
implement the strategy for th	IS SCI VICE.	
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
	Contracting Parties:	Effective and Ending Dates:
	Contracting Parties:	Effective and Ending Dates:
	Contracting Parties:	Effective and Ending Dates:
	Contracting Parties:	Effective and Ending Dates:
Agreement Name: 6. What other mechanisms (if a	ny) will be used to implement the strate General Assembly, rate or fee changes, or	gy for this service (e.g., ordinances
6. What other mechanisms (if a resolutions, local acts of the County and city have electorice Delivery Strategy.	ny) will be used to implement the strate General Assembly, rate or fee changes, or ected to use resolutions adopted by e Provision of this service will be carried in passage of the adoption resolution	gy for this service (e.g., ordinances, etc.), and when will they take effect each governing body to initiate the out as outlined and authorized
Agreement Name: 6. What other mechanisms (if a resolutions, local acts of the county and city have eleservice Delivery Strategy. Poy the governing bodies upon putlined above will govern the	ny) will be used to implement the strate General Assembly, rate or fee changes, or ected to use resolutions adopted by ectrovision of this service will be carried in passage of the adoption resolution be delivery of this service.	gy for this service (e.g., ordinances, etc.), and when will they take effect each governing body to initiate the out as outlined and authorized and Additionally, any agreements
Agreement Name: 6. What other mechanisms (if a resolutions, local acts of the Garden	ny) will be used to implement the strate General Assembly, rate or fee changes, on the cted to use resolutions adopted by exprovision of this service will be carried in passage of the adoption resolution in the delivery of this service.	gy for this service (e.g., ordinances, etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized an Additionally, any agreements



Instructions:		
Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names listed on page 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs		
County: Monroe	Service: Roads and Bridges	
I. Check the box that best describes the agree	ed upon delivery arrangement for this service:	
	e., including all cities and unincorporated areas) by a single entify the government, authority or organization providing the	
	ncorporated portion of the county by a single service provider ment, authority or organization providing the	
	vice only within their incorporated boundaries, and the service as. (If this box is checked, identify the government(s), vice:	
	vice only within their incorporated boundaries, and the county areas. (If this box is checked, identify the government(s), vice.):	
	egible map delineating the service area of each service thority, or other organization that will provide service within	
2. In developing the strategy, were overlapping of this service identified? ☐ Yes ☑No	ng service areas, unnecessary competition and/or duplication	
arrangement (i.e., overlapping but higher le	rategy, attach an explanation for continuing the vels of service (See O.C.G.A. 36-70-24(1)), overriding verlapping service areas or competition cannot be eliminated).	

If these conditions will be eliminated under the strategy, **attach an implementation schedule** listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it.

Local Government or Author	ity: Fundi	ng Method:
Monroe County	General Fund, SPLOST, Federal and	
City of Forsyth	General Fund, State Funds	
City of Culloden	General Fund, State Funds	
4. How will the strategy change the county?	he previous arrangements for providi	ng and/or funding this service within
continue to provide the service	method of service delivery for thi countywide through general fund ntains additional information relat	revenues. The attached Service
5. List any formal service delivery implement the strategy for this Agreement Name:	y agreements or intergovernmental conservice: Contracting Parties:	ontracts that will be used to Effective and Ending Dates:
resolutions, local acts of the Ge The county and city have elect Service Delivery Strategy. Pro	will be used to implement the strate eneral Assembly, rate or fee changes, ed to use resolutions adopted by vision of this service will be carried passage of the adoption resolution delivery of this service.	etc.), and when will they take effect each governing body to initiate the double as outlined and authorized
resolutions, local acts of the Ge The county and city have elect Service Delivery Strategy. Pro by the governing bodies upon	ed to use resolutions adopted by vision of this service will be carrie passage of the adoption resolution delivery of this service.	etc.), and when will they take effect each governing body to initiate the d out as outlined and authorized n. Additionally, any agreements
resolutions, local acts of the Ge The county and city have elect Service Delivery Strategy. Pro by the governing bodies upon poutlined above will govern the countined above will govern the Phone number: 478-751-6160 8. Is this the person who should be	eneral Assembly, rate or fee changes, ed to use resolutions adopted by vision of this service will be carrie passage of the adoption resolution delivery of this service.	each governing body to initiate the dout as outlined and authorized an Additionally, any agreements 5/9/2006



instructions:	
Make copies of this form and complete one for listed on page 1. Answer each question below, att the bottom of the page) changes, this should be re	each service listed on page 1, Section III. Use exactly the same service names aching additional pages as necessary. If the contact person for this service (listed at ported to the Department of Community Affairs.
County: Monroe	Service: Sewage Collection/Treatment
1. Check the box that best describes the	agreed upon delivery arrangement for this service:
Service will be provided countywiservice provider. (If this box is check service.):	ide (i.e., including all cities and unincorporated areas) by a single ed, identify the government, authority or organization providing the
Service will be provided only in the (If this box is checked, identify the goservice.):	e unincorporated portion of the county by a single service provider overnment, authority or organization providing the
	s service only within their incorporated boundaries, and the service d areas. (If this box is checked, identify the government(s), e service:
One or more cities will provide this will provide the service in unincorpor authority or organization providing the	s service only within their incorporated boundaries, and the county rated areas. (If this box is checked, identify the government(s), e service.):
Other (If this box is checked, attac provider, and identify the government each service area.): City of Forsyth, Monroe County	th a legible map delineating the service area of each service at, authority, or other organization that will provide service within
2. In developing the strategy, were over of this service identified? ☐ Yes ✓ No	lapping service areas, unnecessary competition and/or duplication
arrangement (i.e., overlapping but high	the strategy, attach an explanation for continuing the ner levels of service (See O.C.G.A. 36-70-24(1)), overriding nat overlapping service areas or competition cannot be eliminated).
If these conditions will be eliminated un step or action that will be taken to elimin completing it.	der the strategy, attach an implementation schedule listing each nate them, the responsible party and the agreed upon deadline for

Local Government or Authority:	Fundin	g Method:
City of Forsyth		nue Bonds, SPLOST, Federal and State Gran
How will the strategy change the pathe county?	revious arrangements for providing	ng and/or funding this service within
This strategy does not alter the me continue to provide the service in poutlined above. The City of Forsythoutlying unincorporated areas throattached Service Delivery Strategy 5. List any formal service delivery ag implement the strategy for this serv	portions of the incorporated are a will continue to provide the so ugh its enterprise fund. A map document contains additional reements or intergovernmental co	ea through the funding mechanismervice in the municipal area and in of the services is attached. The information related to the
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
6. What other mechanisms (if any) we resolutions, local acts of the General	ill be used to implement the strate at Assembly, rate or fee changes,	egy for this service (e.g., ordinances, etc.), and when will they take effect?
6. What other mechanisms (if any) we resolutions, local acts of the General The county and city have elected to Service Delivery Strategy. Provisi by the governing bodies upon pas outlined above will govern the delivery	al Assembly, rate or fee changes, to use resolutions adopted by on of this service will be carrie sage of the adoption resolution	etc.), and when will they take effects each governing body to initiate th d out as outlined and authorized
The county and city have elected to Service Delivery Strategy. Provisi by the governing bodies upon pas outlined above will govern the delivery. Person completing form: Chan Layson	al Assembly, rate or fee changes, to use resolutions adopted by on of this service will be carrie sage of the adoption resolution very of this service.	etc.), and when will they take effect? each governing body to initiate the dout as outlined and authorized an Additionally, any agreements
The county and city have elected to Service Delivery Strategy. Provisi by the governing bodies upon pas outlined above will govern the delivery	al Assembly, rate or fee changes, to use resolutions adopted by on of this service will be carrie sage of the adoption resolution very of this service. Date completed:	etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized n. Additionally, any agreements 5/9/2006



Make copi	ies of this form and complete one f	or each service listed on page attaching additional pages as n	e 1, Section III. Use exactly the same service name ecessary. If the contact person for this service (liste	S ed at
the bottom	of the page) changes, this should be	reported to the Department of	Community Affairs	
County:	Monroe	Service:	Social Services	
1. Check	the box that best describes th	ne agreed upon delivery a	arrangement for this service:	
Service service	provider. (If this box is chec	wide (i.e., including all c ked, identify the govern	cities and unincorporated areas) by a sing ment, authority or organization providing	le g the
Service	box is checked, identify the	the unincorporated portion	on of the county by a single service provi r organization providing the	ider
will no	or more cities will provide to to the provided in unincorporation ity or organization providing	ted areas. (If this box is o	heir incorporated boundaries, and the servehecked, identify the government(s),	vice
will pr	or more cities will provide the ovide the service in unincorpity or organization providing	orated areas. (If this box	heir incorporated boundaries, and the cou is checked, identify the government(s),	nty
provide each se	er (If this box is checked, atta ler, and identify the governm ervice area.): County, City of Culloden	ach a legible map delinent, authority, or other o	eating the service area of each service rganization that will provide service with	in
2. In dev	service identified?	erlapping service areas, u	unnecessary competition and/or duplication	on
arrangei	ment (i.e., overlapping but hi	gher levels of service (Se	explanation for continuing the ee O.C.G.A. 36-70-24(1)), overriding areas or competition cannot be eliminate	:d).
If these costep or accompleting	ction that will be taken to elin	under the strategy, attac ninate them, the responsi	h an implementation schedule listing ea ible party and the agreed upon deadline fo	ich or

Local Government or Author Monroe County	ity: Fun	iding Method:
	General Fund	
Culloden	General Fund	
4. How will the strategy change t	he previous arrangements for prov	iding and/or funding this service within
the county?	Tale agents of the particular and	
continue to provide general fur activities for all county resident	vice Delivery Strategy documen	
5. List any formal service deliver implement the strategy for this Agreement Name:	y agreements or intergovernmenta service: Contracting Parties:	I contracts that will be used to Effective and Ending Dates:
		rategy for this service (e.g., ordinances, es, etc.), and when will they take effect
	eneral Assembly, rate of fee chang	
resolutions, local acts of the Go The county and city have elect Service Delivery Strategy. Pro	ted to use resolutions adopted lovision of this service will be capassage of the adoption resolu	by each governing body to initiate th rried out as outlined and authorized tion. Additionally, any agreements
The county and city have elected Service Delivery Strategy. Proby the governing bodies upon	ted to use resolutions adopted lovision of this service will be cal passage of the adoption resolu delivery of this service.	by each governing body to initiate th rried out as outlined and authorized tion. Additionally, any agreements



Instructions:		
Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names listed on page 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.		
County: Monroe	Service: Soil Conservation	
1. Check the box that best describes the	e agreed upon delivery arrangement for this service:	
	vide (i.e., including all cities and unincorporated areas) by a single ked, identify the government, authority or organization providing the	
	he unincorporated portion of the county by a single service provider government, authority or organization providing the	
	is service only within their incorporated boundaries, and the service ed areas. (If this box is checked, identify the government(s), he service:	
	is service only within their incorporated boundaries, and the county orated areas. (If this box is checked, identify the government(s), he service.):	
	ach a legible map delineating the service area of each service ent, authority, or other organization that will provide service within	
2. In developing the strategy, were ove of this service identified? ☐Yes ✓No	rlapping service areas, unnecessary competition and/or duplication	
arrangement (i.e., overlapping but hig	the strategy, attach an explanation for continuing the gher levels of service (See O.C.G.A. 36-70-24(1)), overriding that overlapping service areas or competition cannot be eliminated).	
	under the strategy, attach an implementation schedule listing each inate them, the responsible party and the agreed upon deadline for	

Local Government or Authority:	Fundi	ng Method:
Monroe County	General Fund	
4. How will the strategy change the p the county?	revious arrangements for providi	ng and/or funding this service within
This strategy does not alter the meto provide general fund revenues fundagement services activities. Tattached Service Delivery Strategy provision of this service.	for the support of the Soil Cons The service will continue to be	servation Services' soil available countywide. The
5. List any formal service delivery ag implement the strategy for this service. **Agreement Name:**		ontracts that will be used to Effective and Ending Dates:
6. What other mechanisms (if any) w resolutions, local acts of the General	ill be used to implement the strate al Assembly, rate or fee changes,	egy for this service (e.g., ordinances, etc.), and when will they take effect
The county and city have elected Service Delivery Strategy. Provisi by the governing bodies upon pas outlined above will govern the deli	ion of this service will be carrie sage of the adoption resolution	d out as outlined and authorized
The county and city have elected Service Delivery Strategy. Provisi by the governing bodies upon pas outlined above will govern the deli	ion of this service will be carrie sage of the adoption resolution very of this service.	d out as outlined and authorized
The county and city have elected Service Delivery Strategy. Provisi by the governing bodies upon pas outlined above will govern the deli	ion of this service will be carrie sage of the adoption resolution very of this service.	d out as outlined and authorized Additionally, any agreements
The county and city have elected Service Delivery Strategy. Provisi by the governing bodies upon pas outlined above will govern the deli	ion of this service will be carrie sage of the adoption resolution every of this service. n. Middle Georgia RDC Date completed:	d out as outlined and authorize n. Additionally, any agreement



Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names listed on page 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed a the bottom of the page) changes, this should be reported to the Department of Community Affairs.		
County: Monroe	Service: Solid Waste Collection/Recycling	
1. Check the box that best describes the agreed	d upon delivery arrangement for this service:	
	e., including all cities and unincorporated areas) by a single entify the government, authority or organization providing the	
	corporated portion of the county by a single service provider nent, authority or organization providing the	
	ice only within their incorporated boundaries, and the services. (If this box is checked, identify the government(s), ice:	
	ice only within their incorporated boundaries, and the county reas. (If this box is checked, identify the government(s), ice.):	
	gible map delineating the service area of each service nority, or other organization that will provide service within	
2. In developing the strategy, were overlappin of this service identified? ☐ Yes ☑ No	g service areas, unnecessary competition and/or duplication	
arrangement (i.e., overlapping but higher lev	ategy, attach an explanation for continuing the rels of service (See O.C.G.A. 36-70-24(1)), overriding erlapping service areas or competition cannot be eliminated).	
	ne strategy, attach an implementation schedule listing each nem, the responsible party and the agreed upon deadline for	

Monroe County	<u> Fundir</u>	ng Method:
normoc county	General Fund, Insurance Premium Ta	ax, and User Fees
City of Forsyth	General Fund and User Fees	
4. How will the strategy change the properties the county?	revious arrangements for providi	ng and/or funding this service within
This strategy does not alter the me continue to provide this service in i providing drop-off sites and on-site above. The City of Forsyth will conuser fees. The attached Service D	ncorporated areas (but to the dumpster pickups through the tinue to provide the service the elivery Strategy document contents or intergovernmental contents or intergovernmental contents.	benefit of all county residents) by e funding mechanism outlined rough general fund revenues and ntains additional information
implement the strategy for this serv Agreement Name:	Contracting Parties:	Effective and Ending Dates:
6. What other mechanisms (if any) wi resolutions, local acts of the Genera	III be used to implement the strate all Assembly, rate or fee changes,	egy for this service (e.g., ordinances, etc.), and when will they take effect
The county and city have elected t Service Delivery Strategy. Provisi by the governing bodies upon pas outlined above will govern the deli	on of this service will be carrie sage of the adoption resolution	d out as outlined and authorized
	Middle Georgia RDC	
7. Person completing form: Chan Layson Phone number: 478-751-6160	Date completed:	5/9/2006



Instructions.	
Make copies of this form and complete one for ea listed on page 1. Answer each question below, attact the bottom of the page) changes, this should be repo	ach service listed on page 1, Section III. Use exactly the same service names hing additional pages as necessary. If the contact person for this service (listed at orted to the Department of Community Affairs.
County: Monroe	Service: Street Lighting
1. Check the box that best describes the ap	greed upon delivery arrangement for this service:
Service will be provided countywide service provider. (If this box is checked service.):	e (i.e., including all cities and unincorporated areas) by a single i, identify the government, authority or organization providing the
	unincorporated portion of the county by a single service provider ernment, authority or organization providing the
One or more cities will provide this will not be provided in unincorporated authority or organization providing the	service only within their incorporated boundaries, and the service areas. (If this box is checked, identify the government(s), service: City of Forsyth, City of Culloden
	service only within their incorporated boundaries, and the county ted areas. (If this box is checked, identify the government(s), service.):
Other (If this box is checked, attach provider, and identify the government, each service area.):	a legible map delineating the service area of each service authority, or other organization that will provide service within
2. In developing the strategy, were overlar of this service identified? ☐ Yes ✓ No	pping service areas, unnecessary competition and/or duplication
arrangement (i.e., overlapping but higher	e strategy, attach an explanation for continuing the relevels of service (See O.C.G.A. 36-70-24(1)), overriding to overlapping service areas or competition cannot be eliminated).
	er the strategy, attach an implementation schedule listing each ate them, the responsible party and the agreed upon deadline for

Local Government or Authority	y: Fundin	ig Method:
Ionroe County	General Fund	
ity of Forsyth	General Fund	
4. How will the strategy change the the county?	e previous arrangements for providing	ng and/or funding this service withi
continue to provide the service of	method of service delivery for this countywide through general fund tains additional information relate	revenues. The attached Service
5. List any formal service delivery implement the strategy for this s Agreement Name:	agreements or intergovernmental coervice: Contracting Parties:	entracts that will be used to Effective and Ending Dates
	will be used to implement the strate neral Assembly, rate or fee changes,	
	ed to use resolutions adopted by	each governing body to initiate t
Service Delivery Strategy. Prov	assage of the adoption resolution	
Service Delivery Strategy. Prov by the governing bodies upon p outlined above will govern the d 7. Person completing form: Chan La	assage of the adoption resolution delivery of this service. yson, Middle Georgia RDC	n. Additionally, any agreements
Service Delivery Strategy. Prov by the governing bodies upon p outlined above will govern the d	assage of the adoption resolution lelivery of this service.	n. Additionally, any agreements



Instructions

County: Monroe	Service: Telecommunications
1. Check the box that best describes the a	greed upon delivery arrangement for this service:
	de (i.e., including all cities and unincorporated areas) by a single d, identify the government, authority or organization providing the
	unincorporated portion of the county by a single service provider. vernment, authority or organization providing the
will not be provided in unincorporated	service only within their incorporated boundaries, and the service areas. (If this box is checked, identify the government(s), service:
	service only within their incorporated boundaries, and the county ited areas. (If this box is checked, identify the government(s), e service.):
	n a legible map delineating the service area of each service a, authority, or other organization that will provide service within

If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or competition cannot be eliminated).

If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it.

Local Government or Authority:	Fundin	g Method:
City of Forsyth	Enterprise Fund, User Fees, General F	
	1	
4. How will the strategy change the p the county?	revious arrangements for providin	g and/or funding this service within
This strategy does not alter the mecontinue to provide the service for extends into portions of the uninco service map is attached, the attached formation related to the provision	the benefit of its cable subscrib rporated area. However, due the described Service Delivery Strategy of	pers. The city's service area o growth of this service, no
5. List any formal service delivery ag implement the strategy for this serv Agreement Name:		ntracts that will be used to Effective and Ending Dates:
		33
		2
6. What other mechanisms (if any) w resolutions, local acts of the General		
	al Assembly, rate or fee changes, of the use resolutions adopted by each of this service will be carried sage of the adoption resolution	gy for this service (e.g., ordinances, etc.), and when will they take effect? each governing body to initiate the dout as outlined and authorized
The county and city have elected Service Delivery Strategy. Provisi by the governing bodies upon pas outlined above will govern the deli	al Assembly, rate or fee changes, on the use resolutions adopted by exion of this service will be carried asage of the adoption resolution very of this service.	gy for this service (e.g., ordinances, etc.), and when will they take effects each governing body to initiate the out as outlined and authorized a. Additionally, any agreements
The county and city have elected Service Delivery Strategy. Provisi by the governing bodies upon pas outlined above will govern the deli	al Assembly, rate or fee changes, of the use resolutions adopted by each on of this service will be carried sage of the adoption resolution very of this service.	gy for this service (e.g., ordinances, etc.), and when will they take effects each governing body to initiate the out as outlined and authorized a. Additionally, any agreements
The county and city have elected Service Delivery Strategy. Provisi by the governing bodies upon pas outlined above will govern the deli	to use resolutions adopted by elements of this service will be carried sage of the adoption resolution every of this service. Date completed:	gy for this service (e.g., ordinances, etc.), and when will they take effect? each governing body to initiate the dout as outlined and authorized an Additionally, any agreements 5/9/2006



completing it.

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS PAGE 2

Instructions:		
Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names isted on page 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed a he bottom of the page) changes, this should be reported to the Department of Community Affairs.		
County: Monroe	Service: Indigent Care	
1. Check the box that best describes the ag	greed upon delivery arrangement for this service:	
	e (i.e., including all cities and unincorporated areas) by a single, identify the government, authority or organization providing the	
	unincorporated portion of the county by a single service provider ernment, authority or organization providing the	
	service only within their incorporated boundaries, and the service areas. (If this box is checked, identify the government(s), service:	
	service only within their incorporated boundaries, and the county ed areas. (If this box is checked, identify the government(s), service.):	
	a legible map delineating the service area of each service authority, or other organization that will provide service within	
2. In developing the strategy, were overla of this service identified? ☐ Yes ✓ No	pping service areas, unnecessary competition and/or duplication	
arrangement (i.e., overlapping but highe	e strategy, attach an explanation for continuing the r levels of service (See O.C.G.A. 36-70-24(1)), overriding t overlapping service areas or competition cannot be eliminated).	

If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for

Local Government or Authority:	Fundin	ng Method:
Monroe County	General Fund and State Revenues	
4. How will the strategy change the p the county?	revious arrangements for providir	ng and/or funding this service within
This strategy does not alter the me continue to provide the service cou Delivery Strategy document contain	untywide through general fund	revenues. The attached Service
5. List any formal service delivery ag implement the strategy for this serv		entracts that will be used to
	Contractive Darties	Effective and Ending Dates
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
6. What other mechanisms (if any) w	ill be used to implement the strate	gy for this service (e.g., ordinances,
6. What other mechanisms (if any) w	ill be used to implement the strate at Assembly, rate or fee changes, to use resolutions adopted by each of this service will be carried sage of the adoption resolution	gy for this service (e.g., ordinances, etc.), and when will they take effect each governing body to initiate the out as outlined and authorized
6. What other mechanisms (if any) w resolutions, local acts of the General The county and city have elected Service Delivery Strategy. Provisibly the governing bodies upon pasoutlined above will govern the delivery. Person completing form: Chan Layson	ill be used to implement the strate al Assembly, rate or fee changes, to use resolutions adopted by e fon of this service will be carried sage of the adoption resolution very of this service.	gy for this service (e.g., ordinances, etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized and Additionally, any agreements
6. What other mechanisms (if any) we resolutions, local acts of the General field of the county and city have elected a Service Delivery Strategy. Provising the governing bodies upon passoutlined above will govern the deli	ill be used to implement the strate al Assembly, rate or fee changes, on to use resolutions adopted by elements on of this service will be carried sage of the adoption resolution very of this service.	gy for this service (e.g., ordinances, etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized and Additionally, any agreements
6. What other mechanisms (if any) we resolutions, local acts of the General The county and city have elected a Service Delivery Strategy. Provising the governing bodies upon passoutlined above will govern the delimination. 7. Person completing form: Chan Layson	ill be used to implement the strate al Assembly, rate or fee changes, on to use resolutions adopted by each on of this service will be carried sage of the adoption resolution very of this service. Date completed:	gy for this service (e.g., ordinances, etc.), and when will they take effect each governing body to initiate the dout as outlined and authorized an Additionally, any agreements



Instructions

completing it.

Make copies of this forms and complete one for	and a first day and a Contact William and a
listed on page 1. Answer each question below, att the bottom of the page) changes, this should be re	each service listed on page 1, Section III. Use exactly the same service names aching additional pages as necessary. If the contact person for this service (listed at sported to the Department of Community Affairs.
County: Monroe	Service: Tick Control
1. Check the box that best describes the	agreed upon delivery arrangement for this service:
	ide (i.e., including all cities and unincorporated areas) by a single ed, identify the government, authority or organization providing the
	e unincorporated portion of the county by a single service provider overnment, authority or organization providing the
One or more cities will provide thi will not be provided in unincorporate authority or organization providing the	s service only within their incorporated boundaries, and the service d areas. (If this box is checked, identify the government(s), he service:
	s service only within their incorporated boundaries, and the county rated areas. (If this box is checked, identify the government(s), he service.):
Other (If this box is checked, attac provider, and identify the government each service area.):	ch a legible map delineating the service area of each service at, authority, or other organization that will provide service within
2. In developing the strategy, were over of this service identified?☐ Yes ✓ No	lapping service areas, unnecessary competition and/or duplication
arrangement (i.e., overlapping but high	the strategy, attach an explanation for continuing the mer levels of service (See O.C.G.A. 36-70-24(1)), overriding nat overlapping service areas or competition cannot be eliminated).
If these conditions will be eliminated ur step or action that will be taken to elimi	nder the strategy, attach an implementation schedule listing each nate them, the responsible party and the agreed upon deadline for

Local Government or Author	ity: Fundir	ng Method:
Monroe County	General Fund and User Fees	
City of Forsyth	General Fund and User Fees	
4. How will the strategy change t the county?	he previous arrangements for providing	ng and/or funding this service within
continue to provide the service	e method of service delivery for thi in the incorporated areas through Delivery Strategy document contai	the funding mechanisms outlined
List any formal service deliver implement the strategy for this	y agreements or intergovernmental co service:	ontracts that will be used to
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
6. What other mechanisms (if any	y) will be used to implement the strate eneral Assembly, rate or fee changes,	egy for this service (e.g., ordinances,
6. What other mechanisms (if any resolutions, local acts of the Go	y) will be used to implement the strate eneral Assembly, rate or fee changes, ted to use resolutions adopted by ovision of this service will be carried passage of the adoption resolution	egy for this service (e.g., ordinances, etc.), and when will they take effect? each governing body to initiate the dout as outlined and authorized
6. What other mechanisms (if any resolutions, local acts of the Go The county and city have elect Service Delivery Strategy. Proby the governing bodies upon outlined above will govern the 7. Person completing form: Chan	y) will be used to implement the strate eneral Assembly, rate or fee changes, ted to use resolutions adopted by ovision of this service will be carried passage of the adoption resolution delivery of this service.	egy for this service (e.g., ordinances, etc.), and when will they take effect? each governing body to initiate the dout as outlined and authorized n. Additionally, any agreements
6. What other mechanisms (if any resolutions, local acts of the Go The county and city have elect Service Delivery Strategy. Proby the governing bodies upon outlined above will govern the	y) will be used to implement the strate eneral Assembly, rate or fee changes, ted to use resolutions adopted by ovision of this service will be carried passage of the adoption resolution delivery of this service.	egy for this service (e.g., ordinances, etc.), and when will they take effect? each governing body to initiate the dout as outlined and authorized h. Additionally, any agreements



County: Monroe	Service: Water Services
1. Check the box that best describe	es the agreed upon delivery arrangement for this service:
	intywide (i.e., including all cities and unincorporated areas) by a single checked, identify the government, authority or organization providing the
Service will be provided only (If this box is checked, identify service.):	in the unincorporated portion of the county by a single service provider the government, authority or organization providing the
	de this service only within their incorporated boundaries, and the service orated areas. (If this box is checked, identify the government(s), ing the service:
One or more cities will provie will provide the service in uninc authority or organization provid	de this service only within their incorporated boundaries, and the county corporated areas. (If this box is checked, identify the government(s), ing the service.):
provider, and identify the governach service area.):	attach a legible map delineating the service area of each service rument, authority, or other organization that will provide service within outside of their boundaries but not currently in conflict with Monroe County's service area
	overlapping service areas, unnecessary competition and/or duplication

duplication, or reasons that overlapping service areas or competition cannot be eliminated).

If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it.

	: Funa	ing Method:
Nonroe County	General Fund, User Fees, Enterpris	e Fund, SPLOST, Revenue Bonds,
City of Forsyth	Enterprise Fund, SPLOST, Revenue	Fund, Federal Grants
City of Culloden	Enterprise Fund, SPLOST	
4. How will the strategy change the the county?	previous arrangements for provide	ling and/or funding this service within
This strategy does not alter the no continue to provide the service in mechanisms outlined above. The municipal area through an enterprovide the service in the city and the c	portions of the unincorporated e City of Culloden will continue orise fund and SPOLST. The d in portions of the unincorporate or intergovernmental	d area through the funding to provide the service in its City of Forsyth will continue to atted area (see attached map)
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Water Services Agreement	Monroe County, City of Forsyth	12/31/2007
		B
The county and city have elected Service Delivery Strategy. Providence of the General Providence	d to use resolutions adopted by sion of this service will be carrassage of the adoption resolutions.	tegy for this service (e.g., ordinances, s, etc.), and when will they take effect acceptable and governing body to initiate the dout as outlined and authorized on. Additionally, any agreements
The county and city have elected Service Delivery Strategy. Proviby the governing bodies upon page 1.00 pt 1.0	d to use resolutions adopted by sion of this service will be carrassage of the adoption resolutions of this service.	each governing body to initiate the effect of each governing body to initiate the ied out as outlined and authorized on. Additionally, any agreements
resolutions, local acts of the General The county and city have elected Service Delivery Strategy. Provide the governing bodies upon particle above will govern the delivery Strategy. Provides a possible of the governing bodies upon particle above will govern the delivery Strategy. Person completing form: 7. Person completing form: Phone number: 478-751-6160	d to use resolutions adopted by sion of this service will be carrassage of the adoption resolution elivery of this service. Son, Middle Georgia RDC Date complete	d: 5/9/2006 evaluating whether proposed local

3. List each government or authority that will help to pay for this service and indicate how the service will