GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS

SERVICE DELIVERY STRATEGY

FOR STEPHENS

COUNTY

PAGE 1

I. GENERAL INSTRUCTIONS

- Only one set of these forms should be submitted per county. The completed forms should clearly present the collective
 agreement reached by all cities and counties that were party to the service delivery strategy.
- 2. List each local government and/or authority that provides services included in the service delivery strategy in Section II below.
 - List all services provided or primarily funded by each general purpose local government and authority within the county in Section III below. It is acceptable to break a service into separate components if this will facilitate description of the service delivery strategy.
- 4. For each service or service component listed in Section III, complete a separate Summary of Service Delivery Arrangements form (page 2).
- 5. Complete one copy of the Summary of Land Use Agreements form (page 3).
- 6. Have the Certifications form (page 4) signed by the authorized representatives of participating local governments. Please note that DCA cannot validate the strategy unless it is signed by the local governments required by law (see Instructions, page 4).
- 7. Mail the completed forms along with any attachments to:

Georgia Department of Community Affairs Office of Coordinated Planning 60 Executive Park South, N.E. Atlanta, Georgia 30329

For answers to most frequently asked questions on Georgia's Service Delivery Act, links and helpful publications, visit DCA's website at www.dca.servicedelivery.org, or call the Office of Coordinated Planning at (404) 679-3114.

Note: Any future changes to the service delivery arrangements described on these forms will require an official update of the service delivery strategy and submittal of revised forms and attachments to the Georgia Department of Community Affairs.

II. LOCAL GOVERNMENTS INCLUDED IN THE SERVICE DELIVERY STRATEGY:

In this section, list all local governments (including cities located partially within the county) and authorities that provide services included in the service delivery strategy.

Stephens County City of Toccoa City of Avalon City of Martin

III. SERVICES INCLUDED IN THE SERVICE DELIVERY STRATEGY:

For each service listed here, a separate Summary of Service Delivery Arrangements form (page 2) must be completed.

Airport, Ambulance Service, Animal Control, Building Inspection/Permits, Business Licenses, EMA/Civil Defense, Code Enforcement, D.A.R.E., Economic Development, Fire Protection, Hospital, Library, Law Enforcement, Landfill/Solid Waste, Natural Gas Distribution, Recreation, Parks, Tax Assessment, Water System, Waste Water System, Streets/Roads, Cemetery, Downtown Development, Jail, 911 Communications

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SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names	the said and a said
Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the pending the Department of Community Affaire	listed on page 1.
should be reported to the Department of Community Affairs	age) changes, this

Coun	tv:	STE	PHENS		6		AIRPORT		
	_	he hov i	hat best de	oribos the serve		vice:			
					d upon delivery arra				
		cencu, i	dentity the	government, aut	nority or organizati	on provid	ling the service.)	Toccoa	service provider. (If this box -Stephens County
	Servi ident	ice will ify the	be provide governmen	d only in the unir t, authority or org	corporated portion ganization providing	of the co	ounty by a single vice.)	Airport service provid	t Authority er. (If this box is checked,
	One o	or more corpora	cities will ed areas. (I	provide this serv f this box is chec	ice only within thei ked, identify the go	r incorpo overnmen	prated boundaries at(s), authority or	, and the servion programme organization programme or a contraction program	ce will not be provided in providing the service.)
	One o	or more	cities will ed areas. (I	provide this serv f this box is chec	ice only within thei ked, identify the go	r incorpo overnmen	orated boundaries at(s), authority or	, and the count organization p	ty will provide the service in providing the service.)
	Other gover	r. (If thi rnment,	s box is che authority, e	ecked, attach a l or other organiza	egible map delines tion that will provid	ting the	service area of e within each serv	each service p vice area.)	rovider, and identify the
L.,	J) C3	CM III							of this service identified?
			will contin rvice (See (not be elim	J.C.O.M. JU-10-2	tegy, attach an e x (4(1)), overriding b	p lanatio enefits of	n for continuing the duplication,	the arrangen or reasons tha	nent (i.e., overlapping but t overlapping service areas
If thes	se con to eli	ditions minate	will be elir them, the re	minated under the esponsible party a	e strategy, attach and the agreed upor	n implen deadline	nentation schedu	le listing each	step or action that will be
	,	, 8	onoral rana	thority that will I s, special service	help to pay for this district revenues, h	service a	nd indicate how (el taxes, franchis	he service wil e taxes, impac	I be funded (e.g., enterprise t fees, bonded indebtedness, et
Local G	Sovernr	ment or A	Authority:	Funding Method:					
			occoa	General	Fund				
Sto	epho Sc.	ens Airp	County	Genera	l Fund				
7	Autl	nori	ty	User F	ees				
4. Ho	w wil	l the str	ategy chan	ge the previous a	rrongoments for				
		Chang		Be the previous a	rrangements for pro	oviding a	nd/or funding thi	s service withi	n the county?
5 I ict	anv f	formal e	anvice deli						
Agreem	ent Na	me:	none	very agreements	Contracting Parties:	al contra	cts that will be us	ed to impleme	ent the strategy for this service: Effective and Ending Dates:
	<u>-</u> -								
6. Wh	at oth	ner mec	hanisms (if	any) will be used	to implement the	strategy f	or this service (e	g., ordinances	, resolutions, local acts of the
Genera		, ciliory,	rate or fee	changes, etc.), an	d when will they ta	ike effect	?		, recording took held of the
		n/a							
			ng form: 16-886-9	Clifton W					_
							12/21/98		
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SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County: STEPHENS C		Service:	AMBULANCE S	ERVICE	
1. Check the box that best des	scribes the agreed	upon delivery arrangen	ent for this service.		
is checked, identify the	d countywide (i.e. government, auth	, including all cities and ority or organization pro	unincorporated areas oviding the service.)	stephens	County Hospit
Service will be provided identify the government	only in the uning authority or orga	orporated portion of the inization providing the	e county by a single se service.)	rvice provider. (If	this box is checked,
One or more cities will punincorporated areas. (If	provide this service I this box is check	e only within their inco ed, identify the governi	rporated boundaries, a nent(s), authority or o	and the service wil rganization provid	Il not be provided in ling the service.)
One or more cities will punincorporated areas. (If	provide this servic this box is check	e only within their inco ed, identify the governr	rporated boundaries, a nent(s), authority or or	nd the county will ganization provid	I provide the service in ling the service.)
Other. (If this box is chee government, authority, o	cked, attach a leg r other organizatio	ible map delineating to on that will provide serv	he service area of eac	ch service provide e area.)	er, and identify the
2. In developing the strategy, ☐ yes ☐ no	were overlapping	service areas, unnecess	ary competition and/or	r duplication of the	is service identified?
If these conditions will continu higher levels of service (See O or competition cannot be elimin	e under the street				
If these conditions will be elim taken to eliminate them, the res	inated under the s			listing each step of	or action that will be
3. List each government or aut	hority that will be	o a contraction	me for completing it.		
Level C	Funding Method:	suici revenues, notel/m	otel taxes, franchise ta	ixes, impact fees,	bonded indebtedness, etc
Stephens County SC HOSPITAL	General	Funds			
Authority	User Fe	es			
4 How will the street					
 How will the strategy change No Change 	the previous arra	ngements for providing	and/or funding this se	ervice within the c	ounty?
1.0 Imange					
5. List any formal service delive	EV 9greements on	-100			
5. List any formal service delive Agreement Name:	ry agreements of	mergovernmental continuous Contracting Parties:	acts that will be used	to implement the s	strategy for this service:
Stephens County	Hospital				ve and Ending Dates:
	Authority	Stephens Coun	y Yospital Aut ty	hority 196	53-2013
6. What other mechanisms (if an	v) will be used to				
6. What other mechanisms (if an General Assembly, rate or fee ch	anges, etc.), and v	implement the strategy when will they take effe	for this service (e.g.,	ordinances, resolu	tions, local acts of the
		, , , , , , , , , , , , , , , , , , , ,			
n/a					
Person completing form: 706-886-949	Clifton Wil				
	· · · · · · · · · · · · · · · · · · ·	_ Date completed:	12/21/00		
. Is this the person who should less this the person who should less consistent with the service delegant for the provide designated contact	ivery strategy?	ate agencies when evalues no	nating whether propose	ed local governme	nt projects
., France good Budger colleact	person(s) and pho	one number(s) below:			

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County: Stephens Co	ounty	Service:	Animal (Control	
1. Check the box that best de	scribes the agreed u	pon delivery arrangen	nent for this serv	vice:	
Service will be provide is checked, identify the	d countywide (i.e., i government, author	ncluding all cities and ity or organization pro	unincorporated	areas) by a single s	ervice provider. (If this box
Service will be provide identify the governmen	d only in the uninco t, authority or organ	rporated portion of the ization providing the	e county by a sin service.)	ngle service provide	r. (If this box is checked,
One or more cities will unincorporated areas. (provide this service If this box is checked	only within their inco d, identify the govern	orporated bound ment(s), authori	aries, and the service ty or organization pu	e will not be provided in roviding the service.)
One or more cities will unincorporated areas.	provide this service If this box is checked	only within their inco	orporated bound ment(s), authori	aries, and the county ty or organization pa	y will provide the service in roviding the service.)
Other. (If this box is ch government, authority,	ecked, attach a legi or other organizatio	ble map delineating n that will provide ser	the service area vice within each	a of each service pr 1 service area.)	covider, and identify the
2. In developing the strategy ☐ yes ☐ no	, were overlapping s	service areas, unneces	sary competition	n and/or duplication	of this service identified?
If these conditions will continuing higher levels of service (See or competition cannot be elim	O.C.G.A. 36-70-24(gy, attach an explan s 1)), overriding benefi	ation for contin as of the duplica	uing the arrangem tion, or reasons that	ent (i.e., overlapping but overlapping service areas
If these conditions will be eli taken to eliminate them, the r	minated under the stresponsible party and	trategy, attach an im I the agreed upon dea	plementation so dline for comple	hedule listing each ting it.	step or action that will be
3. List each government or a funds, user fees, general fund	uthority that will he ds, special service di	lp to pay for this servi	ce and indicate motel taxes, frame	how the service will nchise taxes, impact	be funded (e.g., enterprise fees, bonded indebtedness, etc
Local Government or Authority:	Funding Method:				
City of Toccoa	General F	und			
Stephens County	General F	und			
4 How will the strategy ober					
4. How will the strategy char				ng this service within	n the county?
Consolidation o	f previously	seperate servi	ces		
5. List any formal service del	ivery agreements or	intergovernmental co	ntracts that will	he used to impleme	ent the strategy for this service:
Agreement Name:		Contracting Parties:		to impleme	Effective and Ending Dates:
InterGovernmental Co	ontract	Toccoa/Steph	nens County		
					Annual
6 What all a second size					
 What other mechanisms (i General Assembly, rate or fee N/A 	if any) will be used to changes, etc.), and	o implement the strate when will they take e	egy for this serv ffect?	ice (e.g., ordinances	, resolutions, local acts of the
7. Person completing form:	Clifton Wilk	inson			
Phone number: 706-886-			40/04/00		
		Date completed:		or property 11	
8. Is this the person who sho are consistent with the service If not, provide designated con	e delivery strategy?	xyes no		er proposed local go	overnment projects

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County:	Stephens		Service:Building Inspections/	Permits
1. Check	the box that best des	scribes the agreed	d upon delivery arrangement for this service:	· C) 1/1 03
x Ser	vice will be provided	countywide (i.e.	e., including all cities and unincorporated areas) by a sing hority or organization providing the service.)	le service provider. (If this box
☐ Serider	vice will be provided ntify the government	l only in the unin , authority or org	corporated portion of the county by a single service provenization providing the service.)	vider. (If this box is checked,
One unit	e or more cities will parcorporated areas. (If	provide this servi f this box is chec	ice only within their incorporated boundaries, and the ser ked, identify the government(s), authority or organization	vice will not be provided in n providing the service.)
One unir	or more cities will pacorporated areas. (If	provide this servi	ce only within their incorporated boundaries, and the cou ked, identify the government(s), authority or organization	anty will provide the service in providing the service.)
Otho	er. (If this box is cheernment, authority, o	cked, attach a le r other organizat	egible map delineating the service area of each service ion that will provide service within each service area.)	provider, and identify the
,	(2)		g service areas, unnecessary competition and/or duplicati	
	onditions will continu els of service (Sce O ition cannot be elimi		egy, attach an explanation for continuing the arrang 4(1)), overriding benefits of the duplication, or reasons the duplication of the duplication.	ement (i.e., overlapping but hat overlapping service areas
If these co	enditions will be eliminate them, the res	ninated under the sponsible party a	strategy, attach an implementation schedule listing eand the agreed upon deadline for completing it.	ch step or action that will be
3. List eac	h government or aut	thority that will b	nelp to pay for this service and indicate how the service we district revenues, hotel/motel taxes, franchise taxes, impa	vill be funded (e.g., enterprise
Local Govern	nment or Authority:	Funding Method:		total delided indebtedness, etc.
City	of Toccoa	General F	und	
Stephe	ens County	General F	und	
4 Ua				
4. now w	ill the strategy chang	e the previous ar	rangements for providing and/or funding this service wit	hin the county?
NC	change			
E 1 :				
Agreement N	formal service delive	ery agreements o	or intergovernmental contracts that will be used to implem	nent the strategy for this service:
	anc.		Contracting Parties:	Effective and Ending Dates:
				
6. What of	her mechanisms (if a	iny) will be used	to implement the strategy for this service (e.g., ordinance)	es, resolutions, local acts of the
General As	sembly, rate or fee c	hanges, etc.), and	d when will they take effect?	representations, rocar acts of the
N/A				
7. Person c	ompleting form:	Clifton Wil	kinson	
Phone num	ber: <u>795-886-949</u>	91	Date completed: 12/21/98	
8. Is this th	e person who should	be contacted by	state agencies when evaluating whether proposed local g	ROVERNMENT projects
			yes no phone number(s) below:	, projects
	G	- Person(s) and	Prione number(2) DEIOW:	

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

Comme			
County: Stephens Cou		Service:Business License	
1. Uneck the box that best des	scribes the agreed upon delive	ry arrangement for this service:	
is checked, identify the	d countywide (i.e., including a government, authority or orga	all cities and unincorporated areas) by a single anization providing the service.)	e service provider. (If this box
Service will be provided identify the government	d only in the unincorporated po t, authority or organization pro	ortion of the county by a single service proviously of the service.) City of Toccoa	ider. (If this box is checked,
One or more cities will unincorporated areas. (I	provide this service only within f this box is checked, identify	in their incorporated boundaries, and the serv the government(s), authority or organization	
One or more cities will punincorporated areas. (If	provide this service only withing this box is checked, identify	in their incorporated boundaries, and the count the government(s), authority or organization	nty will provide the service in providing the service.)
Other. (If this box is che government, authority, o	cked, attach a legible map de or other organization that will p	elineating the service area of each service provide service within each service area.)	provider, and identify the
		s, unnecessary competition and/or duplication	
or competition cannot be elimi	inated).	an explanation for continuing the arranger ling benefits of the duplication, or reasons the	at overlapping service areas
	. ,	ach an implementation schedule listing each lupon deadline for completing it.	
3. List each government or aut funds, user fees, general funds	thority that will halm to	r this service and indicate how the service wi ues, hotel/motel taxes, franchise taxes, impac	ill be funded (e.g., enterprise
Local Government or Authority:	Funding Method:		x rees, bonded indebteaness, etc
- City of Toccoa	General Fund		
4. How will the strategy change No Change	e the previous arrangements fo	or providing and/or funding this service with	in the county?
5 List any formal service delive			
Agreement Name:	Contracting P	mental contracts that will be used to impleme Parties:	ent the strategy for this service: Effective and Ending Dates:
 What other mechanisms (if a General Assembly, rate or fee cl N/A 	iny) will be used to implement hanges, etc.), and when will th	the strategy for this service (e.g., ordinances ney take effect?	, resolutions, local acts of the
7. Person completing form: Phone number:706=886=9	Clifton Wilkinson	40/04/00	
3. Is this the person who should	Date con	mpleted: 12/21/98	
are consistent with the service de If not, provide designated contac	elivery strategy? yes to person(s) and phone number	s when evaluating whether proposed local go no (s) below:	vernment projects

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County: Stepher				EMA/Civi		
1. Check the box that						
Service will be is checked, iden	provided county tify the governm	wide (i.e., inclunent, authority of	iding all cities and or organization pr	l unincorporated a oviding the service	reas) by a single e.)	service provider. (If this box
Service will be pridentify the government	provided only in ernment, author	the unincorpor ity or organizati	ated portion of the	e county by a sing service.)	gle service provid	er. (If this box is checked,
One or more citi unincorporated a	es will provide areas. (If this bo	this service only x is checked, id	y within their inco lentify the govern	orporated boundar ment(s), authority	ies, and the servion or organization p	ce will not be provided in providing the service.)
One or more citi	es will provide areas. (If this bo	this service only x is checked, id	y within their inco	orporated boundar ment(s), authority	ies, and the count or organization p	ty will provide the service in providing the service.)
Other. (If this be government, aut	ox is checked, a hority, or other	ttach a legible i organization tha	map delineating at will provide ser	the service area ovice within each s	of each service page.)	rovider, and identify the
2. In developing the s ☐ yes ☑ no	trategy, were ov	erlapping servi	ce areas, unneces	sary competition a	and/or duplication	of this service identified?
If these conditions will higher levels of servic or competition cannot	c (300 O.C.O.A	r the strategy, a . 36-70-24(1)),	attach an explans overriding benefi	ation for continuits of the duplication	ing the arrangen	nent (i.e., overlapping but t overlapping service areas
	l be eliminated	under the strate le party and the	gy, attach an imp agreed upon dea	Diementation sch dline for completi	edule listing each	step or action that will be
rando, asor rees, gener	ai funds, specia	that will help to Il service distric	pay for this servi	ce and indicate ho motel taxes, franc	ow the service wil hise taxes, impac	l be funded (e.g., enterprise t fees, bonded indebtedness, etc
Local Government or Author		Method:				
Stephens Co	unty Ge	neral Fun	ıds			
						
4. How will the strate	gy change the p	revious arrange	ments for providi	ng and/or funding	this service withi	in the county?
no change				ng ana or randing	ting service with	in the county:
5. List any formal serv	ice delivery agr	eements or inte	rgovernmental co	ntracts that will be	e used to impleme	ent the strategy for this service:
Agreement Name: no	ne	Con	tracting Parties:			Effective and Ending Dates:
· · · · · · · · · · · · · · · · · · ·						
				1 13 12		
6. What other mechan General Assembly, rate	isms (if any) wi	II be used to im , etc.), and whe	plement the strate n will they take e	gy for this service	e (e.g., ordinances	s, resolutions, local acts of the
n/a						
7. Person completing	form: <u>Cli</u>	fton Wilki	nson			
Phone number: 706-	886-0491		Date completed:	12/21/08		
 Is this the person ware consistent with the lf not, provide designa 	ho should be co service delivery	ntacted by state strategy?	agencies when ever	aluating whether	proposed local go	overnment projects

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, the contact person for this service (listed at the bottom of the page) changes, the contact person for this service (listed at the bottom of the page) changes, the contact person for this service (listed at the bottom of the page) changes, the contact person for this service (listed at the bottom of the page) changes, the contact person for this service (listed at the bottom of the page) changes, the contact person for this service (listed at the bottom of the page) changes, the contact person for this service (listed at the bottom of the page) changes, the contact person for this service (listed at the bottom of the page) changes, the contact person for this service (listed at the bottom of the page) changes, the contact person for this service (listed at the bottom of the page) changes, the contact person for this service (listed at the bottom of the page) changes, the contact person for this service (listed at the bottom of the page) changes at the contact person for this service (listed at the bottom of the page) changes at the contact person for the page (listed at the bottom of the page) changes at the contact person for the contact p	Make copies of this form and complete one for each service listed Answer each question below, attaching additional pages as necessary. I should be reported to the Department of Community Affairs.	d on page 1, Section III. Use exactly the same service names listed on page if the contact person for this service (listed at the bottom of the page) changes, the
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County: Ste	phens Co	unty	Service	: Code	Enforcement	
1. Check the bo	x that best des	cribes the agreed u	pon delivery arrange			
☐ Service w	ill be provided	countywide (i.e.,	including all cities an	d unincorno	rated arong) by a simple	e service provider. (If this box
☐ Service w identify th	rill be provided ne government	only in the uninco , authority or organ	orporated portion of the	ne county by service.)	a single service provi	der. (If this box is checked,
One or mo unincorpo	ore cities will porated areas. (If	provide this service this box is checke	only within their inc d, identify the govern	orporated be iment(s), au	oundaries, and the serv thority or organization	rice will not be provided in providing the service.)
14.		and don is ellecke	a, identity the govern	orporated boment(s), aut	oundaries, and the cour hority or organization	nty will provide the service in providing the service.)
U Other. (If	this box is che	Stephens Co cked, attach a legi r other organizatio	unty ble map delineating n that will provide sen	the service	area of each service peach service area.)	provider, and identify the
_,,						on of this service identified?
If these condition higher levels of or competition com			y, attach an explana l)), overriding benefi	ation for co ts of the dup	ntinuing the arrange plication, or reasons the	ment (i.e., overlapping but at overlapping service areas
If these condition taken to eliminate	ns will be elim te them, the re	inated under the st sponsible party and	rategy, attach an im I the agreed upon dea	plementation	on schedule listing each	h step or action that will be
3. List each gov	ernment or au	hority that will hel	n to nov for this			ill be funded (e.g., enterprise ct fees, bonded indebtedness, et
Local Government of	or Authority:	Funding Method:			manomise taxes, impac	ct rees, bonded indebtedness, et
Stephens	County	Genera	l_Funds			
City of	Toccoa	General	Funds			
4. How will the	strategy chang	e the previous arra	ngements for providi		nding this service with	
		providus aria	rigements for providing	ng and/or tu	nding this service with	in the county?
no char	ige					
5. List any forma	l service deliv	ery agreements or	intergovernmental con	ntracts that	will be used to implem	ent the strategy for this service:
Agreement Name:	none		Contracting Parties:			Effective and Ending Dates:
6. What other me	echanisms (if a	iny) will be used to	implement the strate	gy for this s	ervice (e.e. andi	s, resolutions, local acts of the
	y, rate or fee c	hanges, etc.), and	when will they take ef	fect?	ervice (e.g., ordinance	s, resolutions, local acts of the
N/A						
7. Person comple	-	Clifton Wilk	inson			
Phone number: Z			Date completed:	12	/21/98	
		l be contacted by st elivery strategy?	ate agencies when an	aluating wh	ether proposed local go	overnment projects
		, , , , , , , , , , , , , , , , , , ,				

SERVICE DELIVEDY STRATEGY

If not, provide designated contact person(s) and phone number(s) below:

A A			DAIGE DET			
E	Instructions:	SUMMARY OF SE	_ vi i i i i i			
	Make copies of the Answer each quest should be reported	his form and complete one for e tion below, attaching additional pag to the Department of Community	each service liste ges as necessary. Affairs.	ed on page 1, 5 If the contact p	Section III. Use exacti erson for this service (I	ly the same service names listed on page listed at the bottom of the page) changes, th
County: St			Service:	D.A.R	.E.	
1. Check the b	oox that best des	scribes the agreed upon deliv	very arrangem	nent for this s	service:	
Service is check	will be provided ted, identify the	d countywide (i.e., including government, authority or org	gall cities and ganization pro	unincorpora	nted areas) by a sin ervice.)	gle service provider. (If this box
Service identify	will be provided the government	only in the unincorporated , authority or organization p	portion of the stroyiding the s	county by a service.)	single service pro	ovider. (If this box is checked,
One or nunincorp	nore cities will porated areas. (1)	provide this service only wit f this box is checked, identif	hin their inco y the governr	rporated bounent(s), auth	indaries, and the se ority or organization	ervice will not be provided in on providing the service.)
One or nunincorp	nore cities will porated areas. (If	provide this service only with this box is checked, identify	hin their inco y the governm	rporated bounent(s), author	ndaries, and the co ority or organization	ounty will provide the service in on providing the service.)
Other. (I governm	f this box is che ent, authority, o	cked, attach a legible map or other organization that wil	delineating t	he service a	rea of each servic ach service area.)	ce provider, and identify the
_,						ition of this service identified?
If these conditi higher levels o or competition	ions will continu of service (See O cannot be elimi	ie under the strategy, attach .C.G.A. 36-70-24(1)), overr nated).	an explanated	t ion for cont s of the dupli	inuing the arrang cation, or reasons	gement (i.e., overlapping but that overlapping service areas
f these conditi aken to elimin	ons will be eliminate them, the re-	ninated under the strategy, at sponsible party and the agree	l tach an imp l ed upon dead	lementation line for com	schedule listing ea	ach step or action that will be
3. List each go	overnment or and	thority that will halp to now t	Con all in a second			will be funded (e.g., enterprise pact fees, bonded indebtedness, etc
ocal Government	or Authority:	Funding Method:				pact tees, bullued indebtedness, en
City of	Госсоа	General Fund				
Stephens-	-County	General Fund				
Stephens Board of	County					
נט טוויט טו	Education	General Fund				
4. How will the	s strategy chang	e the previous arrangements	for providing	g and/or fund	ling this service wi	ithin the county?
5. List any form Agreement Name:	nal service delive	ery agreements or intergover Contracting	rnmental conf g Parties:	tracts that wi	II be used to imple	ement the strategy for this service: Effective and Ending Dates:
What other r	nachanisme (if					
General Assemb	bly, rate or fee c	iny) will be used to impleme hanges, etc.), and when will	int the strateg	y for this ser ect?	vice (e.g., ordinand	ces, resolutions, local acts of the
n/a						
. Person comp	leting form:	Clifton Wilkinsor				
	706-886-9		completed:	12/21/	98	
B. Is this the per are consistent wi	rson who should ith the service d	be contacted by state agencelivery strategy? yes [luating whet		government projects

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

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.

Stephens_	Ser	rvice: <u>Economic De</u>	velopment
1. Check the box that best des	scribes the agreed upon delivery arr	angement for this service:	
Service will be provided is checked, identify the	d countywide (i.e., including all citi government, authority or organizati	es and unincorporated areas) ion providing the service.) T	by a single service provider. (If this box - SC Industrial evelopment Authority
identify the government	, authority or organization providin	of the county by a single sering the service.)	evelopment Authority vice provider. (If this box is checked,
One or more cities will unincorporated areas. (I	provide this service only within the f this box is checked, identify the go	ir incorporated boundaries, an overnment(s), authority or org	nd the service will not be provided in ganization providing the service.)
One or more cities will punincorporated areas. (If	provide this service only within their this box is checked, identify the go	ir incorporated boundaries, an overnment(s), authority or org	d the county will provide the service in ganization providing the service.)
Other. (If this box is che government, authority, o	cked, attach a legible map delines or other organization that will provid	nting the service area of each de service within each service	n service provider, and identify the area.)
			duplication of this service identified?
or competition cannot be elimi	nated).	enerits of the duplication, or r	e arrangement (i.e., overlapping but reasons that overlapping service areas
If these conditions will be elim taken to eliminate them, the res	iinated under the strategy, attach a sponsible party and the agreed upor	n implementation schedule lande deadline for completing it.	isting each step or action that will be
3. List each government or au	thority that will halp to may for at the		service will be funded (e.g., enterprise xes, impact fees, bonded indebtedness, etc
Local Government or Authority:	Funding Method:		nes, impact rees, bonded indebtedness, etc
Stephens County	General Funds		
City of Toccoa	General Funds		
4. How will the strategy change	a the manifest		
will the strategy chang	e the previous arrangements for pro	oviding and/or funding this se	rvice within the county?
no change			
5. List any formal service delive	PTV agreements or intercommunity		
Agreement Name: none	Contracting Parties:	al contracts that will be used t	o implement the strategy for this service:
			Effective and Ending Dates:
6. What other mechanisms (if a	ny) will be used to implement the s	trategy for this service (e.g.,	ordinances, resolutions, local acts of the
Concide Assembly, tale of fee C	hanges, etc.), and when will they ta	ke effect?	the state of the state of the
n/a			
7. Person completing form:	ifton Wilkinson		
Phone number: 700-880-9	Date complet	ted: 12/21/98	
8. Is this the person who should are consistent with the service de	be contacted by state agencies whe elivery strategy? 🙀 yes 🔲 no	n evaluating whether propose	ed local government projects
ii not, provide designated contac	ct person(s) and phone number(s) be	elow:	

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

Make copies of this form and complete one for each service tiste	ed 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: Stephens	Service:	Fire Protection	
1. Check the box that best descr	ibes the agreed upon delivery arrangem		
Service will be provided c is checked, identify the go	ountywide (i.e., including all cities and overnment, authority or organization pro	unincorporated areas) by a single viding the service.)	service provider. (If this box
Service will be provided of identify the government, a	only in the unincorporated portion of the nuthority or organization providing the s	county by a single service providervice.)	er. (If this box is checked,
One or more cities will prounincorporated areas. (If t	ovide this service only within their inco his box is checked, identify the governn	rporated boundaries, and the servi nent(s), authority or organization p	ce will not be provided in providing the service.)
One or more cities will prounincorporated areas. (If t	ovide this service only within their inco his box is checked, identify the governn	rporated boundaries, and the coun nent(s), authority or organization i	ty will provide the service in providing the service.)
City of Toccoa, St			
Other. (If this box is check	ked, attach a legible map delineating to other organization that will provide serv	he service area of each service p vice within each service area.)	provider, and identify the
2. In developing the strategy, w	vere overlapping service areas, unnecess	sary competition and/or duplication	n of this service identified?
If these conditions will continue higher levels of service (See O.6 or competition cannot be elimin	e under the strategy, attach an explana C.G.A. 36-70-24(1)), overriding benefit	s of the duplication, or reasons tha	ment (i.e., overlapping but at overlapping service areas
If these conditions will be elimi	nated. Overlapping, but hig nated under the strategy, attach an imp ponsible party and the agreed upon dead	Ther levels of service Iementation schedule listing each Unit for completing it.	h step or action that will be
3. List each government or auth	nority that will help to pay for this service special service district revenues, hotel/i	ce and indicate how the service wi	II be funded (e.g., enterprise et fees, bonded indebtedness, etc.
	Funding Method:		
Stephens County	General Funds		
City of Toccoa	General Funds		
			
4. How will the strategy change	e the previous arrangements for providing	ng and/or funding this service with	ain the country?
	we provide an angement for providing	ig and or randing this service with	in the county?
no change			
5. List any formal service delive	ery agreements or intergovernmental co	ntracts that will be used to implem	nent the strategy for this service:
Agreement Name: none	Contracting Parties:		Effective and Ending Dates:
6. What other mechanisms (if a	any) will be used to implement the strate	egy for this service (e.g., ordinance	es, resolutions, local acts of the
Ocheral Assembly, rate or fee c	hanges, etc.), and when will they take e	flect?	
n/a			
7. Person completing form:			
Phone number: <u>705-886-9</u>			
are consistent with the service of	d be contacted by state agencies when endelivery strategy? X yes no note person(s) and phone number(s) below		government projects

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



	Instructions: Make copies of this form and Answer each question below, atta should be reported to the Departm	complete one for each service liste aching additional pages as necessary. nent of Community Affairs.	ed on page 1, Section III. Use exactly the san If the contact person for this service (listed at th	ne service names listed on page 1 ne bottom of the page) changes, thi
County: St	ephens	Service:	Hospital	
I. Check the b	oox that best describes the a	greed upon delivery arrangem	ent for this service:	

1. Check the box that best de	scribes the agreed	upon delivery arrangement for this ser	rvice
Service will be provide	d countywide (i e	including all cities and unincorporate ority or organization providing the ser-	
Service will be provided identify the government	d only in the unince t, authority or orga	orporated portion of the county by a s nization providing the service.)	ingle service provider. (If this box is checked,
One or more cities will unincorporated areas. (I	provide this service If this box is checke	e only within their incorporated bound ed, identify the government(s), author	daries, and the service will not be provided in ity or organization providing the service.)
One or more cities will unincorporated areas. (I	provide this service f this box is checke	e only within their incorporated bounded, identify the government(s), author	daries, and the county will provide the service in ity or organization providing the service.)
Other. (If this box is che government, authority, o	ecked, attach a leg or other organizatio	ible map delineating the service are on that will provide service within eac	a of each service provider, and identify the h service area.)
			n and/or duplication of this service identified?
or competition cannot be elim	inated).	comming benefits of the dupites	nuing the arrangement (i.e., overlapping but ation, or reasons that overlapping service areas
		a me agreed about deadtine for comple	
		p to pay for this service and indicate strict revenues, hotel/motel taxes, fra	how the service will be funded (e.g., enterprise nchise taxes, impact fees, bonded indebtedness, e
Local Government of Authority:	Funding Method:		
Stephens County	General	Funds	
SC Hospital Authority			
	User Fee	S	
4. How will the strategy change	e the previous arre	angements for providing and/or funding	
	, · ···· provious arre	ingenients for providing and/or fundir	ig this service within the county?
no change			
5. List any formal service deliv	ery agreements or	intergovernmental contracts that will	be used to implement the strategy for this service
Agreement Name: none		Contracting Parties:	Effective and Ending Dates:
			Effective and Ending Dates:
6 What all and a second			
o. What other mechanisms (if a General Assembly, rate or fee o	any) will be used to	implement the strategy for this servi	ce (e.g., ordinances, resolutions, local acts of the
	manges, etc.), and	when will they take effect?	
n/a			
7. Person completing form: _	<u>Clifton Wi</u>	lkinson	
Phone number: <u>706-886-94</u>	01	Date completed:12/21/98	
Is this the person who should are consistent with the service d	d be contacted by silelivery strategy?	tate agencies when evaluating whethe	r proposed local government projects
If not, provide designated conta	or herson(s) and bu	one number(s) below:	

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County: Stephens	Service: _L	ibrary	
	cribes the agreed upon delivery arrangemen	for this service:	
	countywide (i.e., including all cities and un government, authority or organization provid		rvice provider. (If this box
	only in the unincorporated portion of the co authority or organization providing the ser-		(If this box is checked,
One or more cities will p unincorporated areas. (If	provide this service only within their incorporation that is checked, identify the government	orated boundaries, and the service at(s), authority or organization pro	will not be provided in oviding the service.)
One or more cities will p unincorporated areas. (If	provide this service only within their incorportion that is checked, identify the government	orated boundaries, and the county at(s), authority or organization pro	will provide the service in oviding the service.)
Other. (If this box is ched government, authority, o	cked, attach a legible map delineating the or other organization that will provide servic	service area of each service pro e within each service area.)	vider, and identify the
☐ yes ☐ no	were overlapping service areas, unnecessar		
If these conditions will continue higher levels of service (See Coor competition cannot be eliminate)	ue under the strategy, attach an explanation of the condition of the strategy, overriding benefits contained.	on for continuing the arrangement of the duplication, or reasons that	ent (i.e., overlapping but overlapping service areas
If these conditions will be elin taken to eliminate them, the re	ninated under the strategy, attach an imple esponsible party and the agreed upon deadling	mentation schedule listing each see for completing it.	step or action that will be
3. List each government or au funds, user fees, general funds	thority that will help to pay for this service s, special service district revenues, hotel/mo	and indicate how the service will tel taxes, franchise taxes, impact	be funded (e.g., enterprise fees, bonded indebtedness, etc
Local Government or Authority:	Funding Method:		
Stephens County	General Funds		
4 17 - 19 4			
4. How will the strategy chan	ge the previous arrangements for providing	and/or funding this service within	the county?
no change			
E. I ist and formal condenses dell'			
Agreement Name: NONE	very agreements or intergovernmental contr Contracting Parties:	acts that will be used to impleme	nt the strategy for this service Effective and Ending Dates:
			Effective and Efforts Dates.
6. What other mechanisms (if	f any) will be used to implement the strategy	for this service (e.g., ordinances	resolutions, local acts of the
General Assembly, rate or fee	changes, etc.), and when will they take effe	ct?	
11/ 6			
7. Person completing form:		40/04/00	
Phone number: <u>706-886-</u>		12/21/98	
are consistent with the service	uld be contacted by state agencies when eva	luating whether proposed local go	vernment projects
ii not, provide designated con	stact person(s) and phone number(s) below:		

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County: <u>Stephens</u>		Service:		+
1. Check the box that best des	scribes the agreed upo	on delivery arrangen	nent for this service:	
Service will be provided is checked, identify the	d countywide (i.e., inc	cluding all cities and	unincorporated areas) by	single service provider. (If this box
Service will be provided identify the government	l only in the unincorp , authority or organiz	porated portion of the ation providing the	e county by a single service pervice.)	provider. (If this box is checked,
One or more cities will punincorporated areas. (If	provide this service of this box is checked,	nly within their inco identify the governr	rporated boundaries, and the nent(s), authority or organiza	e service will not be provided in action providing the service.)
One or more cities will punincorporated areas. (If	rovide this service or this box is checked,	nly within their inco identify the governn	rporated boundaries, and the nent(s), authority or organiza	county will provide the service in ation providing the service.)
Other. (If this box is che government, authority, o	cked, attach a legibl er other organization t	e map delineating t hat will provide serv	he service area of each service within each service area.	vice provider, and identify the
				cation of this service identified?
or competition cannot be elimi	nated).	, overriding benefits	of the duplication, or reason	angement (i.e., overlapping but as that overlapping service areas
If these conditions will be elim taken to eliminate them, the res	inated under the strat ponsible party and th	egy, attach an impl e agreed upon deadl	ementation schedule listing ine for completing it.	each step or action that will be
3. List each government or aut	hority that will belo to	O nay for this samia	and indicated and	ee will be funded (e.g., enterprise mpact fees, bonded indebtedness, et
Local Government or Authority:	Funding Method:			input 1003, bolided indebtedness, et
Stephens County	General Fu	nds		
Eity of Toccoa	General Fu	nds		
		1143		
		BANK HERE		
4. How will the strategy change No Change.	the previous arrange	ements for providing	and/or funding this service	within the county?
5. List any formal service delive	ry agreements or inte	rgovernmental contr	racts that will be used to imp	lement the strategy for this service:
Agreement Name: None	Cor	ntracting Parties:		Effective and Ending Dates:
6. What other mechanisms (if ar General Assembly, rate or fee chN / A	ny) will be used to im anges, etc.), and whe	plement the strategy n will they take effe	for this service (e.g., ordina	nces, resolutions, local acts of the
Power				
Phone number: 706-886-9	9491	Date completed: _M	lay 17, 1999	
. Is this the person who should be consistent with the service defined, provide designated contact			nating whether proposed loca	al government projects

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County: Stephens	Service:	Landfill/Solid Was	te Collection
	bes the agreed upon delivery arrangem	ent for this service:	
Service will be provided co	ountywide (i.e., including all cities and vernment, authority or organization pro	unincorporated areas) by a single	service provider. (If this box
Service will be provided or identify the government, as	nly in the unincorporated portion of the athority or organization providing the	e county by a single service provide service.)	er. (If this box is checked,
One or more cities will pro unincorporated areas. (If the	vide this service only within their inco his box is checked, identify the govern	orporated boundaries, and the servion ment(s), authority or organization p	ce will not be provided in providing the service.)
One or more cities will prounincorporated areas. (If the	ovide this service only within their inco nis box is checked, identify the govern	orporated boundaries, and the count ment(s), authority or organization p	ty will provide the service in providing the service.)
City of Avalon, N	Martin, Toccoa, Stephens (County	
Other. (If this box is check government, authority, or	ted, attach a legible map delineating other organization that will provide se	the service area of each service prvice within each service area.)	provider, and identify the
xxyes no	ere overlapping service areas, unneces		
higher levels of service (See O.0	eunder the strategy, attach an explant C.G.A. 36-70-24(I)), overriding benefated). overlapping, but hig	its of the duplication, or reasons the	ment (i.e., overlapping but at overlapping service areas
If these conditions will be elimi	nated under the strategy, attach an imponsible party and the agreed upon dea	plementation schedule listing eac	h step or action that will be
3. List each government or auth funds, user fees, general funds,	nority that will help to pay for this serv special service district revenues, hotel	rice and indicate how the service w I/motel taxes, franchise taxes, impa	ill be funded (e.g., enterprise ct fees, bonded indebtedness, et
Local Government or Authority:	Funding Method:		
Stephens County	General Funds; user	fees	
City of Toccoa	Enterprise Funds		
City of Martin	Enterprise Funds		
City of Avalon	Enterprise Funds		
4. How will the strategy chang no change	e the previous arrangements for provid	ding and/or funding this service wit	hin the county?
5. List any formal service deliv	ery agreements or intergovernmental	contracts that will be used to imple	ment the strategy for this service
Agreement Name: none	Contracting Parties:		Effective and Ending Dates:
6. What other mechanisms (if General Assembly, rate or fee	any) will be used to implement the str changes, etc.), and when will they take	ategy for this service (e.g., ordinande e effect?	ces, resolutions, local acts of the
7. Person completing form:	Clifton Wilkinson 9491 Date complete	•	
Phone number: 71:0-600-5	Date complete	ed: <u>12/21/98</u>	I amount aminet
are consistent with the service	ald be contacted by state agencies when delivery strategy? yes no notact person(s) and phone number(s) be		n government projects

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



County:

Instructions:				TAGEZ
Make copies of this form and com Answer each question below, attachir should be reported to the Department	uplete one for each service listed ag additional pages as necessary. If of Community Affairs.	on page I, Section III. Use the contact person for this ser	exactly the same service names lis vice (listed at the bottom of the page	eled on page 1. changes, this
Stephens	Service:	Natural Gas [Distribution	
box that best describes the agre-	ed upon delivery arrangeme	nt for this service:		

1. Check the box that best des	cribes the agreed upon delivery arrangement for this service	ъ.
Service will be provided	countywide (i.e., including all cities and unincorporated a government, authority or organization providing the service	man has a start of the start of
Service will be provided identify the government	only in the unincorporated portion of the county by a sing authority or organization providing the service.)	le service provider. (If this box is checked,
One or more cities will punincorporated areas. (If	provide this service only within their incorporated boundaring this box is checked, identify the government(s), authority	es, and the service will not be provided in or organization providing the service.)
One or more cities will punincorporated areas. (If	provide this service only within their incorporated boundari this box is checked, identify the government(s), authority	es, and the county will provide the service in or organization providing the service.)
Other. (If this box is che government, authority, o	cked, attach a legible map delineating the service area or other organization that will provide service within each se	f each service provider, and identify the ervice area.)
_ · _x	were overlapping service areas, unnecessary competition at	
If these conditions will continu higher levels of service (See O or competition cannot be elimi	te under the strategy, attach an explanation for continuing.C.G.A. 36-70-24(1)), overriding benefits of the duplication nated).	ng the arrangement (i.e., overlapping but n, or reasons that overlapping service areas
If these conditions will be elim taken to eliminate them, the res	inated under the strategy, attach an implementation scheme sponsible party and the agreed upon deadline for completing	dule listing each step or action that will be g it.
	hority that will help to pay for this service and indicate how , special service district revenues, hotel/motel taxes, franch	w the service will be funded (e.g., enterprise ise taxes, impact fees, bonded indebtedness, et
ocal Government of Authority:	Funding Method:	
City of Toccoa	Enterprise Funds	
I. How will the strategy change	e the previous emen and f	
	e the previous arrangements for providing and/or funding t	his service within the county?
no change		
i. List any formal service delive	Pru agraements or interconstruction	
Agreement Name: NONE	ery agreements or intergovernmental contracts that will be Contracting Parties:	
		Effective and Ending Dates:
. What other mechanisms (if a	ny) will be used to implement the strategy for this service (e g ordinances resolutions local sets of the
3,1111 01 100 0	hanges, etc.), and when will they take effect?	organizations, resolutions, local acts of the
n/a		
Derson completing for		
Person completing form: 705-886-949	14	
	Date completed:12/21/98	
	be contacted by state agencies when evaluating whether pre- elivery strategy? yes no ct person(s) and phone number(s) below:	roposed local government projects

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

Coun	ty:	Stephens	Service: Recreation
1. Ch	eck t	he box that best des	cribes the agreed upon delivery arrangement for this service:
	Serv	ice will be provided	countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box government, authority or organization providing the service.)
	Serv	ice will be provided	only in the unincorporated portion of the county by a single service provider. (If this box is checked, authority or organization providing the service.)
	One uning	or more cities will p corporated areas. (If	provide this service only within their incorporated boundaries, and the service will not be provided in this box is checked, identify the government(s), authority or organization providing the service.)
	One (uninc	or more cities will p corporated areas. (If	provide this service only within their incorporated boundaries, and the county will provide the service in this box is checked, identify the government(s), authority or organization providing the service.)
[] (Other gover	(If this box is chec inment, authority, or	cked, attach a legible map delineating the service area of each service provider, and identify the other organization that will provide service within each service area.)
			were overlapping service areas, unnecessary competition and/or duplication of this service identified?
or com	petit	ion cannot be elimin	e under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas nated).
			inated under the strategy, attach an implementation schedule listing each step or action that will be ponsible party and the agreed upon deadline for completing it.
			hority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.
Local Go	overnn	nent or Authority:	Funding Method:
Sto Ci	eph ty	ens County of Toccoa	General Funds; User fees General Funds
4. How	v will	the strategy change	e the previous arrangements for providing and/or funding this service within the county?
nc) cl	nange	
5. List a	any fo	ormal service delive ne: NONE	ery agreements or intergovernmental contracts that will be used to implement the strategy for this service: Contracting Parties:
			Effective and Ending Dates:
		- W	
6. Wha	t other	er mechanisms (if ar	ny) will be used to implement the strategy for this service (e.g., ordinances, resolutions, local acts of the nanges, etc.), and when will they take effect?
	n,		anges, etc.), and when win they take effect?
7. Perso	on cor	mpleting form:	Clifton Wilkinson
Is this	s the	person who should with the service de	be contacted by state agencies when evaluating whether proposed local government projects
ı not, pı	rovid	e designated contact	t person(s) and phone number(s) below:

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County: Stephens	Service: Parks	
1. Check the box that best descr	ibes the agreed upon delivery arrangement for this ser	vice:
is checked, identify the go	ountywide (i.e., including all cities and unincorporated vernment, authority or organization providing the serv	vice.) City of Toccon
Service will be provided o identify the government, a	nly in the unincorporated portion of the county by a si uthority or organization providing the service.)	city of Martin ingle service provider. (If this box is checked,
One or more cities will pro- unincorporated areas. (If the	ovide this service only within their incorporated bound his box is checked, identify the government(s), authori	laries, and the service will not be provided in ity or organization providing the service.)
One or more cities will pro- unincorporated areas. (If the	ovide this service only within their incorporated bound his box is checked, identify the government(s), authori	daries, and the county will provide the service in ity or organization providing the service.)
Other. (If this box is check government, authority, or	ed, attach a legible map delineating the service are other organization that will provide service within each	a of each service provider, and identify the h service area.)
□ yes ∟≬iio	ere overlapping service areas, unnecessary competition	
If these conditions will continue higher levels of service (See O.C or competition cannot be eliminated)	under the strategy, attach an explanation for continuing.G.A. 36-70-24(1)), overriding benefits of the duplicanted).	nuing the arrangement (i.e., overlapping but ation, or reasons that overlapping service areas
If these conditions will be elimin taken to eliminate them, the resp	nated under the strategy, attach an implementation so onsible party and the agreed upon deadline for comple	chedule listing each step or action that will be eting it.
3. List each government or authoriunds, user fees, general funds,	ority that will help to pay for this service and indicate special service district revenues, hotel/motel taxes, frame	how the service will be funded (e.g., enterprise nchise taxes, impact fees, bonded indebtedness e
	anding Method:	, and the second
City of Toccoa	General Fund	
4. How will the strategy change	the previous arrangements for providing and/or funding	ng this service within the county?
no change		
5. List any formal service deliver	y agreements or intergovernmental contracts that will	he used to implement the strategy for all it
Agreement Name: none	Contracting Parties:	Effective and Ending Dates:
6. What other mechanisms (if an General Assembly, rate or fee ch	y) will be used to implement the strategy for this servi anges, etc.), and when will they take effect?	ice (e.g., ordinances, resolutions, local acts of the
n/a		
7. Person completing form:		
Phone number: 705-886-949	Date completed	98
are consistent with the selvice de	be contacted by state agencies when evaluating whether livery strategy? yes no person(s) and phone number(s) below:	er proposed local government projects

PAGE:

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County: Stephens		_ Service: _	Tax	Assessment	
1. Check the box that best des	cribes the agreed upon del				
Service will be provided is checked, identify the	d countywide (i.e., includir government, authority or c	ng all cities and un organization provi	nincorpo	orated areas) by a single service.)	e service provider. (If this box
 Service will be provided identify the government 	only in the unincorporate authority or organization	d portion of the coproviding the ser	ounty by	y a single service provi	der. (If this box is checked,
One or more cities will unincorporated areas. (I	provide this service only w f this box is checked, ident	ithin their incorpe ify the governme	orated b	ooundaries, and the serv othority or organization	rice will not be provided in providing the service.)
One or more cities will unincorporated areas. (I	provide this service only w f this box is checked, ident	ithin their incorpo	orated b	oundaries, and the counthority or organization	nty will provide the service in providing the service.)
Other. (If this box is che government, authority, c	cked, attach a legible ma or other organization that w	p delineating the vill provide servic	service e within	e area of each service n each service area.)	provider, and identify the
2. In developing the strategy, ☐ yes ☐ no					
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If these conditions will be elin taken to eliminate them, the re	ninated under the strategy, sponsible party and the ag	attach an impler reed upon deadlin	nentati e for co	on schedule listing eacompleting it.	th step or action that will be
3. List each government or au funds, user fees, general funds	thority that will help to pay s, special service district re	y for this service a venues, hotel/mo	and indi	cate how the service w s, franchise taxes, impa	ill be funded (e.g., enterprise ct fees, bonded indebtedness,
Local Government or Authority:	Funding Method:				
Stephens County	General Fun	d s			
	150 6				
4. How will the strategy change	e the previous arrangemen	nts for providing a	and/or f	unding this service with	hin the county?
5. List any formal service deliving Agreement Name: none	ery agreements or intergo	vernmental contra	cts that	will be used to implem	nent the strategy for this service
- Igreement (vanc.	Contract	ing Parties:			Effective and Ending Dates:
6. What other mechanisms (if General Assembly, rate or fee	any) will be used to impler changes, etc.), and when w	nent the strategy ill they take effec	for this t?	service (e.g., ordinance	es, resolutions, local acts of the
n/a					
7. Person completing form:	Clifton Wilkins	on			
Phone number: <u>706-886-94</u>			12/	21 /00	
8. Is this the person who should are consistent with the service of	d be contacted by state age delivery strategy?	ncies when evalu			government projects
If not, provide designated conta	ct person(s) and phone nu	mber(s) below:			

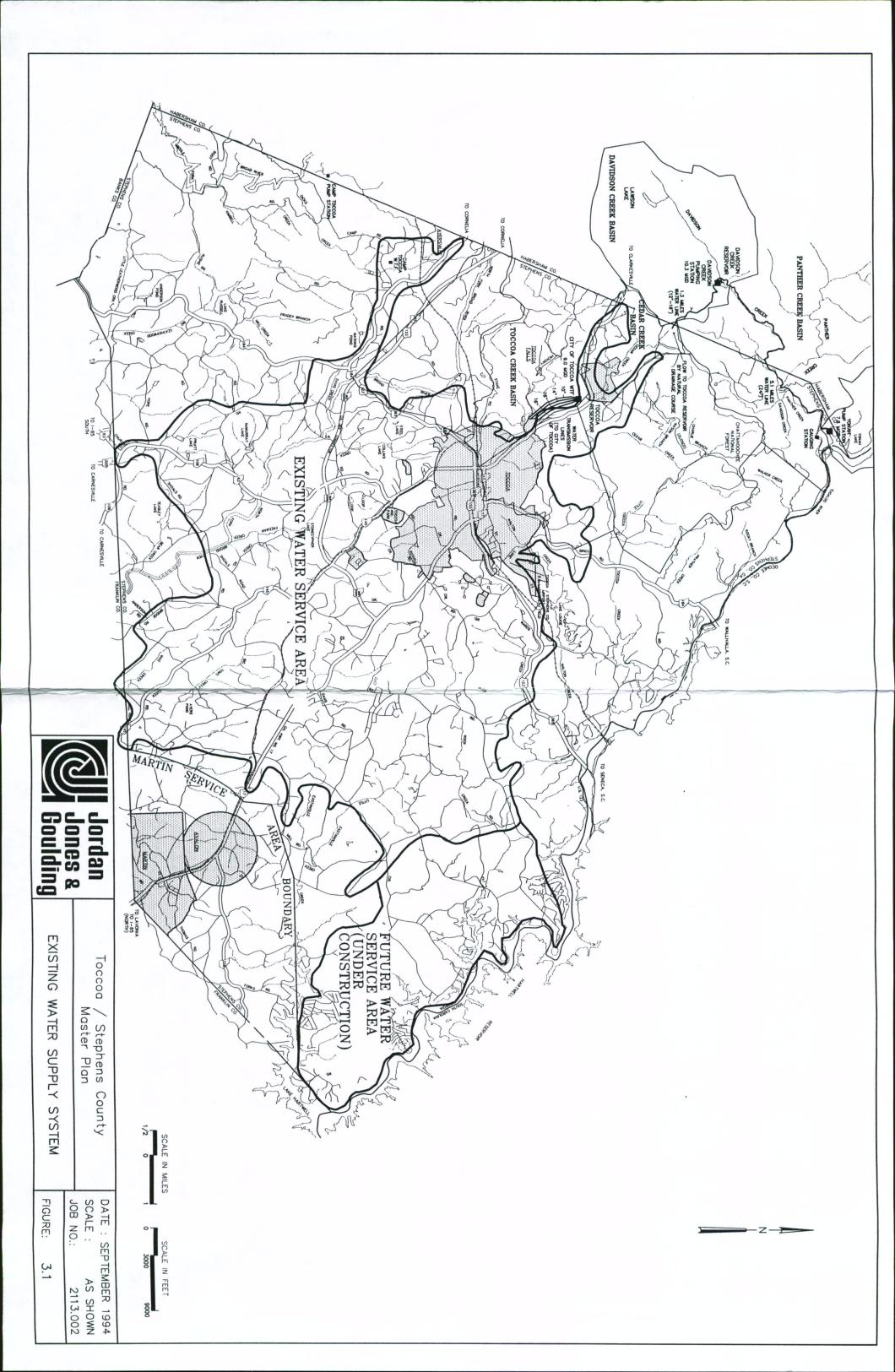
SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

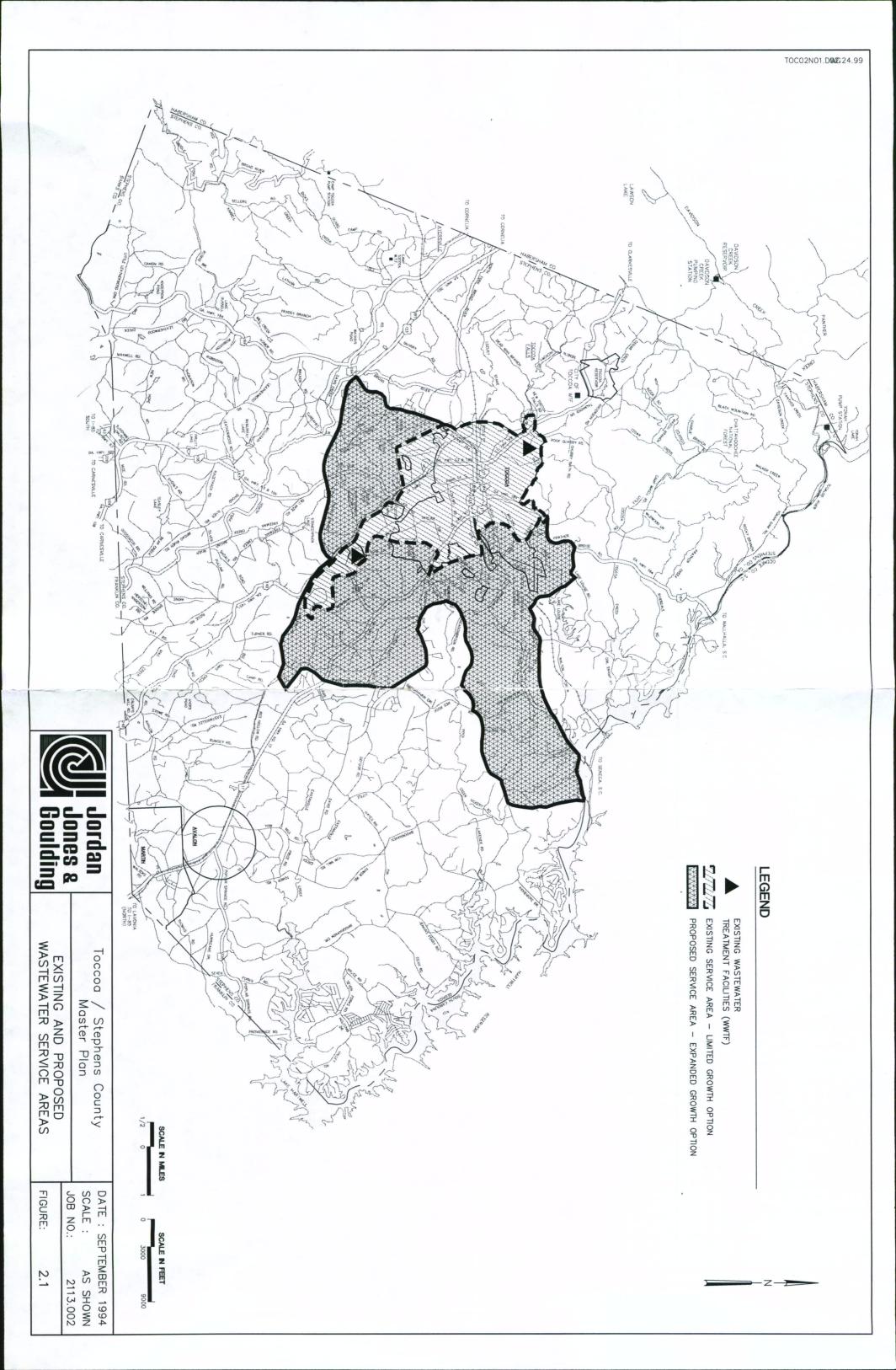


Instructions:

Make copies of this form and complete one for each service liste	d 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 thi	is service (listed at the bottom	of the page) changes, this
should be reported to the Department of Community Affairs.			

County: Stephens		Service:	Water Syste	<u>M</u>
1. Check the box that best descri				
Service will be provided consist checked, identify the go	ountywide (i.e., inclovernment, authority	uding all cities and or organization pro	unincorporated areas) by viding the service.)	y a single service provider. (If this box
Service will be provided or identify the government, as	nly in the unincorpo uthority or organiza	orated portion of the tion providing the s	county by a single serv ervice.)	ice provider. (If this box is checked,
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One or more cities will pro- unincorporated areas. (If the	vide this service on is box is checked, i	ly within their incordentify the governm	rporated boundaries, and nent(s), authority or orga	d the county will provide the service in anization providing the service.)
Other. (If this box is check government, authority, or o	ed, attach a legible other organization th	e map delineating t nat will provide serv	he service area of each vice within each service	service provider, and identify the area.)
2. In developing the strategy, w ☐ yes ☑ no	ere overlapping serv	vice areas, unnecess	ary competition and/or o	duplication of this service identified?
If these conditions will continue higher levels of service (See O.C or competition cannot be eliminated)	C.G.A. 36-70-24(1))	attach an explana , overriding benefit	tion for continuing the s of the duplication, or r	arrangement (i.e., overlapping but easons that overlapping service areas
If these conditions will be elimin taken to eliminate them, the resp	ated under the strate	egy, attach an imp ne agreed upon dead	lementation schedule l	isting each step or action that will be
3. List each government or auth funds, user fees, general funds,	ority that will help t special service distri	o pay for this servicict revenues, hotel/r	ce and indicate how the s	service will be funded (e.g., enterprise xes, impact fees, bonded indebtedness, o
	unding Method:			
City of Toccoa	Enterpris	e Funds		
City of Martin	Enterpris			
4 How will the strategy change	the provious array			
4. How will the strategy change	the previous arrang	gements for providir	ig and/or funding this se	rvice within the county?
no change				
5. List any formal service delive	ry agreements or in	tergovernmental co	ntracts that will be used	to implement the strategy for this service
Agreement Name: NONE		ontracting Parties:	inducts that will be used	Effective and Ending Dates:
		Ea I to the		
6. What other mechanisms (if a	y) will be used to i	mplement the strate	gy for this service (e.g.,	ordinances, resolutions, local acts of th
General Assembly, rate or fee cl	anges, etc.), and wh	hen will they take e	ffect?	
n/a				
7. Person completing form:	Clifton Wi	lkinson		
Phone number:		_ Date completed:	12/21/98	
8. Is this the person who should				sed local government projects
are consistent with the service d	elivery strategy? [X yes □ no		out took government projects
If not, provide designated contact	t person(s) and pho	one number(s) below	/:	





CLIFTON, SANDERS & SMITH, P.C.

ATTORNEYS AT LAW
P.O. BOX 1005
TOCCOA, GEORGIA 30577

CECIL L. CLIFTON, JR. JANNEY E. SANDERS RUSSELL W. SMITH MARIE K. EVANS

LAW OFFICES
311 S. BIG A. ROAD
706-886-7533
FAX 706-886-0617
E-MAIL: CCLIFTON2@ALLTEL.NET

September 27, 2000

Jim Higdon, Commissioner Georgia Department of Community Affairs 60 Executive Park South, N.E. Atlanta, GA 30329-2231

Dear Commissioner Higdon:

As stated in my previous correspondence to you of August 1, on Friday, July 28, the City Commission of the City of Toccoa and the Stephens County Board of Commissioners met in a joint meeting and adopted the amendment to the Waste Water System Service Delivery Strategy. I previously sent to you a copy of the Amendment which had been signed on behalf of both Stephens County and the City of Toccoa. I am now enclosing for your records a copy of the Amendment as signed by all four parties, including the Cities of Martin and Avalon.

Should you need any further information in order that Stephens County will be eligible for permits, grants and loans in connection with its waste water system efforts in the unincorporated section of the County, please advise.

Sincerely

Cecil L. Clifton / Jr.

CLCJr: jah

Enclosures

c: Ferrell Morgan, Mayor City of Toccoa w/ copy executed enclosure

> Bill Lewis, City Manager City of Toccoa W/ originally executed enclosure

John A. Dickerson, Esq., City Attorney City of Toccoa w/ copy executed enclosure

SEP 2 8 2000

Jim Higdon, Commissioner September 27, 2000 Page 2

> James Ledford, Chairman Stephens County Board of Commissioners w/ copy executed enclosure

Lamar Smith, County Administrator Stephens County w/ no enclosure (original picked up 9/26/00)

Donald G. Foster, Mayor City of Martin w/ originally executed enclosure

Gus Gonzalez, Mayor City of Avalon w/ originally executed enclosure

Kirby Rutherford, Chairman Stephens County Development Authority w/ copy executed enclosure

Lonnie M. Edenfield, Jr., Executive Director, Stephens County Development Authority W/ copy executed enclosure

REVISED



SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2

Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names itssed on page 1. Asswer 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: Service: Waste Water System Stephens 1. Check the hox that best describes the agreed upon delivery arrangement for this service: ☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this bux is checked, identify the government, authority or organization providing the service.) Service will be provided only in the unincorporated portion of the county by a single service provider. (If this hox is checked, identify the government, authority or organization providing the service.) One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) City of Toccoa Stephens County Other. (If this box is checked, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.) 2. In developing the strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified? ☐ yes 📈 110 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. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.) Punding Method: City of Toccoa Enterprise Funds Stephens County ...Enterprise Funds 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? Stephens County will provide service in the unincorporated areas of Stephens County except as provided in Exhibit "A" attached hereto and incorporated herein by reference. 5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service: Agreement Name: Contracting Pasties: Effective and Ending Dates: None 6. What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, local acts of the General Assembly, rate or fee changes, etc.), and when will they take effect? 7. Person completing form: Lamar T. Smith. Phone number: 706-886-9491

Phone number: 706-886-9491 Date completed:

8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects

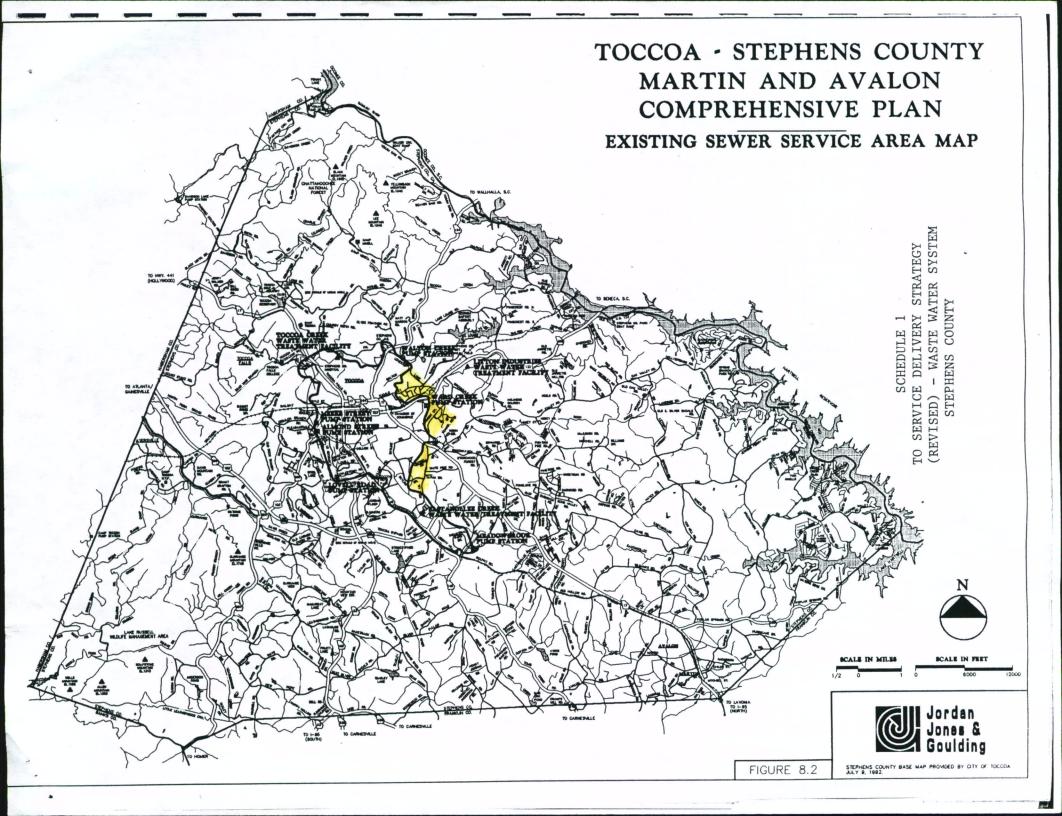
are consistent with the service delivery strategy? yes no
If not provide designated contact person(s) and phone number(s) below:

EXHIBIT "A" TO SERVICE DELIVERY STRATEGY (REVISED) - WASTE WATER SYSTEM STEPHENS COUNTY

Stephens County will provide waste water system service in the unincorporated areas of Stephens County except for any portion of the unincorporated area which is included in the City of Toccoa existing sewer service area shown on Schedule 1 attached hereto and incorporated herein by reference, the same being a reduced copy of the Toccoa, Stephens County, Martin and Avalon Comprehensive Plan Existing Sewer Service Area Map prepared by Jordan, Jones & Goulding (base map provided by City of Toccoa dated July 9, 1992, a copy of which is attached as Figure 8.2 (p. 8-11) of the Comprehensive Plan dated September, 1994 as previously filed with Department of Community Affairs) as amended by the addition of that portion on Schedule 1 shown in yellow. The parties have approved by their signatures full scale maps of Schedule 1, and each party has retained a copy for its records.

The parties agree that the owner of any property located within one (1) mile of the existing sewer service area as shown on Schedule 1 attached hereto may request either Stephens County or the City of Toccoa to provide sewer service to such property and, if agreed by the party requested, the provision of service within such one mile area shall constitute an amendment hereof without further action required on the part of any party hereto.

jahlCounty(Exhibit A to SDS-Waste Water System





SERVICE DELIVERY STRATEGY CERTIFICATIONS

PAGE 4

Lastructions:

This page must, at a minimum, be signed by an authorized representative of the following governments: 1) the enuny; 2) the city serving us the county sent; 3) all cities having 1990 populations of ever 9,000 realding within the county; and 4) no less than 50% of all other cities with a 1990 population of between 500 and 9,000 residing within the county. Cities with 1990 populations below 500 and authorities providing services under the strategy are not required to sign this form, but are encouraged to do so. Attach additional copies of this page as necessary.

SERVICE DELIVERY STRATEGY FOR __ _ COUNTY Stephens

We, the undersigned authorized representatives of the jurisdictions listed below, certify that:

- 1. We have executed agreements for implementation of our service delivery strategy and the attached forms provide an
- accurate depiction of our agreed upon strategy (O.C.G.A. 36-70-21);

 2. Our service delivery strategy promotes the delivery of local government services in the most efficient, effective, and responsive manner (O.C.G.A. 36-70-24 (1));
- Our service delivery strategy provides that water or sewer fees charged to customers located outside the geographic boundaries of a service provider are reasonable and are not arbitrarily higher than the fees charged to customers located within the geographic boundaries of the service provider (O.C.G.A. 36-70-24 (2));
- Our service delivery strategy ensures that the cost of any services the county government provides (including those
 jointly funded by the county and one or more municipalities) primarily for the benefit of the unincorporated area of
 the county are borne by the unincorporated area residents, individuals, and property owners who receive such
 service (O.C.G.A. 36-70-24 (3)); and
- The process(es) for resolving land use disputes arising over annexation were established by the July 1, 1998 deadline (O.C.G.A. 36-70-24(4)).

6. This revision is for waste water system only.

SIGNATURE:	NAME: (Please print or type)	TITLE:	JURISDICTION:	DATE:
	Roberth-3	roup		
	Robert A. Troup	Vice Mayor	City of Toccoa	
Just	James Ledford	Chairman	Stephens County	
Just Daste	Donald G. Foster	Mayor	City of Martin	
Gestf	Gus Gonzalez	Mayor	City of Avalon	

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County: Stephens					
- GOODIICHS	- 1	Service:	Waste Wat	er System	
Service will be asset de	scribes the agreed upon delive	ery arrangeme	nt for this service:		
is checked, identify the	d countywide (i.e., including government, authority or org	all cities and u anization prov	nincorporated area ding the service.)	s) by a single sorvic	e provider. (If this box
Service will be provide identify the governmen	d only in the unincorporated p t, authority or organization pr	portion of the coviding the ser	ounty by a single s	ervice provider. (If	this box is checked,
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unincorporated areas. (I	If this box is checked, identify	the governme	orated boundaries, nt(s), authority or (and the service will byganization providi	not be provided in ng the service.)
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	provide this service only with f this box is checked, identify	go voi illino	n(s), authority of (organization providi	ng the service.)
Uther. (If this box is che government, authority, c	cked, attach a legible map dor other organization that will	lelineating the provide servic	service area of ea	ich service provide ce area.)	r, and identify the
2. In developing the strategy					
2. In developing the strategy, ☐ yes ☐ no	were overlapping service area	as, unnecessary	competition and/o	or duplication of this	service identified?
If these conditions will continu higher levels of service (See O or competition cannot be elimi	the under the strategy, attach C.C.G.A. 36-70-24(1)), overrighted).	an explanation	n for continuing to the duplication, o	h e arrangement (i. r reasons that overl <i>a</i>	e., overlapping but
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Local Government or Authority:	Funding Method:			axes, impact ices, o	onded indebtedness, e
City of Toccoa	Enterprise Funds				
4. How will the strategy change	e the previous arrangements f	or monidia.	1/ 6		
	Provide arrangements I	or providing a	d/or funding this s	service within the co	ounty?
no change					
5. List any formal service delive	ry agreements or intergovern	mental contrac	is that will be used	l to implement	
Agreement Name: none	Contracting P	Parties:	is that will be used	Fifective	trategy for this service: and Ending Dates:
					and Enoing Dates:
6. What other mechanisms (if a					
6. What other/mechanisms (if an General Assembly, rate or fee ch	ay) Will be used to implement langes, etc.) and when will the	the strategy for	r this service (e.g.,	ordinances, resolut	ions, local acts of the
6/2	Solver, and when will fill	icy take effect?			
/174					
ı					
l Dansan and Little and an					
Phone number: 706, 006, 044					
Phone number: 706-886-04		mpleted:	2/21/98		
B. Is this the person who should are consistent with the service def not, provide designated contact	be contacted by state agencies	s when evaluat	ng whether propos	ed local governmen	t projects
	- Prono namoci	(a) UCIUW:			

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County:Stephens	Service: Streets	/Roads
1. Check the box that best describes the agreed u		
Service will be provided countywide (i.e., i is checked, identify the government, author	ncluding all cities and unincorporated ity or organization providing the serv	areas) by a single service provider. (If this box ice.)
 Service will be provided only in the uninco identify the government, authority or organ 	rporated portion of the county by a sinization providing the service.)	ngle service provider. (If this box is checked,
One or more cities will provide this service unincorporated areas. (If this box is checked	only within their incorporated bound d, identify the government(s), authori	aries, and the service will not be provided in ty or organization providing the service.)
One or more cities will provide this service unincorporated areas. (If this box is checked	only within their incorporated bound, identify the government(s), authority	aries, and the county will provide the service in ty or organization providing the service.)
Other. (If this box is checked, attach a leging government, authority, or other organization	ble map delineating the service area to that will provide service within each	a of each service provider, and identify the a service area.)
2. In developing the strategy, were overlapping s ☐ yes ☐ no	ervice areas, unnecessary competition	n and/or duplication of this service identified?
If these conditions will continue under the strateg higher levels of service (See O.C.G.A. 36-70-24(or competition cannot be eliminated).	y, attach an explanation for contin l)), overriding benefits of the duplica	uing the arrangement (i.e., overlapping but tion, or reasons that overlapping service areas
If these conditions will be eliminated under the st taken to eliminate them, the responsible party and	rategy, attach an implementation sc I the agreed upon deadline for comple	hedule listing each step or action that will be sting it.
3. List each government or authority that will hel funds, user fees, general funds, special service di	p to pay for this service and indicate strict revenues, hotel/motel taxes, frai	how the service will be funded (e.g., enterprise nchise taxes, impact fees, bonded indebtedness, etc
Local Government or Authority: Funding Method:		
Stephens County General		
6ity of Toccoa General F	ınds	
4. How will the strategy change the previous arra	ingements for providing and/or fundir	ng this service within the county?
no change		
5 Liet and Samuel and a 1st		
Agreement Name: none	Intergovernmental contracts that will Contracting Parties:	be used to implement the strategy for this service:
	Community Lances.	Effective and Ending Dates:
6. What other mechanisms (if any) will be used t General Assembly, rate or fee changes, etc.), and	o implement the strategy for this serving	ice (e.g., ordinances, resolutions, local acts of the
n/a	when will they take effect?	
, u		
7. Person completing form: Clifton Wi	lkinson	
Phone number: 705-886-9491	Date completed:12/21/9	0
8. Is this the person who should be contacted by are consistent with the service delivery strategy? If not, provide designated contact person(s) and p	state agencies when evaluating wheth	

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

Coun	ity:	Step	hens		Service: (Cemetery	
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X	Serv iden	vice will itify the	be provided government,	only in the unincorp authority or organiz	porated portion of the containing the serv	unty by a single service providice.) City of Toccoa	
	One	or more	cities will p ed areas. (If	provide this service of this box is checked,	only within their incorpor , identify the governmen	rated boundaries, and the servites), authority or organization	ice will not be provided in providing the service.)
	One unin	or more	cities will p ed areas. (If	provide this service of this box is checked,	only within their incorpor , identify the government	rated boundaries, and the cour t(s), authority or organization	nty will provide the service in providing the service.)
	Othe	er. (If thi ernment,	s box is che authority, o	cked, attach a legib or other organization	le map delineating the sthat will provide service	service area of each service p within each service area.)	provider, and identify the
2. In	deve	eloping t	he strategy,	were overlapping se	rvice areas, unnecessary	competition and/or duplication	on of this service identified?
mgne	I IEA	ers or se	will contine rvice (See Contine mot be elim	J.C.G.A. 36-70-24(1)	y, attach an explanation)), overriding benefits of	n for continuing the arrange the duplication, or reasons the	ment (i.e., overlapping but at overlapping service areas
If the taken	se co	onditions liminate	will be elin them, the re	ninated under the strasponsible party and	ategy, attach an implem the agreed upon deadline	nentation schedule listing eace for completing it.	h step or action that will be
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Local (Gover	nment or	Authority:	Funding Method:			
- C :	i t y	of T	Foccoa-	General Fund	d		
		7					
4. Ho				ge the previous arran	ngements for providing a	nd/or funding this service with	hin the county?
		no ch	ange				
5. Lis	st any	y formal	service deli	very agreements or in	ntergovernmental contra	cts that will be used to implen	nent the strategy for this service:
Agreer	meni	Name: N	one		Contracting Parties:		Effective and Ending Dates:
7.1							
Gene	hat cral A	other med	chanisms (if , rate or fee	any) will be used to changes, etc.), and v	implement the strategy when will they take effect	for this service (e.g., ordinance t?	es, resolutions, local acts of the
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			ing form: 706–886-	Clifton Wilk		10/01/00	
					Date completed:	12/21/98	
are co	onsis	tent with	the service	delivery strategy?	tate agencies when evalu yes no none number(s) below:	ating whether proposed local	government projects
			J		number(3) below.		

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS 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, the	
should be reported to the Department of Community Affairs.	

County: Stephens		Service:	Downtown De	evelopment/Mai	n Street
1. Check the box that best descri					
Service will be provided of is checked, identify the go				by a single service provi	der. (If this box
Service will be provided of identify the government, a	only in the unincorpo authority or organiza	orated portion of the cation providing the se	county by a single service.) City of 1	vice provider. (If this bo	x is checked,
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One or more cities will pr unincorporated areas. (If	ovide this service on this box is checked, i	nly within their incorpidentify the governm	porated boundaries, arent(s), authority or org	nd the county will provid ganization providing the	de the service in service.)
Other. (If this box is chec government, authority, or	ked, attach a legibl e other organization t	e map delineating th hat will provide servi	ne service area of eac ice within each service	h service provider, and e area.)	l identify the
 In developing the strategy, v yes ∑ no 	vere overlapping ser	vice areas, unnecessa	ry competition and/or	duplication of this serv	ice identified?
If these conditions will continu higher levels of service (See O. or competition cannot be elimin	.C.G.A. 36-70-24(1)	attach an explanat), overriding benefits	ion for continuing the of the duplication, or	e arrangement (i.e., overlapping	verlapping but g service areas
If these conditions will be elim taken to eliminate them, the res	inated under the stra ponsible party and the	tegy, <mark>attach an impl</mark> he agreed upon deadl	ementation schedule ine for completing it.	listing each step or acti	on that will be
3. List each government or aut funds, user fees, general funds	hority that will help, special service distr	to pay for this service rict revenues, hotel/m	e and indicate how the notel taxes, franchise t	e service will be funded axes, impact fees, bonde	(e.g., enterprise ed indebtedness, etc
Local Government or Authority:	Funding Method:				
City of Toccoa	General Fur	nd, Special Ta	x District		
4. How will the strategy chang	ge the previous arrang	gements for providin	g and/or funding this	service within the count	y?
no change					
no change					
5. List any formal service deliv	erv agreements or in	tergovernmental con	tracts that will be use	d to implement the strate	egy for this service:
Agreement Name: none		Contracting Parties:			d Ending Dates:
6. What other mechanisms (if General Assembly, rate or fee n/a	any) will be used to changes, etc.), and w	implement the strate then will they take ef	gy for this service (e.g fect?	., ordinances, resolution	s, local acts of the
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7. D					
7. Person completing form: Phone number: 706-886-9					
8. Is this the person who should		Date completed:		nosed local government	projects
are consistent with the service If not, provide designated cont	delivery strategy?	y yes no		oscu local government	projects

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions:

Make copies of this form and complete one for each service listed on page I, Section III. Use exactly the same service names listed on page I
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

Ct			
County: Stephens		ce: Jail	1
	ribes the agreed upon delivery arran		
is checked, identify the go	countywide (i.e., including all cities overnment, authority or organization	and unincorporated areas) by a providing the service.)	single service provider. (If this box
Service will be provided of identify the government, a	only in the unincorporated portion of authority or organization providing t	f the county by a single service the service.)	provider. (If this box is checked,
One or more cities will pr unincorporated areas. (If t	rovide this service only within their in this box is checked, identify the government.	incorporated boundaries, and the ernment(s), authority or organize	e service will not be provided in cation providing the service.)
One or more cities will pr unincorporated areas. (If t	rovide this service only within their ithis box is checked, identify the gove	incorporated boundaries, and the ernment(s), authority or organize	e county will provide the service in zation providing the service.)
Other. (If this box is check government, authority, or	ked, attach a legible map delineati other organization that will provide	ng the service area of each ser service within each service are	rvice provider, and identify the a.)
2. In developing the strategy, w ☐ yes ☑ no	vere overlapping service areas, unne	cessary competition and/or dup	lication of this service identified?
If these conditions will continue higher levels of service (See O. or competition cannot be elimin	e under the strategy, attach an expl C.G.A. 36-70-24(1)), overriding ber nated).	anation for continuing the are nefits of the duplication, or reason	rangement (i.e., overlapping but ons that overlapping service areas
If these conditions will be elimitaken to eliminate them, the res	nated under the strategy, attach an ponsible party and the agreed upon o	implementation schedule listing it.	ng each step or action that will be
3. List each government or auth funds, user fees, general funds,	nority that will help to pay for this so special service district revenues, ho	ervice and indicate how the serv tel/motel taxes, franchise taxes,	rice will be funded (e.g., enterprise impact fees, bonded indebtedness, etc
	Funding Method:		
Stephens County	General Fund		
4. How will the strategy change	e the previous arrangements for prov	viding and/or funding this service	ce within the county?
no change			
•			
5 List any formal service deliver	2m. amaamanta 1-4		
Agreement Name: none	Contracting Parties:	contracts that will be used to in	mplement the strategy for this service:
			Effective and Ending Dates:
6 What all the control of the contro			
General Assembly, rate or fee c	my) will be used to implement the st hanges, etc.), and when will they tak	rategy for this service (e.g., ord	inances, resolutions, local acts of the
n/a	and goo, etc.), and whom win they day	ac circet:	
11/ α			
7. Person completing form:	Clifton Wilkinson		
Phone number:		ed: 12/21/00	
8. Is this the person who should are consistent with the service d	I be contacted by state agencies whe lelivery strategy? yes no ct person(s) and phone number(s) be	n evaluating whether proposed	local government projects

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County:	Stephens		Service:	911 Comm	unication Serv	vices
1. Check	the box that best desc	ribes the agreed upor				
⊠ Ser is o	rvice will be provided checked, identify the g	countywide (i.e., incl overnment, authority	luding all cities and or organization pro	unincorporate viding the serv	d areas) by a single s vice.) Stephen	ervice provider. (If this box s County
☐ Seride	rvice will be provided entify the government,	only in the unincorpo authority or organiza	orated portion of the ation providing the s	county by a service.)	ingle service provide	r. (If this box is checked,
On uni	ne or more cities will p incorporated areas. (If	rovide this service on this box is checked, i	nly within their inco identify the governn	porated bound ent(s), author	daries, and the service ity or organization po	e will not be provided in roviding the service.)
☐ On uni	ne or more cities will p incorporated areas. (If	rovide this service on this box is checked, i	nly within their inco identify the governn	porated bound nent(s), author	daries, and the county ity or organization pi	will provide the service in coviding the service.)
Otl gov	her. (If this box is chec vernment, authority, or	ked, attach a legible other organization t	e map delineating t hat will provide serv	he service are	ea of each service pr h service area.)	ovider, and identify the
2. In de	veloping the strategy, veloping the	were overlapping ser	vice areas, unnecess	ary competition	on and/or duplication	of this service identified?
higher le	conditions will continu evels of service (See O etition cannot be elimi	.C.G.A. 36-70-24(1))	attach an explana), overriding benefit	tion for conting of the duplic	nuing the arrangem ation, or reasons that	ent (i.e., overlapping but overlapping service areas
If these of taken to	conditions will be elim eliminate them, the res	inated under the strat sponsible party and the	legy, attach an imp he agreed upon dead	lementation s line for compl	chedule listing each leting it.	step or action that will be
3. List e funds, u	ach government or aut ser fees, general funds	hority that will help to , special service distr	to pay for this servic	e and indicate	how the service will anchise taxes, impact	be funded (e.g., enterprise fees, bonded indebtedness, et
Local Gove	ernment or Authority:	Funding Method:				
City	y of Toccoa	General Fund	Js			
4. How	will the strategy chang	ge the previous arrang	gements for providing	g and/or fund	ing this service withi	n the county?
no	change					
5. List aı	ny formal service deliv	ery agreements or in	tergovernmental co	ntracts that wil	ll he used to impleme	ent the strategy for this service
Agreement			Contracting Parties:		a oo 2000 to implome	Effective and Ending Dates:

6. What General	other mechanisms (if Assembly, rate or fee	any) will be used to i changes, etc.), and w	implement the strate hen will they take e	gy for this ser	vice (e.g., ordinances	resolutions, local acts of the
n/	a					
7. Perso	on completing form:	Clifton Wil	kinson			
	umber: <u>706-886-9</u>	191	_ Date completed:	12/21/9	8	
are cons	s the person who shou iistent with the service rovide designated cont	delivery strategy?	ate agencies when e	aluating whet		overnment projects

SERVICE DELIVERY STRATEGY SUMMARY OF LAND USE AGREEMENTS



Instructions:

Answer each question below, attaching additional pages as necessary. Please note that any changes to the answers provided will require updating of the service delivery strategy. If the contact person for this service (listed at the bottom of this page) changes, this should be reported to the Department of Community Affairs.

County: Stephens	
1. What incompatibilities or conflicts between the land use plans of lethe service delivery strategy?	ocal governments were identified in the process of developing
No incompatibilities or conflicts were id	entified.
2. Check the boxes indicating how these incompatibilities or conflicts	were addressed:
amendments to existing comprehensive plans adoption of a joint comprehensive plan	
other measures (amend zoning ordinances,	Note: If the necessary plan amendments, regulations, ordinances, etc. have not yet been formally adopted, indicate when each of the
add environmental regulations, etc.)	affected local governments will adopt them.
If "other measures" was checked, describe these measures:	
3. Summarize the process that will be used to resolve disputes when a areas to be annexed into a city. If the conflict resolution process will very a conflict resolution process will very a conflict resolution process.	a county disagrees with the proposed land use classification(s) for wary for different cities in the county, summarize each process.
Service Delivery Dispute - Resolution Process	
4 What policies approximate and the second s	
4. What policies, procedures and/or processes have been established been ensure that new extraterritorial water and sewer service will be consist	ent with all applicable land use plans and ordinances?
 County wide water system in place. Sewer service provided by one entity. 	- See rented
217 Jewel Service provided by one entity.	page
E Person complete com Clifton Wilkinson	
5. Person completing form: Clifton Wilkinson Phone number: 706-885-9491 Date completing form: Date completin	
6. Is this the person who should be contacted by state agencies when a	evaluating whether proposed local government projects are
consistent with land use plans of applicable jurisdictions? yes	no
If not, provide designated contact person(s) and phone number(s) belo	w:

SERVICE DELIVERY STRATEGY CERTIFICATIONS



Instructions:

This page 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 1990 populations of over 9,000 residing within the county; and 4) no less than 50% of all other cities with a 1990 population of between 500 and 9,000 residing within the county. Cities with 1990 populations below 500 and authorities providing services under the strategy are not required to sign this form, but are encouraged to do so. Attach additional copies of this page as necessary.

SERVICE DELIVERY STRATEGY FOR STEPHENS COUNTY

We, the undersigned authorized representatives of the jurisdictions listed below, certify that:

- 1. We have executed agreements for implementation of our service delivery strategy and the attached forms provide an accurate depiction of our agreed upon strategy (O.C.G.A. 36-70-21);
- 2. Our service delivery strategy promotes the delivery of local government services in the most efficient, effective, and responsive manner (O.C.G.A. 36-70-24 (1));
- 3. Our service delivery strategy provides that water or sewer fees charged to customers located outside the geographic boundaries of a service provider are reasonable and are not arbitrarily higher than the fees charged to customers located within the geographic boundaries of the service provider (O.C.G.A. 36-70-24 (2));
- 4. Our service delivery strategy ensures that the cost of any services the county government provides (including those jointly funded by the county and one or more municipalities) primarily for the benefit of the unincorporated area of the county are borne by the unincorporated area residents, individuals, and property owners who receive such service (O.C.G.A. 36-70-24 (3)); and
- 5. The process(es) for resolving land use disputes arising over annexation were established by the July 1, 1998 deadline (O.C.G.A. 36-70-24(4)).

SIGNATURE:	NAME: (Please print or type)	TITLE:	JURISDICTION:	DATE
Winnie Zee	Res Winnie Zeches	Mayor	City of Toccoa	
Winnie Zee Brenda Chap	max Brenda Chapman	Chairman Stephens Co. BOC	Stephens Co.	
		Mayor	City of Avalon	
In If Nuche D C	Michael Cole	Mayor	City of Martin	
			1.00	

Phone 886-9491 Fax 886-2185

May 18, 1999

Mr. Rick Brooks
Director
Planning and Environmental Management Division
60 Executive Park, South, S.E.
Atlanta, Georgia 30329-2231

Dear Mr. Brooks,

As requested in your March 31st letter I have enclosed the following documents for your review:

- Service Delivery Arrangements (page 2) for Law Enforcement
- A copy of our "Dispute Resolution Process" is included and attached to our strategy arrangement
- A copy of a new ordinance to insure compatibility with land use plans was approved and enclosed for your review.

Please give me a call if you have any questions or need additional information.

Sincerely,

Clifton Wilkinson Administrator

cc: Board of Commissioners

A Resolution Establishing a

Process to Insure Compatibility with Applicable Land Use Plans and Ordinances and to Resolve Inter-Governmental Land Use Plan and Ordinance Inconsistencies Pursuant to the Provision of New Extra Territorial Water Sewer Services

WHEREAS, the Stephens County Board of Commissioners and the mayor and councils of its political jurisdictions have found it necessary, desirable and in the public interest to establish a formal process to insure that the provision of new extraterritorial water and sewer service is consistent with all applicable land uses plans and ordinances of adjoining local governments, and

WHEREAS, the Stephens County Board of Commissioners and its municipal jurisdictions have determined that a process to insure land use compatibility as it relates to the provision of new extraterritorial water and sewer services and land use plans/ordinances, and

WHEREAS, the Stephens County Board of Commissioners and the governing bodies of the County's municipal jurisdictions have jointly developed a cooperative plan to insure consistency with applicable land use plans/ordinances,

BE IT THEREFORE RESOLVED by the Stephens County Board of Commissioners of Stephens County, Georgia and the governing bodies of the cities of Avalon, Martin, Toccoa, and IT IS HEREBY RESOLVED by the authority of same:

Section 1. Effective immediately upon the adoption of this Resolution by the respective governments. The following process for insuring that proposed extraterritorial water and sewer service is compatible with the land use plans/ordinances of the new territory shall be implemented:

- 1. Prior to initiating the development of water and sewer services in extraterritorial boundaries, the local government proposing the new service will notify the adjacent government of the proposed new service by providing information on location of property, size of area, and existing/proposed land use associated with the property.
- 2. Within 10 working days following receipt of the above information, the local government, receiving the notice of water/sewer 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 providing supporting evidence. If the community proposing the service extension does not receive a response in writing within the deadline, the proposal shall be determine to be consistent with the community's land use plan or land use ordinances.
- 3. If the community desiring to extend the water or sewer services receives a notification that the proposal is incompatible with the land use plan, the community may respond in writing within 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; (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 participants in the mediation. Any cost associated with the mediation will be shared pro rata by the county and the city based on population in accordance with the most recent decennial census.
- 5. A proposal to extend extraterritorial water and sewer service shall not be implemented until any bona fide land use plan or land use ordinance inconsistencies are resolved pursuant to the dispute resolution process.
- 6. However, the final determination of the land use plan or land use ordinances will be accorded to the governing body receiving the proposed service extension.

Section 2. All ordinances and resolutions in conflict herewith are hereby repealed.

DATE: 5-4-99	
ATTEST:	Shareh and Courty Decad of Courtising
Mr. K.	Stephens County Board of Commissioners
Maney Lowns County Clerk	Brenda Chapman
County Clerk	Chairperson
DATE: 5/4/99	
ATTEST:	Mayor, City of Avalon, Georgia
- (- 0 P 1) -	
City Clerk/Notary	The state of the s
City Clerk/reduity	Mayor
DATE: 5/4/99	
DATE: 5/4/99	
ATTEST:	Mayor, City of Martin, Georgia
The PKing	
City Clerk/Notary	Mayor Mayor
	Mayor
DATE: 5/4/99	
DAIL.	
ATTEST:	Mayor, City of Toccoa. Georgia
Jacophin Isliason	Winne Zeles
City Clerk	Mayor Locker

SERVICE DELIVERY STRATEGY

DISPUTE RESOLUTION PROCESS (SEE O.C.G.A. 36-70-24(4)©)

The Stephens County and the Cities of Avalon, Martin, and Toccoa hereby agree to implement the following process for resolving land use disputes over annexation effective July 1, 1998.

Prior to initiating any formal annexation activities, the City will notify the county government of a proposed annexation and provide information on location of property, size of area, and proposed land use or zoning classification(s) (if applicable) of the property upon annexation.

Within 15 working days following receipt of the above information, the county will forward to the city a statement either: (a) indicating that the county has no objection to the proposed land use for the property; or (b) describing its bona fide objection(s) to the city's proposed land use classification, providing supporting information, and listing any possible stipulations or conditions that would alleviate the county's objection(s);

- 2. If the county has no objection to the city's proposed land use or zoning classification, the city is free to proceed with the annexation. If the county fails to respond to the city's notice in writing within the deadline, the city is free to proceed with the annexation and the county loses its right to invoke the dispute resolution process, stop the annexation or object to the land use changes after the annexation.
- 3. If the county notifies the city that it has a bona fide land use classification objection(s), the city will respond to the county in writing within 15 working days of receiving the county's objection(s) by either:

 (a) agreeing to implement the county's stipulations and conditions and thereby resolving the county's objection(s); (b) agreeing with the county and stopping action on the proposed annexation; © disagreeing with the county's objection(s) are bona fide and notifying the county that the city will seek a declaratory judgement in court; (d) initiating a 30-day (maximum) mediation process to discuss possible compromises.
- 4. If the city initiates mediation, the city and county will agree on a mediator, mediation schedule and determine participants in the mediation. The city and county agree to share equally any costs associated with the mediation.
- 5. If no resolution of the county's bona fide land use classification objection(s) results from the mediation, the city will not proceed with the proposed annexation.
- 6. If the city and county reach agreement as described in step 3 (a) or as a result of the mediation, they will draft an annexation agreement for execution by the city and county governments and the property owner(s).

Regardless of future changes in land use or zoning classification, any site-specific mitigation or enhancement measures or site-design stipulations included in the agreement will be binding on all parties for the duration of the annexation agreement. The agreement shall become final when signed by the city, the county and the property owner(s).

This annexation dispute resolution agreement shall remain in force and effect until amended by agreement of each party or unless otherwise terminated by operation of law.

Attest King

Maney Lowns

Mayor

City of Martin

Brenda Chapman

Stephens County Board of Commissioners

Appendix B

CITY ANNEXATION NOTIFICATION FORM

1.	Describe the location of the area to be annexed or attach a clear map indicating the location (if not previously provided to the county with the notice of proposed annexation).
2.	How many landowners/parcels will be included?
3.	How does the city propose to designate this area on its future land use map and/or zoning map if the annexation occurs?
4.	Attach a copy of the sections of the city development ordinances that identify permitted uses for this proposed land use classification.
5.	Describe the development plans for the area proposed to be annexed (if the property owner(s) in the area have initiated specific development proposals).
6.	Indicate any special measures to be implemented or conditions of development that will be imposed on the properties to be annexed to mitigate negative impacts of the annexation proposal on surrounding properties.
or	m completed by:
Sign	natureDate:

Appendix B

COUNTY COMMENTS ON PROPOSED ANNEXATION FORM

1	How is the area proposed to be annexed designated on the county's future land use map?
2	. If the county has zoning, what is the current (county) zoning classification for the area proposed to be annexed?
3	. Has the county previously denied requests for a change of zoning (or general land use) classification in the area proposed to be annexed? If so, provide details.
4.	How would the city's development controls for the proposed land use classification of the area to be annexed differ from the county's current development controls (i.e., permitted density, allowed uses, required setback height restrictions, permitted signage, etc.)?
5.	Would any of the uses allowed under the city's proposed land use classification of the area to be annexed have potentially negative impacts on the surrounding areas? If so, describe these.
6.	Identify any county owned public facilities in the area proposed to be annexed.
7.	Does the county have bona fide land use classification objections to the annexation? If so, list these and attack supporting information as needed to clarify the objections.
8.	If the county objects to the city's plans for the area to be annexed, are there any mitigation measures or conditions of development that would allay the county's concerns? If so, list these.
For	rm completed by:
Sig	natureDate:

Appendix (

ZONING PROCEDURES TIME-LINE (IN RELATION TO ANNEXATION)

The Zoning Procedures Law (O.C.G.A. 36-66-1 *et seq.*) spells out statewide requirements for local government zoning procedures including: a public hearing, public notice of the zoning 15-45 days prior to the public hearing of an informational sign on the property at least 15 days before the public hearing.

For all annexation methods, zoning procedures may legally be commenced on day five, after the City Council has given written notice of the proposed annexation

The required zoning hearing must be held prior to the annexation adoption. The zoning classification approved by the municipality following the required hearing becomes effective on the later of a) the date the zoning is approved; or b) the date the annexation becomes effective.

All Annexation Methods

First Day of Next	Annexation becomes effective Zoning becomes effective
Date of Zoning Hearing	Hearing held in accordance with locally adopted procedures Council approves zoning Council adopts annexation ordinance
15 Days prior to Zoning Hearing	Sign must be piaced on property containing information required In tocal ordinance
15-45 Days prior to Zoning Hearing	City must advertise notice of zoning that includes: I time, date and place of meeting location of the property existing and proposed zoning
Day 5	Written annexation notice given to County Municipality may begin process for establishing zoning (i.e., next three steps)

ANNEXATION TIME - LINES

First Day of Next Month After All Requirements Met

Council Meeting

Annexation becomes

effective

annexation ordinance

Council Adopts

100% Method

Day 1

City Council must give Day 5. Filing of Petition

written notice of

Annexation

ō

proposed annexation to County Commission

60% Method

First Day of Next Month Annexation becomes effective**** within 60 Days of validation Council adopts annexation ordinance Public hearing on proposed annexation after validation 15 - 45 days notice of public hearing 2 weeks prior Council gives to hearing to annexed area (no time limit) Prepares a plan for extending city services City Council determines If petition AND is valid proposed annexation to County Commission written notice** of City Council must give Day 5. annexation*** Filing of petition Day 1 for

Notice must be given within 5 business days of receipt of the annexation petition.

Nolice must be given by certified mail, return receipt requested.

A maximum period of one year is allowed for collecting signatures for a petition under 60% method.
... Annexations by this method may be challenged by any resident voter within 30 days after annexation becomes effective.

ANNEXATION TIME - LINES

Resolution & Referendum Method

First Day of Next Month After All Bequirements Man	Annexation becomes effective
Days 90 - 120	Referendum (must be held on one of four dates authorized for special elections)**
Days 30 - 60	City council must hold public hearing AND Publish written notice of hearing in newspaper (3 consecutive weeks; last publication-7 days before hearing) AND Prepare a plan for extending services to the annexed area AND Prepare a report of plan for the public (14 days before hearing)
Day 5*	City Council must give wrilten notice of proposed annexation to County Commission
Day 1	Clty Council adopts resolution of fntent to Annex AND Sets date of public hearing

Notice must be given within 5 business days of adoption of the annexation resolution.
 There are four permissible dates for holding a referendum (the third Tuesday in March, the third Tuesday in June or the date of the general primary, the third Tuesday in September, the Tuesday after the first Monday in November).

ANNEXATION TIME - LINES

Annexation by Local Act of the General Assembly

First Day of the Next Month After All Beginsternests Man	Annexation becomes effective
Referendum	A referendum is required by General Law for annexations by this method if the population of the area to be annexed is more than 500 or 3% of the city's total population A referendum may also be required by the Local Act at the discretion of the Act's sponsor
Days 8 +***	A minimum of 5 days is required for enactment of Local Acts by both houses of the General Assembly, but may be introduced at any time during the legislative session
Days 3 - 61***	introduction of Local Act containing proposed annexation
Day 1	Advertisement of Notice of Intent to Intent to Introduce Local Act to annex area. AND Provide copy of proposed Local Act to county** (on same date)

This advertisement must be published in the newspaper in which sheriff's advertisements are published one time before the Local Act is introduced.

Failure to provide a copy of the proposed Local Act to the county governing authority will result in the annexation being vold.

Advertisement of Intent to introduce Local Legislation may be published at any time within 60 days before the convening of the legislative session at which the Local Act is introduced, or it may be published during the legislative session. If the advertisement is published during the session, the Bill may not be introduced until at least the next calendar week after the date of publication.

•••• This time period is dependent upon the date of publication of the notice of intent and upon the meeting schedule of the General Assembly.

••••• There are four permissible dates for holding a referendum (the third Tuesday in March, the third Tuesday in June or the date of the general primary, the third Tuesday in September, the Tuesday after the first Monday in November).

A Resolution Establishing a

Process to Insure Compatibility with Applicable Land Use Plans and Ordinances and to Resolve Inter-Governmental Land Use Plan and Ordinance Inconsistencies Pursuant to the Provision of New Extra Territorial Water Sewer Services

WHEREAS, the Stephens County Board of Commissioners and the mayor and councils of its political jurisdictions have found it necessary, desirable and in the public interest to establish a formal process to insure that the provision of new extraterritorial water and sewer service is consistent with all applicable land uses plans and ordinances of adjoining local governments, and

WHEREAS, the Stephens County Board of Commissioners and its municipal jurisdictions have determined that a process to insure land use compatibility as it relates to the provision of new extraterritorial water and sewer services and land use plans/ordinances, and

WHEREAS, the Stephens County Board of Commissioners and the governing bodies of the County's municipal jurisdictions have jointly developed a cooperative plan to insure consistency with applicable land use plans/ordinances,

BE IT THEREFORE RESOLVED by the Stephens County Board of Commissioners of Stephens County, Georgia and the governing bodies of the cities of Avalon, Martin, Toccoa, and IT IS HEREBY RESOLVED by the authority of same:

Section 1. Effective immediately upon the adoption of this Resolution by the respective governments. The following process for insuring that proposed extraterritorial water and sewer service is compatible with the land use plans/ordinances of the new territory shall be implemented:

- 1. Prior to initiating the development of water and sewer services in extraterritorial boundaries, the local government proposing the new service will notify the adjacent government of the proposed new service by providing information on location of property, size of area, and existing/proposed land use associated with the property.
- 2. Within 10 working days following receipt of the above information, the local government, receiving the notice of water/sewer 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 providing supporting evidence. If the community proposing the service extension does not receive a response in writing within the deadline, the proposal shall be determine to be consistent with the community's land use plan or land use ordinances.
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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 participants in the mediation. Any cost associated with the mediation will be shared pro rata by the county and the city based on population in accordance with the most recent decennial census.
- 5. A proposal to extend extraterritorial water and sewer service shall not be implemented until any bona fide land use plan or land use ordinance inconsistencies are resolved pursuant to the dispute resolution process.
- 6. However, the final determination of the land use plan or land use ordinances will be accorded to the governing body receiving the proposed service extension.

Section 2. All ordinances and resolutions in conflict herewith are hereby repealed.

DATE: 5-4-49

ATTEST:

Money N

1) home

Stephens County Board of Commissioners

Chairperson

SERVICE DELIVERY STRATEGY

DISPUTE RESOLUTION PROCESS (SEE O.C.G.A. 36-70-24(4)©)

The Stephens County and the Cities of Avalon, Martin, and Toccoa hereby agree to implement the following process for resolving land use disputes over annexation effective July 1, 1998.

1. Prior to initiating any formal annexation activities, the City will notify the county government of a proposed annexation and provide information on location of property, size of area, and proposed land use or zoning classification(s) (if applicable) of the property upon annexation.

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- 2. If the county has no objection to the city's proposed land use or zoning classification, the city is free to proceed with the annexation. If the county fails to respond to the city's notice in writing within the deadline, the city is free to proceed with the annexation and the county loses its right to invoke the dispute resolution process, stop the annexation or object to the land use changes after the annexation.
- 3. If the county notifies the city that it has a bona fide land use classification objection(s), the city will respond to the county in writing within 15 working days of receiving the county's objection(s) by either:

 (a) agreeing to implement the county's stipulations and conditions and thereby resolving the county's objection(s); (b) agreeing with the county and stopping action on the proposed annexation; © disagreeing with the county's objection(s) are bona fide and notifying the county that the city will seek a declaratory judgement in court; (d) initiating a 30-day (maximum) mediation process to discuss possible compromises.
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- 6. If the city and county reach agreement as described in step 3 (a) or as a result of the mediation, they will draft an annexation agreement for execution by the city and county governments and the property owner(s).

Regardless of future changes in land use or zoning classification, any site-specific mitigation or enhancement measures or site-design stipulations included in the agreement will be binding on all parties for the duration of the annexation agreement. The agreement shall become final when signed by the city, the county and the property owner(s).

This annexation dispute resolution agreement shall remain in force and effect until amended by agreement of each party or unless otherwise terminated by operation of law.

Attest King

Mayor

City of Avalon

Mancy Downs

Chairman

Stephens County Board of Commissioners

Appendix B

CITY ANNEXATION NOTIFICATION FORM

1.	Describe the location of the area to be annexed or attach a clear map indicating the location (if not previously provided to the county with the notice of proposed annexation).
2.	How many landowners/parcels will be included?
3.	How does the city propose to designate this area on its future land use map and/or zoning map if the annexation occurs?
4.	Attach a copy of the sections of the city development ordinances that identify permitted uses for this proposed land use classification.
5.	Describe the development plans for the area proposed to be annexed (if the property owner(s) in the area have initiated specific development proposals).
б.	Indicate any special measures to be implemented or conditions of development that will be imposed on the properties to be annexed to mitigate negative impacts of the annexation proposal on surrounding properties.
F~.	my completed by
. U	an completed by:
Sig	matureDate:

Signature_

Appendix B

COUNTY COMMENTS ON PROPOSED ANNEXATION FORM

1.	How is the area proposed to be annexed designated on the county's future land use map?
2.	If the county has zoning, what is the current (county) zoning classification for the area proposed to be annexed?
3.	Has the county previously denied requests for a change of zoning (or general land use) classification in the area proposed to be annexed? If so, provide details.
4.	How would the city's development controls for the proposed land use classification of the area to be annexed differ from the county's current development controls (i.e., permitted density, allowed uses, required setbacks, height restrictions, permitted signage, etc.)?
5.	Would any of the uses allowed under the city's proposed land use classification of the area to be annexed have potentially negative impacts on the surrounding areas? If so, describe these.
6.	Identify any county owned public facilities in the area proposed to be annexed.
7.	Does the county have bona fide land use classification objections to the annexation? If so, list these and attach supporting information as needed to clarify the objections.
8.	If the county objects to the city's plans for the area to be annexed, are there any mitigation measures or conditions of development that would aliay the county's concerns? If so, list these.
For	m completed by:

ZONING PROCEDURES TIME-LINE (IN RELATION TO ANNEXATION)

public notice of the zoning 15-45 days prior to the public hearing, and posting of an informational sign on the property at least 15 days before the public hearing. The Zoning Procedures Law (O.C.G.A. 36-66-1 of seq.) spells out statewide requirements for local government zoning procedures including: a public hearing,

For all annexation methods, zoning procedures may legally be commenced on day five, after the City Council has given written notice of the proposed annexation to the County Commission.

The required zoning hearing must be held prior to the annexation adoption. The zoning classification approved by the municipality following the required hearing becomes effective on the later of a) the date the zoning is approved; or b) the date the annexation becomes effective.

All Annexation Methods

Day 5	15-45 Days prior to	15 Days prior to	Date of Zoning	First Day of Next
	Zoning Hearing	Zoning Hearing	Hearing	Month
Written annexallon notice given to County Municipality may begin process for establishing zoning (i.e., next three steps)	Clly must advertise notice of zoning that includes: I time, date and place of meeting ication of the property existing and proposed zoning	Sign must be placed on property containing information required in tocal ordinance	Hearing held in accordance with tocally adopted procedures Council approves zoning Council adopts annexation	Annexation becomes effective Zoning becomes effective

ANNEXATION TIME - LINES

100% Method

Day t	Day 5*				Council Meeting	First Day of Next Month After All Requirements Met
Filing of Pellion for Annexallon	Clly Council must give written notice" of proposed amexation to County Commission			ų iš	Council Adopts annexation ordinance	Annexalion becomes effective
60% Method Day 1	Day 5*		2 weeks prior to hearing	15 - 45 days after validation	within 60 Days of validation	First Day of Next Month
Filing of patition for annexation***	City Council must give written notice** of proposed annexation to County Commission	City Council determines if petition is valid AND Prepares a plan for extending city services to annexed area (no time Ilmit)	Council glves nolice of public hearing	Public hearing on proposed annexalion	Council adopts annexation ordinance	Annexation becomes effective****

Nolice must be given within 5 business days of receipt of the annexation petition.
Nolice must be given by certified mail, return receipt requested.
A maximum period of one year is allowed for collecting signatures for a petition under 60% method.
Annexations by this method may be challenged by any resident voter within 30 days after annexation becomes effective.

ANNEXATION TIME - LINES

Resolution & Re	Resolution & Referendum Method				
Day 1	Day 5*	Days 30 - 60	Days 90 - 120	First Day of Next Month After All Requirements Met	
City Council adopts resolution of intent to Annex AND Sets date of public hearing	Clly Council must give written notice of proposed annexation to County Commission	Clty council must hold public hearing AND Publish written notice of hearing in newspaper (3 consecutive weeks; last publication-7 days before hearing) AND Prepare a plan for extending services to the annexed area AND Prepare a report of plan for the public (14 days before hearing)	Referendum (must be held "son one of four dates authorized for special elections)***	Annexation becomes affective	

Notice must be given within 5 business days of adoption of the annexation resolution.
 There are four permissible dates for holding a referendum (the third Tuesday in March, the third Tuesday in June or the date of the general primary, the third Tuesday in September, the Tuesday after the first Monday in November).

ANNEXATION TIME - LINES

Assembly
the General
al Act of
on by Loc
Annexatic

Day 1	Days 3 - 61***	Days 8 +***	Referendum	First Day of the Next Month After All Requirements Met
Advertisement	Introduction	A minimum of	A referendum is	Annexation becomes
of Notice of	of Local Act	5 days is required	required by General	effective
intent to	containing	for enactment	Law for annexations	
introduce	proposed	of Local Acis by	by this method	
Local Act	annexation	both houses of	IF the population of	
lo annex		the General Assembly,	the area to be	
area*		but may be introduced	annexed is more than	
AND		at any time during the	500 or 3% of the clty's	
Provide copy		legislative session	total population	
of proposed		(4)		
Local Act to			A referendum	
county.			may also be required	
(on same dale) .			by the Local Act	
,,			at the discretion	
			of the Act's sponsor	

This advertisement must be published in the newspaper in which sheriff's advertisements are published one time before the Local Act is introduced.

-- Fallure to provide a copy of the proposed Local Act to the county governing authority will result in the annexation being void.

*** Advantsement of Intent to Introduce Local Legislation may be published at any time within 60 days before the convening of the legislative session at which the Local Act is introduced, or it may be published during the legislative session. If the advertisement is published during the session, the Bill may not be Introduced until at least the next calendar week after the date of publication.

**** There are four permissible dates for holding a referendum (the third Tuesday in March, the third Tuesday in June or the date of the general primary, the third *** This Ilma parlod is dependent upon the date of publication of the notice of intent and upon the meeting schedule of the General Assembly. Tuesday in September, the Tuesday after the first Monday in November). SERVICE DELIVERY STRATEGY

DISPUTE RESOLUTION PROCESS (SEE O.C.G.A. 36-70-24(4)©)

The City of Toccoa and Stephens County hereby agree to implement the following process for resolving land use disputes over annexation effective July 1, 1998.

1. Prior to initiating any formal annexation activities, the City will notify the county government of a proposed annexation and provide information on location of property, size of area, and proposed land use or zoning classification(s) (if applicable) of the property upon annexation.

Within 15 working days following receipt of the above information, the county will forward to the city a statement either: (a) indicating that the county has no objection to the proposed land use for the property; or (b) describing its bona fide objection(s) to the city's proposed land use classification, providing supporting information, and listing any possible stipulations or conditions that would alleviate the county's objection(s);

- 2. If the county has no objection to the city's proposed land use or zoning classification, the city is free to proceed with the annexation. If the county fails to respond to the city's notice in writing within the deadline, the city is free to proceed with the annexation and the county loses its right to invoke the dispute resolution process, stop the annexation or object to the land use changes after the annexation.
- 3. If the county notifies the city that it has a bona fide land use classification objection(s), the city will respond to the county in writing within 15 working days of receiving the county's objection(s) by either:

 (a) agreeing to implement the county's stipulations and conditions and thereby resolving the county's objection(s); (b) agreeing with the county and stopping action on the proposed annexation; © disagreeing with the county's objection(s) are bona fide and notifying the county that the city will seek a declaratory judgement in court; (d) initiating a 30-day (maximum) mediation process to discuss possible compromises.
- 4. If the city initiates mediation, the city and county will agree on a mediator, mediation schedule and determine participants in the mediation. The city and county agree to share equally any costs associated with the mediation.
- 5. If no resolution of the county's bona fide land use classification objection(s) results from the mediation, the city will not proceed with the proposed annexation.
- 6. If the city and county reach agreement as described in step 3 (a) or as a result of the mediation, they will draft an annexation agreement for execution by the city and county governments and the property owner(s).

Regardless of future changes in land use or zoning classification, any site-specific mitigation or enhancement measures or site-design stipulations included in the agreement will be binding on all parties for the duration of the annexation agreement. The agreement shall become final when signed by the city, the county and the property owner(s).

This annexation dispute resolution agreement shall remain in force and effect until amended by agreement of each party or unless otherwise terminated by operation of law.

Attest Sharon

Mayor \
City of Toccoa

Attest

Chairman

Stephens County Board of Commissioners

Appendix B

CITY ANNEXATION NOTIFICATION FORM

1.	Describe the location of the area to be annexed or attach a clear map indicating the location (if not previously provided to the county with the notice of proposed annexation).
2.	How many landowners/parcels will be included?
3.	How does the city propose to designate this area on its future land use map and/or zoning map if the annexation occurs?
4.	Attach a copy of the sections of the city development ordinances that identify permitted uses for this proposed land use classification.
5.	Describe the development plans for the area proposed to be annexed (if the property owner(s) in the area have initiated specific development proposals).
6.	Indicate any special measures to be implemented or conditions of development that will be imposed on the properties to be annexed to mitigate negative impacts of the annexation proposal on surrounding properties.
Fo	rm completed by:
Si	gnatureDate:

Appendix B

COUNTY COMMENTS ON PROPOSED ANNEXATION FORM

Sig	pature Date:
Fo	rm completed by:
8.	If the county objects to the city's plans for the area to be annexed, are there any mitigation measures or conditions of development that would allay the county's concerns? If so, list these.
7.	Does the county have bona fide land use classification objections to the annexation? If so, list these and attach supporting information as needed to clarify the objections.
6.	Identify any county owned public facilities in the area proposed to be annexed.
5.	Would any of the uses allowed under the city's proposed land use classification of the area to be annexed have potentially negative impacts on the surrounding areas? If so, describe these.
4.	How would the city's development controls for the proposed land use classification of the area to be annexed differ from the county's current development controls (i.e., permitted density, allowed uses, required setbacks, height restrictions, permitted signage, etc.)?
3.	Has the county previously denied requests for a change of zoning (or general land use) classification in the area proposed to be annexed? If so, provide details.
2.	If the county has zoning, what is the current (county) zoning classification for the area proposed to be annexed?
1.	How is the area proposed to be annexed designated on the county's future land use map?

ZONING PROCEDURES TIME-LINE (IN RELATION TO ANNEXATION)

The Zoning Procedures Law (O.C.G.A. 36-66-1 *et seq.*) spells out statewide requirements for local government zoning procedures including: a public hearing, public notice of the zoning 15-45 days before the public hearing.

For all annexation methods, zoning procedures may legally be commenced on day five, after the City Council has given written notice of the proposed annexation to the County Commission.

The required zoning hearing must be held prior to the annexation adoption. The zoning classification approved by the municipality following the required hearing becomes effective on the later of a) the date the zoning is approved; or b) the date the annexation becomes effective.

All Annexation Methods

First Day of Next Month	Annexation becomes effective Zoning becomes effective
Date of Zoning Hearing	Hearing held in accordance with locally adopted procedures Council approves zoning adopts annexation
15 Days prior to Zoning Hearing	Sign must be placed on property containing information required in local ordinance
15-45 Days prior to Zoning Hearing	City must advertise notice of zoning that includes: If time, date and place of meeting Icoation of the property existing and proposed zoning
Day 5	Written annexation notice given to County Municipality may begin process for establishing zoning (i.e., next three steps)

ordinance

ANNEXATION TIME - LINES

	After All Requirements Met	Annexation becomes effective		First Day of Next Month	Annexation becomes effective***
	Council Meeling	Council Adopts annexation ordinance		within 60 Days of validation	Council adopts annexation ordinance
		Å		15 - 45 days after validation	Public hearing on proposed annexation
				2 weeks prior to hearing	Council gives notice of public hearing
					City Council determines if petition is valid AND Prepares a plan for extending city services to annexed area (no time limit)
	Day 5	City Council must give written notice** of proposed annexation to County Commission		Day 5*	City Council must give written notice** of proposed annexation to County Commission
100% Method	Day I	Filing of Petition for Annexation	60% Method	Day 1	Filing of petition for annexation***

<sup>Notice must be given within 5 business days of receipt of the annexation petition.
Notice must be given by certified mail, return receipt requested.
A maximum period of one year is allowed for collecting signatures for a petition under 60% method.
Annexations by this method may be challenged by any resident voter within 30 days after annexation becomes effective.</sup>

ANNEXATION TIME - LINES

Resolution & Referendum Method

Day 1	Day 5*	Days 30 - 60	Days 90 - 120	First Day of Next Month After All Requirements Met
City Council adopts resolution of Intent to Annex AND Sets date of public hearing	City Council must give written notice of proposed annexation to County Commission	City council must hold public hearing AND Publish written notice of hearing in newspaper (3 consecutive weeks; last publication-7 days before hearing) AND Prepare a plan for extending services to the annexed area AND Prepare a report of plan for the public (14 days before hearing)	Referendum (must be held " on one of four dates authorized for special elections)**	Annexation becomes effective

Notice must be given within 5 business days of adoption of the annexation resolution.
 There are four permissible dates for holding a referendum (the third Tuesday in March, the third Tuesday in June or the date of the general primary, the third Tuesday in September, the Tuesday after the first Monday in November).

ANNEXATION TIME - LINES

Annexation by Local Act of the General Assembly

Day 1	Days 3 - 61***	Days 8 +***	Referendum****	First Day of the Next Month After All Beguirements Mat
Advertisement of Notice of Intent to introduce Local Act to annex area. AND Provide copy of proposed Local Act to county.	Introduction of Local Act containing proposed annexation	A minimum of 5 days is required ior enactment of Local Acts by both houses of the General Assembly, but may be introduced at any time during the legislative session	A referendum is required by General Law for annexations by this method IF the population of the area to be annexed is more than 500 or 3% of the city's total population A referendum may also be required by the Local Act at the discretion	Annexation becomes effective
			of the Act's sponsor	

This advertisement must be published in the newspaper in which sheriff's advertisements are published one time before the Local Act is introduced.

Fallure to provide a copy of the proposed Local Act to the county governing authority will result in the annexation being void. ***

Advertisement of Intent to Introduce Local Legislation may be published at any time within 60 days before the convening of the legislative session at which the Local Act is introduced, or it may be published during the legislative session. If the advertisement is published during the session, the Bill may not be Introduced until at least the next calendar week after the date of publication.

**** There are four permissible dates for holding a referendum (the third Tuesday in March, the third Tuesday in June or the date of the general primary, the third •••• This time period is dependent upon the date of publication of the notice of intent and upon the meeting schedule of the General Assembly.

Tuesday in September, the Tuesday after the first Monday in November).