## GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS

#### SERVICE DELIVERY STRATEGY

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PAGE 1

#### 1. 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.
- List each local government and/or authority that provides services included in the service delivery strategy in Section II below. 2.
- List all services provided or primarily funded by each general purpose local government and authority within the county in
- 3. Section III below. It is acceptable to break a service into separate components if this will facilitate description of the service delivery strategy.
- 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.

Taylor County **Butler** Reynolds

#### III. SERVICES INCLUDED IN THE SERVICE DELIVERY STRATEGY:

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

Airport

Building Code Inspection

Business Licensing

Cemetery

Courts

Economic Development

Emergency Management Agency

Emergency Medical & Rescue

Fire Protection

Indigent Defense

Jail

Law Enforcement

Parking Facilities (Ride Share)

Libraries

Parks - Recreation

Planning & Zoning

Public Health

Public Housing

Roads and Streets

Sanitary Sewage Treatment

Social Services

Solid Waste Collection Solid Waste Disposal

Water Treatment and Distribution

Recycling

Cooperative Extension Service

County Coroner

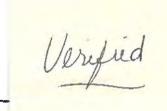
Senior Citizens Center

Street Lights

Tax Appraisal/Assessment

Tax Collection

Voter Registration



### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

Count	ty: _	Taylor		Service:	Airport	
1. <b>C</b> ho	eck th	ne box that best desc	ribes the agreed up	on delivery arrangement	for this service:	
				cluding all cities and un y or organization provid		e service provider. (If this box
				porated portion of the co cation providing the serv	ounty by a single service prov	ider. (If this box is checked,
					orated boundaries, and the ser at(s), authority or organization	
					orated boundaries, and the countries, authority or organization	anty will provide the service in providing the service.)
					service area of each service within each service area.)	provider, and identify the
		oping the strategy, v	vere overlapping se	rvice areas, unnecessary	competition and/or duplicati	on of this service identified?
higher	r leve		C.G.A. 36-70-24(1)		n for continuing the arrang f the duplication, or reasons t	ement (i.e., overlapping but hat overlapping service areas
				ategy, attach an implen the agreed upon deadlin	n <b>entation schedule listi</b> ng ca e for completing it.	ch step or action that will be
						will be funded (e.g., enterprise act fees, bonded indebtedness, etc
Local G	iovemi	nent or Authority:	Funding Method:			
Airp	port	Authority	County Gener	ral Fund User	Fee	
<u> </u>						
					····	
	·····					
			e the previous arrar	igements for providing a	und/or funding this service wi	thin the county?
ľ	NoC	hange				
<b>.</b>						
J. List Agreem				ntergovernmental contra Contracting Parties:	icts that will be used to imple	ment the strategy for this service:
				Contacing raties:		Effective and Ending Dates:
		Service Delive County Airport				3/14/94
					· ·	3/14/34 "
				implement the strategy when will they take effect		ces, resolutions, local acts of the
N	A\R				•	
-						
7 Pa-		ompleting form:	Ianda V ma-	inton	•	
		ber: <u>(912)</u> 862-		Date completed:	4/14/98	<del></del>
				•	nating whether proposed local	Government projects
are con	nsiste	nt with the service o	lelivery strategy?		ming whomer proposed local	e so to minorit projects

# Instructions:

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

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, (	hi
should be reported to the Department of Community Affairs	

		·	<del></del>	
County: <u>Taylor</u>		Service: Bu1]	Iding Code Inspect	ion
1. Check the box that best described	ribes the agreed upon deli	very arrangement for the	his service:	
Service will be provided of is checked, identify the go		_		ervice provider. (If this box
Service will be provided of identify the government,			by a single service provide	r. (If this box is checked,
			boundaries, and the service authority or organization programmers.	
			boundaries, and the county authority or organization p	y will provide the service in roviding the service.)
Other. (If this box is chec government, authority, or			ice area of each service pr nin each service area.)	rovider, and identify the
2. In developing the strategy, v ☐ yes ☑ no	vere overlapping service a	ueas, unnecessary com	petition and/or duplication	of this service identified?
If these conditions will continue higher levels of service (See O. or competition cannot be elimin	C.G.A. 36-70-24(1)), over			
If these conditions will be elimitaken to eliminate them, the res				step or action that will be
3. List each government or autifunds, user fees, general funds,				l be funded (e.g., enterprise t fees, bonded indebtedness, etc.)
Local Government or Authority:	Funding Method:			
Taylor County	General Fund	User Fee		<del></del>
City of Butler	General Fund	User Fee		
City of Reynolds	General Fund	User Fee		
4. How will the strategy chang No Change	e the previous arrangemen	nts for providing and/o	r funding this service withi	in the county?
· · · · · · · · · · · · · · · · · · ·	•=	• • • • • • • • • • • • • • • • • • •		
<ol> <li>List any formal service deliv Agreement Name:</li> </ol>		vernmental contracts the stracts the stracts the straight contracts the straight contract the straight contracts the straight contracts the straight contract the str	at will be used to impleme	ent the strategy for this service:  Effective and Ending Dates:
	.	ing i di ma,		Elicules and Ending Dates.
Master Service Delive	ry Agreement			
	<u></u>			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
<ol><li>6. What other mechanisms (if a General Assembly, rate or fee of</li></ol>			nis service (e.g., ordinances	i, resolutions, local acts of the
* N/A				
7. Person completing form:			·	_
Phone number: (912) 862		ite completed: 4/1		<u> </u>
<ol> <li>Is this the person who should are consistent with the service of If not, provide designated conta</li> </ol>	lelivery strategy? 🛛 🗓 yes	s 🔲 no	; whether proposed local go	overnment projects

# SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

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 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.

Lounty: Taylor		. Bernice:	Business Lice	ensing	
1. Check the box that best desi	cribes the agreed upon deliv	ery arrangeme	nt for this service:		
Service will be provided is checked, identify the g	countywide (i.e., including sovernment, authority or org			) by a single service	provider. (If this box
	only in the unincorporated authority or organization p			ervice provider. (If t	his box is checked,
	wavide this service only wit this box is checked, identif		•		-
One or more cities will punincurporated areas. (If	rovide this service only wit this box is checked, identif				
	cked, attach a legible map r other organization that wi				r, and identify the
<ol> <li>In developing the strategy,</li> <li>yes</li></ol>	were overlapping service a	reas, unnecessa	ury competition and/	or duplication of this	service identified?
If these conditions will continue higher levels of service (See Co or competition cannot be elimi	I.C.G.A. 36-70-24(1)), over				
If these conditions will be elim taken to eliminate them, the re	·	•			r action that will be
3. List each government or au funds, user fees, general funds					
Local Government or Authority:	Funding Method:				
Taylor County	Occupational Tax				***************************************
City of Butler	Occupational Tax				
City of Reynolds	Occupational Tax				<del> </del>
	<u></u>	······································	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
4. How will the strategy change	ge the previous errangemen	u for providin	g and/or funding this	service within the c	county?
,					
5. List any formal azrvice deliv Agreement Name:		emmental con	tracts that will be use	<u>-</u>	strategy for this service:
Master Service Delive	ery Agreement				
18666m					A&#</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>6. What other mechanisms (if General Assembly, rate or fee</td><td></td><td></td><td></td><td>g., ordinances, resol</td><td>utions, local acts of the</td></tr><tr><td>A/K</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td>ż.</td></tr><tr><td>7. Person completing form:</td><td>Leoda K. Taunton</td><td>ı</td><td></td><td>•</td><td></td></tr><tr><td>Phone number: (912) 86</td><td></td><td>e completed:</td><td>4/14/98</td><td></td><td></td></tr><tr><td>8. Is this the person who shou</td><td></td><td>• "</td><td>****</td><td>posed local governm</td><td>nent projects</td></tr><tr><td>are consistent with the service If not, provide designated cont</td><td>delivery strategy? 🗀 yes</td><td>По</td><td></td><td></td><td>-co-in group duits</td></tr><tr><td></td><td>## ###################################</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td>····</td><td></td></tr></tbody></table>

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions;

County:	Taylor	Service: Cemetery				
1. Check	k the box that best desc	ribes the agreed upon delivery arrangement for this service:				
		countywide (i.e., including all cities and unincorporated areas) by a single sovernment, authority or organization providing the service.)	ervice provider. (If this box			
	Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.)					
		rovide this service only within their incorporated boundaries, and the service this box is checked, identify the government(s), authority or organization p				
		rovide this service only within their incorporated boundaries, and the count this box is checked, identify the government(s), authority or organization p				
	-	ked, attach a legible map delineating the service area of each service prother organization that will provide service within each service area.)	rovider, and identify the			
	veloping the strategy,	were overlapping service areas, unnecessary competition and/or duplication	of this service identified?			
higher le		e under the strategy, attach an explanation for continuing the arrangement. C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that nated).				
		inated under the strategy, attach an implementation schedule listing each sponsible party and the agreed upon deadline for completing it.	step or action that will be			
		hority that will help to pay for this service and indicate how the service wil, special service district revenues, hotel/motel taxes, franchise taxes, impact				
Local Gov	ernment or Authority:	Funding Method:				
City	of Reynolds	General Fund				
			···			
<b>-</b> -						
	1.00					
4. How	will the strategy chang	e the previous arrangements for providing and/or funding this service within	n the county?			
No C	hange					
5. List an	•	ery agreements or intergovernmental contracts that will be used to impleme Contracting Parties:	ent the strategy for this service; Effective and Ending Dates:			
Maste	r Service Deliv	ry Agreement				
i						
		any) will be used to implement the strategy for this service (e.g., ordinances changes, etc.), and when will they take effect?	, resolutions, local acts of the			
N/A						
7 Paren	n completing form:	Lenda K. Taunton				
	umber: <u>(912)</u> 863		<u> </u>			
8. Is this	s the person who shou istent with the service	d be contacted by state agencies when evaluating whether proposed local godelivery strategy? X yes no	 overnment projects			
n not, p	rovine nesignated cour	act person(s) and phone number(s) below:				

### SERVICE DELIVERY STRATEGY



		SUMMARY	OF SERVICE DELIVERY ARRANGEMENTS	PAGE Z			
	Answer each questio	form and complete on below, attaching addition the Department of Com	one for each service listed on page 1, Section III. Use exactly the stional pages as necessary. If the contact person for this service (listed at numerity Affairs.	name service names listed on page 1. The bottom of the page) changes, this			
County:	Taylor Service: Courts						
I. Check the	box that best descri	ribes the agreed up	on delivery arrangement for this service:				
	-	•	cluding all cities and unincorporated areas) by a single set or organization providing the service.)	ervice provider. (If this box			
	•		porated portion of the county by a single service provider zation providing the service.)	:. (If this box is checked,			
			only within their incorporated boundaries, and the service, identify the government(s), authority or organization pr				
			only within their incorporated boundaries, and the county, identify the government(s), authority or organization pr				
	•		le map delineating the service area of each service pro that will provide service within each service area.)	ovider, and identify the			
2. In develop		vere overlapping se	ervice areas, unnecessary competition and/or duplication	of this service identified?			
higher levels		C.G.A. 36-70-24(1	y, attach an explanation for continuing the arrangement)), overriding benefits of the duplication, or reasons that				
			rategy, attach an implementation schedule listing each the agreed upon deadline for completing it.	step or action that will be			
			p to pay for this service and indicate how the service will strict revenues, hotel/motel taxes, franchise taxes, impact				
Local Governme	nt or Authority:	Funding Method:					
Taylor Co		General Fu					
City of		General Fu					
City of	Keynolds	General Fu	na				
4. How will	_	e the previous arran	ngements for providing and/or funding this service within	n the county?			
	,						
5. List any fo			intergovernmental contracts that will be used to impleme Contracting Parties:	nt the strategy for this service:  Effective and Ending Dates:			
				Energy and Energy Dates.			
Master Se	TVICE DELIVE	ry Agreement					
General Asse			o implement the strategy for this service (e.g., ordinances, when will they take effect?	, resolutions, local acts of the			
N/A			·				
	4.4.5	1 1					
	mpleting form: _ er: <u>(912) 862</u>	Lenda K. Tai -3336	Date completed: 4/14/98	- [			
8. Is this the are consisten	person who should twith the service of	d be contacted by s delivery strategy?	tate agencies when evaluating whether proposed local go				
-		=					

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Make copies of this form an	ad complete one for each service	listed on page 1, Section 1	III. Use exactly the same	service names listed on page I
Answer each question below, a	attaching additional pages as necessa	ary. If the contact person for	r this service (listed at the b	ottom of the page) changes, thi
should be reported to the Depa	Artiment of Community Affairs.	•		

County:	Taylor		Service:	Economic Development	
1. Check the	box that best desc	ribes the agreed upon deli	vе <b>г</b> у аттапдете	nt for this service:	
		countywide (i.e., including overnment, authority or or		nincorporated areas) by a single siding the service.)	service provider. (If this box
		only in the unincorporated authority or organization p		county by a single service provide rvice.)	er. (If this box is checked,
				porated boundaries, and the servicent(s), authority or organization p	-
				porated boundaries, and the count ent(s), authority or organization p	
	•			te service area of each service po ce within each service area.)	rovider, and identify the
2. In develo		were overlapping service a	ureas, unnecessa	ry competition and/or duplication	of this service identified?
higher level		.C.G.A. 36-70-24(1)), ove		ion for continuing the arrangen of the duplication, or reasons tha	
		inated under the strategy, sponsible party and the agi		ementation schedule listing each ine for completing it.	step or action that will be
				e and indicate how the service wil otel taxes, franchise taxes, impac	
Local Governm	ent or Authority:	Funding Method:			
Develop	ment Authority	County's Gen	eral Fund		
Valley P	artnership	County's Ger	neral Fund		
4 How wil	the strategy chang	e the previous arrangemen	nts for providing	and/or funding this service with	n the county?
		o die provious mimigonio	ne for providing	s with our railding title set vice with	in the county?
No Cha	nge				
•					
-		· •		tracts that will be used to impleme	-·
Agreement No	vne:	Contrac	ting Parties:		Effective and Ending Dates:
	ervice Delive				9/17/84 _
		ment Authority			6/17/97
	velopment Aut artnership	noticy			10/1/96
6. What off	er mechanisms (if	any) will be used to imple		ry for this service (e.g., ordinance	<u> </u>
N/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , , , , , , , , , , , , , , , , , ,	,	
		Lenda K. Taunton			<del></del>
	ber: (912) 862-		ate completed: _		<del></del>
				aluating whether proposed local g	overnment projects
		delivery strategy? 🔃 ye act person(s) and phone m			
er most broat	anni-biration colle	beroom at mind butone in			_

## SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



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 1
Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) chan	ges, this
should be reported to the Department of Community Affairs	

Count	y: Taylor		Service:	Emergency Management Ag	gency
1. Che	eck the box that best desc	ribes the agreed up	on delivery arrangeme	ent for this service:	
	Service will be provided is checked, identify the g			unincorporated areas) by a single solution the service.)	ervice provider. (If this box
	Service will be provided identify the government,			county by a single service provide	r. (If this box is checked,
	One or more cities will p unincorporated areas. (If	rovide this service of this box is checked	only within their incor , identify the governm	porated boundaries, and the service tent(s), authority or organization pr	e will not be provided in oviding the service.)
				porated boundaries, and the county ent(s), authority or organization pr	
				he service area of each service price within each service area.)	ovider, and identify the
	developing the strategy,	were overlapping se	rvice areas, unnecess	ary competition and/or duplication	of this service identified?
higher		.C.G.A. 36-70-24(1		tion for continuing the arrangem s of the duplication, or reasons that	
	se conditions will be elim to eliminate them, the re			ementation schedule listing each line for completing it.	step or action that will be
				e and indicate how the service will notel taxes, franchise taxes, impact	
Local C	Sovernment or Authority:	Funding Method:			
Tay	lor County	General Fund		·	
				- 11 - C - 11 - 40 1	
4. HO	ow will the strategy chang	ge the previous arrai	ngements for providin	g and/or funding this service within	n the county?
No	Change				
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£ T:-				stracts that will be used to impleme	nt the etectory for this comice.
	nent Norme:		Contracting Parties:	idacis that will be used to impleffic	Effective and Ending Dates:
	er Service Delive				
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	hat other mechanisms (if ral Assembly, rate or fee	• •	•	gy for this service (e.g., ordinances fect?	, resolutions, local acts of the
N/	'A			•	
	rson completing form:		unton		<del>-</del>
Phone	e number: <u>(912)</u> 862	-3336	Date completed:	4/14/98	_
are co	this the person who shou ensistent with the service , provide designated cont	delivery strategy?	🗓 yes 🔲 no	aluating whether proposed local go	vernment projects

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS Instructions:

County: Taylor		Service:	Emergency Med	ical & Rescue	
1. Check the box that best desc	ribes the agreed upo	on delivery аггапдел	nent for this service:		
Service will be provided a is checked, identify the ga				) by a single service provider. (	If this box
Service will be provided identify the government,				ervice provider. (If this box is c	hecked,
				and the service will not be prov organization providing the servi	
				and the county will provide the organization providing the servi	
Other. (If this box is chec government, authority, or	_	_		nch service provider, and iden ce area.)	tify the
2. In developing the strategy, v	vere overlapping se	ervice areas, unneces	sary competition and/	or duplication of this service ide	entified?
If these conditions will continu- higher levels of service (See O. or competition cannot be elimin	C.G.A. 36-70-24(1				
If these conditions will be elimitaken to eliminate them, the res					t will be
3. List each government or autifunds, user fees, general funds,					-
Local Government or Authority:	Funding Method:				
Taylor County	General Fund	User Fe	2		
	<u></u> .				
4. How will the strategy chang	e the previous arran	ngements for providi	ng and/or funding this	service within the county?	
No Change					
5					
,					
5. List any formal service deliv	ery agreements or i	ntergovernmental co	ntracts that will be us	ed to implement the strategy for	r this service:
Agreement Name:		Contracting Parties:		Effective and Endin	g Dates:
Master Service Delive	ry Agreement				
6 What alban makes in a 45 c			for this armine to		
<ol><li>What other mechanisms (if a General Assembly, rate or fee of</li></ol>		-	<del></del>	g., orginances, resolutions, loca	ii acis or the
•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			
N/A					
S. D	Y 1- 1/ 17				
7. Person completing form:  Phone number: (912) 862-	<u>Lenga K. Tar</u> -3336	Date completed:	4/14/98		
				posed logal soursement	· c
<ol> <li>Is this the person who should are consistent with the service of If not, provide designated contains</li> </ol>	delivery strategy?	X yes ☐ no		posed local government project	S

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



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

County:Taylo	<b>#</b>	Servi	ice:	ire Protection	
	at best describes the agree	d upon delivery arran	igement i	for this service:	
	e provided countywide (i. entify the government, au				single service provider. (If this bo
	e provided only in the uni overnment, authority or or				provider. (If this box is checked,
					e service will not be provided in alien providing the service.)
					e county will provide the service i ation providing the service.)
	box is checked, attack a authority, or other organiz				vice provider, and identify the a.)
2. In developing th	e strategy, were overlappi	ng service areas, unne	есеѕвагу	competition and/or dupl	ication of this service identified?
	vice (See O.C.G.A. 36-70				angement (i.e., overlapping but ons that overlapping service areas
	will be eliminated under them, the responsible party		-		ig each step or action that will be
					ice will be funded (e.g., enterprise impact fees, bonded indebtednes:
Local Covernment of A	uthority: Funding Method	P\$4			
Taylor Count	· · · · · · · · · · · · · · · · · · ·	fund SPLOS	T		
City of Butl	**************************************	······································		**************************************	
City of Reyn	olds General I	lund			
	<u> </u>				
4 If					
4. FLOW WILL INE SU	ategy change the previous	managements for bio	រស់លាប់នី បា	nevot through mis setate	e within the county?
No Change					
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# 12st F1			-1	ara shat milif ha wand ta ia	
Agreement Name:	ervice derivery agreement	s or intergovernments: Commeting Parties:		CIZ NIBI WIII OC USEU IO IL	nplement the strategy for this ser Effective and Ending Dates:
f			······································		
Master Servic	e Delivery Agreeme				
					2
					inances, resolutions, local acts of
General Assembly,	rate or fee changes, etc.),	and when will they la	aka esteci	t?	
N/A				•	
7. Person complete	ng form: Lenda K.	Taunton	**************************************		··········
Phone number: 🗘	912)_862-3336	Date comple	eled:	4/14/98	
are consistent with	n who should be contacted the service defivery strate gnated contact person(s) a	gy? 🖾 yes 🗌 no		ating whether proposed	local government projects
- <b>-</b>					A-10-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0

## SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



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,	age 1
Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) change	s, thi
should be specified to the Department of Community Affairs	

County: Taylor		Service: Indiger	ıt Defense	
1. Check the box that best desc	ribes the agreed up	on delivery arrangement for this s	ervice:	
• • • • • • • • • • • • • • • • • • •		cluding all cities and unincorpora ty or organization providing the s		rvice provider. (If this box
		porated portion of the county by a zation providing the service.)	single service provider.	(If this box is checked,
		only within their incorporated bou , identify the government(s), auth		
		only within their incorporated bou , identify the government(s), auth		
	_	ole map delineating the service a that will provide service within e	_	vider, and identify the
2. In developing the strategy, v ☐ yes ☒ no	were overlapping se	ervice areas, unnecessary competi	tion and/or duplication o	f this service identified?
	.C.G.A. 36-70-24(1	y, attach an explanation for con )), overriding benefits of the dupl		
		rategy, attach an implementation the agreed upon deadline for com		tep or action that will be
		p to pay for this service and indicatrict revenues, hotel/motel taxes,		
Local Government or Authority:	Funding Method:			
Taylor County	_General Fu	ınd		
	<u> </u>			
4. How will the strategy chang	e the previous arra	ngements for providing and/or fur	nding this service within	the county?
No Change	•			•
•		intergovernmental contracts that v	-	
Agreement Name:		Contracting Parties:		Effective and Ending Dates:
Master Service Delive	ery Agreement			
6. What other mechanisms (if General Assembly, rate or fee		implement the strategy for this s when will they take effect?	ervice (e.g., ordinances,	resolutions, local acts of the
N/A			•	
7. Person completing form:	Lenda V Tau	inton		
Phone number: (912) 862		Date completed:4/14/9		<b></b>
		tate agencies when evaluating wh		ernment projects
are consistent with the service of t	delivery strategy?	X yes □ no	roposou ioem go	
				<u> </u>

## SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names listed o	n 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) cha	nges, thi
should be reported to the Department of Community Affairs.	

County: Taylor		Service:	Parks - Rec	reation	
1. Check the box that best desc	ribes the agreed upon	delivery arrangemen	t for this service:		
X Service will be provided is checked, identify the g				as) by a single service provider. (If	this box
Service will be provided identify the government,				service provider. (If this box is che	ecked,
				s, and the service will not be provid r organization providing the service	
		•		s, and the county will provide the so r organization providing the service	
Other. (If this box is chec				each service provider, and identif	fy the
2. In developing the strategy, v  ☐ yes X no	were overlapping serv	rice areas, unnecessar	y competition an	d/or duplication of this service iden	ntified?
	.C.G.A. 36-70-24(1))			g the arrangement (i.e., overlappin, or reasons that overlapping service	
If these conditions will be elim taken to eliminate them, the res				ule listing each step or action that v	will be
				the service will be funded (e.g., en se taxes, impact fees, bonded indeb	
Local Government or Authority:	Funding Method:				
City of Reynolds	General Fund				
Recreation Board	County's Gene	eral Fund			
	SPLOST				
	Butler Genera	al Fund			
<u> </u>	Reynolds Gene	eral Fund			
4. How will the strategy chang No Change	e the previous arrang	ements for providing	and/or funding t	is service within the county?	
5 List any formal service deliv	ery agreements or int	ergovernmental contr	racts that will be	used to implement the strategy for t	this service:
Agreement Name:		ontracting Parties:		Effective and Ending	
Master Service Delive	ry Agreement		-,,,,,		
Taylor County Recreat				7/1/95	
6. What other mechanisms (if General Assembly, rate or fee				(e.g., ordinances, resolutions, local	acts of the
N/A		·			
.,,					
7. Person completing form:		<del>-</del> -	//1//00		
Phone number: (912) 862		_ Date completed: _			
<ol> <li>Is this the person who shoul are consistent with the service of If not, provide designated contract.</li> </ol>	delivery strategy? 🛛	🛚 yes 🔲 no	luating whether p	roposed local government projects	



	Conves De	12 22/21	NI COND LONG ON		· · · · · · · · · · · · · · · · · · ·
(01.50)	SERVICE DE SUMMARY OF SERVICE		RY STRATEGY	IENITO	BACE 1
Answer each question	s form and complete one for each ser in below, attaching additional pages as ne to the Department of Community Affairs.	rvice listed ecessary. If	on page 1, Section III. U	se exactly the same service na	PAGE 2  mes listed on page 1. the page) changes, this
County: Taylor	Se	ervice:	Law Enforcemen	t	
•	ribes the agreed upon delivery ar	rrangeme	ent for this service:		
	countywide (i.e., including all cit overnment, authority or organiza			y a single service provid	der. (If this box
	only in the unincorporated portion authority or organization providi			rice provider. (If this box	is checked,
	rovide this service only within th this box is checked, identify the				
	rovide this service only within th this box is checked, identify the				
	ked, attach a legible map deling other organization that will prov	_			identify the
2. In developing the strategy, v  ☐ yes ☑ no	were overlapping service areas, u	innecessa	ury competition and/or	duplication of this service	ce identified?
	e under the strategy, attach an e C.G.A. 36-70-24(1)), overriding nated).				
	inated under the strategy, attach ponsible party and the agreed up			isting each step or action	n that will be
	hority that will help to pay for th , special service district revenues				
Local Government or Authority:	Funding Method:				
Taylor County	General Fund - Fines	- Forf	feitures		
City of Butler	General Fund - Fines				
City of Reynolds	General Fund - Fines	- Forf	feitures		
4. How will the strategy chang No Change	e the previous arrangements for	providing	g and/or funding this se	ervice within the county?	
5. List any formal service deliv	ery agreements or intergovernme		tracts that will be used	to implement the strateg	-

Agreement No Master Service Delivery Agreement

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?

N/A

7. Person completing form: Lenda K. Taunton				
Phone number: (912) 862-	-3336	Date completed:	4/14/98	
8. Is this the person who shou are consistent with the service If not, provide designated cont	delivery strategy?	X yes ☐ no	aluating whether proposed local government projects	

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions:

County:	Taylor		Service:	Parking	Facilities	(Ride Share	<u> </u>
1. Check th	e box that best desc	ribes the agreed upo	n delivery arrangeme	nt for this ser	vice:		
	•		luding all cities and u or organization prov	-		ngle service provi	der. (If this box
			orated portion of the cation providing the se		ingle service pro	ovider. (If this bo	x is checked,
			nly within their incorpidentify the government				
			nly within their incom identify the governme				
			e <b>map delineating th</b> hat will provide servi				identify the
2. In develo		were overlapping ser	vice areas, unnecessa	ry competitio	on and/or duplica	ation of this servi	ce identified?
higher level		.C.G.A. 36-70-24(1)	attach an explanati ), overriding benefits				
			tegy, attach an imple he agreed upon deadl			each step or actic	on that will be
			to pay for this service rict revenues, hotel/m				
Local Governm	nent or Authority:	Funding Method:					
City of	Reynolds	General Fund					
4. How will	I the etcetory shore	a the areviews area		and/or fund	ina this samian	within the country	.2
No Chan	-	ge the previous arrang	gements for providing	g and/or rund	ing this service	within the county	· <b>:</b>
NO CHAI	Re						
5. List any i			itergovernmental contracting Parties:	tracts that wil	l be used to imp		gy for this service: Ending Dates:
Master S	ervice Delive	ry Agreement					
					<del></del>		-
				<del></del>		<del>-  </del>	
			implement the strateg hen will they take eff		vice (e.g., ordina	ances, resolutions	s, local acts of the
N/A							
7 Darson -	omoleting forms	Lenda K. Taun	ton				•
	ber: <u>(912) 862</u>		_ Date completed: _	4/14/98			
			te agencies when eva		her proposed los	cal government n	roiects
are consiste	nt with the service	delivery strategy?		_	proposou 100	em Poverninout h	s o jaces
							-

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names listen	1 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)	chonges, thi
should be experted to the Department of Community Affairs	

County: Taylor	<u></u>	Service:	Libraries	
1. Check the box that best desc	ribes the agreed up	on delivery arrangem	ent for this service:	
Service will be provided is checked, identify the g				a single service provider. (If this box
<ul> <li>Service will be provided identify the government,</li> </ul>				e provider. (If this box is checked,
-		-	-	he service will not be provided in ization providing the service.)
				he county will provide the service in ization providing the service.)
			he service area of each so vice within each service an	ervice provider, and identify the ea.)
2. In developing the strategy, v  ☐ yes X no	vere overlapping s	ervice areas, unnecess	ary competition and/or du	plication of this service identified?
	.C.G.A. 36-70-24(			rrangement (i.e., overlapping but sons that overlapping service areas
If these conditions will be elim taken to eliminate them, the res				ing each step or action that will be
-	•			rvice will be funded (e.g., enterprise s, impact fees, bonded indebtedness, etc
Local Government or Authority:	Funding Method:			
Taylor County	General Fu	ınd		
City of Butler	General Fu	ınd		
City of Reynolds	General Fu	and		
4 1				
4. How will the strategy chang	e the previous arra	ingements for providu	ig and/or lunding this serv	ice within the county?
No Change				
5 List any formal service deliv	leni gareemente or	intergovernmental cor	stracte that will be used to	implement the strategy for this service:
Agreement Name:	ay agreement or	Contracting Parties:	iques diat will be ased to	Effective and Ending Dates:
Master Service Delive	erv Agreement			
				-
		<u> </u>		
6. What other mechanisms (if General Assembly, rate or fee of				dinances, resolutions, local acts of the
N/A				
7. Person completing form:	Lenda K. Ta	unton		
Phone number: (912) 862		Date completed:	4/14/98	
8. Is this the person who should		_		d local government projects
are consistent with the service of If not, provide designated control	delivery strategy?	🗓 yes 🗌 no	• •	₩

## SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

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
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 connected to the Department of Community Affairs

County: Taylor	Service: Jail	
I. Check the box that best describes the agreed up	oon delivery arrangement for this service:	
	ncluding all cities and unincorporated areas) by a single	e service provider. (If this box
Service will be provided only in the uninconidentify the government, authority or organization.	rporated portion of the county by a single service provious ization providing the service.)	der. (If this box is checked,
	only within their incorporated boundaries, and the serv i, identify the government(s), authority or organization	
	only within their incorporated boundaries, and the courd, identify the government(s), authority or organization	
	ble map delineating the service area of each service part that will provide service within each service area.)	provider, and identify the
2. In developing the strategy, were overlapping s  ☐ yes ☑ no	ervice areas, unnecessary competition and/or duplication	on of this service identified?
	y, attach an explanation for continuing the arrange  1)), overriding benefits of the duplication, or reasons th	
If these conditions will be eliminated under the staken to eliminate them, the responsible party and	rategy, <b>attach an implementation schedule</b> listing each the agreed upon deadline for completing it.	ch step or action that will be
	p to pay for this service and indicate how the service w strict revenues, hotel/motel taxes, franchise taxes, impa	
Local Government or Authority: Funding Method:		
Taylor County General Fun	d ; User Fees	
4. How will the strategy change the previous arra No Change	angements for providing and/or funding this service wit	hin the county?
5. List any formal service delivery agreements or Agreement Name:	intergovernmental contracts that will be used to impler Contracting Parties:	nent the strategy for this service:  Effective and Ending Dates:
Master Service Delivery Agreement		Extended and Emailing Dates.
Jail Agreement	Taylor County, City of Butler &	7/1/94
	City of Reynolds	
6. What other mechanisms (if any) will be used to General Assembly, rate or fee changes, etc.), and	o implement the strategy for this service (e.g., ordinanc when will they take effect?	es, resolutions, local acts of the
n/A		
N/ B		
7. Person completing form: Lenda K. Ta	unton	
Phone number: (912) 862-3336	Date completed: 4/14/98	
	state agencies when evaluating whether proposed local X yes one	government projects
		_

## SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions:

County: Taylor		Service:	Planning and Zoning	
1. Check the box that best desc	ribes the agreed upon de	livery arrangeme	ent for this service:	
Service will be provided is checked, identify the go			unincorporated areas) by a single viding the service.)	e service provider. (If this box
Service will be provided identify the government,			county by a single service proviervice.)	der. (If this box is checked,
			porated boundaries, and the servicent(s), authority or organization	
			porated boundaries, and the countent(s), authority or organization	
<del></del>	_	_	he service area of each service rice within each service area.)	provider, and identify the
2. In developing the strategy, v	were overlapping service	areas, unnecessa	ary competition and/or duplication	on of this service identified?
	.C.G.A. 36-70-24(1)), ov		tion for continuing the arrange s of the duplication, or reasons th	
If these conditions will be elim taken to eliminate them, the res			lementation schedule listing car line for completing it.	ch step or action that will be
			e and indicate how the service w notel taxes, franchise taxes, impa	vill be funded (e.g., enterprise act fees, bonded indebtedness, etc.
Local Government or Authority:	Funding Method:			
City of Butler	User Fee	General	Fund	
City of Reynolds	User Fee	General		
Taylor County	User Fee	General	runa	
	<u> </u>	- <del></del>		· · · · · · · · · · · · · · · · · · ·
4. How will the strategy change	to the provious among	anta far nesvidi-	a and/or funding this across wife	this the second
No Change	e the previous arrangem	ents for provious	g and/or funding this service wit	min the county?
5. List any formal service deliv Agreement Name:	· •	overnmental con	tracts that will be used to implet	ment the strategy for this service:  Effective and Ending Dates:
Master Service Deliv	ery Agreement			
6. What other mechanisms (if General Assembly, rate or fee of	-	,	gy for this service (e.g., ordinance fect?	es, resolutions, local acts of the
N/A				
	<u> </u>			
7. Person completing form: Phone number: (912) 862-	Lenda K. Taunto -3336 r	on	4/14/98	
		•	aluating whether proposed local	COVERNMENT Projects
are consistent with the service of the first provide designated contains	delivery strategy? 🛛 🔀 y	es 🗀 no		government projects

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County	y:	Tay,	lor	10.2	Service:	Public He	alth	
1. Che	ck th	e box	that best de	scribes the agreed up	on delivery arrangeme	nt for this service	ce:	
	Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.)							
					porated portion of the zation providing the se		gle service provide	er. (If this box is checked,
					only within their incor , identify the governm			e will not be provided in roviding the service.)
					only within their incor , identify the governm			y will provide the service in roviding the service.)
_		•			le map delineating the that will provide serv		_	rovider, and identify the
	develo			, were overlapping se	ervice areas, unnecessa	ry competition	and/or duplication	of this service identified?
higher	level	ls of s		D.C.G.A. 36-70-24(1				nent (i.e., overlapping but t overlapping service areas
					ategy, <b>attach an impl</b> the agreed upon dead			step or action that will be
								l be funded (e.g., enterprise t fees, bonded indebtedness, etc.
Local G	очеппп	nent o	Authority:	Funding Method:				
Tay]	lor	Coun	ty	General Fu	nd			
			<del></del>					
				<del> </del>				
	w wil		strategy cha	nge the previous arran	ngements for providin	g and/or funding	g this service withi	in the county?
5. List	t anv í	forma	l service del	ivery agreements or i	ntergovernmental con	tracts that will b	e used to impleme	ent the strategy for this service:
Agreem	_			-	Contracting Parties:			Effective and Ending Dates:
Mast	ter	Serv	ice Deli	very Agreement				
					implement the strate; when will they take ef		e (e.g., ordinance	s, resolutions, local acts of the
N/	A						•	
7. Per	cson c	វព្ធភាព	eting form:	Lenda K. Ta	unton			
			(912) 86:		Date completed:	4/14/98		<del></del>
8. Is the	his th nsiste	e pers	son who sho th the servic	uld be contacted by see delivery strategy?	tate agencies when ev		r proposed local g	overnment projects
								_

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

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
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
chould be reported to the Department of Community Affairs

County: Taylor		Service:	Public Housing	١
1. Check the box that best desc	ribes the agreed upor	delivery arrangeme	nt for this service:	
Service will be provided is checked, identify the g				a single service provider. (If this box
<ul> <li>Service will be provided identify the government,</li> </ul>				e provider. (If this box is checked,
One or more cities will punincorporated areas. (If	ovide this service on this box is checked, i	ly within their incor dentify the governm	porated boundaries, and tent(s), authority or organ	he service will not be provided in ization providing the service.)
				he county will provide the service in ization providing the service.)
Other. (If this box is chec government, authority, or				ervice provider, and identify the ea.)
2. In developing the strategy,	vere overlapping serv	vice areas, unnecessa	ury competition and/or du	plication of this service identified?
	C.G.A. 36-70-24(1))			rrangement (i.e., overlapping but sons that overlapping service areas
If these conditions will be eliminate them, the res				ing each step or action that will be
<b>*</b>	-			rvice will be funded (e.g., enterprise s, impact fees, bonded indebtedness, etc.
Local Government or Authority:	Funding Method:			
Flint Area Housing				
Authority	USHUD			
<u></u>				
4. How will the strategy chang	e the previous arrang	gements for providin	g and/or funding this serv	ice within the county?
No Change				
5. List any formal service deliv	erv agreements or in	tergovernmental con	tracts that will be used to	implement the strategy for this service:
Agreement Name:		ontracting Partles:		Effective and Ending Dates:
Master Service Deliv	ery Agreement			
6. What other mechanisms (if General Assembly, rate or fee		- ,		rdinances, resolutions, local acts of the
N/A				
7. Person completing form:		·		
Phone number: (912) 862-		_ Date completed:		<del></del>
<ol> <li>Is this the person who shoul are consistent with the service</li> <li>If not, provide designated contra</li> </ol>	delivery strategy? (	∑ yes 🗀 no		d local government projects
	······································	<del></del>		

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County: Taylor		Service:	Roads and Stre	ets		
1. Check the box that best desc	ribes the agreed upo	on delivery arrangemer	nt for this service:			
	Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box 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 box is checked, identify the government, authority or organization providing the service.)					
				the service will not be provided in nization providing the service.)		
				the county will provide the service in inization providing the service.)		
Other. (If this box is chec government, authority, or				service provider, and identify the area.)		
2. In developing the strategy, v  ☐ yes ☒ no	were overlapping se	rvice areas, unnecessa	ry competition and/or d	luplication of this service identified?		
	.C.G.A. 36-70-24(1			arrangement (i.e., overlapping but easons that overlapping service areas		
If these conditions will be elim taken to eliminate them, the res				sting each step or action that will be		
				ervice will be funded (e.g., enterprise es, impact fees, bonded indebtedness, et		
Local Government or Authority:	Funding Method:					
Taylor County	SPLOST					
				<u> </u>		
4. How will the strategy chang	e the previous arrar	ngements for providing	and/or funding this se	vice within the county?		
No Change						
•						
5. List any formal service deliv Agreement Name:		ntergovernmental cont Contracting Parties:	racts that will be used t	o implement the strategy for this service Effective and Ending Dates:		
Master Service Deliv	ery Agreement					
				-		
<u></u>						
<ol><li>What other mechanisms (if General Assembly, rate or fee</li></ol>				ordinances, resolutions, local acts of the		
N/A						
7. Person completing form:	Lenda K. Tau	ınton				
Phone number: (912) 862		Date completed:	4/14/98			
8. Is this the person who shoul		•		ed local government projects		
are consistent with the service of If not, provide designated control	delivery strategy?	🛚 yes 🗌 no	another propos	and the second services		
				_		

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



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) change	ges, this
should be reported to the Denartment of Community Affairs	

County: Taylor	Service: Sanitary Sewage Treatm	nent
1. Check the box that best desc	ribes the agreed upon delivery arrangement for this service:	
	countywide (i.e., including all cities and unincorporated areas) by a single so evernment, authority or organization providing the service.)	rvice provider. (If this box
	only in the unincorporated portion of the county by a single service provider authority or organization providing the service.)	. (If this box is checked,
	rovide this service only within their incorporated boundaries, and the service this box is checked, identify the government(s), authority or organization pro-	
	rovide this service only within their incorporated boundaries, and the county this box is checked, identify the government(s), authority or organization pro	
	ked, attach a legible map delineating the service area of each service pro other organization that will provide service within each service area.)	ovider, and identify the
2. In developing the strategy, v	vere overlapping service areas, unnecessary competition and/or duplication of	of this service identified?
	e under the strategy, attach an explanation for continuing the arrangeme C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that on tated).	
	inated under the strategy, attach an implementation schedule listing each s ponsible party and the agreed upon deadline for completing it.	step or action that will be
	hority that will help to pay for this service and indicate how the service will special service district revenues, hotel/motel taxes, franchise taxes, impact	
	Funding Method:	
Taylor County	User Fee	····
City of Butler	User Fee	
City of Reynolds	User Fee	
4. How will the strategy change	e the previous arrangements for providing and/or funding this service within	the county?
,		
	ery agreements or intergovernmental contracts that will be used to implement	**
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Master Service Deliv	ery Agreement	
	any) will be used to implement the strategy for this service (e.g., ordinances, changes, etc.), and when will they take effect?	resolutions, local acts of the
N/A		
-7		
7. Person completing form:	Lenda K. Taunton	
	3336 Date completed: 4/14/98	_
are consistent with the service of	d be contacted by state agencies when evaluating whether proposed local go- delivery strategy? X yes no act person(s) and phone number(s) below:	vernment projects

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County	y: Taylor		Service:	Social	Services	
1. Che	ck the box that best de	scribes the agreed up	on delivery arrangeme	ent for this	service:	
	Service will be provide is checked, identify the					ervice provider. (If this box
	Service will be provide dentify the governmen				a single service provide	er. (If this box is checked,
		-	-	•	undaries, and the servic tority or organization p	e will not be provided in roviding the service.)
	One or more cities will unincorporated areas. (	provide this service of If this box is checked	only within their incor , identify the governm	porated bou ent(s), auth	undaries, and the county ority or organization p	y will provide the service in roviding the service.)
	Other. (If this box is ch government, authority,					rovider, and identify the
	developing the strategy	, were overlapping se	ervice areas, unnecessa	ary competi	tion and/or duplication	of this service identified?
higher		O.C.G.A. 36-70-24(1				ent (i.e., overlapping but overlapping service areas
	e conditions will be eli to eliminate them, the r					step or action that will be
funds,	user fees, general fund	ls, special service dis				be funded (e.g., enterprise fees, bonded indebtedness, etc.
	overnment or Authority:	Funding Method:				
Tay.	lor County	General Fun	<u> </u>			
	,		<del>, , , , , , , , , , , , , , , , , , , </del>		<u> </u>	
	w will the strategy cha No Change	nge the previous arra	ngements for providin	g and/or fu	nding this service withi	n the county?
5 List	any formai service dei	ivery agreements or i	intergovernmental con	tracte that v	vill be used to impleme	ent the strategy for this service:
	ent Name:	roty agroomones or	Contracting Parties:	diora mac.	will be asses to impleme	Effective and Ending Dates:
Mast	ter Service Deli	verv Agreemen				
		,				-
	at other mechanisms (i al Assembly, rate or fe				ervice (e.g., ordinances	, resolutions, local acts of the
N/A						
7. Per	son completing form:	Lenda K. Ta	inton			<del></del>
Phone	number: (912) 86	2=3336	Date completed:	4/14/9	8	<del></del>
are cor	his the person who sho nsistent with the servic provide designated co	e delivery strategy?	K yes ☐ no		ether proposed local go	overnment projects
ia IIUG	broarde designated cos	irent hersou(2) aug bi	ione namber(s) below:	•		_

## SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



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, ettaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) of	hanges, this
should be reported to the Department of Community Affairs	

County: Tavlor		Service:	Solid	Waste	Collection	
1. Check the box that best desc	ribes the agreed upo		-			
_	countywide (i.e., inc	cluding all cities and u	піпсогрог	rated area		ervice provider. (If this box
<ul> <li>Service will be provided identify the government,</li> </ul>				a single s	service provider	. (If this box is checked,
One or more cities will pr unincorporated areas. (If	rovide this service o this box is checked,	nly within their incorpidentify the government	orated bo ent(s), aut	ounderies, hority ar	, and the service organization pro	will not be provided in oviding the service.)
One or more cities will pr unincorporated areas. (If	rovi <b>de this</b> servi <b>ce</b> o this box is checked,	nly within their incorpidentify the government	orated bo	undaries, hority or	, and the county organization pro	will provide the service in oviding the service.)
Other. (If this box is chec government, authority, or						ovider, and identify the
2. In developing the strategy, v	were overlapping sei	rvice areas, unnecessa	y compet	ition and	Vor duplication (	of this service identified?
If these conditions will continu higher levels of service (See O. or competition cannot be elimin	.C.G.A. 36-70-24(1)					
If these conditions will be elim taken to eliminate them, the res					_	step or action that will be
3. List each government or aut funds, user fees, general funds,						
Local Government or Authority:	Funding Method:					
Taylor County	General Fund	, User Fee				
City of Butler	User Fee					
City of Reynolds	User Fee					
		<del></del>				
4. How will the strategy chang No Change	e the previous arran	gements for providing	and/or fu	inding th	is service within	the county?
5. List any formal service deliv	erv agreements or it	niergovernmental cont	racts that	will he u	sed to implemen	nt the strategy for this service:
Agreement Name:	•	Contracting Parties:			-	Effective and Ending Dates:
Master Service Deliv	erv Agreement					
Taylor County Solid		ent Authority				8/13/91 -
6. What other mechanisms (if a				service (e	e.g., ordinances,	resolutions, local acts of the
General Assembly, rate or fee of	:nanges, etc.), and w	rhen will they take effe	ect?			
N/A						
7. D	T					
7. Person completing form: Phone number: (912) 862-	<u>венов К. Тацп</u> -3336	Date completed: _	4/14/	98		-
	<del></del>					<b>-</b>
8. Is this the person who should are consistent with the service of If not, provide designated contains	delivery strategy?	X yes ☐ no	idating w	n <b>euter</b> pro	oposed local go	vernment projects

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County: Taylor		Service: Solid Waste	Disposal				
1. Check the box that best des	cribes the agreed up	on 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 box is checked, identify the government, authority or organization providing the service.)						
		porated portion of the county by a single zation providing the service.)	service provider. (If this box is checked,				
	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.)						
		ble map delineating the service area of a that will provide service within each ser					
		located in Charing, Ga. (Ta	ylor County) and is the				
only landfill  2. In developing the strategy,  yes Ino	were overlapping so	nty ervice areas, unnecessary competition and	d/or duplication of this service identified?				
	D.C.G.A. 36-70-24(1		the arrangement (i.e., overlapping but, or reasons that overlapping service areas				
		rategy, attach an implementation sched the agreed upon deadline for completing	ule listing each step or action that will be it.				
			the service will be funded (e.g., enterprise se taxes, impact fees, bonded indebtedness, etc.				
Local Government or Authority:	Funding Method:						
Contractor							
	<del> </del>						
4. How will the strategy chan No Change	ge the previous arra	ingements for providing and/or funding th	nis service within the county?				
5. List any formal service deli	very agreements or	intergovernmental contracts that will be t	used to implement the strategy for this service;				
Agreement Name:		Contracting Parties:	Effective and Ending Dates:				
Southern States Land	fill		8/19/97				
6. What other mechanisms (if General Assembly, rate or fee			e.g., ordinances, resolutions, local acts of the				
N/A	·	,					
7. Person completing form:	Lenda K. T	aunton					
Phone number: (912) 862-		Date completed: 4/14/98					
	ald be contacted by a	state agencies when evaluating whether p	roposed local government projects				
are consistent with the service If not, provide designated con	delivery strategy?	X yes □ no					

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Make copies of this form and complete one for each service listed			
Answer each question below, attaching additional pages as necessary.	if the contact person for this	service (listed at the bottom o	of the page) changes, thi
should be reported to the Department of Community Affairs	-		

County:	Taylor		Service:	Water TReatment and Dis	stribution					
1. Check the	e box that best desc	ribes the agreed u	pon delivery arrangeme	ent for this service:						
	_	•	ncluding all cities and ity or organization pro	unincorporated areas) by a single solution the service.)	ervice provider. (If this box					
			rporated portion of the ization providing the se	county by a single service provider ervice.)	r. (If this box is checked,					
	•		-	porated boundaries, and the service nent(s), authority or organization pr	<b>-</b>					
	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.)									
	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  no									
higher level		.C.G.A. 36-70-24(		tion for continuing the arrangem s of the duplication, or reasons that						
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.										
				ce and indicate how the service will notel taxes, franchise taxes, impact						
Local Governm	nent or Authority:	Funding Method:	<u></u>							
City of		User Fee								
	Reynolds	User Fee								
Water Au	thority (T.C.	) User Fee		<del></del>						
	<del></del>			·						
4. How will No Ch		e the previous arr	angements for providin	ng and/or funding this service within	n the county?					
Agreement No		ery agreements or	Intergovernmental cor Contracting Parties:	ntracts that will be used to impleme	nt the strategy for this service:  Effective and Ending Dates:					
Master	Service Deliv	ery Agreemen	t							
Taylor	County Water	Authority			3/25/95					
			<u> </u>							
	•	• •	to implement the strate when will they take ef	gy for this service (e.g., ordinances	, resolutions, local acts of the					
N/A										
		Innda w Ton								
	ompleting form:	Lenda K. Tau		4/14/09						
			Date completed:							
are consiste	nt with the service	delivery strategy?		valuating whether proposed local go	overnment projects					

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions:

Count	y: _	Tayl	or								Se	rvi	ce:	]	Rec	yc:	11ng	g_										
			that bes	t descr	ribes	the as	greed 1	100	n del	iver	у ал	ranj	zeme	nt (	for L	his :	servi	ce:		_								_
<b>X</b>	Serv	ice wil	l be providentify	vided (	опр	tywide	: (i.e.,	inc	ludin	ig al	l cit	ies :	and u	ınir	тсог	роп	ated a	area	ıs) by	a si	ngle	ser	vice	pro	vid <b>e</b> r	, (If	this b	οx
			l be pro-														a sinį	gle s	servi	се рг	ovid	er.	(If d	his t	ox is	che	cked,	
_			e cities ated area	-					_																_			
			e cities ned area																									in
			nis box i i, author																			rov	ride	г, а	nd id	entif	y the	
		loping	the stra	tegy, v	vere	overla	pping	sei	rvice	area	ıs, u	nne	cessa	чу	¢0m	pet	ition	and	Vor d	uplic	atio	n of	f this	s ser	vice	iden	tified	?
higher	r leve	els of s	s will co ervice () unot be	See O.	C.G	.A. 36																						
			s will be them,																	sting	eac	h su	ер о	T ac	Lion (	hat v	vill b	В
funds	, use	r fees,	erament general	funds																								
			Authorit	y:		ng Met																						
Tay1	or	Count	y		'	Gene	ral 1	Fui	nd			_																
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		ill the : hange	str <b>ategy</b> 2	chang	e the	previ	ous at	ran	geme	ents .	for	pro	vidia	gaz	nd/o	r fu	ndin <sub>i</sub>	g th	199 BE	vice	with	oin (	the d	COME	ty?			
Agreen	nent l	Name:	l service					(	ntergo Contra				i con	trac	CLS {	hat	will I	be u	sed t	o im	plem				legy nd En			rvice:
Mast	er	Servi	ce De	live	ry .	Agre	emen	t										_				4						
-								-						_								+						
								-				_										+		_				
			echanisi y, rate o													his s	ervi	ce (e	e.g., (	ordin	ance	±5, ſ	esol	lutio	ns, lo	ocal (	acts o	f the
N/	/A																											
7. Pe	reon	compl	eting for	m; _	Le	nda	к. т	au	nto	n.																		
Phone	תעת ב	nber: ,	(912)	862	-33	36			D	ate	com	ple	led:		4/	14	/98	_										
are co	onsis	lent wi	son who th the se signates	rvice (	deliv	ery str	ategy'	?		es (		10			atinį	g w	hethe	ar þu	ropos	ed lo	ocal į	gov	emp	nent	proje	ects		
	•				•	•		•			,																	_

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County	y: Taylor	Service	e: Cooperative Extension Service	•
I. Che	ck the box that best desc	cribes the agreed upon delivery arrange	ement for this service:	
	-	countywide (i.e., including all cities as government, authority or organization p	nd unincorporated areas) by a single service provider. (If this be providing the service.)	x
		only in the unincorporated portion of authority or organization providing th	the county by a single service provider. (If this box is checked, ne service.)	
	-	-	recorporated boundaries, and the service will not be provided in rement(s), authority or organization providing the service.)	
			ncorporated houndaries, and the county will provide the service irrument(s), authority or organization providing the service.)	in
		cked, attach a legible map delineating other organization that will provide s	ng the service area of each service provider, and identify the service within each service area.)	
	developing the strategy,	were overlapping service areas, unnec	essary competition and/or duplication of this service identified?	
higher		O.C.G.A. 36-70-24(1)), overriding bene	snation for continuing the arrangement (i.e., overlapping but efits of the duplication, or reasons that overlapping service areas	i
If thes	e conditions will be elim to eliminate them, the re	ninated under the strategy, attach an in sponsible party and the agreed upon de	mplementation schedule listing each step or action that will be eadline for completing it.	
			rvice and indicate how the service will be funded (e.g., enterpris el/motel taxes, franchise taxes, impact fees, bonded indebtednes	
Local G	overnment or Authority:	Funding Method:		
Tay:	lor County	General Funds		
<u> </u>				_
<u> </u>				
				-
4 Ho	w will the strategy chang	ne the previous errangements for provi	iding and/or funding this service within the county?	
	Change	ge the provious miningenients for provi	wing and/or funding this section within the county:	
NO	change			
5. List	any formal service deliv	very agreements or intergovernmental	contracts that will be used to implement the strategy for this ser	vice:
	ent Name:	Contracting Parties:	Effective and Ending Dates;	
Mas	ter Service Deliv	ery Agreement		
				·
<u> </u>				_
				]
	-	any) will be used to implement the str changes, etc.), and when will they take	rategy for this service (e.g., ordinances, resolutions, local acts of e effect?	the
Nor	ne			
7 Par	son completing form:	Lenda K. Taunton		
	number: 912/862-		ed: 4/14/98	
			n evaluating whether proposed local government projects	
are co	nsistent with the service	delivery strategy? N yes no		
II not,	provide designated cont	tact person(s) and phone number(s) bel	low:	

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

<del></del>			44¢¢	
County: Taylor		Service:	County Coron	er
1. Check the box that best	describes the agreed up	on delivery arrangeme	nt for this service:	
	ided countywide (i.e., in the government, authorit			) by a single service provider. (If this box
	ded only in the unincorporate anthority or organis			ervice provider. (If this box is checked,
	•	-	-	and the service will not be provided in organization providing the service.)
	-	-	_	and the county will provide the service in Exganization providing the service.)
	checked, attach a legit ty, or other organization			ach service provider, and identify the ice area.)
2. In developing the strate	egy, were overlapping se	Prvice areas, unnecessa	ry competition and/	or duplication of this service identified?
	∞ O.C.G.A. 36-70-24(1			the arrangement (i.e., overlapping but or reasons that overlapping service areas
If these conditions will be taken to eliminate them, if				le listing each step or action that will be t.
				he service will be funded (e.g., enterprise taxes, impact fees, bonded indebtedness,
Local Government or Authority	Funding Method:			
Taylor County	General Fun	ds		WALLER TO THE TOTAL PROPERTY OF THE TOTAL PR
				<del>*************************************</del>
			······································	the work of the second of the
<u></u>	<u> </u>			
4. How will the strategy of	hange the previous arra	ngenients for providin	g and/or funding thi	s service within the county?
No Change				
5. List any formal service Agreement Name:	delivery agreements or	intergovernmental con Contracting Pasies:	irects that will be us	ed to implement the strategy for this servi Effective and Ending Dates:
<u> </u>		Louinem & assess		Entered and according season.
Master Service Del	TASEA WELESHETT		#EF#A 1 - 111111111111111111111111111111	IIIAAA
			· · · · · · · · · · · · · · · · · · ·	
	V			
<ol> <li>What other mechanism General Assembly, rate or None</li> </ol>				g., ordinances, resolutions, local acts of t
7. Person completing form Phone number: 912/8		unton Date completed:	4/14/98	
	should be contacted by s vice delivery suntegy?	state agencies when ev	altrating whether pro	posed local government projects

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County: Taylor		Service:	Senior Citizens Cente	r					
1. Check the box that best descri	ribes the agreed upo	on delivery arrangement	for this service:						
Service will be provided of is checked, identify the go			ncorporated areas) by a single seing the service.)	ervice provider. (If this box					
Service will be provided of identify the government, a			unty by a single service provider ice.)	. (If this box is checked,					
			rated boundaries, and the service t(s), authority or organization pr						
	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.)								
			service area of each service pro within each service area.)	ovider, and identify the					
2. In developing the strategy, w	vere overlapping se	rvice areas, unnecessary	competition and/or duplication	of this service identified?					
If these conditions will continue higher levels of service (See O. or competition cannot be elimin	C.G.A. 36-70-24(1	, attach an explanation )), overriding benefits of	of for continuing the arrangement the duplication, or reasons that	ent (i.e., overlapping but overlapping service areas					
If these conditions will be elimitaken to eliminate them, the res			entation schedule listing each se for completing it.	step or action that will be					
			nd indicate how the service will el taxes, franchise taxes, impact						
Local Government or Authority:	Funding Method:								
Taylor County	General Fun	ıds							
		****							
4. How will the strategy chang	e the previous arrai	ngements for providing a	nd/or funding this service within	the county?					
No Change									
			4 . 144						
_		_	cts that will be used to impleme	= -					
Agreement Name:		Contracting Parties:		Effective and Ending Dates:					
Master Service Delive	ry Agreement			<u> </u>					
			<u> </u>						
			for this service (e.g., ordinances	, resolutions, local acts of the					
General Assembly, rate or fee of	changes, etc.), and v	when will they take effec	et?						
None									
7. Person completing form:	Lenda K.	Taunont		MAA.					
Phone number: 912/862-3		Date completed:	4/14/98	_					
8. Is this the person who should are consistent with the service of If not, provide designated conta	delivery strategy?	🔀 yes 🔲 no	nating whether proposed local go	vernment projects					
	. (-) and [//			_					

### SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



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 conject person for this service (listed at the bottom of the page) changes, this
should be reported to the Department of Community Affairs.

County: Taylor		Service: Street Lights	**************************************						
I. Check the box that best desc	ribes the agreed upo	n delivery arrangement for this service:							
		studing all cities and unincorporated areas) to organization providing the service.)	y a single service provider. (If this box						
		orated portion of the county by a single servation providing the service.)	rice provider. (If this box is checked,						
		nly within their incorporated boundaries, an identify the government(s), authority or org							
One or more cities will provide on incorporated areas. (If	(X) One or more cities will provide this service only within their incorporated houndaries, 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.)								
		e map delineating the service area of each hat will provide service within each service							
2. In developing the strategy, τ	vere overlapping ser	vice areas, unnecessary competition and/or	duplication of this service identified?						
If these conditions will continu higher levels of service (See O. or competition cannot be elimit	.C.G.A. 36-70-24(1))	attach an explanation for continuing the ), overriding benefits of the duplication, or r	earrangement (i.e., overlapping but easons that overlapping service areas						
		tegy, attach an implementation schedule l he agreed upon deadline for completing it.	isting each step or action that will be						
		to pay for this service and indicate how the ict revenues, horel/motel taxes, franchise ta							
The state of the s	Funding Method:								
Taylor County	General Fund	\$							
City of Butler	General Fund	S	**************************************						
City of Reynolds	General Fund	S							
######################################	4,94,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,	LILLINGUUUHHIIII AREEK							
4. How will the strategy chang No Change	c the previous arrang	gements for providing and/or funding this se	ervice within the county?						
5 List one formal somire datin	ami naramante ar ini	tergovernmental contracts that will be used	In implement the almost a Coulting sections						
Agreement Name:		Contracting Parties:	Effective and Ending Detes:						
Master Service Deliv	ery Agreement	A LANGUAGE CONTRACTOR	A STATE OF THE STA						
A A A A A A A A A A A A A A A A A A A			1						
			WANT OF THE PROPERTY OF THE PR						
6. What other mechanisms (if a General Assembly, rate or fee o None		mplement the strategy for this service (e.g., hen will they take effect?	ordinances, resolutions, local acts of the						
7. Person completing form: Phone number: 912/862-	Lenda K. Tau	nton _ Date completed: 4/14/98							
	d be contacted by statellivery strategy?	te agencies when evaluating whether propos XI yes	sed local government projects						

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County:Taylor		Service:	Tax Appraisa	1/Assessment	
1. Check the box that best desc	ribes the agreed upor	n delivery arrangeme	ent for this service:		
Service will be provided is checked, identify the go				s) by a single service prov	ider. (If this box
Service will be provided identify the government,				service provider. (If this bo	x is checked,
				, and the service will not be organization providing the	
				, and the county will provid organization providing the	
Other. (If this box is chec				each service provider, and vice area.)	l identify the
2. In developing the strategy, v  ☐ yes 🙀 no	were overlapping ser	vice areas, unnecess	ary competition and	Vor duplication of this serv	ice identified?
If these conditions will continu higher levels of service (See O. or competition cannot be eliminated)	.C.G.A. 36-70-24(1))				
If these conditions will be elim taken to eliminate them, the res					on that will be
3. List each government or aut funds, user fees, general funds					
Local Government or Authority:	Funding Method:				
Taylor County	General Fund	ds			
	·				
		7			
4. How will the strategy chang	e the previous arrang	gements for providir	ig and/or funding th	is service within the count	y?
No Change					
5. List any formal service deliv	en occaments of in	storocyammental cou	stracte that will be a	red to implement the strett	nav for this convice.
Agreement Name:		Contracting Parties:	ittacis (ilai wili oc i	•	Ending Dates:
Master Service Delive					
	<u></u>		·		
6. What other mechanisms (if General Assembly, rate or fee				e.g., ordinances, resolution	s, local acts of the
None					
7. Person completing form:	Lenda K. Ta	unton			
Phone number: 912/862-		_ Date completed:	4/14/98		
8. Is this the person who shoul				roposed local government r	projects
are consistent with the service  If not, provide designated cont	delivery strategy?	K yes □ no		Programme 1	- y

### SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

County:	Taylor		Service:	Tax	Collection	
1. Check the	box that best descr	ibes the agreed up	on delivery arrangeme	nt for this	service:	
			cluding all cities and u y or organization prov			ervice provider. (If this box
			porated portion of the cation providing the se		a single service provide	r. (If this box is checked,
					oundaries, and the service thority or organization pr	
			-		oundaries, and the county thority or organization pr	y will provide the service in roviding the service.)
	•		ole map delineating the that will provide servi		area of each service preach service area.)	ovider, and identify the
2. In develo	- •	vere overlapping se	ervice areas, unnecessa	гу сотре	tition and/or duplication	of this service identified?
higher levels		C.G.A. 36-70-24(1				ent (i.e., overlapping but overlapping service areas
			ategy, attach an impl the agreed upon deadl			step or action that will be
						l be funded (e.g., enterprise fees, bonded indebtedness, etc.
Local Government	ent or Authority:	Funding Method:				
Taylor	County	General Fun	ud			
City of		General Fun				
	Reynolds	General Fun	ıd			
	· · · · · · · · · · · · · · · · · · ·					
					<u> </u>	
4 77 232						
4. How wil.	the strategy chang	e the previous arra	ngements for providing	g and/or t	unding this service withi	n the county?
No Chang	e					
5. List any 6	ormal service deliv	ery agreements or	intergovernmental con	tracts tha	will be used to impleme	ent the strategy for this service:
Agreement Na		,	Contracting Parties:			Effective and Ending Dates:
	ervice Delive	rv Agreement	T T			
		7			<u></u>	
			o implement the strates when will they take eff		service (e.g., ordinances	s, resolutions, local acts of the
none						
	ompleting form:			1.1301	ng	
Phone numb			Date completed:			_
are consiste	nt with the service (	delivery strategy?		_	whether proposed local g	overnment projects

## SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Make copies of this form and complete one for each service fisted on page 4, Section III. Use exactly the same service names	listed on page
Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the	inge) changes, thi
should be reported to the Department of Community Affairs	

County:	Taylor		Service:	Voter	Registration	
I. Check th	e box that best descr	ribes the agreed upon deliver	- ry arrangeme	nt for this	service:	
	-	countywide (i.e., including a overnment, authority or orga		•	aled areas) by a single service proservice.)	ovider. (If this box
	-	only in the unincorporated po authority or organization pro			a single service provider. (If this	box is checked,
	-	_			undaries, and the service will not hority or organization providing t	-
					undaries, and the county will pro hority or organization providing t	
_	•	ked, attach a legible map d other organization that will	•		area of each service provider, a each service area.)	and identify the
2. In devel		were overlapping service are	as, unnecesse	ry compet	ition and/or duplication of this se	ervice identified?
higher leve		C.G.A. 36-70-24(1)), overri			ntinuing the arrangement (i.e., dication, or reasons that overlapp	
		inated under the strategy, at ponsible party and the agree			on schedule listing each step or a nipleting it.	ction that will be
	_				cate how the service will be funde , franchise taxes, impact fees, bo	
		Funding Method:				
Taylor	County	General Funds	<del></del>			
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		<u> </u>				<del>-</del>
4. How wi	il the strategy chang	e the previous arrangements	for providin	g and/or ft	anding this service within the cou	nty?
No Cha	ange					
5. List any Agreement N		ery agreements or intergove Contracting		tracts that	will be used to implement the str Effective	ategy for this service: and Ending Dates:
Master	Service Deliv	ery Agreement				
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		any) will be used to implementations, etc.), and when will			service (e.g., ordinances, resoluti	ons, local acts of the
None						
7 Parson	completing form:	Lenda K. Taunto	n			
	completing form iber: <u>912/862-3</u>	336 Date	completed:	_4/14/	98	
8. Is this t	he person who shoulent with the service	d be contacted by state agen delivery strategy? 🔣 yes	cies when ev	aluating w	thether proposed local government	nt projects
it not, pro	vine nesikunten cout	act person(s) and phone num	inei(z) netom			_

#### -P.2/2-

PAGE 3

### SERVICE DELIVERY STRATEGY SUMMARY OF LAND USE AGREEMENTS



Instructions:

Answer each question below, stracking 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 (fisted at the bottom of this page) changes, this should be reported to the Department of Community Affairs.

County; TAYLUR							
1. What incompatibilities or conflicts between the land use plans of local governments were identified in the process of developing the service delivery strategy?							
NONE - There were no incompatibilities or conflicts between the land use plans of local governments identified during development of the service delivery strategy. Taylor County and City of Butler and City of Reynolds participated in preparation and adoption of a Joint City/County Comprehensive Plan in 1995. Any incompatibilities or conflicts were addressed at that time.							
2. Check the boxes indicating how these incompatibilities or conflicts were addressed: NONE							
amendments to existing comprehensive plans adoption of a joint comprehensive plan other measures (amend zoning ordinances, add environmental regulations, etc.)  If "other measures" was checked, describe these measures:							
3. Summarize the process that will be used to resolve disputes when a county disagrees with the proposed land use classification(s) for areas to be annexed into a city. If the conflict resolution process will vary for different cities in the county, summarize each process.  SEE ATTACHED RESOLUTION							
4. What policies, procedures and/or processes have been established by local governments (and water and sewer authorities) to ensure that new extraterritorial water and sewer service will be consistent with all applicable land use plans and ordinances?  CITIES AND COUNTY AGREE TO GO BY LAND USE PLAN AS SET UP  THE CITIES AND COUNTY AGREE NOT TO EXTEND LINES INCONSISTENT WITH LAND USE PLAN AND ORDINANCES.							
- Tania V. Maurina							
5. Person completing form: Lenda K. Taunton  (912) 862-3336  Deta completed: 4/14/98							
Phone number:  Date completed: 4/14/98  6. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with land use plans of applicable jurisdictions?  possible projects are plans of applicable jurisdictions?							
If not, provide designated contact person(s) and phone number(s) below:							

### SERVICE DELIVERY STRATEGY SUMMARY OF LAND USE AGREEMENTS



Answer each question bel	ow, attaching additional pages as necessary.	Please note that any changes to the	answers provided will re	equire updating of the
	If the contact person for this service (listed			
Community Affairs			/	The second second second second

County:	TAYLOR	
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	X e	
lo Ta ac	ocal governments identified duri aylor County and City of Butler	ities or conflicts between the land use plans of mg development of the service delivery strategy. and City of Reynolds participated in preparation and comprehensive Plan in 1995. Any incompatibilities at time.
2. Check t	the boxes indicating how these incompatibilities	s or conflicts were addressed: NONE
ado	pendments to existing comprehensive plans option of a joint comprehensive plan her measures (amend zoning ordinances, and environmental regulations, etc.)	Note: If the necessary plan amendments, regulations, ordinances, etc. have not yet been formally adopted, indicate when each of the affected local governments will adopt them.
If "other n	neasures" was checked, describe these measur	es:
areas to be	annexed into a city. If the conflict resolution	sputes when a county disagrees with the proposed land use classification(s) for process will vary for different cities in the county, summarize each process.
ş	EE, ATTACHED RESOLUTION	
	TO SECURE SOUTH	
ensure tha	olicies, procedures and/or processes have been t new extraterritorial water and sewer service v ITIES AND COUNTY AGREE TO GO BY	established by local governments (and water and sewer authorities) to vill be consistent with all applicable land use plans and ordinances?  LAND USE PLAN AS SET UP
	V	Revised
	completing form: Lenda K. Taunto (912) 862-3336	
Phone num	nber:	Date completed: 4/14/98
consistent	the person who should be contacted by state ag with land use plans of applicable jurisdictions	encies when evaluating whether proposed local government projects are
	vide designated contact person(s) and phone no	

#### RESOLUTION

WHEREAS, as part of House Bill 489, Taylor County, Georgia, the City of Butler, Georgia, and the City of Reynolds, Georgia are required to identify a process for resolving land use disputes involving annexations and submit it to the Georgia Department of Community Affairs by no later than July 1, 1998; and,

WHEREAS, Taylor County, the City of Butler and the City of Reynolds have previously prepared and adopted a joint Land Use Plan, approved by the Georgia Department of Community Affairs, which will assist in the determination of incompatible land uses involved with annexations; and,

WHEREAS, Taylor County, the City of Butler and the City of Reynolds have agreed to utilize a Private Consultant to act as an impartial Mediator in settling all disputed land use/annexation issues; and,

WHEREAS, Taylor County, the City of Butler and the City of Reynolds have agreed the cost of mediation shall be shared by the disputing parties on a pro rata basis according to the individual entity's most recent population figures as provided by the Georgia Department of Community Affairs; and,

THEREFORE BE IT RESOLVED THAT, Taylor County, the City of Butler and the City of Reynolds do hereby unanimously agree to this prepared, negotiated, and adopted Resolution regarding the method of mediating disputed land use and annexation issues.

BY: TAYLOR COUNTY, GEORGIA BOARD OF COMMISSIONERS

Chairman of the Board County Manager

CITY OF BUTLER, GEORGIA

Mayor City Clerk

CITY OF REYNOLDS, GEORGIA

DATE: 05/11/98 . 1998



#### Instructions:

This page trust, 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 TAYLOR COUNTY

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

- 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(cs) for resolving land use disputes arising over annexation were established by the July 1, 1998 deadline (O.C.G.A. 36-70-24(4)).

IGNATURE:	NAME: (Please print or type)	TITLE:	Jurisdiction:	DATE:
Eng Boin	Greg Brown	Chairman	Taylor County	2-9-99
May ayer	Richard Turk	Mayor	City of Butler	3-9-99
Mary ayer	Mary Ayers	Mayor	City of Reynolds	1-18-9

#### AIRPORT:

The Taylor County Airport Authority is made up of five-member board. Taylor County staff provides the airport services in unincorporated Taylor County and the Cities of Butler and Reynolds. Funding is derived from the County General Funds.

#### BUILDING CODE INSPECTION:

Inspection of new construction and enforcement of various codes in unincorporated Taylor County are provided by Taylor County staff. Funding is derived from the County General Funds and user fees. Building code inspection in Butler are provided by City of Butler staff and funding is derived from the City of Butler General Funds and user fees. Building code inspection in Reynolds are provided by City of Reynolds staff and funding is derived from the City of Reynolds General Funds and user fees.

#### **BUSINESS LICENSING:**

Business licensing in unincorporated Taylor County is provided by Taylor County Staff and funding is derived from occupational tax. Business licensing in City of Butler and City of Reynolds are provided by the Cities staff and funding is derived from occupational tax.

#### CEMETERY

A city cemetery is provided by the City of Reynolds and only in their incorporated boundary. Funding is derived from the City of Reynolds General Fund. There is no service in the unincorporated area. There is no service in the City of Butler.

#### COURTS:

Taylor County Staff provides Court services in the unincorporated Taylor County and funding is derived from the County General Funds. Court services in the incorporated City of Butler are provided by City of Butler staff and funding is derived from the City General Funds. Court services in the incorporated City of Reynolds are provided by City of Reynolds staff and funding is derived from the City General Funds.

#### ECONOMIC DEVELOPMENT:

Taylor County has set up The Taylor County Development Authority and is made up of six members appointed by the Taylor County Board of Commissioners. The Development Authority serves as Taylor County's principal contact for prospective commercial and industrial interests seeking business opportunity within the county. The department serves as staff resource for the Taylor County Board of Commissioners, City of Butler and City of Reynolds. The department is staffed with one part-time employee with assistance from the Administrative Department of the City of Reynolds. Funding for the department is provided from the County General Funds. The geographic service area is county wide.

#### EMERGENCY MANAGEMENT:

The Taylor County Emergency Management Agency is charged with developing mitigation activities that either prevent the occurrence of an emergency or reduce the community's vulnerability in ways that minimize the adverse impact of a disaster situation or other emergency. The agency is staffed by one part time employee and volunteers. Funding is from the County General Funds with some reimbursement from the Federal Emergency Management Agency through Georgia's Emergency Management Agency. The geographic service area is county wide.

#### EMERGENCY MEDICAL AND RESCUE:

Taylor County Ambulance Service provides emergency medical services. There are fifteen part-time EMT, 2 Paramedics, and one part time employee that serve as the Director. Funding is from the County General Funds and Users fees. The geographic service area is county wide.

#### FIRE PROTECTION:

Fire protection for the unincorporated area of Taylor County is provided by six fire stations staffed by 115 volunteer firefighters and one part time fire co-ordinator. Funding is derived from the Taylor County General Fund. Also funds have been set aside from the Special One- Percent Sales Tax for new buildings. The City of Butler provides fire protection for incorporated area of Butler and funding is from the City's General Fund. The City of Reynolds provides fire protection from the incorporated area of Reynolds and funding is from the City's General Fund.

#### INDIGENT DEFENSE:

Taylor County provides a public defender for those otherwise unable to afford legal defense. Funding is from the County 's General Fund. The geographic service is county wide.

#### JAIL:

The jail is located in Butler and is operated by the Taylor County Sheriff's Department. Funding is derived from the County's General Funds. It does house state prisoners on a temporary basis and the county receives some funding by housing state prisoners. The geographic service area is county wide.

#### LAW ENFORCEMENT:

The Taylor County Sheriff's Department provides law enforcement to the unincorporated county. Funding for the Sheriff's Department is derived from the County General Funds, fees fines, and forfeitures. The Sheriff's Department is staffed by county employees. The City of Butler Police Department provides law enforcement to the incorporated area of Butler. Funding is by the City's General Funds, fees, fines, and forfeitures. The City of Reynolds Police Department provides law enforcement to the incorporation area of Reynolds. Funding is by the City's General Funds fees, fines, and forfeitures.

#### PARKING FACILITIES (RIDE SHARE)

The City of Reynolds provides parking facilities known as Ride Share. Upkeep of the parking lot is provided by the City employees and funding is provided by the City of Reynolds General Funds.

#### LIBRARIES:

The Butler Public Library and the Reynolds Public Library are a part of Pine Mountain Regional Library. These libraries provide services to the County and both cities. Funding is derived from the Taylor County General Fund, City of Butler General Funds, and City of Reynolds General Funds and the Pine Mountain Regional Library. The Pine Mountain Regional Library employs staff.

#### PARKS AND RECREATION:

Taylor County, City of Butler, and City of Reynolds setup the Taylor County Recreation Board, consisting of two members from the county and each of the two cities. This board supervises the Taylor County Parks and Recreation Department provide recreational programs throughout Taylor County. The department offers programs for all ages, should as youth football, softball, soccer, basketball, tennis, cheerleading, adult baseball, tennis and aerobics classes. Senior citizens program is also offered. A pavilion area is provided with picnic tables and grills. The Parks and Recreation Department is staffed by county employees and service area is county wide. Funding is provided by the County General Fund, City of Butler and Reynolds General Fund and by users fees. Also a portion of the Taylor County Special 1% Sales Tax goes to the improvement of the Parks & Recreation Department.

#### PLANNING AND ZONING:

Taylor County provides Planning and Zoning in the unincorporated area. The Taylor County Planning & Zoning Board consist of five members appointed by the Board of Commissioners. The board hears all Planning and Zoning issues and reports to the County Commissioners. The County Commissioners make the final decision. The Taylor County Planing & Zoning Office consist of two full time employees. The County General Fund and Users fees derive funding. City of Butler provides Planning & Zoning in the incorporated area of Butler. The City of Butler Planning and Zoning Board consist of 5 members appointed by the City of Butler Council. Funding is provided by the City General Fund and Users fees. City of Reynolds provides Planning and Zoning in the incorporated area of Reynolds. The City of Reynolds Planning and Zoning Board consist of 5 members appointed by the City of Reynolds Council. The City General Fund and User fees provide funding.

#### PUBLIC HEALTH:

The Taylor County Health Department provides care and treatment for the ill, engages in preventive medicine and conducts an active immunization programs. There is a part-time County Sanitarium who monitors the placement of septic systems, wells, and handles complaints. The Health Department is Staffed by State Employees, and funding is provided by the State and also funding from the County's General Fund. The geographic service area is county wide.

#### PUBLIC HOUSING:

The Flint Area Housing Authority provides public housing in the incorporated areas of Butler and Reynolds. The Flint Area Housing Authority provides funding.

#### ROADS AND STREETS:

The Taylor County Roads and Bridges Department maintains roads, bridges, and rights-of-ways throughout unincorporated portions of the County. The County Department also maintains streets located in the incorporated areas of Butler and Reynolds. The Roads and Bridges Department is staffed by county employees and funding is derived from the County General Funds, Special Purpose Local Option Sales Tax, and State Local Assistance Road Programs.

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#### SANITARY SEWAGE TREATMENT:

Taylor County provides a sanitary sewage service in only one area of the unincorporated area of Taylor County, the Potterville Community. The County sewage system in operated by county employees and funded by the Enterprise Fund and User Fees. The City of Butler provides a sanitary sewage service in the incorporated area of Butler. Funding by the Enterprise Fund and User Fees and is operated by city employees. The City of Reynolds provides a sanitary sewage service in the incorporated area of Reynolds. Funding by the Enterprise Fund and User Fees and is operated by city employees.

#### **SOCIAL SERVICES:**

The Taylor County office of the Department of Family and Children Services provides monthly support checks to those who qualify, has assistance for applicants seeking Medicaid Insurance and the U.S. D. A. Food Stamp Programs. Assist low-income family with utility and medicine payments. The department provides child protection services, provide a foster parents programs and assists in adoptions. This service is offered county wide. The office employees are State Employees. Funding is by the County General Fund and state monies.

#### SOLID WASTE COLLECTION:

Southern States Landfill is located in the unincorporated area of Taylor County. All of the County wide solid waste collection is delivered to this landfill. The former County/City landfill was been closed in 1990 and is monitored by EPD by Groundwater monitoring wells and Methane Monitoring wells. Taylor County offers solid waste collection in the unincorporated areas of Taylor County. Green Boxes are placed throughout Taylor County for a collection of household garbage. Also businesses are offered the green boxes for a user fee. Taylor County has three full time employees and funding is by the County General Fund and Users Fees. Taylor County also has an Inert Landfill for collection of yard trimmings, etc. The City of Butler offers solid waste collection in the incorporated areas of Butler. City employees provide weekly curbside collection of solid waste. Funding is by the City General Fund and User Fees. The City of Reynolds offers solid waste collection in the incorporated areas of Reynolds. City employees provide weekly curbside collection of solid waste. Funding is by the City General Fund and User Fees.

#### WATER TREATMENT AND DISTRIBUTION:

Taylor County provides water service to only one area in the unincorporated area of Taylor County. The Potterville Community has a county well system and it is permitted by the EPD. Water is tested on a regular basis throughout the year. The system is operated by county employees and funding is by the enterprise funds and user fees. The City of Butler provides water service to the incorporation areas of Butler. It is permitted by the EPD and water is tested on a regular basis throughout the year. The system is operated by the city employees and funding is by the city's enterprise fund and user fees. The City of Reynolds provides water service to the incorporated areas of Reynolds. It is also permitted by the EPD and the water is tested on a regular basis throughout the year. The system is operated by the city employees and funding is by the city's enterprise fund and user fees.

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#### RECYCLING:

Taylor County provides a county-wide recycling program. The county has 3 recycling trailers that are placed throughout the county for collection of newspapers, magazines, cardboard, cans, plastic containers, etc. The department provides a recycling program at the school systems. The recycling department is operated by two full time county employees and is funding by the County General Fund.

#### COOPERATIVE EXTENSION SERVICE

The Taylor County office of the Cooperative Extension Service provides assistance in Agriculture, Home Economics, 4-H, and Food and Nutrition. The office is staffed by the University of Georgia and serves county wide. The funding is provided by the State and the County General Funds.

#### COUNTY CORONER:

The County Coroner is an elected position; therefore the individual is a county employee. The County Coroner signs death certificates and handles any investigation of foul play if suspected. The Coroner serves the emire county and is funded by the County General Funds.

#### SENIOR CITIZENS CENTER:

The Senior Citizens Center provides a place for individual aged 60 and older to enjoy arts and crafts activities, health screenings, receive information on programs, transportation is provided. Meals are also served at the center as well as delivered to the homebound. The Senior Citizens Center is county wide service and funding is provided by the county and state monies.

#### STREET LIGHTS:

The Taylor County Board of Commissioners provides the street lights in unincorporated Taylor County. The County General Funds funds this service. The City of Butler provides street lights in the incorporated areas of Butler and is funded by the City General Funds. The City of Reynolds provides street lights in the incorporated areas of Reynolds and is funded by the City General Funds.

#### TAX APPRAISAL/ASSESSMENT:

The Tax Assessor's Office handles the appraisal of property, making sure that new buildings are placed on the tax digest and the correct value are provided. The office also has official tax maps for the county. This office is responsible for sending tax assessments to property owners in order that personal property is on file. County employees staff the office and the service area is County wide. Funding for the office is provided from the County General Funds.

#### Page 6

#### TAX COLLECTION:

The Tax Commissioner is responsible for collecting all due taxes in Taylor County. The Tax Commissioner is also responsible for recording intangibles, issuing motor vehicle tag and titles, reporting timber sales, and issuing mobile home location permits. This office is staff by county employees and the service area is county wide. Funding for the department is provided by the County General funds. The Cities of Butler and Reynolds also collect taxes. Funding for there departments are provided from the General Funds of the cities.

#### VOTER REGISTRATION:

The Taylor County Board of Registrars consist of three members appointed by the Chief Judge of the Superior Court. The Voter Registration Department ensures that county voter registration is in compliance with applicable laws and regulations. The department duties include registering county citizens to vote, registration information is updated, registration lists are purged, monthly registration reports are forwarded to the Secretary of State, applications for absentee ballots are processed, absentee ballots are tallied, and voter data after primary and general elections are recorded. The office is staffed by one full time county employee serving as Chief Registrar and two part time registrars. The County General Funds funds the department.