



Liane Levetan Chief Executive Officer

September 8, 1999

VIA HAND DELIVERY

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

Re: Future Comm. Legislation

Dear Sir/Madame:

On behalf of DeKalb County and the Cities of Atlanta, Avondale Estates, Chamblee, Clarkston, Decatur, Doraville, Lithonia, and Pine Lake, I am hereby submitting the Service Delivery Strategy for DeKalb County.

Please feel free to contact me at your convenience if you have any questions or comments.

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Liane Levetan Chief Executive Officer

LL/rac

Attachment

cc: Kevin DuBose, Department of Community Affairs Bill Campbell, Mayor of Atlanta John Lawson, Mayor of Avondale Estates Mary Goldenburg, Mayor of Chamblee George Baldersare, Mayor of Clarkston William Floyd, Mayor of Decatur Gene Lively, Mayor of Doraville Marcia Glenn, Mayor of Doraville Marcia Glenn, Mayor of Pine Lake Chuck Burris, Mayor of Stone Mountain

GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS



SERVICE DELIVERY STRATEGY

FOR <u>DEKALB</u>

____COUNTY

PAGE 1

I. GENERAL INSTRUCTIONS:

- Only one set of these forms should be submitted per county. The completed forms should clearly present the collective agreement reached by all cities and counties that were party to the service delivery strategy.
- 2. List each local government and/or authority that provides services included in the service delivery strategy in Section II below.
- 3. List all services provided or primarily funded by each general purpose local government and authority within the county in Section III below. It is acceptable to break a service into separate components if this will facilitate description of the service delivery strategy.
- 4. For each service or service component listed in Section III, complete a separate Summary of Service Delivery Arrangements form (page 2). (See Tabs 2 8)
- 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. DeKalb County, City of Atlanta, City of Avondale Estates, City of Chamblee, City of Clarkston, City of Decatur, City of Doraville, City of Lithonia, City of Pine Lake, Decatur/DeKalb Housing Auth., DeKalb Development Auth., Downtown Development Auth. (Decatur), Lithonia Housing Auth., Atlanta Housing Auth., Lithonia Downtown Development Auth., Fulton-DeKalb Hospital Auth., Atlanta Development Auth., City of Stone Mountain.

III. SERVICES INCLUDED IN THE SERVICE DELIVERY STRATEGY:

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

See the attached Matrix of Services in DeKalb. Attachment B.

SERVICE DELIVERY STRATEGY SUMMARY OF LAND USE AGREEMENTS

PAGE 3

Instructions:

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

County: _

DEKALB

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.

2. Check the boxes indicating how these incompatibilities or conflicts were addressed:

amendments to existing comprehensive plans

adoption of a joint comprehensive plan

□ other measures (amend zoning ordinances, add environmental regulations, etc.

If "other measures" was checked, describe these measures:

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.

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.

Prior to initiating any formal annexation activites that would involve land use or zoning classification changes, the City will notify the County and all contiguous property owners of the proposed annexation and of the schedule for public hearings. The County may review and provide comments - County must raise any bona fide

(See Attachment A)

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?

(See Attachment C)

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consistent with land	ho should be contacte I use plans of applical gnated contact person	ble jurisdictions?	🗆 Yes 🗆 No	ng whether propo	sed local government proje	cts are

Attachment A

Summary of Process to Resolve Disputes Over Land Use Classifications for Annexed Areas

land use classification objections at this time. If the County does not object, the City may proceed with the annexation. If the County does object, the City and County agree to either (a) implement the County's conditions and remove the objection; (b) stop the annexation; or (c) initiate a 30 day negotiation period. If the City proceeds with the annexation, a vote by the County on whether or not to authorize the annexation (pursuant to O.C.G.A. § 36-36-70) constitutes final resolution, provided however that the County cannot refuse to authorize an annexation due to a bona fide land use classification objection if the objection was resolved or not already raised in accordance with these procedures. A copy of the resolution/ordinance passed by each City and the County is attached hereto.

SERVICE DELIVERY STRATEGY CERTIFICATIONS

PAGE 4

Instructions:

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

SERVICE DELIVERY STRATEGY FOR __DEKALB

_ COUNTY

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

- 1. We have executed agreements for implementation of our service delivery strategy and the attached forms provide an accurate depiction of our agreed upon strategy (O.C.G.A. 36-70-21);
- 2. Our service delivery strategy promotes the delivery of local government services in the most efficient, effective, and responsive manner (O.C.G.A. 36-70-24 (1));
- 3. Our service delivery strategy provides that water or sewer fees charged to customers located outside the geographic boundaries of a service provider are reasonable and are not arbitrarily higher than the fees charged to customers located within the geographic boundaries of the service provider (O.C.G.A. 36-70-24 (2)); and
- 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)).

SIGNATURE:	NAME: (Please print or type)	TITLE:	JURISDICTION:	DATE:
1 ane Leud	Liane Levetan	Chief Executiv Officer	e DeKalb County	9/8/99
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A RESOLUTION TO ADOPT THE SERVICE DELIVERY STRATEGY

1

WHEREAS, O.C.G.A. § 36-70-1 et. seq. requires the adoption of local government service delivery strategy agreements by municipalities and counties; and

WHEREAS, DeKalb County and the Cities of Atlanta, Avondale Estates, Chamblee, Doraville, Decatur, Lithonia, Clarkston, Stone Mountain, and Pine Lake have participated in the development of a service delivery strategy, and

WHEREAS, O.C.G.A. § 36-70-25(b) provides that approval of the strategy shall be accomplished by adoption of a resolution:

(1) By the county governing authority;

(2) By the governing authority of municipalities within the county which have a population of 9,000 or greater within the county;

(3) By the municipality which serves as the county site if not included in paragraph (2) of this subsection; and

(4) By no less than 50% of the remaining municipalities within the county which contain at least 500 persons within the county if not included paragraph (2) or (3) of this subsection; and

WHEREAS, the local government service delivery strategy agreement must be approved by DeKalb County; and

WHEREAS, after October 29, 1999, no state administered financial assistance or grant, loan, or permit shall be issued to any local government or authority which is not included in a department verified strategy or for any project which is inconsistent with such strategy.

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of DeKalb County, and it is hereby resolved by authority of the same that the attached service delivery strategy is hereby adopted and the Chief Executive Officer is hereby authorized to execute the strategy and any and all other documents necessary to evidence adoption of the strategy; and

BE IT FURTHER RESOLVED that any and all resolutions, or any part thereof in conflict with this resolution are hereby repealed. This resolution shall be effective immediately upon its adoption.

[Resolution to Adopt the Service Delivery Strategy]

4

APPROVED by the Board of Commissioners of DeKalb County this 24th day of 1999. August ×42. Porter Sanford, Ill Presiding Officer Board of Commissioners DeKalb County, Georgia APPROVED by the Chief Executive Officer of DeKalb County, this 24th day of , 1999. August an Liane Levetan

Chief Executive Officer DeKalb County, Georgia

ATTEST: Michael J. Bell

Ex-Officio Clerk, Board of Commissioners / and Chief Executive Officer DeKalb County, Georgia

APPROVED AS TO FORM

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Jonathan Weintraub County Attorney

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ERCENTICATIONS: A service to the second service performance of the following local governments: 1) the county: 2) the historicions: This page must, at a minimum, be signed by the chief elected official of each of the following local governments: 1) the county: 2) the county seat city; 3) all cities having a 1990 population of over 9,000 residing within the county; and 4) 50% or more of all other cities with a 1990 population of the jurisding within the county; and 4) 50% or more of all other cities with a 1990 we, the undersigned authorized representatives of the jurisdicated, certify that:	The duly exceuted agreement(s) enclosed with this certification represent the agreement for implementation of our service delivery strategy for construction of 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 (I)) Our service delivery strategy provides that water or sewer fees charged to customers located outside the geographic boundaries of a service provider. (O.C.G.A. 36-70-24 (I)) Our service delivery strategy provides that water or sewer fees charged to customers located outside the geographic boundaries of the a service provider. (O.C.G.A. 36-70-24 (2)) Our service delivery strategy provides that water the fees charged to customers located within the geographic boundaries of the a service provider. (O.C.G.A. 36-70-24 (2)) Our service delivery strategy ensures that the cost of any services the county government provides (including those jointly funded by the county and one or more municipalities) primarily for the benefit of the unincorporated area of the county are borne by the unincorporated area residents, individuals, and property owners who receive such service. (O.C.G.A. 36-70-24 (3)) Our land use plans have been amended as necessary and are now compatible and non-conflicting. (O.C.G.A. 36-70-24 (4) (A)) Our land use plans have been amended as necessary and are now compatible and non-conflicting. (O.C.G.A. 36-70-24 (4) (A)) Our service delivery strategy ensures that the provision of extraterritorial water and sewer services by any jurisdiction is consistent with all applicable land use plans and oreshoures. (O.C.G.A. 36-70-24 (4) (A)) Our service delivery strategy ensures that the county. (O.C.G.A. 36-70-24 (4) (A)) Our service delivery strategy or our county, clites and authorities has been duly approved. (O.C.G.A. 36-70-25) The service delivery strategy for our county, clites and authorities has been duly approved. (O.C.G.A. 36-70-25)	Drint)	- 12	
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county seat city; 3) all cities having a 1990 population of over 9,000 residing within the county; and 4) 50% or m population of between 500 and 9,000 residing within the county. Attach additional copies of this page if necessary We, the undersigned authonized representatives of the jurisdictions indicated, certify that:	he duly executed agreement(s) enclosed with this certification represent the agreement for implementation of our strategy. (O.C.G.A. 36-70-21) Dur service delivery strategy promotes the delivery of local government services in the most efficient, effective, manner. (O.C.G.A. 36-70-24 (1)) Dur service delivery strategy provides that water or sewer fees charged to customers located outside the geographic by service provider are not arbitrarily higher than the fees charged to customers located within the geographic by service provider. (O.C.G.A. 36-70-24 (2)) Dur service delivery strategy ensures that the cost of any services the county government provides (including thos by the county and one or more municipalities) primarily for the benefit of the unincorporated area of the county unincorporated area residents, individuals, and property owners who receive such services by any jurisd Our service delivery strategy ensures that the provision of extraterritorial water and sever services by any jurisd for and use plans have been amended as necessary and are now compatible and non-conflicting. (O.C.G.A. 36 Our service delivery strategy ensures that the provision of extraterritorial water and sever services by any jurisd fend with all applicable land use plans and ordinances. (O.C.G.A. 36-70-24 (4) (B)) A process was established by July 1, 1998 to resolve land use classification disputes when the county objects to th use of an area to be annexed into a municipality within the county. (O.C.G.A. 36-70-24 (4) (C)) The service delivery strategy for our county, cities and authorities has been duly approved. (O.C.G.A. 36-70-25)	ate as a second		
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CITY COUNCIL ATLANTA, GEORGIA

RESOLUTION BY FINANCE/EXECUTIVE COMMITTEE

99- *2*-1497

A RESOLUTION TO ADOPT THE SERVICE DELIVERY STRATEGY BETWEEN THE CITY OF ATLANTA AND DEKALB COUNTY, AND FOR OTHER PURPOSES

WHEREAS, O.C.G.A. & 36-70-1 et.seq. requires the adoption of local government service delivery strategy agreements by municipalities and counties; and

WHEREAS, Dekalb County and the Cities of Atlanta, Avondale Estates, Chamblee, Doraville, Decatur, Lithonia, Clarkston, Stone Mountain, and Pine Lake have participated in the development of a service delivery strategy; and

WHEREAS, O.C.G.A. & 36-70-25(b) provides that approval of the strategy shall be accomplished by adoption of a resolution:

- (1) By the county governing authority:
- (2) By the governing authority of municipalities within the county which have a population of 9,000 or greater within the county;
- (3) By the municipality which serves as the county site if not included in paragraph (2) of this subsection; and
- (4) By no less than 50% of the remaining municipalities within the county which contain at least 500 persons within the county if not included paragraph (2) or (3) of this subsection; and

WHEREAS, the local government service delivery strategy agreement must be approved by City of Atlanta and Dekalb County; and

WHEREAS, after October 29, 1999, no state administered financial assistance or grant, loan, or permit shall be issued to any local government or authority which is not included in a department verified strategy or for any project which is inconsistent with such strategy.

NOW, THEREFORE, BE IT RESOLVED, by the Atlanta City Council, that the Service Delivery Strategy between the City of Atlanta and Dekalb County is hereby adopted in the form attached hereto.

BE IT FURTHER RESOLVED that the Mayor is hereby authorized to execute the strategy and any and all other documents necessary to evidence adoption of the strategy.

BE IT FURTHER RESOLVED that any resolutions or parts in conflict crewith are hereby repealed.

BE IT FINALLY RESOLVED that this resolution shall be effective immediately upon signature by the Mayor of the City of Atlanta.

Dard Moris □V Vote IFRC Vote TARI CERTIFIED change FINAL COUNCIL STION ATLANTA CITY COUNCIL PRESIDENT APPROVED N ERTUFIE MAYOR'S ACTION 19999 2 1999 SEP 0 7 1999 Rud Brack CLERK Readings D1st & 2nd YOR 1 bereau SEP / ß 1-3 **C**onsent tory. D2nd 0 Fav, Adv, Hold (see rev. side) Fav, Adv, Hold (see rev. side) Committee Committee Members Refer To Action: Members Action: Other: Refer To Date Chair Other: Chair Date First Reading Fav, Adv, Hold (see rev. side) Fav, Adv, Hold (see rev. side) 20 dele-99 dohupittee Committee Meinopers Members Action: Other: Refer To Refer To Action: S 2 Detei Chair Other: Date Date Chair Referred to Committee FAILED In Call Volt BETWEEN THE CITY OF ATLANTA AND DEKALB COUNTY, AND FOR OTHER FINANCE/EXECUTIVE COMMITTEE ADOPTED BY SEP 0 7 1999 COUNCIL SERVICE DELIVERY STRATEGY A RESOLUTION TO ADOPT THE (Do Not Write Above This Line) 1st ADOPT 2nd READ & REFER **REGULAR REPORT REFER** PERSONAL PAPER REFER 199- Motion to Table *₹*-1497 **ADVERTISE & REFER** CONSENT REFER A RESOLUTION BY Date Referred Date Referred Date Referred Referred To: Referred To: Referred To: PURPOSES

 CERTIFICATIONS: Service Delivery Strategy for City of Avondale Estates. Intractions: This page must at a minimum, by signed by the chief detend distant of service delivery strategy of 000 residing used general operation of over 9000 residing within the county. Alto the hardwork of this page functions with a 1990 population of the number of the page functions. This page must at a minimum, by signed by the chief of this page of the number of the nu

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A RESOLUTION TO ADOPT THE SERVICE DELIVERY STRATEGY

WHEREAS, O.C.G.A. 36-70-1 et seq requires the adoption of local government service delivery strategy agreements by municipalities and counties, and

WHEREAS, DeKalb County and the Cities of Atlanta, Avondale Estates, Chamblee, Doraville, Decatur, Lithonia, Clarkston, Stone Mountain, and Pine Lake have participated in the development of a service delivery strategy, and

WHREAS, O.C.G.A. 36-70-25(b) provides that the approval of the strategy shall be accomplished by adoption of a resolution:

- (1) By the county governing authority,
- (2) By the governing authority of municipalities within the county which have a population of 9,000 or greater within the county;
- (3) By the municipality which serves as the county site if not included in paragraph (2) of this subsection, and
- (4) By no less than 50% of the remaining municipalities within the country which contain at least 500 persons within the county if not included in paragraph (2) or (3) of this subsection; and

WHEREAS, the local government service delivery strategy agreement must be approved by DeKalb County, and

WHEREAS, after October 29, 1999, no state administered financial assistance or grant, loan, or permit shall be issued to any local government or authority which is not included in a department verified strategy or for any project which is inconsistent with such strategy.

NOW, THEREFORE, BE IT RESOLVED, by the Board of Mayor and Commissioners of the City of Avondale Estates, and it is hereby resolved by authority of the same that the attached service delivery strategy is hereby adopted and the Mayor is hereby authorized to execute the strategy and any and all other documents necessary to evidence adoption of the strategy, and

BE IT FURTHER RESOLVED that any and all resolutions, or any part thereof in conflict with this resolution are hereby repealed. This resolution shall be effective immediately upon its adoption.

APPROVED by the Board of Mayor and Commissioners of the City of Avondale Estates this <u>23</u>¹⁴ day of <u>214</u>, 1999.

John Lawson, Mayor

AFPRONED AS FORM: bh Nardone, Jr. Esq.

Attorney

ATTEST:

<u>A. R. Steadran, City</u>

CERTIFICATIONS: Service Delivery Strategy for De Mode County County Instructions: This page must, at a minimum, be signed by the chief elected official of each of the following local governments: 1) the county, 2) the county seat city; 3) all cities having a 1990 population of over 9,000 residing within the county; and 4) 50% or more of all other cities with a 1990 population of between 500 and 9,000 residing within the county. Attach additional copies of this page if necessary. We, the undersigned authorized representatives of the jurisdictions indicated, certify that:	 The duly executed agreement(s) enclosed with this certification represent the agreement for implementation of our service delivery strategy (O.C.G.A. 36-70-21) Our service delivery strategy promotes the delivery of local government services in the most efficient, effective, and responsive manner. (O.C.G.A. 36-70-24 (1)) Our service delivery strategy provides that water or sever fees charged to customers located outside the geographic boundaries of service provider. (O.C.G.A. 36-70-24 (2)) Our service delivery strategy ensures that the cost of any services the county government provides (including those jointly funded by the county and one or more municopalities) 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 (2)) Our service delivery strategy ensures that the provision of extrateritorial water and sever services by any jurisdiction is consistent with all applicable land use plans and ordinances. (O.C.G.A. 36-70-24 (3)) Our service delivery strategy ensures that the provision of extrateritorial water and sever services by any jurisdiction is consistent with all applicable land use plans and ordinances. (O.C.G.A. 36-70-24 (4) (B)) A process was established by July 1, 1998 to resolve land use compares when the county are borne by the unincorporated area to service and sever services by any jurisdiction is consistent with all applicable land use plans and ordinances. (O.C.G.A. 36-70-24 (4) (B)) A process was established by July 1, 1998 to resolve land use classification disputes when the county are borne by the unincorporated area to a secret services (IO.C.G.A. 36-70-24 (4) (B)) A process was established by July 1, 1998 to resolve land use classification disputes when the county are borne by the unincorporated area to the county area borne by the unincorpo	Jurisdiction Signature Date Name and Title (please print) City of Chamblee May M. Hould Andrew 9/197 Mary W. Goldenburg - Mayor		
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CITY OF CHAMBLEE, GEORGIA RESOLUTION TO ADOPT SERVICE DELIVERY STRATEGY

WHEREAS, O.C.G.A. 36-70-1 et. seq. requires the adoption of local government service delivery strategy agreements by municipalities and counties; and,

WHEREAS, DeKalb County and the Cities of Atlanta, Avondale Estates, Chamblee, Doraville, Decatur, Lithonia, Clarkston, Stone Mountain, and Pine Lake have participated in the development of a service delivery strategy; and,

WHEREAS, O.C.G.A. 36-70-25(b) provides that approval of the strategy shall be accomplished by adoption of a resolution; and,

WHEREAS, local government service delivery strategy agreement must be approved by the City of Chamblee; and,

WHEREAS, after October 29, 1999, no state administered financial assistance or grant, loan, or permit shall be issued to any local government or authority which is not included in a department verified strategy or for any project which is inconsistent with such strategy.

NOW, THEREFORE, BE IT RESOLVED, by the Mayor and City Council of the City of Chamblee, and it is hereby resolved by authority of the same, that the attached service delivery strategy is hereby adopted and the City Manager/Chief Executive Officer is hereby authorized to execute the strategy and any and all other documents necessary to evidence adoption of the strategy; and

BE IT FURTHER RESOLVED that any and all resolutions, or any part thereof in conflict with this resolution are hereby repealed. This resolution shall be effective immediately upon its adoption.

ADOPTED this 17th day of August, 1999.

Mary Ward Goldenburg - Mayor,

James H. Copeland - Council Dist. 2

Člara A. de Ojeda - Øuncil Dist. 4

Robert I. Coleman - Council Dist. 1

#50

Kathy Fugatt - Council Dist. 3

John R. Bradford - Council Dist. 5

I certify that this is a true and exact copy of the record and/or records on file with the CLA Clerkia of Ecc.

ann 8/18/99 Date

ERTHCATIONS: Service Delivery Strategy for County And County and A 50% or more of all other county; 2) the following local governments: 1) the county; 2) the county seat city; 3) all cities having a 1990 population of over 9,000 residing within the county; and 4) 50% or more of all other cities with a 1990 population of the jurisdictions indicated, certify that: We, the undersigned authorized representatives of the jurisdictions indicated, certify that:	The duly executed agreement(s) enclosed with this certification represent the agreement for implementation of our service delivery strategy. (O.C.G.A. 36-70-21) Our service delivery strategy promotes the delivery of local government services in the most efficient, effective, and responsive mannet. (O.C.G.A. 36-70-24 (1)) Our service delivery strategy provides that water or sewer fees charged to customers located outside the geographic boundaries of a service provider are not arbitrarily higher than the fees charged to customers located within the geographic boundaries of the service provider (O.C.G.A. 36-70-24 (2)) Our service provider (O.C.G.A. 36-70-24 (2)) Our service provider (O.C.G.A. 36-70-24 (2)) Our service delivery strategy ensures that the cost of any services the county government provides (including those jointly funded by the county and one or more municipalities) primarily for the benefit of the unincorporated area of the county are borne by the unincorporated area residents, individuals, and property owners who receive such service, (O.C.G.A. 36 70-24 (4)) Our land use plans have been amended as necessary and are now compatible and non-conflicting. (O.C.G.A. 36-70-24 (4) (A)) Our rand use plans have been amended as necessary and are now compatible and non-conflicting. (O.C.G.A. 36-70-24 (4) (A)) Our service delivery strategy ensures that the provision of extraterritorial water and sewer services by any jurisdiction is consis- tent with all applicable land use plans and ordinances. (O.C.G.A. 36-70-24 (4) (C)) A process was established by July 1, 1998 to resolve land use classification disputes when the county objects to the proposed land the service delivery strategy for our county, clues and authorities has been duly approved. (O.C.G.A. 36-70-25)	Signature Date Name and Mile (please print). Noge L'Eddune 8-33-99 George 1. Baldesare, Mayor			
CERTHECATIONS: Instructions: This page must, at a minimucounty seat city: 3) all cities having a 199 population of between 500 and 9,000 resting the undersigned authorized represented anthorized represent	 The duly executed agreement(s) enclosed w strategy. (O.C.G.A. 36-70-21) Our service delivery strategy promotes the manner. (O.C.G.A. 36-70-24 (1)) Our service delivery strategy provides that a service provider are not arbitrarily high service provider. (O.C.G.A. 36-70-24 (2)) Our service delivery strategy ensures that by the county and one or more municipali unincorporated area residents, individuals 0 on service delivery strategy ensures that that applicable land use plans and tent with all applicable land use glans and then with all applicable land use glans and use of an area to be annexed into a munic 8) The service delivery strategy for our coun 	Jurisdiction City of Clarkston			

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OFFICE OF MUNICIPAL CLERK

RHONDA DAUPHIN JOHNSON, CMC MUNICIPAL CLERK 55 TRINITY AVENUE, S.W. SECOND FLOOR, EAST SUITE 2700 ATLANTA, GEORGIA 30335 (404) 330-6033 FAX (404) 658-6273

July 21, 1998

Becky Craven Municipal City Clerk 5468 Peachtree Road Chamblee, Georgia 30341

Dear Ms. Craven:

As requested by the Atlanta City Council, I am forwarding a copy of the following Ordinance to you:

98-O-1159

59 AN ORDINANCE CREATING A PROCESS TO RESOLVE ANNEXATION DISPUTES IN DEKALB COUNTY INVOLVING LAND USE; AND FOR OTHER PURPOSES.

The above legislation was adopted by the Atlanta City Council, May 18, 1998, and approved by the Mayor on July 13, 1998.

Please call me at (404) 330-6033, if there are any questions.

Sincerely,

Rhonda Dauphin Johnson

Rhonda Dauphin Johnson, CMC Municipal Clerk

RDJ/tdc

Enclosure

CITY OF ATLANTA



OFFICE OF MUNICIPAL CLERK

STATE OF GEORGIA

COUNTY OF FULTON

CITY OF ATLANTA

I, Rhonda Dauphin Johnson, do hereby certify that I am the duly appointed Municipal Clerk of the City of Atlanta, Georgia, and as such am in charge of keeping the Minutes of the City Council of the said City of Atlanta. I further certify that the attached is a true and correct copy of Ordinance #98-O-1159:

AN ORDINANCE CREATING A PROCESS TO RESOLVE ANNEXATION DISPUTES IN DEKALB COUNTY INVOLVING LAND USE AND FOR OTHER PURPOSES

All as the same appears from the original which is of record and on file in my said office.

GIVEN under my hand and seal of office this 18th day of July, 1998.

RHONDA DAUPHIN JOHNSON, CMC MUNICIPAL CLERK

FYNAL

MUNICIPAL CLERK ATLANTA, GEORGIA

98- 7-1159

AN ORDINANCE BY FINANCE/EXECUTIVE COMMITTEE

AN ORDINANCE CREATING A PROCESS TO RESOLVE ANNEXATION DISPUTES IN DEKALB COUNTY INVOLVING LAND USE AND FOR OTHER PURPOSES.

WHEREAS, O.C.G.A. § 36-70-24 (4)(C) requires that Dekalb County and the cities located wholly or partially within its borders establish a process to resolve land use classification disputes when the County objects to the proposed land use of an area to be annexed from the County into a city within the County, and

WHEREAS, the County has met with the Cities of Atlanta, Avondale Estates, Chamblee, Clarkston, Decatur, Doraville, Lithonia, Pine Lake and Stone Mountain to establish such a procedure in order to comply with O.C.G.A. § 36-70-(4)(C), and

WHEREAS, each jurisdiction has agreed to the land use/annexation process.

WHEREAS, it is in the best interest of the City of Atlanta to adopt this process in order to be in compliance with O.C.G.A. 36-70-24 (4)(C).

NOW THEREFORE BE IT ORDAINED BY THE COUNCIL OF THE CITY OF ATLANTA, GEORGIA AS FOLLOWS:

Section 1. That the City of Atlanta hereby establishes a process to resolve land use classification disputes wholly or partially within the borders of Dekalb County and that the process is attached hereto and made a part hereof. (See Attachment A).

Section 2. That a certified copy of this ordinance be forwarded to Dekalb County and all cities in Dekalb.

Section 3. That all ordinances and parts of ordinances in conflict herewith be and the same are hereby repealed.

A true copy, Municipal Clerk, CMC

ADOPTED by the City Council APPROVED by the Mayor

July 06, 1998 July 13, 1998

A RESOLUTION TO ADOPT THE SERVICE DELIVERY STRATEGY

WHEREAS, O.C.G.A. § 36-70-1 et. seq. requires the adoption of local government service delivery strategy agreements by municipalities and counties; and

WHEREAS, DeKalb County and the Cities of Atlanta, Avondale Estates, Chamblee, Doraville, Decatur, Lithonia, Clarkston, Stone Mountain, and Pine Lake have participated in the development of a service delivery strategy; and

WHEREAS, O.C.G.A. § 36-70-25(b) provides that approval of the strategy shall be accomplished by adoption of a resolution:

(1) By the county governing authority;

(2) By the governing authority of municipalities within the county which have a population of 9,000 or greater within the county;

(3) By the municipality which serves as the county seat if not included in Paragraph (2) of this subsection; and

(4) By no less than 50% of the remaining municipalities within the county which contain at least 500 persons within the county if not included in paragraph (2) or (3) of this subsection; and

WHEREAS, the local government service delivery strategy agreement must be approved by DeKalb County; and

WHEREAS, after October 29, 1999, no state administered financial assistance or grant, loan, or permit shall be issued to any local government or authority which is not included in a department verified strategy or for any project which is inconsistent with such strategy.

NOW, THEREFORE, BE IT RESOLVED, by the City Council of Clarkston, Georgia, and it is hereby resolved by authority of the same that the attached service delivery strategy is hereby adopted and the Mayor is hereby authorized to execute the strategy and any and all other documents necessary to evidence adoption of the strategy; and

BE IT FURTHER RESOLVED that any and all resolutions, or any part thereof in conflict with this resolution are hereby repealed. This resolution shall be effective immediately upon its adoption.

APPROVED by the City Council of Clarkston, Georgia, this <u>23</u> day of <u>August</u>, 1999.

4 L. Calderan

George L. Baldesare, Mayor

Attest:

Carole	\mathcal{A}	us	
Carole Keys, City	Clerk	0	

CERTIFICATIONS: Sarvice Delivery Strate via Instructions: This page must, at a minimum, be signed by the chief elected official of each of the following local governments: 1) the county: 2) the county seat city; 3) all cities having a 1990 population of over 9,000 residing within the county; and 4) 50% or more of all other cities with a 1990 population of between 500 and 9,000 residing within the county; and 4) 50% or more of all other cities with a 1990 We the indercided authorized accountion of the initiation of this page if necessary.	 The duly executed agreement(s) enclosed with this certification represent the agreement for implementation of our service delivery strategy. (O.C.G.A. 36-70-24) Our service delivery strategy promotes the delivery of local government services in the most efficient, effective, and responsive manner. (O.C.G.A. 36-70-24 (1)) Our service delivery strategy provides that water or sewer fees charged to customers located outside the geographic boundaries of a service provider are not arbitrarily higher than the fees charged to customers located within the geographic boundaries of the service provider are not arbitrarily higher than the fees charged to customers located within the geographic boundaries of the service provider. (O.C.G.A. 35-70-24 (2)) Our service delivery strategy ensures that the cost of any services the county government provides (including those jointly funded by the county and one or more municipalities) primarily for the benefit of the unincorporated area of the county and one or more municipalities) primarily for the benefit of the unincorporated area of the county and one or more municipalities) primarily for the benefit of the unincorporated area of the county and one or more municipalities). Our land use plans have been armended as necessary and are now compatible and non-conflicting. (O.C.G.A. 36-70-24 (3)) A process was established by July 1, 1998 to resolve land are now compatible and non-conflicting. (O.C.G.A. 36-70-24 (4) (A), the net with all applicable land use plans and ordinances. (O.C.G.A. 36-70-24 (3)) A process was established by July 1, 1998 to resolve land are area for and sever services by any jurisdiction is consistent with service delivery strategy for our county, (O.C.G.A. 36-70-24 (4) (C), and and are area of the annicopality the service delivery strategy for our county, (O.C.G.A. 36-70-24 (4) (C)) A process was established by July 1, 1998 to resolve land are area of the coun	Jurisolicion Signature Date Name and Trile (please print) City of Decatur August 31, 1999 William F. Floyd, Mayor
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08/20/99 11:28 3713024

DEKALB LAW

R-99-15

P.2/2

RESOLUTION

WHEREAS, O.C.G.A. § 36-70-1 et. seq. requires the adoption of local government service delivery strategy agreements by municipalities and counties; and,

WHEREAS, DeKalb County and the Cities of Atlanta, Avondale Estates, Chamblee, Clarkston, , Decatur, Doraville, Lithonia, Pine Lake and Stone Mountain have participated in the development of a service delivery strategy; and,

WHEREAS, O.C.G.A. § 36-70-25(b) provides that approval of the strategy shall be accomplished by adoption of a resolution by:

- 1) the county governing authority; and,
- 2) the governing authority of municipalities within the county which have a population of 9,000 or more; and,
- 3) the municipality which serves as the county site, if not included in paragraph (2) of this subsection; and;
- 4) no less than 50% of the remaining municipalities within the county which contains at least 500 persons within the county if not included in paragraph (2) or (3) of this subsection;

and,

WHEREAS, the local government service delivery strategy agreement must be approved by the City of Decatur; and,

WHEREAS, after October 29, 1999, no state administered financial assistance or grant, loan or permit shall be issued to any local government or authority which is not included in a department verified strategy or for any project which is inconsistent with such strategy.

NOW, THEREFORE, BE IT RESOLVED, and it is hereby resolved, by the City Commission of the City of Decatur, Georgia, and it is hereby resolved by the authority of the same that the document known as the "Local Government Service Delivery Strategy" is hereby adopted; and

BE IT FURTHER RESOLVED that any and all resolutions, or any part thereof in conflict with this resolution are hereby repealed. This resolution shall be effective immediately upon adoption.

This 16th day of August, 1999.

Mayor

Acting City Clerk

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ERTIFICATIONS: Service Delivery Shategy for the provention of the provention of the provention of the provention of the provent provent provent provents of the provent provent propulation of performing within the county; and 4) 50% or m population of between 500 and 9,000 residing within the county; and 4) 50% or m We, the undersigned authorized representatives of the junisdictions indicated, certify that:	The duly executed agreement(s) enclosed with this certification represent the agreement for implementation of our service delivery strategy. (O.C.G.A. 36-70-21) Our service delivery strategy promotes the delivery of local government services in the most efficient, effective, and responsive manner. (O.C.G.A. 36-70-24 (1)) Our service delivery strategy provides that water or sever fees charged to customers located outside the geographic boundaries of the O.C.G.A. 36-70-24 (1)) Our service delivery strategy provides that water or sever fees charged to customers located within the geographic boundaries of the service provider are not arbitrarily higher than the fees charged to customers located within the geographic boundaries of the service provider. (O.C.G.A. 36-70-24 (2)) Our service delivery strategy ensures that the cost of any services the county government provides (including those jointly funded by the county and one or more municipalities) primarily for the benefit of the unincorporated area of the county are borne by the unincorporated area residents, individuals, and property owners who receive such service. (O.C.G.A. 36-70-24 (4) (A)) Our service delivery strategy ensures that the cost of any services the county government provides (including those jointly funded unincorporated area residents, individuals, and property owners who receive such service. (O.C.G.A. 36-70-24 (4) (A)) Our service delivery strategy ensures that the provision of extraterritorial water and sever services by any jurisdiction is consistent with all applicable land under day provident of the unincorporated area to the county are borne by the unincorporated area to be annexed into a municipality within the county. (O.C.G.A. 36-70-24 (4) (A)) Our service delivery strategy ensures that the provision of extraterritorial water and sever services by any jurisdiction is consistent with all applicable land use plans and ordinances. (O.C.G.A. 36-70-24 (4) (B)) Our service delivery strategy for our county, cities and authorities has been du	Date 20/25								• .		
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A RESOLUTION TO ADOPT THE SERVICE DELIVERY STRATEGY

WHEREAS, O.C.G.A. §36-70-1 et.seq. requires the adoption of local government service delivery strategy agreements by municipalities and counties; and

WHEREAS, Dekalb County and the Cities of Atlanta, Avondale Estates, Chamblee, Doraville, Decatur, Lithonia, Clarkston, Stone Mountain, and Pine Lake have participated in the development of a service delivery strategy; and

WHEREAS, O.C.G.A. §36-70-25(b) provides that approval of the strategy shall be accomplished by adoption of a resolution:

(1) By the county governing authority; and

(2) By certain of the municipalities within the county.

WHEREAS, the local government service delivery strategy agreement should be approved by the City of Doraville; and

WHEREAS, after October 29, 1999, no state administered financial assistance or grant, loan, or permit shall be issued to any local government or authority which is not included in a department verified strategy or for any project which is inconsistent with such strategy.

NOW, THEREFORE, BE IT RESOLVED, by the City Council of the City of Doraville, and it is hereby resolved by authority of the same that the service delivery strategy on file with City Clerk is hereby adopted and the Mayor is hereby authorized to execute the strategy and any and all other documents necessary to evidence adoption of the strategy; and

BE IT FURTHER RESOLVED that any and all resolutions, or any party thereof in conflict with this resolution are hereby repealed. This resolution shall be effective immediately upon its adoption.

ADOPTED by the City Council this 18 day of August, 1999.

Gene Lively, Mayor J

ATTEST

Mary W\Grant, City Clerk

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	FRTHECATIONS: Service Delivery Betategy for a large for the formation of the following local governments: 1) the county; 2) the fast a minimum, be signed by the chief elected official of each of the following local governments: 1) the county; 2) the county seat city; 3) all cities having a 1990 population of over 9,000 residing within the county; and 4) 50% or more of all other cities with a 1990 population of the junctional copies of this page if necessary.		Jurisdiction	
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fröm 3713024 → CITY OF LITHONIA DEKALB LAW

page 4 Ø 004

A RESOLUTION TO ADOPT THE SERVICE DELIVERY STRATEGY

WHEREAS, O.C.G.A. 36-70-1 et seq requires the adoption of local government service delivery strategy agreements by municipalities and counties, and

WHEREAS, DeKalb County and the Cities of Atlanta, Avondale Estates, Chamblee, Doraville, Decatur, Lithonia, Clarkston, Stone Mountain, and Pine Lake have participated in the development of a service delivery strategy, and

WHEREAS, O.C.G.A. 36-70-25(b) provides that the approval of the strategy shall be accomplished by adoption of a resolution:

- (1) By the county governing authority,
- (2) By the governing authority of municipalities within the county which have a population of 9,000 or greater within the county;
- By the municipality which serves as the county site if not included in paragraph
 (2) of this subsection, and
- By no less than 50% of the remaining municipalities within the county which contain at least 500 persons within the county if not included in paragraph (2) or (3) of this subsection, and

WHEREAS, the local government service delivery strategy agreement must be approved by DeKalb County, and

WHEREAS, after October 29, 1999, no state administered financial assistance or grant, loan, or permit shall be issued to any local government or authority which is not included in a department verified strategy or for any project which is inconsistent with such strategy.

NOW, THEREFORE, BE IT RESOLVED, by the Mayor and Council of the City of Lithonia, and it is hereby resolved by authority of the same that the attached service delivery strategy is hereby adopted and the Mayor is hereby authorized to execute the strategy and any and all other documents necessary to evidence adoption of the strategy, and

BE IT FURTHER RESOLVED that any and all resolutions, or any part thereof in conflict with this resolution are hereby repealed. This resolution shall be effective immediately upon its adoption.

W

Marcia W. Glenn, Mayor

APPROVED AS FG City Attorney

ATTEST:

Maren A.

Karen H. Smith, City Cler

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08/20/99 11:31 3713024 DEKALB LAW

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A RESOLUTION TO ADOPT THE SERVICE DELIVERY STRATEGY

WHEREAS, O.C.G.A. § 36-70-1 et seq. Requires the adoption of local government service delivery agreements by municipalities and counties, and

WHEREAS, DeKalb County and the Cities of Atlanta, Avondale Estates, Chamblee, Doraville, Decatur, Lithonia, Clarkston, Stone Mountain and Pine Lake have participated in the development of a service delivery strategy, and

WHEREAS, O.C.G.A. § 36-70-25(b) provides that approval of the strategy shall be accomplished by adoption of a resolution:

- (1) By county governing authority;
- (2) By the governing authority of municipalities within the county which have a population of 9,000 or greater within the county,
- (3) By municipality which serves as the county site if not included in paragraph (2) of this subsection; and
- (4) By no less than 50% of the remaining municipalities within the county which contain at least 500 persons within the county, if not included in paragraph (2) or (3) of this subsection; and

WHEREAS, the local government service delivery strategy agreement must be approved by DeKalb, and

WHEREAS, after October 29, 1999, no state administered financial assistance or grant, loan, or permit shall be issued to any local government or authority which is not included in a department verified strategy or for any project which is inconsistent with such strategy.

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of DeKalb County, and it is hereby resolved by authority of the same that the attached service delivery strategy is hereby adopted and the Mayor and City Council of Pine Lake are hereby authorized to execute the strategy and any and all other documents necessary to evidence adoption of the strategy, and

BE IT FURTHER RESOLVED, that any and all resolutions, or any part thereof in conflict with this resolution are hereby repealed. This resolution shall be effective immediately upon its adoption.

APPROVED by the Mayor and City Council of Pine Lake this 16th day of August, 1999.

Alfred L. Fowler, Mayor Martha X Martha Brown, Councilmember Host 1

Vicky/McCall, Councilmember Post 2

Gouncilmember Post 3 Matt Colbum, James J. Paproski, Councilmember Post 4

and Mayor Pro Tem

ATTEST: ranley Maxis J. Cross

City Clerk



OFFICE OF MUNICIPAL CLERK

RHONDA DAUPHIN JOHNSON, CMC MUNICIPAL CLERK

July 21, 1998

Becky Craven Municipal City Clerk 5468 Peachtree Road Chamblee, Georgia 30341

Dear Ms. Craven:

As requested by the Atlanta City Council, I am forwarding a copy of the following Ordinance to you:

98-O-1159 AN ORDINANCE CREATING A PROCESS TO RESOLVE ANNEXATION DISPUTES IN DEKALB COUNTY INVOLVING LAND USE; AND FOR OTHER PURPOSES.

The above legislation was adopted by the Atlanta City Council, May 18, 1998, and approved by the Mayor on July 13, 1998.

Please call me at (404) 330-6033, if there are any questions.

Sincerely,

Rhondo Dauphin Johnson

Rhonda Dauphin Johnson, CMC Municipal Clerk

RDJ/tdc

Enclosure

55 TRINITY AVENUE, S.W. SECOND FLOOR, EAST SUITE 2700 ATLANTA, GEORGIA 30335 (404) 330-6033 FAX (404) 658-6273

CITY OF ATLANTA



OFFICE OF MUNICIPAL CLERK

STATE OF GEORGIA

COUNTY OF FULTON

CITY OF ATLANTA

I, Rhonda Dauphin Johnson, do hereby certify that I am the duly appointed Municipal Clerk of the City of Atlanta, Georgia, and as such am in charge of keeping the Minutes of the City Council of the said City of Atlanta. I further certify that the attached is a true and correct copy of Ordinance #98-O-1159:

AN ORDINANCE CREATING A PROCESS TO RESOLVE ANNEXATION DISPUTES IN DEKALB COUNTY INVOLVING LAND USE AND FOR OTHER PURPOSES

All as the same appears from the original which is of record and on file in my said office.

GIVEN under my hand and seal of office this 18th day of July, 1998.

RHONDA DAUPHIN JOHNSON, CMC MUNICIPAL CLERK

FINAL

MUNICIPAL CLERK ATLANTA, GEORGIA

98- ⑦-1159

AN ORDINANCE BY FINANCE/EXECUTIVE COMMITTEE

AN ORDINANCE CREATING A PROCESS TO RESOLVE ANNEXATION DISPUTES IN DEKALB COUNTY INVOLVING LAND USE AND FOR OTHER PURPOSES.

WHEREAS, O.C.G.A. § 36-70-24 (4)(C) requires that Dekalb County and the cities located wholly or partially within its borders establish a process to resolve land use classification disputes when the County objects to the proposed land use of an area to be annexed from the County into a city within the County, and

WHEREAS, the County has met with the Cities of Atlanta, Avondale Estates, Chamblee, Clarkston, Decatur, Doraville, Lithonia, Pine Lake and Stone Mountain to establish such a procedure in order to comply with O.C.G.A. § 36-70-(4)(C), and

WHEREAS, each jurisdiction has agreed to the land use/annexation process.

WHEREAS, it is in the best interest of the City of Atlanta to adopt this process in order to be in compliance with O.C.G.A. §36-70-24 (4)(C).

NOW THEREFORE BE IT ORDAINED BY THE COUNCIL OF THE CITY OF ATLANTA, GEORGIA AS FOLLOWS:

Section 1. That the City of Atlanta hereby establishes a process to resolve land use classification disputes wholly or partially within the borders of Dekalb County and that the process is attached hereto and made a part hereof. (See Attachment A).

Section 2. That a certified copy of this ordinance be forwarded to Dekalb County and all cities in Dekalb.

Section 3. That all ordinances and parts of ordinances in conflict herewith be and the same are hereby repealed.

A true copy, Alin Johnso Municipal Clerk, CMC

ADOPTED by the City Council APPROVED by the Mayor July 06, 1998 July 13, 1998

ATTACHMENT A

LAND USE CLASSIFICATION DISPUTE PROCESS FOR DEKALB COUNTY

Prior to initiating any formal annexation activities, that would involved land use or zoning classification changes, the City will notify the County government of the proposed annexation and provide information on location of property, size of area, and proposed land use of zoning classification(s) of the property upon annexation The City will also provide the County with a list of all contiguous property owners with the notification. The notice shall be sent certified mail to the Chief Executive Officer return receipt requested.

The City will also provide written notice to all contiguous property owners, including those located in the unincorporated County area. Said notice to property owners shall include a description of the property to be annexed, a description of the proposed land use designation and/or zoning changes, and a schedule of all City public hearings. Said property owners of such contiguous property shall have the same opportunity to participate in the City's public hearing(s) as residents of the City are given pursuant to the City Code, policies and/or procedures.

Within thirty (30) working days following receipt of the above information, the County shall forward written comments to the designee of the City about the land use and/or zoning changes in the proposed annexation. The County's comments should describe the County's objections to the City's proposed land use classification, provide supporting information, and list any possible stipulations or conditions that would alleviate the County's objections. Bona fide land use classification objections to the proposed zoning must be raised by the County at this time. As used herein, the term "bona fide land use classification objections" shall have the definition set for in O.C.G.A § 36-36-11.

If the County has no objection to the City's proposed land use or zoning classification, the City may validate a petition for annexation or adopt a resolution of intent to annex. If the County fails to respond to the City's notice within the deadline, the City is free to proceed with the annexation and the County loses its right to stop the annexation due to bona fide land use classification objections.

If the County notifies the City that it has a bona fide land use classification objection(s), the City will respond to the County Planning Director in writing within thirty (30) working days of receiving the County's objection(s) by either: (a) agreeing to implement the County's stipulations and conditions and thereby resolving the County's objection(s); (b) agreeing with the County and stopping action on the proposed annexation; or (c) initiating a thirty (30) working day negotiation period to discuss possible compromises.

If the City proceeds with the annexation a vote by the County governing authority, as provided for by O.C.G.A. § 36-36-70, on whether or not to authorize the annexation shall constitute the final resolution of the annexation, provided however that the County governing authority may not refuse to authorize an annexation due to a bona fide land use classification objection if the City and County reached an agreement as described in step 4. All bona fide land use classification objections must be raised by the County during step 2.

Nothing in this process shall preclude the City or the County from pursuing any and all legal remedies provided by Georgia law.

If any step in this process is found to be void or invalid, such invalidity shall not affect the remaining steps in this process.

Any of the parties to this process may call for a review and possible revision of this process. In no case shall the same party call for review of the process more than once in a twelve month period.

RESOLUTION

STATE OF GEORGIA CITY OF AVONDALE ESTATES

1.

A RESOLUTION TO PROVIDE THAT THE CITY OF AVONDALE ESTATES ESTABLISH A PROCESS TO RESOLVE LAND USE CLASSIFICATIONS WHEN DEKALB COUNTY OBJECTS TO THE PROPOSED LAND USE OF AN AREA TO BE ANNEXED FROM DEKALB COUNTY INTO THE MUNICIPAL CORPORATE LIMITS OF AVONDALE ESTATES.

WHEREAS, O.C.G.A. 36-70-24 (4)(C) requires that the City of Avondale Estates and DeKalb County establish a process by July 1, 1998 to resolve land use classification disputes when the County objects to the proposed land use of an area to be annexed from DeKalb County into the City of Avondale Estates;

WHEREAS, the City of Avondale Estates has met with DeKalb County to establish such a procedure in order to comply with O.C.G.A. 36-70-24 (4)(C);

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF MAYOR AND COMMISSION OF THE CITY OF AVONDALE ESTATES and it is hereby resolved by authority of the same, that, in compliance with O.C.G.A. 36-70-24(4)(C) the City has agreed to follow the following procedure when DeKalb County objects to the proposed land use classification of property to be annexed into from DeKalb County into the City of Avondale Estates.

Prior to initiating any formal annexation activities, that would involve land use or zoning classification changes, the City will notify the County government of the proposed annexation and provide information on location of property, size of area, and proposed land use or zoning classification(s) of the property upon annexation.² The City will also provide the County with a list of all contiguous property owners with the notification. The notice shall be sent certified mail to the Chief Executive Officer return receipt requested.

The City will also provide written notice to all contiguous property owners, including those located in the unincorporated County area. Said notice to property owners shall include a description of property to be annexed; a description of the proposed land use designation and/or zoning changes; and a schedule of all City public hearings. Said property owners of such contiguous property shall have the same opportunity to participate in the City's public hearing(s) as residents of the City are given pursuant to the City Code, policies and/or procedures.

 2 City should not validate a petition for annexation or adopt a resolution of intent to annex prior to completion of this annexation dispute resolution process.

Within thirty (30) working days following receipt of the above information, the County shall forward written comments to the designee of the City about the land use and/or zoning changes in the proposed annexation. The County's comments should describe the County's objections to the City's proposed land use classification, provide supporting information, and list any possible stipulations or conditions that would alleviate the County's objections. Bona fide land use classification objections to the proposed zoning must be raised by the County at this time. As used herein, the term "bona fide land use classification objections" shall have the definition set forth in O.C.G.A. 36-36-11.

If the County has no objection to the City's proposed land use or zoning classification, the City may validate a petition for annexation or adopt a resolution of intent to annex. If the County fails to respond to the City's notice within the deadline, the City is free to proceed with the annexation and the County loses its right to stop the annexation due to bona fide land use classification objections.

If the County notifies the City that it has a bona fide land use classification objection(s), the City will respond to the County Planning Director in writing within thirty (30) working days of receiving the County's objection(s) by either: (a) agreeing to implement the County's stipulations and conditions and thereby resolving the County's objection(s); (b) agreeing with County and stopping action on the proposed annexation; or (c) initiating a thirty (30) day negotiation period to discuss possible compromises.

If the City proceeds with the annexation a vote by the County governing authority, as provided for by O.C.G.A. 36-36-70, on whether or not to authorize the annexation shall constitute the final resolution of the annexation, provided however that the County governing authority may not refuse to authorize an annexation due to a bona fide land use classification objection if the City and County reached an agreement as described in step 4. All bona fide land use classification objections must be raised by the County during step 2.

Nothing in this process shall preclude the City or the County from pursuing any and all legal remedies provided by Georgia law.

If any step in this process is found to be void or invalid, such invalidity shall not affect the remaining steps in this process.

This annexation dispute resolution process shall become effective July 1, 1998 and shall be reviewed and readopted as part of the Service Delivery Strategy on or before June 30, 1999.

9. Any of the parties to this process may call for a review and possible revision of this process. In no case shall the same party call for review of the process more than once in a twelve month period.

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BE IT FURTHER RESOLVED by the authority aforesaid and it is hereby resolved by the authority of the same, that any and all resolutions in conflict with this resolution be an the same are hereby repealed.

ADOPTED by the City of Avondale Estates this 22^{nd} day of June, 1998

John W. Lawson, Mayor

Bruge Van Buren, Mayor Pro Tem Phoebe Stephens, Commissioner mil

1. 1. 1811

Carol Reimer, Commissioner

Jimmie Moomaw, Commissioner

APPROVED AS TO FORM. ephNardone, Jr. Α. City Attorney City of Avondale Estates

RESOLUTION

STATE OF GEORGIA CITY OF CHAMBLEE

1:

A RESOLUTION TO PROVIDE THAT THE CITY OF CHAMBLEE ESTABLISH A PROCESS TO RESOLVE LAND USE CLASSIFICATIONS WHEN DEKALB COUNTY OBJECTS TO THE PROPOSED LAND USE OF AN AREA TO BE ANNEXED FROM DEKALB COUNTY INTO THE CITY OF CHAMBLEE.

WHEREAS, O.C.G.A. § 36-70-24 (4)(C) requires that the City of Chamblee and DeKalb County establish a process by July 1, 1998 to resolve land use classification disputes when the County objects to the proposed land use of an area to be annexed from DeKalb County into the City of Chamblee.

WHEREAS, the City of Chamblee has met with DeKalb County to establish such a procedure in order to comply with O.C.G.A. § 36-70-24-(4)(C);

NOW, THEREFORE, BE IT HEREBY RESOLVED BY THE CITY COUNCIL OF THE CITY OF CHAMBLEE and it is hereby resolved by authority of the same, that, in compliance with O.C.G.A. § 36-70-24(4)(C) the City has agreed to follow the following procedure when DeKalb County objects to the proposed land use classification of property to be annexed from DeKalb County into the City of Chamblee:

Prior to initiating any formal annexation activities <u>that would involve land use or zoning</u> <u>classification changes</u>, the City will notify the County government of the proposed annexation and provide information on location of property, size of area, and proposed land use or zoning classification(s) of the property upon annexation.² The City will also provide the County with a list of all contiguous property owners with the notification. The notice shall be sent certified mail to the Chief Executive Officer return receipt requested.

The City will also provide written notice to all contiguous property owners, including those located in the unincorporated County area. Said notice to property owners shall include a description of the property to be annexed; a description of the proposed land use designation and/or zoning changes; and a schedule of all City public hearings. Said property owners of such contiguous property shall have the same opportunity to participate in the City's public

²City should not validate a petition for annexation or adopt a resolution of intent to annex prior to completion of this annexation dispute resolution process.
hearing(s) as residents of the City are given pursuant to the City Code, policies and/or procedures.

- 2. Within thirty (30) working days following receipt of the above information, the County shall forward written comments to the designee of the City about the land use and/or zoning changes in the proposed annexation. The County's comments should describe the County's objections to the City's proposed land use classification, provide supporting information, and list any possible stipulations or conditions that would alleviate the County's objections. Bona fide land use classification objections to the proposed zoning must be raised by the County at this time. As used herein, the term "bona fide land use classification objections" shall have the definition set forth in O.C.G.A § 36-36-11.
- 3. If the County has no objection to the City's proposed land use or zoning classification, the City may validate a petition for annexation or adopt a resolution of intent to annex. If the County fails to respond to the City's notice within the deadline, the City is free to proceed with the annexation and the County loses its right to stop the annexation due to bona fide land use classification objections.
- 4. If the County notifies the City that it has a bona fide land use classification objections(s), the City will respond to the County Planning Director in writing within thirty (30) working days of receiving the County's objection(s) by either: (a) agreeing to implement the County's stipulations and conditions and thereby resolving the County's objection(s); (b) agreeing with the County and stopping action on the proposed annexation; or (c) initiating a thirty (30) working day negotiation period to discuss possible compromises.
- 5. If the City proceeds with the annexation, a vote by the County governing authority, as provided for by O.C.G.A § 36-36-70 on whether or not to authorize the annexation shall constitute the final resolution of the annexation, provided however that the County governing authority may not refuse to authorize an annexation due to a bona fide land use classification objection if the City and County reached an agreement as described in step 4. All bona fide land use classification objections must be raised by the County during step 2.
- 6. Nothing in this process shall preclude the City or the County from pursuing any and all legal remedies provided by Georgia law.
- 7. If any step in this process is found to be void or invalid, such invalidity shall not affect the remaining steps in this process.
- 8, This annexation dispute resolution process shall become effective on July 1, 1998 and shall be reviewed and readopted as part of the Service Delivery Strategy on or before June 30, 1999.
- 9. Any of the parties to this process may call for a review and possible revision of this process. In no case shall the same party call for review of the process more than once in a twelve month period.

BE IT FURTHER RESOLVED by the authority aforesaid and it is hereby resolved by the authority of the same, that any and all resolutions in conflict with this resolution be repealed and the same are hereby repealed.

ADOPTED by the City Council this 16th day of June, 1998.

Mary Ward Goldenburg - Mayor

Approved As To Form:

Attest:

Ioe Rowl àrttorhey

Traves

Becky Craver City Clerk

RESOLUTION

STATE OF GEORGIA

CITY OF CLARKSTON

A RESOLUTION TO PROVIDE THAT THE CITY OF CLARKSTON ESTABLISH A PROCESS TO RESOLVE LAND USE CLASSIFICATIONS WHEN DEKALB COUNTY OBJECTS TO THE PROPOSED LAND USE OF AN AREA TO BE ANNEXED FROM DEKALB COUNTY INTO CLARKSTON

WHEREAS, O.C.G.A. § 36-70-24 (4)(C) requires that the City of Clarkston and DeKalb County establish a process by July 1, 1998 to resolve land use classification disputes when the County objects to the proposed land use of an area to be annexed from DeKalb County into the City of Clarkston;

WHEREAS, the City of Clarkston has met with DeKalb County to establish such a procedure in order to comply with O.C.G.A. § 36-70-24(4)(C);

NOW, THEREFORE, BE IT HEREBY RESOLVED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF CLARKSTON, and it is hereby resolved by authority of the same, that, in compliance with O.C.G.A. § 36-70-24(4)(C) the City has agreed to follow the following procedure when DeKalb County objects to the proposed land use classification of property to be annexed from DeKalb County into the City of Clarkston:

1. Prior to initiating any formal annexation activities, that would involve land use or zoning classification changes, the City will notify the County government of the proposed annexation and provide information on location of property, size of area, and proposed land use or zoning classification(s) of the property upon annexation. The City will also provide the County with a list of all contiguous property owners with the notification. The notice shall be sent certified mail to the Chief Executive Officer return receipt requested. The City should not validate a petition for annexation or adopt a resolution of intent to annex prior to completion of this annexation dispute resolution process.

The City will also provide written notice to all contiguous property owners, including those located in the unincorporated County area. Said notice to property owners shall include a description of the property to be annexed; a description of the proposed land use designation and/or zoning changes; and a schedule of all City public hearings. Said property owners of such contiguous property shall have the same opportunity to participate in the City's public hearing(s) as residents of the City are given pursuant to the City Code, policies and/or procedures.

2. Within thirty (30) working days following receipt of the above information, the County shall forward written comments to the designee of the City about the land use and/or zoning changes in the proposed annexation. The County's comments should describe the County's objections to the City's proposed land use classification, provide supporting information and list any possible stipulations or conditions that would alleviate the County's objections. Bona fide land use classification objections to the proposed zoning must be raised by the County at this tirne. As used herein, the term "bona fide land use classification objections" shall have the definition set forth in O.C.G.A § 36-36-11.

3. If the County has no objection to the City's proposed land use or zoning classification, the City may validate a petition for annexation or adopt a resolution of intent to annex. If the County fails to respond to the City's notice within the deadline, the City is free to proceed with the annexation and the County loses its right to stop the annexation due to bona fide land use classification objections.

4. If the County notifies the City that it has a bona fide land use classification objections(s), the City will respond to the County Planning Director in writing within thirty (30) working days of receiving the County's objection(s) by either: (a) agreeing to implement the County's stipulations and conditions and thereby resolving the County's objection(s); (b) agreeing with the County and stopping action on the proposed annexation; or (c) initiating a thirty (30) working day negotiation period to discuss possible compromises.

5. If the City proceeds with the annexation a vote by the County governing authority, as provided for by O.C.G.A § 36-36-70, on whether or not to authorize the annexation shall constitute the final resolution of the annexation provided however that the County governing authority may not refuse to authorize an annexation due to a bona fide land use classification objection if the City and County reached an agreement as described in step 4. All bona fide land use classification objections must be raised by the County during step 2.

6. Nothing in this process shall preclude the City or the County from pursuing any and all legal remedies provided by Georgia law.

7. If any step in this process is found to be void or invalid, such invalidity shall not affect the remaining steps in this process.

8. This annexation dispute resolution process shall become effective on July 1, 1998 and shall be reviewed and readopted as part of the Service Delivery Strategy on or before June 30, 1999.

9. Any of the parties to this process may call for a review and possible revision of this process. In no case shall the same party call for review of the process more than once in a twelve month period.

BE IT FURTHER RESOLVED by the authority aforesaid and it is hereby resolved by the authority of the same that any and all resolutions in conflict with this resolution be and the same are hereby repealed.

ADOPTED by the Mayor and City Council of Clarkston this $\underline{\mathscr{Z}}$ day of June, 1998.

George Baldesare, Mayor

Attest:

<u>Carole</u> <u>A</u> <u>Yeys</u> Carole Keys, City Clerk

Approved as to form:

F. Jackson Rhodes, City Attorney

RESOLUTION R-98-13

STATE OF GEORGIA CITY OF DECATUR

1.

A RESOLUTION TO ESTABLISH A PROCESS TO RESOLVE LAND USE CLASSIFICATIONS WHEN DEKALB COUNTY OBJECTS TO THE PROPOSED LAND USE OF AN AREA TO BE ANNEXED FROM DEKALB COUNTY INTO THE CITY OF DECATUR.

WHEREAS, O.C.G.A.§ 36-70-24 (4)(C) requires that the City of Decatur and DeKalb County establish a process by July 1, 1998 to resolve land use classification disputes when the County objects to the proposed land use of an area to be annexed from DeKalb County into the City of Decatur; and,

WHEREAS, the City of Decatur has met with DeKalb County to establish such a procedure in order to comply with O.C.G.A.§ 36-70-24(4)(C).

NOW, THEREFORE, BE IT HEREBY RESOLVED BY The City Commission of the City of Decatur and it is hereby resolved by authority of the same, that in compliance with O.C.G.A.§ 36-70-24(4)(C) the city has agreed to follow the following procedure when DeKalb County objects to the proposed land use classification of property to be annexed from DeKalb County into the City of Decatur.

> Prior to initating any formal annexation activites that would involve land use or zoning classification changes, the City will notify the County government of the proposed annexation and provide information on location of property, size of area, and proposed land use or zoning classification(s) of the property upon annexation.¹ The City will also provide the County with a list of all contiguous property owners with the notification. The notice shall be sent certified mail to the Chief Executive Officer return receipt requested.

The City will also provide written notice to all contiguous property owners, including those located in the unincorporated County area. Said notice to property owners shall include a description of the property to be annexed; a description of the proposed land use designation and/or zoning changes; and a

schedule of all City public hearings. Said property owners of such contiguous property shall have the same opportunity to participate in the City's public hearing(s) as residents of the City are given pursuant to the City code, policies and/or procedures. Within thirty (30) working days following receipt of the above information, the County shall forward written comments to the designee of the City about the land use and/or zoning changes in the proposed annexation. The County's comments should describe the County's objections to the City's proposed land use classification, provide supporting information, and list any possible stipulations or conditions that would alleviate the County's objections. Bona fide land use classification objections to the proposed zoning must be raised by the County at this time. As used herein, the term "bona fide land use classification objections shall have the definition set forth in O.C.G.A. § 36-36-11.

If the County has no objection to the City's proposed land use or zoning classification, the City may validate a petition for annexation or adopt a resolution of intent to annex. If the County fails to respond to the City's notice within the deadline, the City is free to proceed with the annexation and the County loses its right to stop the annexation due to bona fide land use classification objections.

If the County notifies the City that it has a bona fide land use classification objections(s), the City will respond to the County Planning Director in writing within thirty (30) working days of receiving the County's objection(s) by either: (a) agreeing to implement the County's stipulations and conditions and thereby resolving the County's objection(s); (b) agreeing with the County and stopping action on the proposed annexation; or (c) initiating a thirty (30) working days negotiation period to discuss possible compromises.

If the City proceeds with the annexation a vote by the County governing authority, as provided for by O.C.G.A §. 36-36-70, on whether or not to authorize the annexation shall constitute the final resolution of the annexation, provided however that the County governing authority may not refuse to authorize an annexation due to a bona fide land use classification objection if the City and County reached an agreement as described in step 4. All bona fide land use classification objections must be raised by the county during step 2.

6. Nothing in this process shall preclude the City or the County from pursuing any and all legal remedies provided by Georgia law.

7. If any step in this process is found to be voided or invalid, such invalidity shall not affect the remaining step in this process.

8. This annexation dispute resolution process shall become effective on July 1, 1998 and shall be reviewed and readopted as part of the Service Delivery Strategy on or before June 30, 1999.

9. Any of the parties to this process may call for a review and possible revision of this process. In no case shall the same party call for review of the process more than once in a twelve month period.

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BE IT FURTHER RESOLVED by the authority aforesaid and it is hereby resolved by the authority of the same, that any and all resolutions in conflict with this resolution be and the same are hereby repealed.

ADOPTED by the Decatur City Commission this 15th day of June, 1998.

APPROVED TO FORM:

MS

Thomas O. Davis City Attorney

-lo lelan,

Elizabeth Wilson Mayor

1. City should not validate a petition for annexation or adopt a resolution of intent to annex prior to completion of this annexation dispute resolution process.

RESOLUTION

STATE OF GEORGIA CITY OF DORAVILLE

A RESOLUTION TO PROVIDE THAT THE CITY OF DORAVILLE ESTABLISH A PROCESS TO RESOLVE LAND USE CLASSIFICATIONS WHEN DEKALB COUNTY OBJECTS TO THE PROPOSED LAND USE OF AN AREA TO BE ANNEXED FROM DEKALB COUNTY INTO THE CITY OF DORAVILLE.

WHEREAS, O.C.G.A. § 36-70-24 (4)(C) requires that the City of Doraville and DeKalb County establish a process by July 1, 1998 to resolve land use classification disputes when the County objects to the proposed land use of an area to be annexed from DeKalb County into the City of Doraville.

WHEREAS, the City of Doraville has met with DeKalb County to establish such a procedure in order to comply with O.C.G.A. § 36-70-24 (4)(C);

NOW, THEREFORE, BE IT HEREBY RESOLVED BY THE CITY COUNCIL OF THE CITY OF DORAVILLE and it is hereby resolved by authority of the same, that, in compliance with O.C.G.A. § 36-70-24(4)(C) the City has agreed to follow the following procedure when DeKalb County objects to the proposed land use classification of property to be annexed from DeKalb County into the City of Doraville:

 Prior to initiating any formal annexation activities <u>that would involve land use</u> or <u>zoning classification changes</u>, the City will notify the County government of the proposed annexation and provide information on location of property, size of area, and proposed land use or zoning classification(s) of the property upon annexation.² The City will also provide the County with a list of all contiguous property owners with the notification. The notice shall be sent certified mail to the Chief Executive Officer return receipt requested.

The City will also provide written notice to all contiguous property owners, including those located in the unincorporated County area. Said notice to property owners shall include a description of the property to be annexed; a description of the proposed land use designation and/or zoning changes; and a schedule of all City public hearings. Said property owners of such contiguous property shall have the same opportunity to participate in the City's public hearing(s) as residents of the City are given pursuant to the City Code, policies and/or procedures.

²City should not validate a petition for annexation or adopt a resolution of intent to annex prior to completion of this annexation dispute resolution process.

- 2. Within thirty (30) working days following receipt of the above information, the County shall forward written comments to the designee of the City about the land use and/or zoning changes in the proposed annexation. The County's comments should describe the County's objections to the City's proposed land use classification, provide supporting information, and list any possible stipulations or condition that would alleviate the County's objections. Bona fide land use classification objections to the proposed zoning must be raised by the County at this time. As used therein, the term "bona fide land use classification objections" shall have the definition set forth in O.C.G.A. § 36-36-11.
- 3. If the County has no objection to the City's proposed land use or zoning classification, the city may validate a petition for annexation or adopt a resolution of intent to annex. If the County fails to respond to the City's notice within the deadline, the City is free to proceed with the annexation and the County loses it right to stop the annexation due to bona fide land use classification objections.
- 4. If the County notifies the City that it has a bona fide land use classification objection(s), the City will respond to the County Planning Director in writing within thirty (30) working days of receiving the County's objection(s) by either: (a) agreeing to implement the County's stipulations and conditions and thereby resolving the County's objection(s); (b) agreeing with the County and stopping action on the proposed annexation; or (c) initiating a thirty (30) work day negotiation period to discuss possible compromises.
- 5. If the City proceeds with the annexation, a vote by the County governing authority, as provided for by O.C.G.A. § 36-36-70 on whether or not to authorize the annexation shall constitute the final resolution of the annexation, provided however that the County governing authority may not refuse to authorize an annexation due to a bona fide land use classification objection if the City and County reached an agreement as described in step 4. All bona fide land use classification objections must be raised by the County during step 2.
- 6. Nothing in this process shall preclude the City or the County from pursuing any and all legal remedies by Georgia law.
- 7. If any step in this process is found to be void or invalid, such invalidity shall not affect the remaining steps in this process.
- 8. This annexation dispute resolution process shall become effective on July 1, 1998 and shall be reviewed and readopted as part of the Service Delivery Strategy on or before June 30, 1999.
- 9. Any of the parties to this process may call for a review and possible revision of this process. In no case shall the same party call for review of the process more than once in a twelve month period.

DORAVILLE CITY HALL

BE IT FURTHER RESOLVED by the authority aforesaid and it is hereby resolved by the authority of the same, that any and all resolutions in conflict with this resolution be repealed and the same are hereby repealed.

ADOPTED by the City Council on this 1 st June, 1998

Gene Lively - Mayof

Approved As To Form:

Attest:

Edward Carter - City Attorney

Mary^IW. Grant - City Clerk

RESOLUTION

STATE OF GEORGIA CITY OF Lithonia

1.

A RESOLUTION TO PROVIDE THAT THE CITY OF <u>Lithonia</u> ESTABLISH A PROCESS TO RESOLVE LAND USE CLASSIFICATIONS WHEN DEKALB COUNTY OBJECTS TO THE PROPOSED LAND USE OF AN AREA TO BE ANNEXED FROM DEKALB COUNTY INTO <u>the City of Lithonia</u>.

WHEREAS, O.C.G.A. § 36-70-24 (4)(C) requires that the City of <u>Lithonia</u> and DeKalb County establish a process by July 1, 1998 to resolve land use classification disputes when the County objects to the proposed land use of an area to be annexed from DeKalb County into the City of <u>Lithonia</u>

WHEREAS, the City of <u>Lithonia</u> has met with DeKalb County to establish such a procedure in order to comply with O.C.G.A. § 36-70-(4)(C);

NOW, THEREFORE, BE IT HEREBY RESOLVED BY THE <u>City Council</u> OF THE CITY OF <u>Lithonia</u> and it is hereby resolved by authority of the same, that, in compliance with O.C.G.A. § 36-70-24(4)(C) the City has agreed to follow the following procedure when DeKalb County objects to the proposed land use classification of property to be annexed into from DeKalb County into the City of Lithonia

Prior to initiating any formal annexation activities, that would involve land use or zoning classification changes, the City will notify the County government of the proposed annexation and provide information on location of property, size of area, and proposed land use or zoning classification(s) of the property upon annexation.² The City will also provide the County with a list of all contiguous property owners with the notification. The notice shall be sent certified mail to the Chief Executive Officer return receipt requested.

The City will also provide written notice to all contiguous property owners, including those located in the unincorporated County area. Said notice to property owners shall include a description of the property to be annexed; a description of the proposed land use designation and/or zoning changes; and a schedule of all City public hearings. Said property owners of such contiguous property shall have the same opportunity to

²City should not validate a petition for annexation or adopt a resolution of intent to annex prior to completion of this annexation dispute resolution process.

participate in the City's public hearing(s) as residents of the City are given pursuant to the City Code, policies and/or procedures.

Within thirty (30) working days following receipt of the above information, the County 2. shall forward written comments to the designee of the City about the land use and/or zoning changes in the proposed annexation. The County's comments should describe the County's objections to the City's proposed land use classification, provide supporting information, and list any possible stipulations or conditions that would alleviate the County's objections. Bona fide land use classification objections to the proposed zoning must be raised by the County at this time. As used herein, the term "bona fide land use classification objections" shall have the definition set forth in O.C.G.A § 36-36-11.

If the County has no objection to the City's proposed land use or zoning classification, the 3. City may validate a petition for annexation or adopt a resolution of intent to annex. If the County fails to respond to the City's notice within the deadline, the City is free to proceed with the annexation and the County loses its right to stop the annexation due to bona fide land use classification objections.

If the County notifies the City that it has a bona fide land use classification objections(s), the City will respond to the County Planning Director in writing within thirty (30) working days of receiving the County's objection(s) by either: (a) agreeing to implement the County's stipulations and conditions and thereby resolving the County's objection(s), (b) agreeing with the County and stopping action on the proposed annexation, or (c) initiating a thirty (30) working day negotiation period to discuss possible compromises.

If the City proceeds with the annexation a vote by the County governing authority, as provided for by O.C.G.A § 36-36-70, on whether or not to authorize the annexation shall constitute the final resolution of the annexation, provided however that the County governing authority may not refuse to authorize an annexation due to a bona fide land use classification objection if the City and County reached an agreement as described in step 4. All bona fide land use classification objections must be raised by the County during step 2.

Nothing in this process shall preclude the City or the County from pursuing any and all legal remedies provided by Georgia law.

If any step in this process is found to be void or invalid, such invalidity shall not affect the 7. remaining steps in this process.

This annexation dispute resolution process shall become effective on July 1, 1998 and shall be reviewed and readopted as part of the Service Delivery Strategy on or before June 30, 1999.

Any of the parties to this process may call for a review and possible revision of this process. In no case shall the same party call for review of the process more than once in a twelve month period.

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BE IT FURTHER RESOLVED by the authority aforesaid and it is hereby resolved by the authority of the same, that any and all resolutions in conflict with this resolution be and the same are hereby repealed.

ADOPTED by the <u>City of Lithonia</u> this <u>lst</u> day of <u>July</u>, 1998.

12. Marcia W. Glenn

Mayor

Approved/ Tun Miimat

Stan Kreimer City Attorney

Attest:

Horace W. Marcell City Clerk

A RESOLUTION

Resolution No. R 00698

STATE OF GEORGIA CITY OF PINE LAKE

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A RESOLUTION TO PROVIDE THAT THE CITY OF PINE LAKE ESTABLISH A PROCESS TO RESOLVE LAND USE CLASSIFICATIONS WHEN DEKALB COUNTY OBJECTS TO THE PROPOSED LAND USE OF AN AREA TO BE ANNEXED FROM DEKALB COUNTY INTO THE CITY OF PINE LAKE.

WHEREAS, O.C.G.A. § 36-70-24 (4)(C) requires that the City of Pine Lake and DeKalb County establish a process by July 1, 1998 to resolve land use classification disputes when the County objects to the proposed land use of an area to be annexed from DeKalb County into the City of Pine Lake.

WHEREAS, the City of Pine Lake has met with DeKalb County to establish such a procedure in order to comply with O.C.G.A § 36-70-24 (4)(C):

NOW, THERFORE, BE IT HEREBY RESOLVED BY THE MAYOR AND COUNCIL OF THE CITY OF PINE LAKE and it is hereby resolved by authority of the same, that, in compliance with O.C.G.A. § 36-70-24 (4)(C) the City has agreed to follow the following procedure when DeKalb County objects to the proposed land use classification of property to be annexed into from DeKalb County into the City of Pine Lake:

 Prior to initiating any formal annexation activities, that would involve land use or zoning classification changes, The City will notify the County government of the proposed annexation and provide information on location of property, size of area, and proposed land use or zoning classification(s) of the property upon annexation. The City will also provide the County with a list of all contiguous property owners with the notification. The notice shall be sent certified mail to the Chief Executive Officer return receipt requested.

The City will also provide written notice to all contiguous property owners, including those located in the unincorporated County area. Said notice to property owners shall include a description of the property to be annexed: a description of the proposal land use designation and/or zoning changes: and a schedule of all City public hearings. Said property owners of such contiguous property shall have the same opportunity to participate in the City's public hearing(s) as residents of the City are given pursuant to the City Code, policies and/or procedures. 2. Within thirty (30) working days following receipt of the above information, the County shall forward written comments to the designee of the City about the land use and/or zoning changes in the proposed annexation. The County's comments should describe the County's objections to the City's proposed land use classification, provide supporting information, and list any possible stipulations or conditions that would alleviate the County's objections. Bona fide land use classification objections to the proposed zoning must be raised by the County at this time. As used herein, the term "bona fide land use classification objections" shall have the definition set forth in O.C.G.A. § 36-36-11.

3. If the County has no objection to the City's proposed land use or zoning classification, the City may validate a petition for annexation or adopt a resolution of intent to annex. If the County fails to respond to the City's notice within the deadline, the City is free to proceed with the annexation and the County loses its right to stop the annexation due to the bona fide land use classification objections.

4. If the County notifies the City that it has a bona fide land use classification objection(s), the City will respond to the County Planning Director in writing within thirty (30) working days of receiving the County's objection(s) by either : (a) agreeing to implement the County's stipulations and conditions and thereby resolving the County's objection(s); (b) agreeing with the County and stopping action on the proposed annexation; or (c) initiating a thirty (30) working day negotiation period to discuss possible compromises.

5. If the City proceeds with the annexation a vote by the County governing authority, as provided for by O.C.G.A. § 36-36-70, on whether or not to authorize the annexation shall constitute the final resolution of the annexation, provided however that the County governing authority may not refuse to authorize an annexation due to a bona fide land use classification objection if the City and County reached an agreement as described in step 4. All bona fide land use classification objections must be raised by the County during step 2.

- Nothing in this process shall preclude the City or the County from pursuing any and all legal remedies
 provided by Georgia law.
- 26 7. If any step in this process is found to be void or invalid, such invalidity shall not affect the remaining
 27. steps in this process.

This annexation dispute resolution process shall become effective July 1, 1998 and shall be reviewed
 and readopted as part of the Service Delivery Strategy on or before June 30, 1999.

Any of the parties to this process may call for a review and possible revision of this process. In no
 case shall the same party call for review of the process more than once in a twelve month period.

BE IT FURTHER RESOLVED by the authority aforesaid and it is hereby resolved by the authority of the same, that any and all resolutions in conflict with this resolution be and the same are hereby repealed.

ADOPTED by the Mayor and Council of the City of Pine Lake, this 29th day of June, 1998.

Mayor Mi & Stuckey

Touler

Tem Al Fowler Mayor

Attest: I hereby certify that the foregoing is a true and accurate copy of Resolution No. R00698 of the City of Pine Lake, Georgia adopted June 29, 1998.

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City Clerk Mayis J. Crossley SEAL

Councilmember Linda Unger, Post 1 Councilmember Althea Sumpter, Post 2 Councilmember Matt Colourn, Post 3 Councilmember James Paproski, Post 4

RESOLUTION NO. 98-10

STATE OF GEORGIA

CITY OF STONE MOUNTAIN

A RESOLUTION TO PROVIDE THAT THE CITY OF STONE MOUNTAIN ESTABLISH A PROCESS TO RESOLVE LAND USE CLASSIFICATIONS WHEN DEKALB COUNTY OBJECTS TO THE PROPOSED LAND USE OF AN AREA TO BE ANNEXED FROM DEKALB COUNTY INTO STONE MOUNTAIN.

WHEREAS, OCGA § 36-70-24 (4)(C) requires that the City of Stone Mountain and DeKalb County establish a process by July 1, 1998 to resolve land use classification disputes when the County objects to the proposed land use of an area to be annexed from DeKalb County into the City of Stone Mountain;

WHEREAS, the City of Stone Mountain has met with DeKalb County to establish such a procedure in order to comply with OCGA § 36-70-24 (4)(C);

NOW THEREFORE, BE IT HEREBY RESOLVED BY THE MAYOR AND COUNCIL OF THE CITY OF STONE MOUNTAIN and it is hereby resolved by authority of the same, that, in compliance with OCGA § 36-70-24 (4)(C) the City has agreed to follow the following procedure when DeKalb County objects to the proposed land use classification of property to be annexed from DeKalb County into the City of Stone Mountain.

Prior to initiating any formal annexation activities that would involve land use or zoning classification changes, the City will notify the County government of the proposed annexation and provide information on location of property, size of area, and proposed land use or zoning classification(s) of the property upon annexation. The City will also provide the County with a list of all contiguous property owners with the notification. The notice shall be sent certified mail to the Chief Executive Officer return receipt requested.

The City will also provide written notice to all contiguous property owners, including those located in the unincorporated County area. Said notice to property owners shall include a description of the property to be annexed; a description of the proposed land use designation and/or zoning changes; and a schedule of all City public hearings. Said property owners of such contiguous property shall have the same opportunity to participate in the City's public hearing(s) as residents of the City are given pursuant to the City Code, policies and/or procedures.

Within thirty (30) working days following receipt of the above information, the County shall

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forward written comments to the designee of the City about the land use and/or zoning changes in the proposed annexation. The County's comments should describe the County's objections to the City's proposed land use classification, provide supporting information, and list any possible stipulations or conditions that would alleviate the County's objections. Bona fide land use classification objections to the proposed zoning must be raised by the County at this time. As used herein, the term "bona fide land use classification objections" shall have the definition set forth in O.C.G.A. 36-36-11.

- 3. If the County has no objection to the City's proposed land use or zoning classification, the City may validate a petition for annexation or adopt a resolution of intent to annex. If the County fails to respond to the City's notice within the deadline, the City is free to proceed with the annexation and the County loses its right to stop the annexation due to bona fide land use classification objections.
- 4. If the County notifies the City that it has a bona fide land use classification objection(s), the City will respond to the County Planning Director in writing within thirty (30) working days of receiving the County's objection(s) by either; (a) agreeing to implement the County's stipulations and conditions and thereby resolving the County's objection(s); (b) agreeing with the County and stopping action on the proposed annexation; or (c) initiating a thirty (30) working day negotiation period to discuss possible compromises.
- 5. If the City proceeds with the annexation, a vote by the County governing authority as provided for by OCGA § 36-36-70 on whether or not to authorize the annexation shall constitute the final resolution of the annexation; provided, however, that the County governing authority may not refuse to authorize an annexation due to a bona fide land use classification objection if the City and County reached an agreement as described in step 4 above. All bona fide land use classification objections must be raised by the County during step 2 above.
- 6. Nothing in this process shall preclude the City or the County from pursuing any and all legal remedies provided by Georgia law.
- 7. If any step in this process is found to be void or invalid, such invalidity shall not affect the remaining steps in this process.
- 8. This annexation dispute resolution process shall become effective on July 1, 1998 and shall be reviewed and readopted as part of the Service Delivery Strategy on or before June 30, 1999.
- 9. Any of the parties to this process may call for a review and possible revision of this process. In no case shall the same party call for review of the process more than once in a twelve month period.

BE IT ORDAINED AND RESOLVED by the authority aforesaid and it is hereby resolved

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by the authority of the same, that any and all resolutions in conflict with this resolution be and the same are hereby repealed.

ADOPTED by the Mayor and City Council this $\underline{9}$ day of 1998. Approved as to form: HUCK BURRIS, I JØE FOWLER, City Attorney Mayor OLLETTI, Councilmember GE 4k ELEANOR ember Councilr uncilmember GAR Councilmember 'ON. BENT ROBERT SMITH, Councilmember

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ATTACHMENT B

			. Derv	ices m De	Kaib Cot	aney Oren		·····	1 ·····	1
Gen. Govt.	Atlanta	Avondale Estates	Chamblee	Clarkston	Decatur	Doraville	Lithonia	Pine Lake	Stone Mountain	DeKalb County
Finance	D D	D	D	D	D	D	D	D	D	D
Purchasing	D	D	D	D	D	D	D	D	D	D
Information Technologies	D	D	D	D	D	D	D	 D	D	D
Elections	D-IG-DC	IG-DC	D-IG-DC	. D .	IG-DC-D	IG-DC-D	D-IG-DC	D-IG-DC	D-IG-DC	D
Personnel	D	D	D	D	D	D	D	D ···	D	.D
Property Tax Collections/ Tax Billing	IG-DC	IG-DC	IG-DC	IG-DC	D	D	D	D IG-DC	D	D

Services in DeKalb County Cities

DEFINITIONS

FINANCE: Revenue collections, accounts payable, evaluation & administration of debt, accounting procedures, maintenance of fund accounting.

PURCHASING: Bid acceptance, vendor evaluation, administration of contracts, central supply.

INFORMATION TECHNOLOGIES: Computer hardware/software, system maintenance & technical support.

LECTIONS: Appointment and compensation of workers, supply equipment & materials, process ballots, handle required advertisement.

PERSONNEL: Recruitment, compensation & benefits, training, etc. of employees.

PROPERTY TAX COLLECTIONS/TAX BILLING: Self explanatory.

D - Direct

IG-DC - Intergovernmental Agreement with DeKalb IG-A - Intergovernmental Agreement with an Authority J - Joint C - Contractor - Pvt. A - Authority IG-ATL - Intergovernmental Agreement with Atlanta N/A - Not Available DC - DeKalb County

Legal/ Judic.	Atlanta	Avondale Estates	Chamblee	Clarkston	Decatur	Doraville	Lithonia	Pine Lake	Stone Mountain	DeKalb County
Municipal/ Recorders Court	D	D	D	D	D	D	D	D and the second s	D	D
Public Defender	D	с	с	С	с	С	С	C C	N/A	D
Solicitor	D	C C	с	~ c	С	D	с	С	N/A	D
Local Government Attorney	D	С	с	С	С	с	с	с	С	Đ

DEFINITIONS

MUNICIPAL/RECORDERS COURT: Includes Judges and Clerks. PUBLIC DEFENDER: Self explanatory. SOLICITOR: Self explanatory. LOCAL GOVERNMENT ATTORNEY: Self explanatory.

> D - Direct IG-DC - Intergovernmental Agreement with DeKalb IG-A - Intergovernmental Agreement with an Authority J - Joint C - Contractor - Pvt. A - Authority IG-ATL - Intergovernmental Agreement with Atlanta N/A - Not Available DC - DeKalb County

September 8, 1999 \\MALOOF1\DATA\HOME\LAW\CRITTNDN\TABLE3.AVB

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Public Safety	Atlanta	Avondale Estates	Chamblee	Clarkston	Decatur	Doraville	Lithonia	Pine Lake	Stone Mountain	DeKalb County
Police	D	D	D	D	D	D	D	D	D	D
Sheriff/Jail & Evictions	DC	DC	DC	DC	DC	DC	D DC	DC	DC	D
Marshall/Real Estate & Warrants	D	D	D	D	D	D	D	D	D	D
Fire	D	DC	DC IG-DC	DC	D	DC	DC	DC	. DC	D
Animal Control	IG-BOH	DC	D	DC	D	D	DC	DC	DC	D
EMS	DC	DC	DC	DC	DC	DC	DC	DC	DC	D
911	D	IG-DC	D	IG-DC	D	D	IG-DC	IG-DC	IG-DC	. D
Dispatch	D	IG-DC	D	IG-DC	D	D	D	IG-DC	D	D
Medical Examiner	DC	DC	DC	DC	DC	DC	DC	DC	DC	D
Emergency Management	D	J-DC	J-DC	J-DC	J-DC	J-DC	J-DC	J-DC	J-DC	D

Services in DeKalb County Cities

DEFINITIONS

POLICE: Includes criminal investigation.
SHERIFF/JAIL & EVICTIONS: Self explanatory.
MARSHALL/REAL ESTATE & WARRANTS: Self explanatory.
FIRE: Self explanatory.
ANIMAL CONTROL: Self explanatory.
EMS: Self explanatory.
911: Self explanatory.
DISPATCH: Self explanatory.
MEDICAL EXAMINER: Self explanatory.
EMERGENCY MANAGEMENT: Self explanatory.

D - Direct

IG-DC - Intergovernmental Agreement with DeKalb IG-A - Intergovernmental Agreement with an Authority J - Joint C - Contractor - Pvt. A - Authority IG-ATL - Intergovernmental Agreement with Atlanta N/A - Not Available

DC - DeKalb County

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Comm. Dev.	Atlanta	Avondale Estates	Chamblee	Clarkston	Decatur	Doraville	Lithonia	Pine Lake	Stone Mountain	DeKalb County
Economic Development	D/A	D .	D	D	D/A	D	А	N/A	D ' . "	. D
CDBG	J · ·	N/A	D	J	J	N/A	J	N/A	J-DC	D-J
Building Inspections/ Building Permits	D	IG-DC	D Site Plans/ R&D-DC	D IG-DC	D Elec-DC	D	D	D IG-DC	J-DC	D
Planning/ Zoning	D	D	D	D	D	D	D	D	D	D
Code Enforcement	D	D	D	D	D	D	D	D	D	D
Public Housing	A	N/A	N/A	Α	A	N/A	A	N/A	N/A	A

DEFINITIONS

ECONOMIC DEVELOPMENT: Recruiting & retention of businesses, community revitalization & Development Authorities. **DBG:** Self explanatory.

BUILDING INSPECTIONS/BUILDING PERMITS: New or structural construction including electrical HVAC, & Plumbing & Development.

PLANNING/ZONING: Self explanatory. CODE ENFORCEMENT: Self explanatory. PUBLIC HOUSING: Self explanatory.

D - Direct

IG-DC - Intergovernmental Agreement with DeKalb

IG-A - Intergovernmental Agreement with an Authority

J - Joint

C - Contractor - Pvt. A - Authority

IG-ATL - Intergovernmental Agreement with Atlanta N/A - Not Available DC - DeKalb County

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Public Works	Atlanta	Avondale Estates	Chamblee	Clarkston	Decatur	Doraville	Lithonia	Pine Lake	Stone Mountain	DeKalb County
Water Treatment/ Water Distribution	IG-DC	There is no	These services are b fee differential b	e provided by De etween custome	eKalb County rs living in inc	as an enterpris orporated citie	e fund paid for s and unincorp	by user fees. borated DeKalb	County.	D IG-ATL
Wastewater Collection & Treatment	IG-DC				· · ·					D
Refuse Collection	D-Res C-Com'l	D	D	D	D	D	IG-DC	D	С	D
Landfill	с	С	c	с	с	с	C C	с	с	D/C
Recycling Programs	С	C .	D	N/A	С	D	IG-DC	D	С	D
Street Construction & Maintenance	D	DC	DC	DC	D	DC	DC	DC	DC	D
Street Cleaning	D	D	D	D	D	D	D	D	D	· D
Traffic Engineering	D	DC	DC	DC	DC	DC	DC	DC	DC	D
Storm Water	D	J	J	J	J	J	J	J	J	J
Cemetery	D	. N/A	N/A	N/A	D	N/A	D	N/A	D	, D
Airport	D	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	D

DEFINITIONS

WATER TREATMENT/WATER DISTRIBUTION: Self explanatory.

WASTEWATER COLLECTIONS & TREATMENT: Self explanatory.

REFUSE COLLECTION: Self explanatory.

LANDFILL: Use of public, private or DeKalb County is considered contract; not Intergovernmental Agreement. RECYCLING PROGRAMS: Self explanatory.

STREET CONSTRUCTION & MAINTENANCE: Re-paving (not including LARP), pothole repair, etc. **STREET CLEANING:** Right-of-way mowing, tree trimming, leaf removal, etc.

STREET CLEARING. Right-of-way mowing, the miniming, har removal, etc

TRAFFIC ENGINEERING: Self explanatory.

STORM WATER: Self explanatory.

CEMETERY: Self explanatory. **AIRPORT:** Self explanatory.

D - Direct

IG-DC - Intergovernmental Agreement with DeKalb IG-A - Intergovernmental Agreement with an Authority

J - Joint C - Contractor - Pvt.

A - Authority

IG-ATL - Intergovernmental Agreement with Atlanta N/A - Not Available

DC - DeKalb County

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Leisure Services	Atlanta	Avondale Estates	Chamblee	Clarkston	Decatur	Doraville	Lithonia	Pine Lake	Stone Mountain	DeKalb County
Parks	D	D	D	D	D	D	D IG-DC	D	D	D
Recreation Programs	D	N/A	D	N/A	D	D	N/A	D	D	D
Libraries	DC	DC	DC	DC	IG-DC	IG-DC	DC	DC	DC	D

DEFINITIONS

PARKS: Physical facilities. RECREATION PROGRAMS: Conducted by formal, paid staff, not to include volunteer community programs. LIBRARIES: Self explanatory.

> D - Direct IG-DC - Intergovernmental Agreement with DeKalb IG-A - Intergovernmental Agreement with an Authority J - Joint C - Contractor - Pvt. A - Authority IG-ATL - Intergovernmental Agreement with Atlanta N/A - Not Available DC - DeKalb County

Health and Social Services	Atlanta	Avondale Estates	Chamblee	Clarkston	Decatur	Doraville	Lithonia	Pine Lake	Stone Mountain	DeKalb County
Physical Health/ Environmental Health	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	J
Hospital	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Ą
Mental Health/ Substance Abuse	N/A	N/A	N/A	N/A	N/A	N/A	N/A	. N/A	N/A	J
Welfare	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	J
Senior Services	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	C

DEFINITIONS

- A.

PHYSICAL HEALTH/ENVIRONMENTAL HEALTH: Services provided by the DeKalb County Board of Health, including primary health care and clinical laboratory services such as immunizations, flu shots, hearing and vision examinations, prenatal services, adolescent health services and communicable disease clinics. Services also include injury control, birth and death certificates, health data collection he through the Environmental Health Division the inspection of restaurants, swimming pools and septic tanks. The Board of Health is funded through the Georgia Department of Human Resources, along with fees for services, grants and contributions.

HOSPITAL: Services provided through the Fulton-DeKalb Hospital Authority, known as the Grady Health System. This is a joint authority, with partial funding by Fulton and DeKalb counties. Services are also provided through the DeKalb Hospital Authority, which is DeKalb Medical Center.

MENTAL HEALTH/SUBSTANCE ABUSE: Services are provided through the DeKalb County Community Service Board. The services include comprehensive preventive, early detection, rehabilitation and treatment services for five major groups: adults with serious or chronic mental illness, children and adolescents who are severely emotionally disturbed, people who are mentally retarded, adults addicted to alcohol or other drugs and teens with alcohol and drug problems. Services are provided through community mental health center clinics, mental retardation day training centers, detoxification units, day treatment programs, and a variety of residential programs for all disability groups. A number of the community programs are operated through contracts with private nonprofit agencies.

WELFARE: (Temporary Assistance for Needy Families/TANF) - State program based in DeKalb County. TANF provides assistance to needy families with children on a temporary basis and provides parents with job preparation, work opportunities and other support services such as child care, to enable them to become self-sufficient and leave the program as soon as possible. Services also include foster care and adoption where appropriate, helps parents collect child support and provide adult protection services.

SENIOR SERVICES: Services provided through Senior Connections, a non-profit organization designated by the County to provide comprehensive services for persons 55 and older. Services include congregate meals and fellowship, transportation, home-delivered meals, home health care and home maintenance programs. Programs are designed to help older people maintain independence and avoid premature institutionalization.

D - Direct IG-DC - Intergovernmental Agreement with DeKalb IG-A - Intergovernmental Agreement with an Authority

J - Joint C - Contractor - Pvt. A - Authority IG-ATL - Intergovernmental Agreement with Atlanta N/A - Not Available DC - DeKalb County

ATTACHMENT C

The County provides water and sewer service in the unincorporated and incorporated areas, except the City of Atlanta, and therefore ensures that all applicable service is consistent with all applicable land use plans and ordinances. These services are provided by DeKalb County as an enterprise fund paid for by user fees. There is no fee differential between customers living in incorporated cities and unincorporated DeKalb County. Atlanta provides water and sewer service in the City of Atlanta and does not provide any extraterritorial water and sewer service in DeKalb County.

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,	Gen. Govt.	Atlanta	Avondale Estates	Chamblee	Ciarkston	Decatur	Doraville	Lithonia	Pine Lake	Stone Mountain	DeKalb County
	/ Finance	D	D	D	D	D	D	D	D	D	D
	Purchasing	D	D	D	D	D	D	D .	D	D	D
v	Information Technologies	D	b D	D	D	D	D	D	D	D	D
V	Elections	D-IG-DC	IG-DC	D-IG-DC	D	IG-DC-D	IG-DC-D	D-IG-DC	D-IG-DC	D-IG-DC	D
2	Personnel	D	D	D	D	D	D	D	D	D	D
	Property Tax Collections/ Tax Billing	IG-DC	IG-DC	IG-DC	IG-DC	D	D	D	D IG-DC	D	D

DEFINITIONS

FINANCE: Revenue collections, accounts payable, evaluation & administration of debt, accounting procedures, maintenance of fund accounting.

PURCHASING: Bid acceptance, vendor evaluation, administration of contracts, central supply.

INFORMATION TECHNOLOGIES: Computer hardware/software, system maintenance & technical support.

ELECTIONS: Appointment and compensation of workers, supply equipment & materials, process ballots, handle required advertisement. **PERSONNEL:** Recruitment, compensation & benefits, training, etc. of employees.

PROPERTY TAX COLLECTIONS/TAX BILLING: Self explanatory.

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D - Direct

IG-DC - Intergovernmental Agreement with DeKalb IG-A - Intergovernmental Agreement with an Authority J - Joint C - Contractor - Pvt. A - Authority IG-ATL - Intergovernmental Agreement with Atlanta N/A - Not Available DC - DeKalb County

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SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2

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Instructions:

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

County: DeKalb	Service: Finance
1. Check the box that best descri	bes the agreed upon delivery arrangement for this service:
Service will be provided co	untywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is nment, authority or organization providing the service.)
Service will be provided on identify the government, as	ly in the unincorporated portion of the county by a single service provider. (If this box is checked, ithority or organization providing the service.)
One or more cities will pro unincorporated areas. (If the	vide this service only within their incorporated boundaries, and the service will not be provided in is box is checked, identify the government(s), authority or organization providing the service.)
One or more cities will pro unincorporated areas. (If the	vide this service only within their incorporated boundaries, and the county will provide the service in is box is checked, identify the government(s), authority or organization providing the service.)
Other. (If this box is check	ed, attach a legible map delineating the service area of each service provider, and identify the other organization that will provide service within each service area.)
2. In developing the strategy, w	ere overlapping service areas, unnecessary competition and/or duplication of this service identified?
higher levels of service (See O. competition cannot be eliminate	inated under the strategy, attach an implementation schedule listing each step or action that will be
en to eliminate them, the res	ponsible party and the agreed upon deadline for completing h
	pority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise ds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authorit	y: Funding Method:
All	General Fund
4. How will the strategy chang	e the previous arrangements for providing and/or funding this service within the county?
There will be no changes	

Agreement Name:	Contracting Parties:		Effective and Ending D	ates:
)				
6. What other mechanisms (if any) will be used	o implement the strategy for this	service (e.g., ordinan	ces, resolutions, local act	ts of the
General Assembly, rate or fee changes, etc.), None Needed.	and when will they take effect?	- 	· · · · ·	а
None Meeded.				
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] 0		- · · · · · · · · · · · · · · · · · · ·	
7. Person completing form: <u>H. Russel</u> Phone number: 404-371-2883		September 1,	- 1999	
Phone number:404-371-2883	Date completed:			
3. Is this the person who should be contacted by	state agencies when evaluating w	hether proposed local	government projects are	; .
consistent with the service delivery strategy?	C Yes No	·		
If not, provide designated contact person(s) an	d phone number(s) below:			
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Identification of government(s), authority or organization providing service.

Jurisdiction	
DeKalb County	x
Atlanta	х
Avondale Estates	x
Chamblee	x
Clarkston	 x
Decatur	x
Doraville	x
Lithonia	x
Pine Lake	x
Stone Mountain	 X
Other:	
Other:	

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2



Instructions:

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

County: DeKalb	Service: Purchasing
	the agreed upon delivery arrangement for this service:
Service will be provided count checked, identify the government	wide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ent, authority or organization providing the service.)
Service will be provided only i	n the unincorporated portion of the county by a single service provider. (If this box is checked, rity or organization providing the service.)
One or more cities will provide unincorporated areas. (If this b	this service only within their incorporated boundaries, and the service will not be provided in ox is checked, identify the government(s), authority or organization providing the service.)
One or more cities will provide unincorporated areas. (If this b	this service only within their incorporated boundaries, and the county will provide the service in ox is checked, identify the government(s), authority or organization providing the service.)
Other. (If this box is checked, government, authority, or othe	attach a legible map delineating the service area of each service provider, and identify the rorganization that will provide service within each service area.)
 1. In developing the strategy, were □ Yes ☑ No 	overlapping service areas, unnecessary competition and/or duplication of this service identified?
If these conditions will continue un higher levels of service (See O.C.G competition cannot be eliminated).	der the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but .A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of the duplication.
an to aliminate them the respon	ed under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
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Agreement Name:	Contracting Portage	
	Contracting Parties:	Effective and Ending Dates:
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5. What other mechanisms (if any) will be u	sed to implement the strategy for this service (e.g.	, ordinances, resolutions, local acts of t
General Assembly, rate or fee changes, e None Needed.	ic.), and when will they take effect?	
	•	
7. Person completing form: <u>H. Ru</u>	ssell Crider	
Phone number:	3 Date completed:	er 1, 1999
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consistent with the service delivery strate	d by state agencies when evaluating whether propo gy? ④ Yes □ No	see to at government projects are
If not, provide designated contact person(
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Identification of government(s), authority or organization providing service.

Jurisdiction		
DeKalb County		X
Atlanta		X
Avondale Estates		x
Chamblee		x
Clarkston		x
Decatur		x
Doraville		x
Lithonia		x
Pine Lake		x
Stone Mountain		x
Other:		
Other:	·	

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2



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

County: DeKalb	· · · · · · · · · · · · · · · · · · ·	Service: Information Technology
	st describes the agreed upon del	ivery arrangement for this service:
• Service will be prov checked, identify th	ided countywide (i.e., including e government, authority or orga	g all cities and unincorporated areas) by a single service provider. (If this box is mization providing the service.)
Gervice will be providentify the government	ided only in the unincorporated ment, authority or organization	portion of the county by a single service provider. (If this box is checked, providing the service.)
• One or more cities v unincorporated area	will provide this service only wi as. (If this box is checked, ident	thin their incorporated boundaries, and the service will not be provided in if y the government(s), authority or organization providing the service.)
One or more cities v unincorporated area	will provide this service only wi as. (If this box is checked, ident	thin their incorporated boundaries, and the county will provide the service in ify the government(s), authority or organization providing the service.)
Other. (If this box is government, author	s checked, attach a legible maj ity, or other organization that w	b delineating the service area of each service provider, and identify the ill provide service within each service area.)
2. In developing the strat	tegy, were overlapping service a	areas, unnecessary competition and/or duplication of this service identified?
If these conditions will c higher levels of service (competition cannot be el	See O.C.G.A. 36-70-24(1)), ov	ch an explanation for continuing the arrangement (i.e., overlapping but erriding benefits of the duplication, or reasons that overlapping service areas or
If these conditions will b	be eliminated under the strategy	attach an implementation schedule listing each step or action that will be
 ⁴f these conditions will b en to eliminate them, 3. List each government funds, user fees, gener indebtedness, etc.). 	be eliminated under the strategy the responsible party and the ap or authority that will help to pa ral funds, special service distric	, attach an implementation schedule listing each step or action that will be greed upon deadline for completing it. y for this service and indicate how the service will be funded (e.g., enterprise t revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
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 4 these conditions will be en to eliminate them, 3. List each government funds, user fees, generatindebtedness, etc.). Local Government or Au All 4. How will the strategy 	be eliminated under the strategy the responsible party and the ap or authority that will help to pa ral funds, special service distric uthority: Funding Method: General Fund	y for this service and indicate how the service will be funded (e.g., enterprise t revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
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 4 these conditions will be en to eliminate them, 3. List each government funds, user fees, generatindebtedness, etc.). Local Government or Au All 4. How will the strategy 	be eliminated under the strategy the responsible party and the ap or authority that will help to pa ral funds, special service distric uthority: Funding Method: General Fund	y for this service and indicate how the service will be funded (e.g., enterprise t revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
 4 these conditions will be en to eliminate them, 3. List each government funds, user fees, generatindebtedness, etc.). Local Government or Au All 4. How will the strategy 	be eliminated under the strategy the responsible party and the ap or authority that will help to pa ral funds, special service distric uthority: Funding Method: General Fund	y for this service and indicate how the service will be funded (e.g., enterprise t revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
greement Name:	Contracting Parties:	Effective and Ending Dates:
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	ised to implement the strategy for this service (e.g	., ordinances, resolutions, local acts of
General Assembly, rate or fee changes, et None Needed.	tc.), and when will they take effect?	
vole inceded.		
- H. Ru	ussell Crider	
. Person completing form:		oer 1, 1999
Phone number:	Date completed:	
. Is this the person who should be contacted	d by state agencies when evaluating whether prop	osed local government projects are
consistent with the service delivery strate		
	s) and phone number(s) below:	
If not, provide designated contact person(
If not, provide designated contact person(
If not, provide designated contact person(PAGE 2 (continued)

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Jurisdiction	
DeKalb County	x
Atlanta	X
Avondale Estates	x
Chamblee	X
Clarkston	X , .
Decatur	x
Doraville	x
Lithonia	x
Pine Lake	x
Stone Mountain	x _
Other:	
Other:	

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SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2

Instructions:

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

County: DeKalb	Service: Elections
	the agreed upon delivery arrangement for this service:
Service will be provided county checked, identify the governme	wide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ent, authority or organization providing the service.)
identify the government, author	n the unincorporated portion of the county by a single service provider. (If this box is checked, rity or organization providing the service.)
unincorporated areas. (If this be	this service only within their incorporated boundaries, and the service will not be provided in ox 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 ox is checked, identify the government(s), authority or organization providing the service.)
D Other (If this box is checked a	ttach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
2. In developing the strategy, were of Yes 2 No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
higher levels of service (See O.C.G. competition cannot be eliminated). If these conditions will be eliminate 'ven to eliminate them, the response	der the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or d under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it. y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method:
	General Fund
All	
in an	
4. How will the strategy change the There will be no changes.	e previous arrangements for providing and/or funding this service within the county?
1 · · · · · ·	e previous arrangements for providing and/or funding this service within the county?
	e previous arrangements for providing and/or funding this service within the county?

Agreement Name:	Contracting Parties: Effective and Ending Da	ates
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) (Most recent agreed)	eenlenc	
or sample for eac		
city is attached)	
	will be used to implement the strategy for this service (e.g., ordinances, resolutions, local acts	s o
6. What other mechanisms (If any)	anges, etc.), and when will they take effect?	
	langes, etc.), and when will they take effect.	
None Needed.		
T	Durgell Childry	
7. Person completing form:	Russell Crider	
	-2883 Data completed: September 1, 1999	
Phone number:	L-2833 Date completed: September 1, 1999	
		 e
8. Is this the person who should be	contacted by state agencies when evaluating whether proposed local government projects are	e
8. Is this the person who should be consistent with the service deliver	contacted by state agencies when evaluating whether proposed local government projects are ery strategy? 🖾 Yes 🗆 No	e
8. Is this the person who should be consistent with the service deliver	contacted by state agencies when evaluating whether proposed local government projects are	e
8. Is this the person who should be a consistent with the service deliver	contacted by state agencies when evaluating whether proposed local government projects are ery strategy? 🖾 Yes 🗆 No	e
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8. Is this the person who should be a consistent with the service deliver	contacted by state agencies when evaluating whether proposed local government projects are ery strategy? 🖾 Yes 🗆 No	
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Jurisdiction	
DeKalb County	x
Atlanta	X
Avondale Estates	
Chamblee	X
Clarkston	x
Decatur	X
Doraville	X
Lithonia	X
Pine Lake	X
Stone Mountain	X
Other:	
Other:	

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SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

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

County: DeKalb	Service: Personnel
	he agreed upon delivery arrangement for this service:
Service will be provided county	wide (i.e., including all cities and unincorporated areas) by a single service provider. (If this b nt, authority or organization providing the service.)
Service will be provided only in identify the government, author	the unincorporated portion of the county by a single service provider. (If this box is checked, ity or organization providing the service.)
One or more cities will provide unincorporated areas. (If this be	this service only within their incorporated boundaries, and the service will not be provided in by is checked, identify the government(s), authority or organization providing the service.)
	this service only within their incorporated boundaries, and the county will provide the service ox is checked, identify the government(s), authority or organization providing the service.)
D Other (If this hay is checked a	ttach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
2. In developing the strategy, were of Yes 2 No	verlapping service areas, unnecessary competition and/or duplication of this service identified
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If these conditions will be eliminate ken to eliminate them, the respons List each government or authorit funds, user fees, general funds, s indebtedness, etc.).	ible party and the agreed upon deadline for completing it. that will help to pay for this service and indicate how the service will be funded (e.g., enterp pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
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If these conditions will be eliminate ken to eliminate them, the respons . List each government or authorit funds, user fees, general funds, s indebtedness, etc.). Local Government or Authority: All	ible party and the agreed upon deadline for completing it. / that will help to pay for this service and indicate how the service will be funded (e.g., enterp pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method: General Fund
If these conditions will be eliminate ken to eliminate them, the respons . List each government or authorit funds, user fees, general funds, s indebtedness, etc.). Local Government or Authority: All	ible party and the agreed upon deadline for completing it. that will help to pay for this service and indicate how the service will be funded (e.g., enterpresented by the service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method:

Agreement Name:		Contracting Parties:		Effective and Endi	ing Dates
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General Assembl	anisms (if any) will be used to ly, rate or fee changes, etc.), ar) implement the strategy for nd when will they take eff	or this service (e.g., ordin	ances, resolutions, loc	al acts of
None Needed.	,, into or ice changes, etc.), u	ing when which they take en			
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7. Person completin				1.000	
Phone number: _	404-371-2883	Date comple	eted: September		• .
If not, provide des	signated contact person(s) and	phone number(s) below:			
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Jurisdiction	
DeKalb County	 x
Atlanta	x
Avondale Estates	x
Chamblee	X
Clarkston	x
Decatur	x :
Doraville	x
Lithonia	x
Pine Lake	x
Stone Mountain	 x
Other:	
Other:	

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SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2

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7	Instructions:

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

County: DeKalb		Service: Prop. Tax Collections/Billing
Check the box that	t best describes t	he agreed upon delivery arrangement for this service:
Service will be checked, identi	provided county fy the government	wide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is nt, authority or organization providing the service.)
Service will be identify the go	provided only in vernment, authorit	the unincorporated portion of the county by a single service provider. (If this box is checked, ity or organization providing the service.)
unincorporated	areas. (If this bo	this service only within their incorporated boundaries, and the service will not be provided in bx is checked, identify the government(s), authority or organization providing the service.)
One or more ci unincorporated	ties will provide areas. (If this bo	this service only within their incorporated boundaries, and the county will provide the service in ox is checked, identify the government(s), authority or organization providing the service.)
Other. (If this l	box is checked, a uthority, or other	ttach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
2. In developing the Yes 🗆 No	strategy, were o	verlapping service areas, unnecessary competition and/or duplication of this service identified?
hken to eliminate t	hem, the respons ment or authority general funds, sp c.).	d under the strategy, attach an implementation schedule listing each step or action that will be ible party and the agreed upon deadline for completing it. y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method:
		General Fund
All	· · · · · · · · · · · · · · · · · · ·	
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4 How will the str	ategy change the	previous arrangements for providing and/or funding this service within the county?
4. How will the su There will be n	ategy change the o changes.	previous arrangements for providing and/or funding this service within the county?
4. How will the stu There will be n	ategy change the o changes.	previous arrangements for providing and/or funding this service within the county?
4. How will the stu There will be n	ategy change the o changes.	previous arrangements for providing and/or funding this service within the county?

5. List any formal service delivery agreem service:		
Agreement Name:	Contracting Parties:	Effective and Ending Da
Tax Billing & Collections and	Cities of Atlanta, Avondale Estates	See Attachment
Contract for Services	Chamblee, Clarkston & Pine Lake	· · ·
· · · · · · · · · · · · · · · · · · ·	with County and with Tax Comssr.	
None Needed		· · · · · · · · · · · · · · · · · · ·
7. Person completing form: H. Russell	Crider	·
7. Person completing form: H. Russell (Phone number: 404/371-2883		·
Phone number: 404/371-2883	Date completed: 9/1/99	
Phone number: 404/371-2883 8. Is this the person who should be contac	Date completed: 9/1/99	 ocal government projects are
Phone number: 404/371-2883 8. Is this the person who should be contac consistent with the service delivery stra	Date completed: 9/1/99 ted by state agencies when evaluating whether proposed lo ategy?	 ocal government projects are
Phone number: 404/371-2883 8. Is this the person who should be contac	Date completed: 9/1/99 ted by state agencies when evaluating whether proposed lo ategy?	 ocal government projects are
Phone number: 404/371-2883 8. Is this the person who should be contac consistent with the service delivery stra	Date completed: 9/1/99 ted by state agencies when evaluating whether proposed lo ategy?	· · · · · · · · · · · · · · · · · · ·
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Phone number: 404/371-2883 8. Is this the person who should be contac consistent with the service delivery stra	Date completed: 9/1/99 ted by state agencies when evaluating whether proposed lo ategy?	· · · · · · · · · · · · · · · · · · ·
Phone number: 404/371-2883 8. Is this the person who should be contac consistent with the service delivery stra	Date completed: 9/1/99 ted by state agencies when evaluating whether proposed lo ategy?	· · · · · · · · · · · · · · · · · · ·
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Phone number: 404/371-2883 8. Is this the person who should be contac consistent with the service delivery stra	Date completed: 9/1/99 ted by state agencies when evaluating whether proposed lo ategy?	· · · · · · · · · · · · · · · · · · ·
Phone number: <u>404/371-2883</u> 8. Is this the person who should be contac consistent with the service delivery stra If not, provide designated contact perso	Date completed: 9/1/99 ted by state agencies when evaluating whether proposed lo tegy?	PAGE 2 (continued
Phone number: <u>404/371-2883</u> 8. Is this the person who should be contac consistent with the service delivery stra If not, provide designated contact perso	Date completed: 9/1/99 ted by state agencies when evaluating whether proposed lo tegy?	PAGE 2 (continued
Phone number: <u>404/371-2883</u> 8. Is this the person who should be contac consistent with the service delivery stra If not, provide designated contact perso	Date completed: 9/1/99 ted by state agencies when evaluating whether proposed lo ategy?	PAGE 2 (continued

	Tax Billing and Collections	Services
	(County)	(Tax Commissioner)
Atlanta	May 5, 1999 –	May 17, 1999 -
	(year to year)	(term of office)
Avondale Estates	5-24-95	6-26-95 -
	(year to year)	(term of office)
Chamblee	3-27-96	5-14-96 -
	(year to year)	(term of office)
Clarkston	5-1 2-98	1-20-98 -
	(year to year)	(term of office)
Pine Lake	3-28-96	1996 -
	(year to year)	(term of office)

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Jurisdiction	
DeKalb County	X
Atlanta	
Avondale Estates	· · ·
Chamblee	
Clarkston	-
Decatur	X
Doraville	X
Lithonia	X
Pine Lake	X
Stone Mountain	X
Other:	
Other:	

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Explanation for Continuing the Arrangement:

- Carlos de Carlos de

The Cities of Decatur and Pine Lake have different property tax due dates; and, overlapping but higher level of service.

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	Legal/ Judic.	Atlanta	Avondale Estates	Chamblee	Clarkston	Decatur	Doraville	Lithonia	Pine Lake	Stone Mountain	DeKalb County
:/	Municipal/ Recorders Court	D	D	D	D	D	D	D	D	D	D
. /	Public Defender	D	с	с	с	С	с	С	с	N/A	D
v	Solicitor	D	с	С	С	C ·	D	с	c	N/A	D
	Local Government Attorney	D	с	с	C	с	c	с	с	с	D

Services in DeKalb County Cities

DEFINITIONS

MUNICIPAL/RECORDERS COURT: Includes Judges and Clerks. PUBLIC DEFENDER: Self explanatory. SOLICITOR: Self explanatory. LOCAL GOVERNMENT ATTORNEY: Self explanatory.

> D - Direct IG-DC - Intergovernmental Agreement with DeKalb IG-A - Intergovernmental Agreement with an Authority J - Joint C - Contractor - Pvt. A - Authority IG-ATL - Intergovernmental Agreement with Atlanta N/A - Not Available DC - DeKalb County

September 8, 1999 \\MALOOF1\DATA\HOME\LAW\CRITTNDN\TABLE3.AVB

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SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2



Instructions:

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

County: DeKalb

Service: Municipal/Recorder's Court

л с	beck the hox that	best describes the agreed	upon delivery	y arrangement for this service:	
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- □ 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.)
- □ 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.)
- □ 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

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

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

List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.).

Local Government or Authority: Funding Method:

All		General Fund		
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4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? There will be no changes.

Agreement Name:		Contracting Parties:	· · · · · · · · · · · · · · · · · · ·	Effective and I	Ending Dates:
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• <u></u>	·······				
			<u>.</u>		
6. What other mechanism General Assembly, ra None Needed.	ms (if any) will be used to te or fee changes, etc.), ar	mplement the strategy for t ad when will they take effect	his service (e.g., ord ?	linances, resolutions	local acts of the
			·		
	H. Russell Cr	rider			
7. Person completing for	rm:		· · ·		
Phone number:	404-371-2883	Date complete	d: September	1, 1999	
consistent with the se	rvice delivery strategy?	tate agencies when evaluatin	g wueuter proposed	iocai government pi	
······································			<u> </u>	PAGE 2	continued)
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Jurisdiction	
DeKalb County	x
Atlanta	x
Avondale Estates	x
Chamblee	x
Clarkston	x
Decatur	x
Doraville	x
Lithonia	x
Pine Lake	x
Stone Mountain	x
Other:	
Other:	

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SERVICE DELIVERI DIRATION

SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2



Instructions:

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

County: DeKalb	Service: Public Defender
1. Check the box that best describes	the agreed upon delivery arrangement for this service:
Service will be provided county checked, identify the governme	wide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box 1s nt, authority or organization providing the service.)
Service will be provided only in identify the government, author	the unincorporated portion of the county by a single service provider. (If this box is checked, ity or organization providing the service.)
One or more cities will provide unincorporated areas. (If this be	this service only within their incorporated boundaries, and the service will not be provided in by is checked, identify the government(s), authority or organization providing the service.)
	this service only within their incorporated boundaries, and the county will provide the service in ox is checked, identify the government(s), authority or organization providing the service.)
D Other (If this has is checked a	ttach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
2. In developing the strategy, were on Yes V No.	verlapping service areas, unnecessary competition and/or duplication of this service identified?
higher levels of service (See O.C.G. competition cannot be eliminated).	ler the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
ken to eliminate them, the response	d under the strategy, attach an implementation schedule listing each step or action that will be ible party and the agreed upon deadline for completing it.
	y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
All Cities	General Fund
DeKalb County	General Fund & Indigent Defense Fund

4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? There will be no changes.

greement Name:	Contracting Parties:	Effective and Ending Dates:
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What other mechanisms (if any) will be us	sed to implement the strategy for this servic	ce (e.g., ordinances, resolutions, local acts of t
General Assembly, rate or fee changes, et	c.), and when will they take effect?	
None Needed.		· ·
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Person completing form: H. Russ 404-371-2883	ell Crider	tember 1 1000
Phone number:	Date completed:	tember 1, 1999
Is this the person who should be contacted	by state agencies when evaluating whether	
consistent with the service delivery strateg	y State agencies when evaluating whether y? ☐ Yes □ No	r proposed local government projects are
If not, provide designated contact person(s	and phone number(s) below:	
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		PAGE 2 (continued)
		TAGE 2 (Continued)
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Jurisdiction	
DeKalb County	X
Atlanta	X
Avondale Estates	X
Chamblee	X
Clarkston	X
Decatur	X
Doraville	X
Lithonia	X
Pine Lake	X
Stone Mountain	
Other:	:
Other:	



SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions:

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

County: DeKalb		
	Service: Solicitor	<u> </u>
	s the agreed upon delivery arrangement for this service:	
Service will be provided county checked, identify the government	tywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this aent, authority or organization providing the service.)	s box is
Service will be provided only in identify the government, author	in the unincorporated portion of the county by a single service provider. (If this box is checked ority or organization providing the service.)	xd,
One or more cities will provide unincorporated areas. (If this b	le this service only within their incorporated boundaries, and the service will not be provided box is checked, identify the government(s), authority or organization providing the service.)	in
One or more cities will provide unincorporated areas. (If this b	le this service only within their incorporated boundaries, and the county will provide the servi box is checked, identify the government(s), authority or organization providing the service.)	ce in
Other. (If this box is checked, a government, authority, or othe	attach a legible map delineating the service area of each service provider, and identify the 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 identifi	ed?
🗅 Yes 🗹 No	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping	÷.,
en to eliminate them, the respon- . List each government or authorit funds, user fees, general funds, s indebtedness, etc.).	ted under the strategy, attach an implementation schedule listing each step or action that winsible party and the agreed upon deadline for completing it. ity that will help to pay for this service and indicate how the service will be funded (e.g., enter special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method:	
	Funding Method.	
Local Government or Authority:	Central Fund	
All	General Fund	
All	General Fund	
	General Fund	
All	General Fund	
	General Fund	
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All 4. How will the strategy change the		
All 4. How will the strategy change the		

6. What other mechanisms (if any) will be used General Assembly, rate or fee changes, etc.), None Needed. 7. Person completing form:	to implement the strategy for this service (e. and when will they take effect?		nd Ending Dates:
H. Russel	to implement the strategy for this service (e. and when will they take effect?	.g., ordinances, resolution	ons, local acts of the
H. Russel	to implement the strategy for this service (e. and when will they take effect?	.g., ordinances, resolution	ons, local acts of the
H. Russel	to implement the strategy for this service (e. and when will they take effect?	.g., ordinances, resolution	ons, local acts of the
H. Russel	to implement the strategy for this service (e. and when will they take effect?	.g., ordinances, resoluti	ons, local acts of the
H. Russel	and when will they take effect?		
H. Russel		· · · ·	
7 Demon completing format	11 Crider		
7. reison completing form:			
Phone number: <u>404-371-2883</u>	Date completed:Septen	ber 1, 1999	
8. Is this the nerron who should be contested by	****		• •
8. Is this the person who should be contacted by consistent with the service delivery strategy?	A Yes O No	posed local governmen	r projects are
If not, provide designated contact person(s) and			
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Jurisdiction	
DeKalb County	X
Atlanta	X
Avondale Estates	X
Chamblee	X
Clarkston	X
Decatur	, X .
Doraville	X
Lithonia	X
Pine Lake	X
Stone Mountain	
Other:	•
Other:	

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SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

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

	Service: Local Governmen	tAttorney
County: DeKalb	the agreed upon delivery arrangement for this service:	
Service will be provided count	wide (i.e., including all cities and unincorporated areas) bent, authority or organization providing the service.)	y a single service provider. (If this box is
Service will be provided only i	the unincorporated portion of the county by a single servity or organization providing the service.)	ice provider. (If this box is checked,
	this service only within their incorporated boundaries, and ox is checked, identify the government(s), authority or org	the service will not be provided in anization providing the service.)
A one of the state will provide	this service only within their incorporated boundaries, and ox is checked, identify the government(s), authority or org	d the county will provide the service in
D Other (If this has is checked	ttach a legible map delineating the service area of each r organization that will provide service within each service	service provider, and identify the
2. In developing the strategy, were	overlapping service areas, unnecessary competition and/or	duplication of this service identified?
competition cannot be eliminated).		
If these conditions will be eliminate ken to eliminate them, the respon . List each government or authorin funds, user fees, general funds, s indebtedness, etc.).	d under the strategy, attach an implementation schedule sible party and the agreed upon deadline for completing it. y that will help to pay for this service and indicate how the pecial service district revenues, hotel/motel taxes, franchis	listing each step or action that will be service will be funded (e.g., enterprise
 If these conditions will be eliminate them, the response to eliminate them, the response of the second se	sible party and the agreed upon deadline for completing it. y that will help to pay for this service and indicate how the pecial service district revenues, hotel/motel taxes, franchis Funding Method:	listing each step or action that will be service will be funded (e.g., enterprise
 4f these conditions will be eliminate them to eliminate them, the response . List each government or authority funds, user fees, general funds, so indebtedness, etc.). Local Government or Authority: 	sible party and the agreed upon deadline for completing it. y that will help to pay for this service and indicate how the pecial service district revenues, hotel/motel taxes, franchis	listing each step or action that will be service will be funded (e.g., enterprise
 If these conditions will be eliminate them, the response to eliminate them, the response of the second se	sible party and the agreed upon deadline for completing it. y that will help to pay for this service and indicate how the pecial service district revenues, hotel/motel taxes, franchis Funding Method:	listing each step or action that will be service will be funded (e.g., enterprise
 If these conditions will be eliminate them, the response to eliminate them, the response of the second se	sible party and the agreed upon deadline for completing it. y that will help to pay for this service and indicate how the pecial service district revenues, hotel/motel taxes, franchis Funding Method:	listing each step or action that will be service will be funded (e.g., enterprise
 If these conditions will be eliminate them, the responsive to eliminate them, the responsion of the second secon	sible party and the agreed upon deadline for completing it. y that will help to pay for this service and indicate how the pecial service district revenues, hotel/motel taxes, franchis Funding Method:	listing each step or action that will be service will be funded (e.g., enterprise
 If these conditions will be eliminate them, the response to eliminate them, the response of the second se	sible party and the agreed upon deadline for completing it. y that will help to pay for this service and indicate how the pecial service district revenues, hotel/motel taxes, franchis Funding Method: General Fund	listing each step or action that will be e service will be funded (e.g., enterprise e taxes, impact fees, bonded
 If these conditions will be eliminate them, the responsive to eliminate to eliminate them, the responsive to eliminate to eliminate to eliminate them, the responsive to eliminate to el	sible party and the agreed upon deadline for completing it. y that will help to pay for this service and indicate how the pecial service district revenues, hotel/motel taxes, franchis Funding Method:	listing each step or action that will be e service will be funded (e.g., enterprise e taxes, impact fees, bonded
 If these conditions will be eliminate them, the response to eliminate them, the response of the second se	sible party and the agreed upon deadline for completing it. y that will help to pay for this service and indicate how the pecial service district revenues, hotel/motel taxes, franchis Funding Method: General Fund	e service will be funded (e.g., enterprise e taxes, impact fees, bonded

Agreement Name:	Contracting Parties:	Effective and Ending Dates
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 What other mechanisms (if any) will b General Assembly, rate or fee changes None Needed. 	e used to implement the strategy for this services, etc.), and when will they take effect?	e (e.g., ordinances, resolutions, local acts of
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7. Person completing form: <u>H. R</u> Phone number: <u>404-371-288</u>	3 Date completed:Sep	otember 1, 1999
 Is this the person who should be contac consistent with the service delivery stra 	cted by state agencies when evaluating whether ategy? Δ Yes \Box No	proposed local government projects are
If not, provide designated contact perso		
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Jurisdiction	
DeKalb County	x
Atlanta	x
Avondale Estates	x
Chamblee	x
Clarkston	x
Decatur	x
Doraville	x
Lithonia	x _
Pine Lake	x
Stone Mountain	x
Other:	
Other:	

			Servi	ces in Del	And Cou	inty Citie	-5			
Public Safety	Atlanta	Avondale Estates	Chamblee	Clarkston	Decatur	Doraville	Lithonia	Pine Lake	Stone Mountain	DeKalb County
Police	D	D	D	D	· D	D	D	D	D	D
Sheriff/Jail & Evictions	DC	DC	DC	DC	DC	DC	D DC	DC	DC	D
Marshall/Real Estate & Warrants	D	D	D	D	D	D	D	D	D	D
Fire .	D	DC	DC IG-DC	DC	D	DC	DC	DC	DC	D
Animal Control	IG-BOH	DC	D	DC	D	D	DC	DC	DC	D
EMS	DC	DC	DC	DC	DC .	DC .	DC	DC	DC	D
911	D	IG-DC	D	IG-DC	D	D	IG-DC	IG-DC	IG-DC	D
Dispatch	D	IG-DC	D	IG-DC	D	D	D	IG-DC	D	D
Medical Examiner	DÇ	DC	DC	DC	DC	DC	DC	DC	DC	D
Emergency Management	D	J-DC	J-DC	J-DC	J-DC	J-DC	J-DC	J-DC	J-DC	D

Services in DeKalb County Cities

DEFINITIONS

POLICE: Includes criminal investigation.
SHERIFF/JAIL & EVICTIONS: Self explanatory.
MARSHALL/REAL ESTATE & WARRANTS: Self explanatory.
FIRE: Self explanatory.
ANIMAL CONTROL: Self explanatory.
EMS: Self explanatory.
911: Self explanatory.
DISPATCH: Self explanatory.
MEDICAL EXAMINER: Self explanatory.
EMERGENCY MANAGEMENT: Self explanatory.

D - Direct

IG-DC - Intergovernmental Agreement with DeKalb IG-A - Intergovernmental Agreement with an Authority J - Joint C - Contractor - Pvt. A - Authority IG-ATL - Intergovernmental Agreement with Atlanta N/A - Not Available DC - DeKalb County

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September 8, 1999 MALOOFI\DATA\HOME\LAW\CRITTNDN\TABLE3.AVB



SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2

Instructions:

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

County: DeKalb	Service: Police
	the agreed upon delivery arrangement for this service:
Service will be provided county checked, identify the government	wide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is int, authority or organization providing the service.)
identify the government, author	the unincorporated portion of the county by a single service provider. (If this box is checked, rity or organization providing the service.)
One or more cities will provide unincorporated areas. (If this b	this service only within their incorporated boundaries, and the service will not be provided in ox is checked, identify the government(s), authority or organization providing the service.)
Cons on more sities will provide	this service only within their incorporated boundaries, and the county will provide the service in ox is checked, identify the government(s), authority or organization providing the service.)
Other. (If this box is checked, a government, authority, or other	Attach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
Yes 🗆 No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
higher levels of service (See O.C.G competition cannot be eliminated).	ter the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
en to eliminate them, the response	d under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
- · · · · · · · · · · · · · · · · · · ·	y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
All Cities	General Fund & Grants
DeKalb County	Special Tax District & Grants
and the second	
	V 6 the this comice within the county?

4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? There will be no changes.

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
· · · · · · · · · · · · · · · · · · ·		
5. What other mechanisms (if any) will be use General Assembly, rate or fee changes, etc. None Needed.	d to implement the strategy for this service (e.), and when will they take effect?	g., ordinances, resolutions, local acts of t
		· · ·
H. Russel	l Crider	· · · · · · · · · · · · · · · · · · ·
Person completing form:	Comt	ember 1, 1999
Phone number: 404-371-2883	Date completed:	
. Is this the person who should be contacted be consistent with the service delivery strategy	by state agencies when evaluating whether prop	posed local government projects are
If not, provide designated contact person(s)		
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Jurisdiction	
DeKalb County	x
Atlanta	x
Avondale Estates	x
Chamblee	x
Clarkston	x
Decatur	x
Doraville	X ···
Lithonia	x
Pine Lake	x
Stone Mountain	x
Other:	<u> </u>
Other:	

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Explanation for Continuing the Arrangement:

Overlapping but higher level of service.

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SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2

Instructions:

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

County: DeKalb	Service: Sheriff
1. Check the box that best describes	the agreed upon delivery arrangement for this service:
checked, identify the governme	wide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is int, authority or organization providing the service.)
identify the government, author	the unincorporated portion of the county by a single service provider. (If this box is checked, rity or organization providing the service.)
unincorporated areas. (If this be	this service only within their incorporated boundaries, and the service will not be provided in ox is checked, identify the government(s), authority or organization providing the service.)
	this service only within their incorporated boundaries, and the county will provide the service in ox is checked, identify the government(s), authority or organization providing the service.)
Other (If this hox is checked a	Attach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
2. In developing the strategy, were onQ Yes 2 No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
higher levels of service (See O.C.G. competition cannot be eliminated).	ler the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
"If these conditions will be eliminate Yen to eliminate them, the response	d under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
List such assume or authority	y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
DeKalb County	General Fund
and the second	

4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? There will be no changes.

5. List any formal service del service:	livery agreements or in	tergovernmental contracts the	at will be used to impl	ement the strategy for this
Agreement Name:		Contracting Parties:		Effective and Ending Dates:
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• <u>••••••</u> •••••••••••••••••••••••••••••			· · ·	
		mplement the strategy for this when will they take effect?	service (e.g., ordinan	ces, resolutions, local acts of the
None needed.				
an a	$\frac{1}{2}$			
7. Person completing form:	H. Russell	Crider		
Phone number:	404-371-2883	B Date completed:	September 1	, 1999
8. Is this the person who show consistent with the service "If not, provide designated of	delivery strategy?	•	whether proposed loca	l government projects are
				PAGE 2 (continued)

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·	 -
Jurisdiction	
DeKalb County	X
Atlanta	
Avondale Estates	
Chamblee	
Clarkston	
Decatur	
Doraville	
Lithonia	X
Pine Lake	
Stone Mountain	
Other:	
Other:	

PAGE 2 SUMMARY OF SERVICE DELIVERY ARRANGEMENTS Instructions: Make copies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names listed on page 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs. Service: Marshall/Real Est. & Warrants County: DeKalb 1. Check the box that best describes the agreed upon delivery arrangement for this service: Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this 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.) • 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.) Cone 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? C Yes No If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or competition cannot be eliminated). If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be ken to eliminate them, the responsible party and the agreed upon deadline for completing it. ist each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.).

Local Government or Authority: Funding Method:

All	General Fund

4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? There will be no changes.
| What other mechanisms (if any) will be used to General Assembly, rate or fee changes, etc.), a None Needed. Person completing form: <u>H. Russell</u> 404-371-28 Phone number: <u>404-371-28</u> Is this the person who should be contacted by s consistent with the service delivery strategy? If not, provide designated contact person(s) and | nd when will they take effect?
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| None Needed.
. Person completing form: <u>H. Russell</u>
Phone number: <u>404-371-28</u>
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tate agencies when evaluating whether propose
Yes I No | ed local government projects are |
| Phone number: 404-371-28 Is this the person who should be contacted by s consistent with the service delivery strategy? | Date completed: | ed local government projects are |
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| Is this the person who should be contacted by s consistent with the service delivery strategy? | tate agencies when evaluating whether propos | ed local government projects are |
| consistent with the service delivery strategy? | 🖞 Yes 🗆 No | ······ |
| consistent with the service delivery strategy? | 🖞 Yes 🗆 No | |
| If not, provide designated contact person(s) and | l phone number(s) below: | PAGE 2 (continued) |
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Jurisdiction	1.		
DeKalb County	 		X
Atlanta			x
Avondale Estates			x
Chamblee	 		x
Clarkston			x
Decatur			x
Doraville			x
Lithonia			X
Pine Lake			X
Stone Mountain			X
Other:		· · · ·	:
Other:			

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SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2



Instructions:

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

County: DeKalb	Service: Fire
1 Check the box that best describes the	ne agreed upon delivery arrangement for this service:
Service will be provided country checked, identify the governmer	vide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is t, authority or organization providing the service.)
Service will be provided only in identify the government, authorities	the unincorporated portion of the county by a single service provider. (If this box is checked, ty or organization providing the service.)
• One or more cities will provide unincorporated areas. (If this bo	his service only within their incorporated boundaries, and the service will not be provided in x is checked, identify the government(s), authority or organization providing the service.)
• One or more cities will provide unincorporated areas. (If this bo	his service only within their incorporated boundaries, and the county will provide the service in x is checked, identify the government(s), authority or organization providing the service.)
Other. (If this box is checked, a government, authority, or other	tach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
2. In developing the strategy, were o	verlapping service areas, unnecessary competition and/or duplication of this service identified?
higher levels of service (See O.C.G., competition cannot be eliminated).	er the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
en to eliminate them the responsi	l under the strategy, attach an implementation schedule listing each step or action that will be ble party and the agreed upon deadline for completing it.
J. List each government or authority funds, user fees, general funds, sp indebtedness, etc.).	that will help to pay for this service and indicate how the service will be funded (e.g., enterprise ecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
DeKalb County	Special Fire Tax District
Cities of Atlanta &	
Decatur	General Fund
	i i i i i i i i i i i i i i i i i i i
4. How will the strategy change the There will be no changes.	previous arrangements for providing and/or funding this service within the county?

Agreement Name:	Contracting Parties:	Effective and Ending Date
Intergovernmental Agreement	DeKalb County with	1/1/96 -
· · · · · · · · · · · · · · · · · · ·	Chamblee (Inspections)	(year to year
Resolution by DeKalb Board of	All cities except Atlanta &	1999
Commissioners	Decatur	
General Assembly, rate or fee changes, etc.), a	o implement the strategy for this service (e.g., ordin nd when will they take effect?	ances, resolutions, local acts o
7 Person completing form:	ell Crider	
Phone number: 404-371-2883	Date completed: September	_1, 1999
consistent with the service delivery strategy?		cal government projects are
If not, provide designated contact person(s) and		
ý 		

Jurisdiction	
DeKalb County	x
Atlanta	x
Avondale Estates	
Chamblee	
Clarkston	
Decatur	x
Doraville	
Lithonia	
Pine Lake	
Stone Mountain	
Other:	
Other:	



The County levies property taxes in the cities of Avondale Estates, Chamblee, Clarkston, Doraville, Lithonia, Pine Lake and Stone Mountain for the purpose of providing fire protection. This includes fire suppression and prevention in the cities listed above however fire prevention in the City of Chamblee is done by separate agreement. The County's Resolution to Levy Taxes for the Year 1999 is attached hereto as Exhibit A.



Instructions:

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

County: DeKalb Service: Med . Check the box that best describes the agreed upon delivery arrangement for	lical Examiner
	his service:
Service will be provided countywide (i.e., including all cities and unincor checked, identify the government, authority or organization providing the	porated areas) by a single service provider. (If this box is
Service will be provided only in the unincorporated portion of the county identify the government, authority or organization providing the service.)	by a single service provider. (If this box is checked,
One or more cities will provide this service only within their incorporated unincorporated areas. (If this box is checked, identify the government(s),	aumority of organization providing the services,
One or more cities will provide this service only within their incorporated unincorporated areas. (If this box is checked, identify the government(s),	boundaries, and the county will provide the service in
• Other. (If this box is checked, attach a legible map delineating the serv government, authority, or other organization that will provide service with	ice area of each service provider, and identify the hin each service area.)
 2. In developing the strategy, were overlapping service areas, unnecessary con Yes X 	petition and/or duplication of this service identified?
If these conditions will continue under the strategy, attach an explanation to higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the competition cannot be eliminated). these conditions will be eliminated under the strategy, attach an implement ken to eliminate them, the responsible party and the agreed upon deadline for . List each government or authority that will help to pay for this service and if funds, user fees, general funds, special service district revenues, hotel/mote	tation schedule listing each step or action that will be r completing it. ndicate how the service will be funded (e.g., enterprise
indebtedness, etc.). Local Government or Authority: Funding Method:	
Local Government or Authority: Funding Method:	
Local Government or Authority: Funding Method:	
Local Government or Authority: Funding Method:	
Local Government or Authority: Funding Method: DeKalb County General Fund	
Local Government or Authority: Funding Method: DeKalb County General Fund	
Local Government or Authority: Funding Method: DeKalb County General Fund 4. How will the strategy change the previous arrangements for providing and	
Local Government or Authority: Funding Method: DeKalb County General Fund	
Local Government or Authority: Funding Method: DeKalb County General Fund 4. How will the strategy change the previous arrangements for providing and	
Local Government or Authority: Funding Method: DeKalb County General Fund 4. How will the strategy change the previous arrangements for providing and	
Local Government or Authority: Funding Method: DeKalb County General Fund 4. How will the strategy change the previous arrangements for providing and	

greement Name:	Contracting Parties:	Effective and Ending Dates:
rivate Contract	DeKalb County with	
· · · · · · · · · · · · · · · · · · ·	private Medical Examiner	
b. What other mechanisms (if any) will b General Assembly, rate or fee changes None Needed.	e used to implement the strategy for this service e, etc.), and when will they take effect?	(e.g., ordinances, resolutions, local acts of t
8		
. Person completing form: <u>H. Russ</u>	zell Crider	
101-27	1-2883 Date completed: Sept	cember 1, 1999
Phone number:404-37.	Date completed	
consistent with the service delivery str If not, provide designated contact perso		
		PAGE 2 (continued)
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Jurisdiction	
DeKalb County	x
Atlanta	
Avondale Estates	
Chamblee	
Clarkston	
Decatur	
Doraville	
Lithonia	ļ
Pine Lake	ļ
Stone Mountain	
Other:	
Other:	

PAGE 2

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

County: DeKalb	Service: Emergency Management
1. Check the box that best describ	es the agreed upon delivery arrangement for this service:
	ntywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ment, authority or organization providing the service.)
	in the unincorporated portion of the county by a single service provider. (If this box is checked, nority or organization providing the service.)
	de this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	de this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
	, attach a legible map delineating the service area of each service provider, and identify the er organization that will provide service within each service area.)
2. In developing the strategy, were Ves 🗆 No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
	ted under the strategy, attach an implementation schedule listing each step or action that will be as a schedule party and the agreed upon deadline for completing it.
	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
All	General Funds
*	
4. How will the strategy change th	e previous arrangements for providing and/or funding this service within the county?
No changes.	
•••• *** **	

service:	Contracting Parties:		Effectiv	ve and Ending Date
Agreement Name:	<u> </u>			
Individual Ordinances adopted by	All cities and County			<u> </u>
County and each city	Atlanta provide jointly	/		مربق المربق ا
				<u> </u>
·		and the second		
6. What other mechanisms (if any) will be use General Assembly, rate or fee changes, etc. None Needed			ordinances, resc	olutions, local acts
	· · · ·	· •	· ••	• ·
· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	······
7. Person completing form: H. Russell Crid	er			
		eted. 9/1/99		
 Phone number: <u>404/371-2883</u> 8. Is this the person who should be contacted be consistent with the service delivery strategy 	Date completion Date completio	· · · · · · · · · · · · · · · · · · ·	ed local govern	ment projects are
Phone number: <u>404/371-2883</u> 8. Is this the person who should be contacted be	Date complete by state agencies when evaluate ? 2 Yes D No	· · · · · · · · · · · · · · · · · · ·	ed local govern	ment projects are
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 Phone number: <u>404/371-2883</u> 8. Is this the person who should be contacted be consistent with the service delivery strategy 	Date complete by state agencies when evaluate ? 2 Yes D No	· · · · · · · · · · · · · · · · · · ·		
 Phone number: <u>404/371-2883</u> 8. Is this the person who should be contacted be consistent with the service delivery strategy 	Date complete by state agencies when evaluate ? 2 Yes D No	· · · · · · · · · · · · · · · · · · ·		
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 Phone number: <u>404/371-2883</u> 8. Is this the person who should be contacted be consistent with the service delivery strategy 	Date complete by state agencies when evaluate ? 2 Yes D No	· · · · · · · · · · · · · · · · · · ·		
 Phone number: <u>404/371-2883</u> 8. Is this the person who should be contacted be consistent with the service delivery strategy 	Date complete by state agencies when evaluate ? 2 Yes D No	· · · · · · · · · · · · · · · · · · ·		
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 Phone number: <u>404/371-2883</u> 8. Is this the person who should be contacted be consistent with the service delivery strategy 	Date complete by state agencies when evaluate ? 2 Yes D No	· · · · · · · · · · · · · · · · · · ·		
 Phone number: <u>404/371-2883</u> 8. Is this the person who should be contacted be consistent with the service delivery strategy 	Date complete by state agencies when evaluate ? 2 Yes D No	· · · · · · · · · · · · · · · · · · ·		
 Phone number: <u>404/371-2883</u> 8. Is this the person who should be contacted be consistent with the service delivery strategy 	Date complete by state agencies when evaluate ? 2 Yes D No	· · · · · · · · · · · · · · · · · · ·		

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Explanation

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The County and the Cities work together using the same Emergency Management Plan in case of an emergency or disaster.

Jurisdiction		<u>.</u>	•
DeKalb County			X
Atlanta			X
Avondale Estates			X
Chamblee		-	X
Clarkston			X
Decatur			X
Doraville			X
Lithonia	•		X
Pine Lake			X
Stone Mountain			X
Other:			
Other:			

SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2

TC

Instructions:

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

County: DeKalb	Service: EMS	
Check the box that best	t describes the agreed upon delivery arrangement for this service:	
Samice will be provi	ided countywide (i.e., including all cities and unincorporated areas) by a single service prove e government, authority or organization providing the service.)	vider. (If this box
Service will be provi	ided only in the unincorporated portion of the county by a single service provider. (If this b ment, authority or organization providing the service.)	oox is checked,
	will provide this service only within their incorporated boundaries, and the service will not as. (If this box is checked, identify the government(s), authority or organization providing the	be provided in ne service.)
One or more cities v unincorporated area	will provide this service only within their incorporated boundaries, and the county will prov as. (If this box is checked, identify the government(s), authority or organization providing the	he service.)
	s checked, attach a legible map delineating the service area of each service provider, and rity, or other organization that will provide service within each service area.)	nd identify the
2. In developing the strat	tegy, were overlapping service areas, unnecessary competition and/or duplication of this ser	rvice identified?
higher levels of service (continue under the strategy, attach an explanation for continuing the arrangement (i.e., (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapp liminated).	· ·
these conditions will b ven to eliminate them,	be eliminated under the strategy, attach an implementation schedule listing each step or a , the responsible party and the agreed upon deadline for completing it.	ed (e.g., enterpris
ithese conditions will b ben to eliminate them, List each government funds, user fees, gene indebtedness, etc.).	be eliminated under the strategy, attach an implementation schedule listing each step or a , the responsible party and the agreed upon deadline for completing it. t or authority that will help to pay for this service and indicate how the service will be funde eral funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees,	ed (e.g., enterpris
these conditions will b en to eliminate them, List each government funds, user fees, gene indebtedness, etc.). Local Government or A	be eliminated under the strategy, attach an implementation schedule listing each step or a , the responsible party and the agreed upon deadline for completing it. t or authority that will help to pay for this service and indicate how the service will be funde eral funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees,	ed (e.g., enterpris
These conditions will b en to eliminate them, List each government funds, user fees, gene indebtedness, etc.). Local Government or A	be eliminated under the strategy, attach an implementation schedule listing each step or a , the responsible party and the agreed upon deadline for completing it. t or authority that will help to pay for this service and indicate how the service will be fundereral funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, further taxes in the fundereral funds in the fundereral funder	ed (e.g., enterpris
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it these conditions will b ven to eliminate them, List each government funds, user fees, gene indebtedness, etc.). Local Government or A DeKalb County	be eliminated under the strategy, attach an implementation schedule listing each step or a , the responsible party and the agreed upon deadline for completing it. t or authority that will help to pay for this service and indicate how the service will be fundereal funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, fourthority: Funding Method: General Fund & User Fees	ed (e.g., enterpris
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Agreement Name:	Contracting	Parties:		Effective and I	Ending Dates:
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	-	· · · · · · · · · · · · · · · · · · ·			
- · ·		<u></u>			
6. What other mechanisms (if any) will	be used to implement the	e strategy for this service	ce (e.g., ordinanc	es, resolutions	, local acts of the
General Assembly, rate or fee change	s, etc.), and when will t	hey take effect?			
None Needed.					
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	·	· · · ·		· · · · · · · · · · · · · · · · · · ·	
7. Person completing form: <u>H. Ru</u>	71 2002				
Phone number: 404-3	71-2883	Date completed:	ptember 1,	1999	
8. Is this the person who should be conta	icted by state agencies	when evaluating whethe	r proposed local	government pr	ojects are
consistent with the service delivery st	rategy? 🖄 Yes 🗆 No			-	
If not, provide designated contact pers	ion(s) and phone number	r(s) below:	•		,
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PAGE 2

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County: DeKalb	Service: Dispatch
1. Check the box that best describes	s the agreed upon delivery arrangement for this service:
Service will be provided count checked, identify the governm	ywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ent, authority or organization providing the service.)
Service will be provided only i	in the unincorporated portion of the county by a single service provider. (If this box is checked, prity or organization providing the service.)
D One on more sition will provid	e this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
(III One of mom office will provid	e this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
Other. (If this box is checked, government, authority, or othe	attach a legible map delineating the service area of each service provider, and identify the or organization that will provide service within each service area.)
2. In developing the strategy, were Q Yes Z No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
higher levels of service (See O.C.C. competition cannot be eliminated).	ider the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but B.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
'ten to eliminate them, the respon	ed under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
A. List each government or authori funds, user fees, general funds, indebtedness, etc.).	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
DeKalb County	General Fund &User Fees
Decatur & Chamblee	General Fund & User Fees
Atlanta, Doraville,	
_ithonia &	
Stone Mountain	General Fund
4 How will the strategy change th	e previous arrangements for providing and/or funding this service within the county?
There will be no changes.	

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
	Count Avondale Estates, Clarkston,	1999
Board of Commissioners	⁶ & Pine Lake with	
	DeKalb County	
(What ather much an immed (if any) will be u	read to implement the strategy for this servic	e (e.g., ordinances, resolutions, local acts of th
General Assembly, rate or fee changes, e	tc.), and when will they take effect?	o (o.g., or <u>ensue</u> ce), eeee
None Needed.		
		i i i i i i i i i i i i i i i i i i i
7. Person completing form: H. Russe	ll Crider	
Phone number:	-2883 Date completed:	otember 1, 1999
8. Is this the person who should be contacte	ed by state agencies when evaluating whether 2×2 V as \square No	r proposed local government projects are
consistent with the service delivery strate If not, provide designated contact person(
If not, provide designated contact person	(s) and phone number(s) below.	
		PAGE 2 (continued)
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Jurisdiction	
DeKalb County	x
Atlanta	<u>x</u>
Avondale Estates	
Chamblee	X
Clarkston	
Decatur	 X
Doraville	x
Lithonia	x
Pine Lake	
Stone Mountain	 x
Other:	
Other:	

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EMS, 911 AND DISPATCH

The County levies property taxes in the cities of Atlanta, Avondale Estates, Chamblee, Clarkston, Decatur, Doraville, Lithonia, Pine Lake and Stone Mountain for the provision of police protection. This includes EMS, 911 and dispatch services where applicable. The County also receives the statutory 911 fee that is assessed on users by the telephone company for all cities except Atlanta, Decatur and Chamblee.

In exchange for these taxes and fees, the County provides 911 services for the cities of Avondale Estates, Clarkston, Doraville, Lithonia, Pine Lake, and Stone Mountain. Calls for 911 service that are within a city are directed to the applicable city police department for response and dispatch. The County performs dispatch services for the cities of Clarkston, Avondale Estates, Pine Lake and Lithonia (on a limited basis). EMS services are provided county-wide. A copy of the County's Resolution to Levy Taxes for the year 1999 is attached hereto as Exhibit A.

SERVICE DELIVERT STRATEGY

SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2



Instructions:

1

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

County: DeKalb		Service: 911			
1 Check the box that best describes	the agreed upon delivery	arrangement for	this service:		
Service will be provided county checked, identify the governme	wide (i.e., including all ent, authority or organiza	cities and unincor tion providing the	porated areas) by a s service.)		
Service will be provided only in identify the government, author	n the unincorporated por rity or organization prov	tion of the county iding the service.)	by a single service p		
• One or more cities will provide unincorporated areas. (If this b	this service only within ox is checked, identify th	their incorporated he government(s),	l boundaries, and the authority or organiz	adon provincio	
One or more cities will provide unincorporated areas. (If this b	this service only within ox is checked, identify the	their incorporated he government(s),	l boundaries, and the authority or organiz	e county will provide ation providing the	e the service in service.)
Other. (If this box is checked, a government, authority, or other	attach a legible map de r organization that will p	lineating the serv provide service wit	ice area of each ser hin each service area	vice provider, and a.)	l identify the
2. In developing the strategy, were of	verlapping service areas	s, unnecessary con	npetition and/or dup	lication of this serv	ice identified?
2. In developing the strategy, were to	rr	-			· .
If these conditions will continue und higher levels of service (See O.C.G competition cannot be eliminated). these conditions will be eliminate ten to eliminate them, the response	.A. 36-70-24(1)), overno	ang benefits of the ach an implemen d upon deadline fo	tation schedule listion completing it.	ing each step or act	tion that will be
List each government or authorit funds, user fees, general funds, s indebtedness, etc.).	a state the second for	- this convice and	indicate how the ser	vice will be funded xes, impact fees, bo	l (e.g., enterprise onded
Local Government or Authority:	Funding Method:				
DeKalb County	User Fees				8
Cities of Atlanta,		· · ·	· · · ·	· · · · · · · · · · · · · · · · · · ·	
Chamblee, Decatur &		<u>.</u>			
Doraville	General Fund & Use	er Fees			
					-49
4. How will the strategy change the There will be no changes.	e previous arrangements	for providing and	l/or funding this serv	ice within the cour	11.y :

Agreement Name:		Contracting Parties:		Effective and	d Ending Date
vesolutions of the DeKalb (County	Atlanta, Chamblee,			
mmission		Decatur & Doraville v	with		
	· · · · · · · · · · · · · · · · · · ·	DeKalb County	· · · · · · · · · · · · · · · · · · ·		
					-
6. What other mechanisms (if General Assembly, rate or the None Needed.	f any) will be used to fee changes, etc.), as	implement the strategy for nd when will they take eff	or this service (e.g., ordi ect?	nances, resolutio	ns, local acts c
None Needed.					
	ta da anti- a da anti-				
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7. Person completing form: Phone number:	404-371-288	3 Date compl	eted:September	1, 1999	
consistent with the service If not, provide designated c				:	
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Jurisdiction	
DeKalb County	x
Atlanta	x
Avondale Estates	
Chamblee	x
Clarkston	
Decatur	x
Doraville	x
Lithonia	
Pine Lake	
Stone Mountain	
Other:	
Other:	

EMS, 911 AND DISPATCH

The County levies property taxes in the cities of Atlanta, Avondale Estates, Chamblee, Clarkston, Decatur, Doraville, Lithonia, Pine Lake and Stone Mountain for the provision of police protection. This includes EMS, 911 and dispatch services where applicable. The County also receives the statutory 911 fee that is assessed on users by the telephone company for all cities except Atlanta, Decatur and Chamblee.

In exchange for these taxes and fees, the County provides 911 services for the cities of Avondale Estates, Clarkston, Doraville, Lithonia, Pine Lake, and Stone Mountain. Calls for 911 service that are within a city are directed to the applicable city police department for response and dispatch. The County performs dispatch services for the cities of Clarkston, Avondale Estates, Pine Lake and Lithonia (on a limited basis). EMS services are provided county-wide. A copy of the County's Resolution to Levy Taxes for the year 1999 is attached hereto as Exhibit A.

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

County: DeKalb	Service: Economic Development
1 Check the box that best describ	bes the agreed upon delivery arrangement for this service:
Service will be provided course checked, identify the government.	intywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ument, authority or organization providing the service.)
identify the government, aut	y in the unincorporated portion of the county by a single service provider. (If this box is checked, hority or organization providing the service.)
unincorporated areas. (If thi	ide this service only within their incorporated boundaries, and the service will not be provided in s box is checked, identify the government(s), authority or organization providing the service.)
One or more cities will prov unincorporated areas. (If thi	ide this service only within their incorporated boundaries, and the county will provide the service in is box is checked, identify the government(s), authority or organization providing the service.)
Other. (If this box is checker government, authority, or of	d, attach a legible map delineating the service area of each service provider, and identify the the there or the
2. In developing the strategy, we	re overlapping service areas, unnecessary competition and/or duplication of this service identified?
🗆 Yes 🗹 No	
higher levels of service (See O.C competition cannot be eliminated	under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of d). nated under the strategy, attach an implementation schedule listing each step or action that will be consible party and the agreed upon deadline for completing it.
. List each government or author funds, user fees, general funds indebtedness, etc.).	ority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise s, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	
DeKalb County	General Fund & Fees
City of Decatur	Special Tax Assessment & User Fees
See Note A	
See Note B	
4. How will the strategy change	the previous arrangements for providing and/or funding this service within the county?
There will be no changes.	
There will be no on anget.	·

General Fund and Fees Note B: Cities of Atlanta and Stone Mountain - General Fund and Grants

Note A: Cities of Avondale Estates, Chamblee, Clarkston, Doraville & Lithonia -

Construction Deckab County, Cities of Atanta & Decatur with Development Authorities What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, local acts of th General Assembly, rate or fee changes, etc.), and when will they take effect? One Needed. Person completing form: H. Russell Crider Phone number: 404-371-2883 Date completed: Saptember 1, 1999 Is this the person who should be contacted by sagte agencies when evaluating whether proposed local government projects are consisted with the service delivery strategy? Y Yei D No If Bad, generate designated contact person(s) and phone number(s) below: PAGE 2 (continued)	A	Contracting Parties:	Effective and Ending Dates:
Attanta & Decatur with Development Authorities Authorities What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, local acts of th General Assembly, rate or fee changes, etc.), and when will they take effect? What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, local acts of th General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. H. Russell Crider Phone number: 404-371-2883 Date completed: September 1, 1999 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes D No If not, previde designated contact person(s) and phone number(s) below: Date completed:	Agreement Name:		
Authorities What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, local acts of th General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. Person completing form: Phone number: 404-371-2883 Date completed: September_1, 1999 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes O No If not, provide designated contact person(s) and phone number(s) below: Date completed:	·		ent
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General Assembly, rate or fee changes, etc.), and when will they take effect: None Needed. H. Russell Crider Person completing form: Phone number: <u>404-371-2883</u> Date completed: <u>September</u> 1, 1999 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No If not, provide designated contact person(s) and phone number(s) below:		Autonics	
General Assembly, rate or fee changes, etc.), and when will they take effect: None Needed. H. Russell Crider Person completing form: Phone number: <u>404-371-2883</u> Date completed: <u>September</u> 1, 1999 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No If not, provide designated contact person(s) and phone number(s) below:			(a g ordinances resolutions, local acts of the
H. Russell Crider Person completing form: Phone number: 404-371-2883 Date completed: Phone number: 404-371-2883 Date completed: Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? U Yes D No If not, provide designated contact person(s) and phone number(s) below:	b. What other mechanisms (if any) will b	e used to implement the strategy for this service	(e.g., orumanees, resources, e
H. Russell Crider Person completing form:	General Assembly, rate of lee change	s, etc.), and when which the def the	
Person completing form:	The Necuca.		
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Phone number: 404-371-2883 Date completed: September 1, 1999 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes I No If not, provide designated contact person(s) and phone number(s) below: If not, provide designated contact person(s) and phone number(s) below:	H. Ru	ssell Crider	
 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No If not, provide designated contact person(s) and phone number(s) below: 	7. Person completing form:		
consistent with the service delivery strategy? If Yes I No If not, provide designated contact person(s) and phone number(s) below:	Phone number: $404 - 371 - 2883$	Date completed:Se	<u>ptember 1, 1999</u>
consistent with the service delivery strategy? If Yes I No If not, provide designated contact person(s) and phone number(s) below:	Is this the person who should be contained	acted by state agencies when evaluating whether	proposed local government projects are
If not, provide designated contact person(s) and phone number(s) below:	consistent with the service delivery st	rategy? U Yes U No	
PAGE 2 (continued)	If not, provide designated contact per	son(s) and phone number(s) below:	
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Jurisdiction	
DeKalb County	X
Atlanta	x
Avondale Estates	x
Chamblee	x
Clarkston	x
Decatur	X
Doraville	x
Lithonia	x
Pine Lake	
Stone Mountain	x
Other: DeKalb Development Authority	x
Other: Decatur Downtown Develop. Auth.	x



Instructions:

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

County: DeKalb	Service: Community Dev Block Grant
1 Check the box that best describes	the agreed upon delivery arrangement for this service:
Service will be provided county checked, identify the governme	wide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is nt, authority or organization providing the service.)
Service will be provided only in identify the government, author	the unincorporated portion of the county by a single service provider. (If this box is checked, ity or organization providing the service.)
• One or more cities will provide unincorporated areas. (If this be	this service only within their incorporated boundaries, and the service will not be provided in ox is checked, identify the government(s), authority or organization providing the service.)
One or more cities will provide unincorporated areas. (If this b	this service only within their incorporated boundaries, and the county will provide the service in ox is checked, identify the government(s), authority or organization providing the service.)
Other. (If this box is checked, a government, authority, or other	ttach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
2. In developing the strategy, were of Yes No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
higher levels of service (See O.C.G. competition cannot be eliminated). these conditions will be eliminate en to eliminate them, the response	ther the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or d under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
funds, user fees, general funds, s indebtedness, etc.).	y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method:
Local Government or Authority:	Federal Grant Funds
DeKalb County All Cities	Federal Grant Funds
4. How will the strategy change the There will be no changes.	e previous arrangements for providing and/or funding this service within the county?

DeKaib County with Per Approved Project individual Cities	Agreement Name:		Contracting Pa	rties:		Effective and	Ending Dates:
individual Cities individual Cities individual Cities 6. What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, local acts of General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. 7. Person completing form: H. Russell Crider 404-371-2883 Date completed: September 1, 1999 8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes D No If not, provide designated contact person(s) and phone number(s) below:						Per Approv	ed Project
6. What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, local acts of General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. 7. Person completing form: H. Russell Crider 404-371-2883 Date completed: September 1, 1999 8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes □ No If not, provide designated contact person(s) and phone number(s) below: House 1 House 1							
General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. 7. Person completing form: H. Russell Crider 404-371-2883 Date completed: September 1, 1999 Phone number:	· · · · · ·						
General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. 7. Person completing form: H. Russell Crider 404-371-2883 Date completed: September 1, 1999 Phone number:				· · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
 7. Person completing form: <u>H. Russell Crider</u> 404-371-2883 Date completed: <u>September 1</u>, 1999 8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Difference in No If not, provide designated contact person(s) and phone number(s) below: 	General Assembly, rate of	if any) will be used r fee changes, etc.),	to implement the st , and when will they	trategy for this so take effect?	ervice (e.g., ordin	ances, resolution	s, local acts of
Phone number: Date completed 8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? D Yes D No If not, provide designated contact person(s) and phone number(s) below:			•				
Phone number: Date completed 8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? D Yes D No If not, provide designated contact person(s) and phone number(s) below:	н 						
Phone number: Date completed 8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? D Yes D No If not, provide designated contact person(s) and phone number(s) below:							
Phone number: Date completed 8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? D Yes D No If not, provide designated contact person(s) and phone number(s) below:		· .			• <u></u>	· ·	
Phone number: Date completed 8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? D Yes D No If not, provide designated contact person(s) and phone number(s) below:	7 Demon 1	H. Russell	Crider	· · · ·			
Phone number: Date completed 8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? D Yes D No If not, provide designated contact person(s) and phone number(s) below:	/. rerson completing form:	404-371-28	83 _		September	1, 1999	
consistent with the service delivery strategy? ⁽¹⁾ Yes ⁽¹⁾ No If not, provide designated contact person(s) and phone number(s) below:	Phone number:		Da	te completed:			
If not, provide designated contact person(s) and phone number(s) below:	8. Is this the person who sho	uld be contacted by	y state agencies whe	en evaluating wh	ether proposed lo	scal government	projects are
	If not, provide designated	contact person(s) a	and phone number(s	s) below:	in the state of th		
PAGE 2 (continued)	· · · · · · · · · · · · · · · · · · ·		- ``	<u></u>	<u> </u>	<u> </u>	· · ·
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Jurisdiction	
DeKalb County	X
Atlanta	X
Avondale Estates	- ā
Chamblee	X
Clarkston	X
Decatur	X
Doraville	
Lithonia	X
Pine Lake	
Stone Mountain	X
Other:	
Other:	

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Identification of government(s), authority or organization providing service.



Instructions:

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

County: DeKalb	Service: Building Inspections/Permits
Check the box that best describes t	he agreed upon delivery arrangement for this service:
Service will be provided county checked, identify the government	wide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is at, authority or organization providing the service.)
Service will be provided only in identify the government, author	the unincorporated portion of the county by a single service provider. (If this box is checked, ity or organization providing the service.)
One or more cities will provide unincorporated areas. (If this bc	this service only within their incorporated boundaries, and the service will not be provided in in is checked, identify the government(s), authority or organization providing the service.)
	this service only within their incorporated boundaries, and the county will provide the service in ex is checked, identify the government(s), authority or organization providing the service.)
Other (If this box is checked a	ttach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
2. In developing the strategy, were o	verlapping service areas, unnecessary competition and/or duplication of this service identified?
higher levels of service (See O.C.G., competition cannot be eliminated).	er the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
ten to eliminate them, the response	d under the strategy, attach an implementation schedule listing each step or action that will be ible party and the agreed upon deadline for completing it.
funds, user fees, general funds, sp indebtedness, etc.).	that will help to pay for this service and indicate how the service will be funded (e.g., enterprise ecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
funds, user fees, general funds, sp indebtedness, etc.). Local Government or Authority:	Funding Method:
funds, user fees, general funds, sp indebtedness, etc.). Local Government or Authority: DeKalb County	Funding Method: User Fees
funds, user fees, general funds, sp indebtedness, etc.). Local Government or Authority: DeKalb County All Cities	Funding Method:
funds, user fees, general funds, sp indebtedness, etc.). Local Government or Authority: DeKalb County	Funding Method: User Fees
funds, user fees, general funds, sp indebtedness, etc.). Local Government or Authority: DeKalb County All Cities	Funding Method: User Fees

There will be no changes.

5. List any formal s	ervice delive	ry agreements of	· intergovernmenta	l contracts th	at will be used t	o implement the s	trategy for this	
service:							•	۰.
Agreement Name:	· , · ,		Contracting Par	rties:		Effective :	and Ending Da	tes:

Intergovernmental Agreement	DeKalb County with all	^9-1-99 - 8-31-49
	Cities except Atlanta &	
	Doraville, Lithonia & Pine Lake	
Perclution	Pino lako	1983 -

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? None Needed

7. Person completing form: H. Russell Crider

Phone number: <u>404/371-2883</u>

Date completed: 9/1/99

8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy?
Q Yes Q No

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

PAGE 2 (continued)

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X
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Identification of government(s), authority or organization providing service.



DERVICE DELIVERI UINAILU

SUMIJARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions:

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

County: DeKalb	Service: Planning & Zoning
1. Check the box that best describes	the agreed upon delivery arrangement for this service:
checked, identify the governme	wide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ent, authority or organization providing the service.)
identify the government, autho	the unincorporated portion of the county by a single service provider. (If this box is checked, nity or organization providing the service.)
unincorporated areas. (If this b	this service only within their incorporated boundaries, and the service will not be provided in ox is checked, identify the government(s), authority or organization providing the service.)
	this service only within their incorporated boundaries, and the county will provide the service in ox is checked, identify the government(s), authority or organization providing the service.)
Dotton (If this have is sheaked t	ttach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
2. In developing the strategy, were of Yes 2 No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
If these conditions will continue und higher levels of service (See O.C.G	ter the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
the response them the response	d under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
	y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
All Cities	General Fund & User Fees
	Special Tax District & Grants
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4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? There will be no changes.
| greement Name: | Contracting Parties: | Effective and Ending Dates: |
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| What other mechanisms (if any) will be used | d to implement the strategy for this service (e.g., ordinar | ices, resolutions, local acts of t |
| General Assembly, rate or fee changes, etc.) |), and when will they take effect? | , |
| lone Needed. | | |
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| | | |
| Person completing form: <u>H. Russell</u> (| Crider | |
| Phone number: | Date completed: 9/1/99 | |
| <u>- [].</u> | | |
| Is this the person who should be contacted b | y state agencies when evaluating whether proposed loca | l government projects are |
| consistent with the service delivery strategy for the service delivery strategy for the service designated contact person(s) and the service designated contact person(s) and the service design and the service delivery strategy for the service d | | |
| a not, provide designated contact person(s) a | and phone number(s) below: | |
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Jurisdiction	
DeKalb County	x
Atlanta	x
Avondale Estates	x
Chamblee	x
Clarkston	x
Decatur	x
Doraville	x
Lithonia	x
Pine Lake	x
Stone Mountain	x
Other:	
Other:	<u> </u>

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ÿ	Instructions:

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

DeKalb	Service: Codes Enforcement	
ounty: DeKalb		
Check the box that best describes t	the agreed upon delivery arrangement for this service:	ce provider (If this box is
checked identify the governme	wide (i.e., including all cities and unincorporated areas) by a single service, authority or organization providing the service.)	· · · · ·
Service will be provided only in identify the government, author	n the unincorporated portion of the county by a single service provider. () rity or organization providing the service.)	
• One or more cities will provide	this service only within their incorporated boundaries, and the service work is checked, identify the government(s), authority or organization prov	U
One or more cities will provide unincorporated areas. (If this be	this service only within their incorporated boundaries, and the county work is checked, identify the government(s), authority or organization prov	ill provide the service in iding the service.)
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🖸 Yes 🗹 No		t (i.e. overlanning hut
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greement Name:	Contracting Parties:	Effective and Ending Dates:
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. What other mechanisms (if any) will be used to	implement the strategy for this service (e.g., ordined when will they take effect?	nances, resolutions, local acts of the
General Assembly, rate or fee changes, etc.), an None Needed.		
H. Russell	Crider	
Person completing form:		
Phone number: 404-371-288	Date completed:Septembe	r_1, 1999
3. Is this the person who should be contacted by st	ate agencies when evaluating whether proposed I	local government projects are
consistent with the service delivery strategy?	2 Yes 2 No	
If not, provide designated contact person(s) and	phone number(s) below:	
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	The second se	
Jurisdiction		
DeKalb County		X
Atlanta		X
Avondale Estates		X
Chamblee		x
Clarkston		x
Decatur		X
Doraville		X
Lithonia		X
Pine Lake		x
Stone Mountain		x
Other:		
Other:		

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·	Instructions:

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

County: DeKalb	Service: Public Housing
1. Check the box that best describes	the agreed upon delivery arrangement for this service:
checked, identify the governme	wide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ent, authority or organization providing the service.)
identify the government, autho	n the unincorporated portion of the county by a single service provider. (If this box is checked, rity or organization providing the service.)
unincorporated areas. (If this b	this service only within their incorporated boundaries, and the service will not be provided in ox is checked, identify the government(s), authority or organization providing the service.)
	this service only within their incorporated boundaries, and the county will provide the service in ox is checked, identify the government(s), authority or organization providing the service.)
Other. (If this box is checked, a government, authority, or othe	attach a legible map delineating the service area of each service provider, and identify the rorganization that will provide service within each service area.)
2. In developing the strategy, were of Yes 2 No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
higher levels of service (See O.C.G competition cannot be eliminated).	der the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but .A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
Ven to eliminate them, the respon	ed under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
	y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Dekalb County	Housing Authority - Fees & Grants
Cities of Atlanta, Clarkston	
Decatur & Lithonia	Housing Authority - Fees & Grants
	it is the coupty?
	e previous arrangements for providing and/or funding this service within the county?
There will be no changes.	

6. What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolution: General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. 7. Person completing form: _HRussell_Crider Phone number:404-371-2883	
General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. 7. Person completing form: <u>H. Russell Crider</u> Phone number: <u>404-371-2883</u> Date completed: <u>September 1</u> , 1999 8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government p consistent with the service delivery strategy? Yes I No If not, provide designated contact person(s) and phone number(s) below:	rojects are
General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. Person completing form: <u>H. Russell Crider</u> Phone number: <u>404-371-2883</u> Date completed: <u>September 1</u> , 1999 Is this the person who should be contacted by state agencies when evaluating whether proposed local government p consistent with the service delivery strategy? Yes No If not, provide designated contact person(s) and phone number(s) below:	rojects are
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Phone number: 404-371-2883 Date completed: September 1, 1999 Is this the person who should be contacted by state agencies when evaluating whether proposed local government p consistent with the service delivery strategy? Yes I No If not, provide designated contact person(s) and phone number(s) below: If not, provide designated contact person(s) and phone number(s) below:	
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Is this the person who should be contacted by state agencies when evaluating whether proposed local government p consistent with the service delivery strategy? Yes No If not, provide designated contact person(s) and phone number(s) below:	
consistent with the service delivery strategy? ⁽²⁾ Yes ⁽¹⁾ No If not, provide designated contact person(s) and phone number(s) below:	
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Services in DeKalb County Cities

Public Works	Atlanta	Avondale Estates	Chamblee	Clarkston	Decatur	Doraville	Lithonia	Pine Lake	Stone Mountain	DeKalb County
Water Treatment/ Water Distribution	IG-DC	There is n	These services are o fee differential b	provided by D etween custome	eKalb County a rs living in inco	as an enterprise orporated citie	e fund paid for s and unincor	by user fees. porated DeKalb	County.	D IG-ATL
Wastewater Collection & Treatment	IG-DC						-		T	D
Refuse Collection	D-Res C-Com'l	D	D	D	D	D	IG-DC	D	с	D
Landfill	с	C	С	с	C	с	с	с	с	D/C
Recycling Programs	C .	C	D	N/A	С	D	IG-DC	D	С	D
Street Construction & Maintenance	D	DC	DC	DC	D	DC	DC	DC	DC	D
Street Cleaning	D	D	D	D	D	D	D	D	D	D
Traffic Engineering	D	DC	DC	DC	DC	DC	DC	DC	DC	D
- Storm Water	D .	J	J	J	J	J	1 .	J	J	. J'
Cemetery	D	N/A	N/A	N/A	D	N/A	D	N/A	D	D
Airport	D	N/A	N/A	N/A		N/A	N/A	N/A	N/A	D

DEFINITIONS

WATER TREATMENT/WATER DISTRIBUTION: Self explanatory.

WASTEWATER COLLECTIONS & TREATMENT: Self explanatory.

REFUSE COLLECTION: Self explanatory.

LANDFILL: Use of public, private or DeKalb County is considered contract; not Intergovernmental Agreement.

RECYCLING PROGRAMS: Self explanatory.

STREET CONSTRUCTION & MAINTENANCE: Re-paving (not including LARP), pothole repair, etc. STREET CLEANING: Right-of-way mowing, tree trimming, leaf removal, etc.

TRAFFIC ENGINEERING: Self explanatory.

STORM WATER: Self explanatory.

CEMETERY: Self explanatory.

AIRPORT: Self explanatory.

D - Direct

IG-DC - Intergovernmental Agreement with DeKalb IG-A - Intergovernmental Agreement with an Authority J - Joint

C - Contractor - Pvt.

A - Authority IG-ATL - Intergovernmental Agreement with Atlanta N/A - Not Available DC - DeKalb County

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September 8, 1999 \\MALOOF1\DATA\HOME\LAW\CRITTNDN\TABLE3.AVB

Instructions:

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

ounty: DeKalb	Service: Water Treatment & Distribution
Check the box that best describes	the agreed upon delivery arrangement for this service:
Service will be provided count checked identify the government	ywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box 1 ent, authority or organization providing the service.)
Service will be provided only i identify the government, authorities	n the unincorporated portion of the county by a single service provider. (If this box is checked, rity or organization providing the service.)
One or more cities will provide unincorporated areas. (If this b	e this service only within their incorporated boundaries, and the service will not be provided in pox is checked, identify the government(s), authority or organization providing the service.)
One or more cities will provide unincorporated areas. (If this b	e this service only within their incorporated boundaries, and the county will provide the service in pox 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 r organization that will provide service within each service area.)
In developing the strategy were	overlapping service areas, unnecessary competition and/or duplication of this service identified?
Ves No	
gher levels of service (See O.C.G	der the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but i.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of
Supprise of the second state of the second sta	ed under the strategy, attach an implementation schedule listing each step or action that will be usible party and the agreed upon deadline for completing it. ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Europing Method:
ompetition cannot be eliminated). these conditions will be eliminate on to eliminate them, the respon List each government or authori funds, user fees, general funds, indebtedness, etc.). ocal Government or Authority:	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method:
ompetition cannot be eliminated). these conditions will be eliminated on to eliminate them, the respon List each government or authori funds, user fees, general funds, indebtedness, etc.). ocal Government or Authority: eKalb County	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method: Enterprise Funds
indebtedness, etc.). ocal Government or Authority: eKalb County	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method:
indebtedness, etc.). ocal Government or Authority: eKalb County ity of Atlanta	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method: Enterprise Funds
indebtedness, etc.). ocal Government or Authority: eKalb County ity of Atlanta	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method: Enterprise Funds
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indebtedness, etc.). ocal Government or Authority: eKalb County ity of Atlanta	Isible party and the agreed upon deaunite for compreting it. ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method: Enterprise Funds Enterprise Funds
mpetition cannot be eliminated). these conditions will be eliminate on to eliminate them, the respon List each government or authori funds, user fees, general funds, indebtedness, etc.). ocal Government or Authority: eKalb County ty of Atlanta	Isible party and the agreed upon deaunite for compreting it. ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method: Enterprise Funds Enterprise Funds
Suppretition cannot be eliminated). these conditions will be eliminate en to eliminate them, the respon List each government or authori funds, user fees, general funds, indebtedness, etc.). ocal Government or Authority: eKalb County ty of Atlanta	Isible party and the agreed upon deaunite for compreting it. ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method: Enterprise Funds Enterprise Funds
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ompetition cannot be eliminated). these conditions will be eliminated on to eliminate them, the respon List each government or authori funds, user fees, general funds, indebtedness, etc.). ocal Government or Authority: eKalb County ity of Atlanta	Isible party and the agreed upon deaunite for compreting it. ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method: Enterprise Funds Enterprise Funds
ompetition cannot be eliminated). these conditions will be eliminated en to eliminate them, the respon List each government or authori funds, user fees, general funds, indebtedness, etc.). ocal Government or Authority: eKalb County ity of Atlanta	Isible party and the agreed upon deaunite for compreting it. ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded Funding Method: Enterprise Funds Enterprise Funds

Agreement Name:		Contracting Parties:	Effective and Ending Dates
DeKalb County		DeKalb County with	· · · · · · · · · · · · · · · · · · ·
Service Agree			7/16/68-7/15/18
	· · · · · · · · · · · · · · · · · · ·	Atlanta	
6. What other mechanisms (if a General Assembly, rate or fe None Needed.			e.g., ordinances, resolutions, local acts of
	2 		
	H. Russell C	rider	1000
Phone number:	404-371-2883	Date completed:	cember 1, 1999
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Jurisdiction		
DeKalb County		X
Atlanta		
Avondale Estates		
Chamblee		
Clarkston		
Decatur		
Doraville		
Lithonia		
Pine Lake		
Stone Mountain		
Other:		
Other:		

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PAGE 2

Instructions:

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

County: DeKalb		Service: V	Vastewater Colle	ction & T	reatment
1. Check the box that best describes	the agreed upon delivery	arrangement f	or this service:	· · ·	
Service will be provided county checked, identify the government	wide (i.e., including all on the second s	cities and uninc tion providing	orporated areas) by the service.)	a single service p	rovider. (If this box is
Service will be provided only in identify the government, author	rity or organization prov	iding the servic	e.)		
One or more cities will provide unincorporated areas. (If this be	this service only within ox is checked, identify th	their incorporate the government(ed boundaries, and the s), authority or organ	he service will ne ization providing	ot be provided in g the service.)
One or more cities will provide unincorporated areas. (If this b	this service only within	their incorpora	ed boundaries, and	he county will pr	rovide the service in
Other. (If this box is checked, a government, authority, or other	ttach a legible map del organization that will p	ineating the se rovide service v	rvice area of each s within each service a	ervice provider rea.)	, and identify the
2. In developing the strategy, were of Yes 2 No	overlapping service areas	, unnecessary c	ompetition and/or d	plication of this	
If these conditions will continue und higher levels of service (See O.C.G. competition cannot be eliminated).	A. 36-70-24(1)), overno	ing benefits of	the duplication, or to		pping service and
f these conditions will be eliminate en to eliminate them, the response	ible party and the agreed	i upon deadune	for completing it.		
B. List each government or authority funds, user fees, general funds, s indebtedness, etc.).	y that will help to pay for pecial service district rev	r this service ar	d indicate how the s	ervice will be fur taxes, impact fee	nded (e.g., enterprise s, bonded
Local Government or Authority:	Funding Method:				
DeKalb County	Enterprise Funds				<u> </u>
City of Atlanta	Enterprise Funds	<u></u>			
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	arrangements		lle finding this of	rvice within the	county?

4. How will the strategy change the previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for providing and/or funding uns service whan are previous arrangements for previous are previous are previous arrangements for providing and/or funding uns service what are previous arrangements for previous are previous are

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
M. Clayton Treatment Plant/DeKalb	DeKalb County with	7/16/68-7/15/18
County Sewer Service	City of Atlanta	// 10/ 00 // 13/ 10
Agreement		
	······································	
6. What other mechanisms (if any) will be used to	implement the strategy for this service (e.g., ordin	nances, resolutions, local acts of the
General Assembly, rate or fee changes, etc.), a		,,
None Needed.		
		· · · · · · · · · · · · · · · · · · ·
7. Person completing form:H. Russell Cr	rider	
Phone number: <u>404/371-2883</u>	Date completed: _9/1/99	
· · · ·		
8. Is this the person who should be contacted by s	state agencies when evaluating whether proposed lo ∇S and ∇S	ocal government projects are
consistent with the service delivery strategy?		
If not, provide designated contact person(s) and	a phone number(s) below:	
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Jurisdiction	· · ·		
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DeKalb County			X
Atlanta		· · ·	· * · ·
Avondale Estates			
Chamblee			
Clarkston			
Decatur			-
Doraville			
Lithonia			
Pine Lake			
Stone Mountain			
Other:			
Other:			

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1. Answer each question	rm and complete one for each service listed on page 1, Section III. Use exactly the same service names listed on page a below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) reported to the Department of Community Affairs.
County: DeKalb	Service: Refuse Collection
	the agreed upon delivery arrangement for this service:
Service will be provided count	wide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box ent, authority or organization providing the service.)
Service will be provided only identify the government, authority	n the unincorporated portion of the county by a single service provider. (If this box is checked, rity or organization providing the service.)
	this service only within their incorporated boundaries, and the service will not be provided in ox is checked, identify the government(s), authority or organization providing the service.)
	this service only within their incorporated boundaries, and the county will provide the service in ox is checked, identify the government(s), authority or organization providing the service.)
D Outra (If this hay is checked	attach a legible map delineating the service area of each service provider, and identify the rorganization 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?
higher levels of service (See O.C.C.	der the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas.
these conditions will be eliminate	ed under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
	y that will help to pay for this service and indicate how the service will be funded (e.g., enterpris pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
DeKalb County	Enterprise Funds
City of Atlanta &	
Decatur	User Fees
All Other Cities	User Fees & General Fund
4. How will the strategy change the There will be no changes.	e previous arrangements for providing and/or funding this service within the county?

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Agreement for	DeKalb County with	
Garbage Collections and	City of Lithonia	1/1/95 -
Disposal Services		(year to year)
		diagram machine local acts of
6. What other mechanisms (if any) will be used General Assembly, rate or fee changes, etc.)	t to implement the strategy for this service (e.g., or	umances, resolutions, local acts of
None Needed.	, and when which they take effect.	
None Needed.		
L Ducco	11 Crider	
7. Person completing form:		
	2883 Date completed: September	er 1, 1999
Phone number:		
8. Is this the person who should be contacted b	y state agencies when evaluating whether propose	d local government projects are
consistent with the service delivery strategy	? 🖾 Yes 🗆 No	
If not, provide designated contact person(s)	and phone number(s) below:	
		PAGE 2 (continued)
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Jurisdiction	
DeKalb County	x
Atlanta	x
Avondale Estates	x
Chamblee	x ·
Clarkston	x
Decatur	x
Doraville	x
Lithonia	
Pine Lake	x
Stone Mountain	x
Other:	
Other:	

PAGE 2

Instructions:

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

County: DeKalb

Service: Landfill

1. Check the box that best describes the agreed upon delivery arrangement for this service:

- Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this 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.)
- □ 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.)
- □ 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?

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

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

/3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.).

Local Government or Authority: Funding Method:

DeKalb County	Enterprise Funds	
All Cities	All cities can use the County landfill	
· · · · · · · · · · · · · · · · · · ·	and pay the posted rates when	
	they use it with user fees and/or	
1	general funds	

4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?

No changes.

greement Name:		Contracting F	Parties:	Effe	ctive and Ending Dates:
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What other mecha	misms (if any) will be use	ed to implement the	strategy for this service (e	e.g., ordinances, r	esolutions, local acts of t
lone Needed.	y, rate or fee changes, etc.	.), and when will the	y take effect?	•	
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Person completing	form: <u>H. Russel</u>	l Crider		•	· .
Phone number:	404-371-2883	A	ate completed:	ember 1, 1	999
				· · · · · · · · · · · · · · · · · · ·	
Is this the person v	who should be contacted I	by state agencies wh	en evaluating whether pro	oposed local gove	rnment projects are
	e service delivery strategy				
lf not, provide desi	ignated contact person(s)	and phone number(s) below:	1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -	
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Jurisdiction		
DeKalb County		x
Atlanta		x
Avondale Estates		X
Chamblee		X
Clarkston		X
Decatur		X
Doraville		X
Lithonia		X
Pine Lake		X
Stone Mountain		X
Other:		
Other:		

Instructio	Das:
1 Answe	pies of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names listed on page t each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) this should be reported to the Department of Community Affairs.
County: DeKalb	Service: Recycling Programs
1 Check the box that be	st describes the agreed upon delivery arrangement for this service:
□ Service will be prov checked, identify th	ided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is government, authority or organization providing the service.)
D Service will be prov	vided only in the unincorporated portion of the county by a single service provider. (If this box is checked, ment, authority or organization providing the service.)
	will provide this service only within their incorporated boundaries, and the service will not be provided in as. (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 as. (If this box is checked, identify the government(s), authority or organization providing the service.)
Other. (If this box i	s checked, attach a legible map delineating the service area of each service provider, and identify the rity, or other organization that will provide service within each service area.)
2 In developing the stra	tegy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?
D Yes No	
If these conditions will on higher levels of service competition cannot be e	continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or liminated).
en to eliminate them.	be eliminated under the strategy, attach an implementation schedule listing each step or action that will be , the responsible party and the agreed upon deadline for completing it.
	t or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise eral funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or A	uthority: Funding Method:
DeKalb County	Enterprise Funds
City of Atlanta &	
Decatur	User Fees
All Other Cities	User Fees & General Fund
	this service within the county?

4. How will the strategy change the previous arrangements for providing and/or funding this service within the county There will be no changes.

service:	Contracting Parties:	Effective and Ending Dates:
Agreement Name:		
Agreement for Garbage Collection	DeKalb County with	1/1/95 -
	City of Lithonia	(year to year
and Disposal Servic	'es	
_		
 6. What other mechanisms (if any) will be a General Assembly, rate or fee changes, e None Needed. 	used to implement the strategy for this service (e.g., orditc.), and when will they take effect?	nances, resolutions, local acts of t
7. Person completing form: H. Russe 404-371-	2883Date completed:September	<u>1,</u> 1999
8. Is this the person who should be contacte consistent with the service delivery strate If not, provide designated contact person		local government projects are
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Jurisdiction	
DeKalb County	x
Atlanta	x
Avondale Estates	x
Chamblee	x .
Clarkston	
Decatur	x
Doraville	x
Lithonia	
Pine Lake	x
Stone Mountain	x
Other:	
Other:	

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Instructions:

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

County: DeKalb	Service: Street Const. & Mnt.
1. Check the box that best describe:	the agreed upon delivery arrangement for this service:
Service will be provided count checked, identify the governm	ywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ent, authority or organization providing the service.)
Service will be provided only identify the government, authors	in the unincorporated portion of the county by a single service provider. (If this box is checked, bority or organization providing the service.)
One or more cities will provid unincorporated areas. (If this	e this service only within their incorporated boundaries, and the service will not be provided in pox is checked, identify the government(s), authority or organization providing the service.)
unincorporated areas. (If this	e this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
Other. (If this box is checked, government, authority, or oth	attach a legible map delineating the service area of each service provider, and identify the error 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	ider the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but
ken to eliminate them, the respon	ed under the strategy, attach an implementation schedule listing each step or action that will be usible party and the agreed upon deadline for completing it. ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
indebtedness, etc.).	
indebtedness, etc.). Local Government or Authority:	Funding Method:
indebtedness, etc.). Local Government or Authority:	
indebtedness, etc.). Local Government or Authority: DeKalb County City of Atlanta &	Funding Method: General Fund
indebtedness, etc.). Local Government or Authority: DeKalb County	Funding Method:
indebtedness, etc.). Local Government or Authority: DeKalb County City of Atlanta &	Funding Method: General Fund
indebtedness, etc.). Local Government or Authority: DeKalb County City of Atlanta & Decatur	Funding Method: General Fund General Fund & User Fees
indebtedness, etc.). Local Government or Authority: DeKalb County City of Atlanta & Decatur	Funding Method: General Fund
indebtedness, etc.). Local Government or Authority: DeKalb County City of Atlanta & Decatur 4. How will the strategy change th	Funding Method: General Fund General Fund & User Fees
indebtedness, etc.). Local Government or Authority: DeKalb County City of Atlanta & Decatur 4. How will the strategy change th	Funding Method: General Fund General Fund & User Fees
indebtedness, etc.). Local Government or Authority: DeKalb County City of Atlanta & Decatur 4. How will the strategy change th	Funding Method: General Fund General Fund & User Fees
indebtedness, etc.). Local Government or Authority: DeKalb County City of Atlanta & Decatur 4. How will the strategy change th	Funding Method: General Fund General Fund & User Fees
indebtedness, etc.). Local Government or Authority: DeKalb County City of Atlanta & Decatur 4. How will the strategy change th	Funding Method: General Fund General Fund & User Fees

service:	Contracting Parties: Effective and Ending Da	ates:
Agreement Name:		
- ne - ne - Ne Valla	DeKalb County, with all	<i>.</i>
Resolution by DeKalb	Cities except Atlanta &	
Board of Commissioners	Decatur	
General Assembly, rate or fee changes, etc.), a None Needed.	to implement the strategy for this service (e.g., ordinances, resolutions, local act and when will they take effect?	•
7. Person completing form: <u>H. Russell</u>	l Crider	
Phone number:	Date completed:September 1, 1999	
 Is this the person who should be contacted by consistent with the service delivery strategy? If not, provide designated contact person(s) an 		
If not, provide designated contact person(s) an		
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Jurisdiction	-
DeKalb County	x
Atlanta	x
Avondale Estates	
Chamblee	
Clarkston	
Decatur	x
Doraville	
Lithonia	
Pine Lake	
Stone Mountain	
Other:	
Other:	

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Explanation for Continuing the Arrangement:

Overlapping but higher level of service.

STREET CONSTRUCTION AND MAINTENANCE

The County levies property taxes in the cities to provide street construction and maintenance. A chart indicating the different services provided in each city is attached as Exhibit A. A copy of the County's resolution to levy taxes for 1999 is attached as Exhibit B.

SERVICE DELIVERA SINGLAS

SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2



Instructions:

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

County: DeKalb	Service: Street Cleaning
Check the box that best describes the	ne agreed upon delivery arrangement for this service:
Service will be provided country checked identify the government	vide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is it, authority or organization providing the service.)
Service will be provided only in identify the government, authori	the unincorporated portion of the county by a single service provider. (If this box is checked, ty or organization providing the service.)
One or more cities will provide unincorporated areas. (If this bo	his service only within their incorporated boundaries, and the service will not be provided in x is checked, identify the government(s), authority or organization providing the service.)
	this service only within their incorporated boundaries, and the county will provide the service in x is checked, identify the government(s), authority or organization providing the service.)
Other. (If this box is checked, a government, authority, or other	tach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
2. In developing the strategy, were o	verlapping service areas, unnecessary competition and/or duplication of this service identified?
If these conditions will continue und higher levels of service (See O.C.G., competition cannot be eliminated).	er the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of the duplication.
these conditions will be eliminated	I under the strategy, attach an implementation schedule listing each step or action that will be ble party and the agreed upon deadline for completing it.
	that will help to pay for this service and indicate how the service will be funded (e.g., enterprise ecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
All	General Fund
a daga sa	

 $\sqrt{4}$. How will the strategy change the previous arrangements for providing and/or funding this service within the county? There will be no changes.

Agreement Name:		Contracting Parti	es:		Effective and	Ending Dates:
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6. What other mechanisms (if any General Assembly, rate or fee None Needed.				vice (e.g., ordina	ances, resolutions	;, local acts of the
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7. Person completing form: <u>H</u>	. Russell C	rider		·		
Phone number:4	04-371-2883	 A second sec second second sec	completed:	September	1, 1999	
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8. Is this the person who should b consistent with the service deli	e contacted by stat	te agencies when Yes 🗆 No	evaluating whe	ther proposed loc	cal government p	rojects are
If not, provide designated conta	act person(s) and p	hone number(s) b	elow:			
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					PAGE 2	(continued)
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Jurisdiction	
DeKalb County	X
Atlanta	X
Avondale Estates	X
Chamblee	X
Clarkston	X
Decatur	X
Doraville	X
Lithonia	X
Pine Lake	X
Stone Mountain	X
Other:	
Other:	
SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions:			· .	· · · · · · · · · · · · · · · · · · ·	
1 Answer each question	orm and complete one for e on below, attaching additiona reported to the Department	al pages as necessary. It un	1, Section III. Use exa contact person for this	actly the same service names last service (listed at the bottom of service)	isted on page of the page)
County: DeKalb		Service:Traff	c Engineering		
. Check the box that best describes	the agreed upon delive	ery arrangement for th	is service:		
Service will be provided count checked, identify the governm	wide (i.e., including a	Il cities and unincorp	orated areas) by a si	ingle service provider. (If this box i
Service will be provided only i identify the government, author	in the unincorporated p	ortion of the county b	y a single service p	rovider. (If this box is c	hecked,
One or more cities will provide unincorporated areas. (If this be one of the second	a this service only with	in their incorporated	oundaries, and the uthority or organiz	service will not be prov ation providing the serv	vided in ice.)
One or more cities will provid unincorporated areas. (If this I	e this service only with	in their incorporated	ooundaries, and the	e county will provide the	e service in
Other. (If this box is checked, government, authority, or other	attach a legible map	delineating the servi	e area of each ser	vice provider, and iden	nify the
2. In developing the strategy, were	overlapping service are	eas, unnecessary com	etition and/or dupl	ication of this service ic	lentified?
If these conditions will continue un higher levels of service (See O.C.C competition cannot be eliminated). If these conditions will be eliminate en to eliminate them, the respon	G.A. 36-70-24(1)), over red under the strategy, and the agr	attach an implement: eed upon deadline for	ation schedule listi completing it.	ing each step or action th	hat will be
3. List each government or authori funds, user fees, general funds, indebtedness, etc.).	special service district	for this service and in revenues, hotel/motel	dicate how the serv taxes, franchise tax	vice will be funded (e.g. kes, impact fees, bonded	, enterprise l
Local Government or Authority:	Funding Method:		<u></u>		<u> </u>
DeKalb County	General Fund			<u> </u>	<u> </u>
City of Atlanta	General Fund				<u></u>
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4. How will the strategy change th		te for providing and/	funding this serv	ice within the county?	
4. How will the strategy change the There will be no changes.	e previous arrangemen	its for providing and	Tunung une ser .	· · ·	
mere win be no changes.			· .		
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service: Agreement Name:		Contracting Pa	rties:		Effec	tive and Endi	ng Date
	•	DeKalb Cour		es			
Resolution	· · · · · · · · · · · · · · · · · · ·	except Atlant		<u></u>			
by DeKalb B	soard of			· · · · ·			
Commissione	ers	.					
6. What other mechanisms (General Assembly, rate or	if any) will be used to r fee changes, etc.),	to implement the st and when will they	trategy for this take effect?	service (e.g., oro	linances, re	solutions, loc	al acts
None Needed.				, ,			х.
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7. Person completing form:	H. Russell	<u>Crider</u>		Septembe	<u> </u>	000	۰,
Phone number:	404-371-28	83 Da	te completed:	Septembe	r 1, 1	999	
	e delivery strategy?	state agencies who Ä Yes D No	•	whether proposed	l local gove	rnment proje	cts are
8. Is this the person who sho consistent with the servic	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			
8. Is this the person who sho consistent with the servic	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed		rnment proje PAGE 2 (cor	
8. Is this the person who sho consistent with the servic	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			
8. Is this the person who sho consistent with the servic	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			
8. Is this the person who sho consistent with the servic	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			
8. Is this the person who sho consistent with the servic	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			
8. Is this the person who sho consistent with the servic	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			
8. Is this the person who sho consistent with the servic	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			
8. Is this the person who sho consistent with the servic	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			
8. Is this the person who sho consistent with the servic	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			
8. Is this the person who sho consistent with the servic	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			
8. Is this the person who sho consistent with the servic If not, provide designated	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			
8. Is this the person who sho consistent with the servic If not, provide designated	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			
8. Is this the person who sho consistent with the servic If not, provide designated	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			
8. Is this the person who sho consistent with the servic If not, provide designated	e delivery strategy?	state agencies who Ä Yes D No	•	vhether proposed			

	and the second s
Jurisdiction	
DeKalb County	X .
Atlanta	x
Avondale Estates	
Chamblee	
Clarkston	
Decatur	
Doraville	
Lithonia	
Pine Lake	
Stone Mountain	
Other:	
Other:	



TRAFFIC ENGINEERING

The County levies property taxes in the cities to provide traffic engineering. Traffic Engineering provides the maintenance for all traffic signals within DeKalb County with the exception of those within the City of Atlanta. Traffic Engineering provides the installation of all traffic signals on county routes and almost all state installations. All traffic signal requests from cities are handled in the same manner as requests from unincorporated DeKalb County. All signals are installed at warranted locations with the exception of Commerce Drive @ West Howard, in the city of Decatur. The city of Decatur has assumed all liability for the non-warranted location and is supporting the installation of a second non-warranted location.

Speed hump/cut-thru traffic service is offered to all cities. The city of Decatur has refused the service and no other city has responded to the written invitation. The city of Chamblee has installed two speed humps on Pearl Lane on their own. The County does not perform this service in Atlanta.

Regulatory signs are made for all cities at no charge. Non-regulatory signs are made for all cities at cost. Regulatory signs meeting MUTCD guidelines are installed for cities except Chamblee and Doraville. "No parking" signs are not installed for the cities. Decatur does their own signs.

The County performs normal striping for all cities at no charge. The County does charge for special stripes.

A copy of the County's resolution to levy taxes for 1999 is attached as Exhibit B.

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions:

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

County: DeKalb	Service: Storm Water	
	bes the agreed upon delivery arrangement for this service:	
D Service will be provided of	intywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this bo imment, authority or organization providing the service.)	x is
Service will be provided or identify the government, a	ly in the unincorporated portion of the county by a single service provider. (If this box is checked, thority or organization providing the service.)	
One or more cities will pro unincorporated areas. (If t	vide this service only within their incorporated boundaries, and the service will not be provided in is box is checked, identify the government(s), authority or organization providing the service.)	
	vide this service only within their incorporated boundaries, and the county will provide the service is box is checked, identify the government(s), authority or organization providing the service.)	n
Dubar (If this how is check	ed, attach a legible map delineating the service area of each service provider, and identify the ther organization that will provide service within each service area.)	
2. In developing the strategy, w	re overlapping service areas, unnecessary competition and/or duplication of this service identified?	2
en to eliminate them, the re	nated under the strategy, attach an implementation schedule listing each step or action that will be ponsible party and the agreed upon deadline for completing it. ority that will help to pay for this service and indicate how the service will be funded (e.g., enterprises, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded	
Local Government or Authorit	: Funding Method:	
DeKalb County	Special Tax District & General Fund	
City of Atlanta	Enterprise Fund	
All other Cities	General Fund	
4. How will the strategy change	the previous arrangements for providing and/or funding this service within the county?	
There will be no changes		
		•

greement Name:	Contracting Parties:	Effective and Ending Dates:
orm Water Agreement	DeKalb County with all	see attached
onn water Agreement	Cities except Atlanta	
<u> </u>		
What other mechanisms (if any) will be us General Assembly, rate or fee changes, etc	sed to implement the strategy for this service (e.g., ordinal c_{1}) and when will they take effect?	ances, resolutions, local acts of
lone Needed	c.), and when will dely take effect.	
-		
Person completing form: H. Russell Cri		
Phone number: <u>404/371-2883</u>	Date completed: <u>9/1/99</u>	_ ·
Is this the person who should be contacted	by state agencies when evaluating whether proposed lo	al government projects are
consistent with the service delivery strateg	gy? \Box Yes \Box No	car government projects are
If not, provide designated contact person(s		
· · · ·		PAGE 2 (continued)
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Avondale	12/31/96 -
	12/30/46
Chamblee	9/16/97 -
	9/15/47
Clarkston	10/7/97
	10/6/47
Decatur	8/31/99 -
	8/31/49
Doraville	9/3/97 –
	9/2/47
Lithonia	12/31/96 -
	12/30/46
Pine Lake	9/9/96 -
	9/8/46
Stone Mountain	12/2/97 –
· · ·	12/1/47

Jurisdiction	
DeKalb County	x
Atlanta	x
Avondale Estates	x
Chamblee	x
Clarkston	X
Decatur	x
Doraville	x
Lithonia	x
Pine Lake	x
Stone Mountain	x
Other:	
Other:	

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SERVICE DELIVERI STRATEG SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

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

	Service: Cemetery
County: DeKalb	
1. Check the box that best describes th	agreed upon delivery arrangement for this service:
Service will be provided countyw	e (i.e., including all cities and unincorporated areas) by a single service provider. (If this our is authority or organization providing the service.)
Service will be provided only in tidentify the government, authorit	e unincorporated portion of the county by a single service provider. (If this box is checked, or organization providing the service.)
• One or more cities will provide t	s service only within their incorporated boundaries, and the service will not be provided in s checked, identify the government(s), authority or organization providing the service.)
A	s service only within their incorporated boundaries, and the county will provide the service in s checked, identify the government(s), authority or organization providing the service.)
Other. (If this box is checked, at government, authority, or other	ch a legible map delineating the service area of each service provider, and identify the ganization that will provide service within each service area.)
2 In developing the strategy were ov	lapping service areas, unnecessary competition and/or duplication of this service identified?
□ Yes 2 No	~~FF ~~ 0 ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
If these conditions will continue under higher levels of service (See O.C.G.A competition cannot be eliminated).	the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas o
these conditions will be eliminated	nder the strategy, attach an implementation schedule listing each step or action that will be e party and the agreed upon deadline for completing it.
J. List each government or authority funds, user fees, general funds, sp indebtedness, etc.).	at will help to pay for this service and indicate how the service will be funded (e.g., enterprise ial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
	nding Method:
DeKalb County	eneral Fund (Pauper Cemetery Only)
Cities of Decatur,	eneral Fund & User Fees
Lithonia &	
Stone Mountain	
1	
4 How will the strategy change the	evious arrangements for providing and/or funding this service within the county?
There will be no changes.	

service: Agreement Name:	Contracting Parties: Effective and Ending	Dates:
· · · · · · · · · · · · · · · · · · ·		
• · · · · · · · · · · · · · · · · · · ·		
	s (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, local	acts of t
-	or fee changes, etc.), and when will they take effect?	
None Needed.		
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7. Person completing form	H. Russell Crider	
Phone number:	404-371-2883 Date completed: September 1, 1999	
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	PAGE 2 (contin	ued)
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Jurisdiction	•
DeKalb County	X
Atlanta	X
Avondale Estates	
Chamblee	
Clarkston	
Decatur	X
Doraville	
Lithonia	X
Pine Lake	
Stone Mountain	X
Other:	
Other:	



SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions:

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

County: DeKalb	Service: Animal Control
. Check the box that best describes	the agreed upon delivery arrangement for this service:
Service will be provided count checked, identify the government	ywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ent, authority or organization providing the service.)
Service will be provided only i identify the government, author	n the unincorporated portion of the county by a single service provider. (If this box is checked, rity or organization providing the service.)
unincorporated areas. (If this b	e this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	e this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
Debon (If this how is checked	attach a legible map delineating the service area of each service provider, and identify the r 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 D No	
If these conditions will continue un higher levels of service (See O.C.G competition cannot be eliminated).	der the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
"en to eliminate them, the respon	ed under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
~ /	y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
All	General Fund
the second s	

4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? There will be no changes.

Agreement Name:	Contracting Parties:		Effective and Endi	ng Dates:
	· · · · · · · · · · · · · · · · · · ·	F	1	
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6. What other mechanisms (if any) will be used to i General Assembly, rate or fee changes, etc.), and None Needed.	implement the strategy for this ser d when will they take effect?	rvice (e.g., ordinand	ces, resolutions, loc	al acts of t
			· . ·	
	·			
7. Person completing form: <u>H. Russell</u>	Crider		. · ·	
Phone number: 404-371-288	83 Date completed: Se	eptember 1,	1999	
8. Is this the person who should be contacted by sta consistent with the service delivery strategy?	ate agencies when evaluating whe X Yes D No	ther proposed local	i government projec	.15 arc
If not, provide designated contact person(s) and				
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Jurisdiction	
DeKalb County	x
Atlanta	
Avondale Estates	
Chamblee	x
Clarkston	
Decatur	 x
Doraville	 x
Lithonia	
Pine Lake	
Stone Mountain	
Other:	1
Other:	



Explanation for Continuing the Arrangement:

Overlapping but higher level of service.

ANIMAL CONTROL

The County property taxes levied by the County in the cities of Avondale Estates, Clarkston, Lithonia, Pine Lake and Stone Mountain includes the provision of Animal Control services. Each of those cities has adopted the County's Animal Control Code and authorized the County to enforce it and collect applicable fees within the city. A copy of the authorization/code for each city is attached. Atlanta contracts with the board of public health of DeKalb County for the enforcement of its Animal Control Code. A copy of the applicable Atlanta code section is attached. Chamblee, Decatur and Doraville provide this service.

SERVICE DELIVERI SINALEVA

SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2



Instructions:

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

County: DeKalb	Service: Airport
1 Check the box that best describes	the agreed upon delivery arrangement for this service:
Service will be provided count	ywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this bosent, authority or organization providing the service.)
Service will be provided only i identify the government, author	n the unincorporated portion of the county by a single service provider. (If this box is checked, rity or organization providing the service.)
— — · · · · · · · · · · · · · · · · · ·	e this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
One or more cities will provide unincorporated areas. (If this b	e this service only within their incorporated boundaries, and the county will provide the service is box is checked, identify the government(s), authority or organization providing the service.)
D Other (If this has is checked	attach a legible map delineating the service area of each service provider, and identify the 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? der the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but
f these conditions will be eliminated).	der the strategy, attach an explanation for continuing the unitarguate overlapping service area A.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service area ed under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it. ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
DeKalb County	Enterprise Fund
City of Atlanta	Enterprise Fund
and the second	
1944),	
	e previous arrangements for providing and/or funding this service within the county?
	e previous arrangements for providing and/or funding this service within the county?
4. How will the strategy change the	e previous arrangements for providing and/or funding this service within the county?
4. How will the strategy change th	e previous arrangements for providing and/or funding this service within the county?

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
<u></u>	•	
	· · · · · · · · · · · · · · · · · · ·	
	<u> </u>	
. What other mechanisms (if any) will be used to General Assembly, rate or fee changes, etc.), as	o implement the strategy for this service (e.g. nd when will they take effect?	, ordinances, resolutions, local acts of th
None Needed.	nd when will divy take chect.	
H. Russell	Crider	
. Person completing form:		
Phone number: 404-371-28	83 Date completed: Septer	mber 1, 1999
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. Is this the person who should be contacted by s consistent with the service delivery strategy?	tate agencies when evaluating whether prop	osed local government projects are
If not, provide designated contact person(s) and		
2 100, provide designated contact person(s) and		
		PAGE 2 (continued)
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Jurisdiction	
DeKalb County	x
Atlanta	X
Avondale Estates	
Chamblee	
Clarkston	
Decatur	
Doraville	
Lithonia	
Pine Lake	
Stone Mountain	
Other:	
Other:	

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Leisure Services	Atlanta	Avondale Estates	Chamblee	Clarkston	Decatur	Doraville	Lithonia	Pine Lake	Stone Mountain	DeKalb County
Parks	D	D	D	D	D	D	D IG-DC	D	D	D
Recreation Programs	D	N/A	D	N/A	D	D	N/A	D	D	D
Libraries	DC	DC	DC	DC	IG-DC	IG-DC	DC	DC	DC	D

Services in DeKalb County Cities

DEFINITIONS

PARKS: Physical facilities. **RECREATION PROGRAMS:** Conducted by formal, paid staff; not to include volunteer community programs. **LIBRARIES:** Self explanatory.

> D - Direct IG-DC - Intergovernmental Agreement with DeKalb IG-A - Intergovernmental Agreement with an Authority J - Joint C - Contractor - Pvt. A - Authority IG-ATL - Intergovernmental Agreement with Atlanta N/A - Not Available DC - DeKalb County

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September 8, 1999 \\MALOOF1\DATA\HOME\LAW\CRITTNDN\TABLE3.AVB

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2

Instructions:

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

County:DeKalb	Service: Parks	
. Check the box that best describes the agreed upon delivery	arrangement for this service:	
Service will be provided countywide (i.e., including all c checked, identify the government, authority or organizat		single service provider. (If this box is
Service will be provided only in the unincorporated port identify the government, authority or organization provided		provider. (If this box is checked,
One or more cities will provide this service only within t unincorporated areas. (If this box is checked, identify the		
One or more cities will provide this service only within t unincorporated areas. (If this box is checked, identify the	their incorporated boundaries, and the government(s), authority or organi	ne county will provide the service in zation providing the service.)
Conter. (If this box is checked, attach a legible map deling government, authority, or other organization that will provide the second		
2. In developing the strategy, were overlapping service areas,	unnecessary competition and/or dup	plication of this service identified?
If these conditions will continue under the strategy, attach an higher levels of service (See O.C.G.A. 36-70-24(1)), overridin competition cannot be eliminated).	n explanation for continuing the an ng benefits of the duplication, or rea	rrangement (i.e., overlapping but asons that overlapping service areas or
f these conditions will be eliminated under the strategy, attactive taken to eliminate them, the responsible party and the agreed	upon deadline for completing it.	•
3. List each government or authority that will help to pay for the funds, user fees, general funds, special service district reverse indebtedness, etc.).	this service and indicate how the ser nues, hotel/motel taxes, franchise ta	vice will be funded (e.g., enterprise xes, impact fees, bonded
Local Government or Authority: Funding Method:		
All General Fund,	User Fees and Bonde	d Debt.
	· · · · · · · · · · · · · · · · · · ·	
4. How will the strategy change the previous arrangements for	r providing and/or funding this servi	ce within the county?

5. List any formal service delivery agreements or in service:	ntergovernmental contracts that will be used to imple	ement the strategy for this
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Lease Agreement	DeKalb County with Lithonia	1/1/78 - 12/31/03
5. What other mechanisms (if any) will be used to i General Assembly, rate or fee changes, etc.), and None needed.	implement the strategy for this service (e.g., ordinand d when will they take effect?	ces, resolutions, local acts of the
7. Person completing form: H. Russell	Crider	en de la constante de la const - co nstante de la constante de
Phone number:	Date completed: September 1	, 1999
If not, provide designated contact person(s) and p	phone number(s) below:	
If not, provide designated contact person(s) and j	phone number(s) below:	PAGE 2 (continued)
If not, provide designated contact person(s) and j	phone number(s) below:	PAGE 2 (continued)
If not, provide designated contact person(s) and j	phone number(s) below:	PAGE 2 (continued)
It not, provide designated contact person(s) and j	phone number(s) below:	PAGE 2 (continued)
If not, provide designated contact person(s) and j	phone number(s) below:	PAGE 2 (continued)

Explanation for Continuing the Arrangement:

Overlapping but higher level of service.

Jurisdiction	
DeKalb County	x
Atlanta	x
Avondale Estates	х
Chamblee	x
Clarkston	x
Decatur	x
Doraville	x
Lithonia	X
Pine Lake	x
Stone Mountain	x
Other:	
Other:	



SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2

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

County: DeKalb	Service: Recreation Programs
	s the agreed upon delivery arrangement for this service:
	ywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is lent, authority or organization providing the service.)
	in the unincorporated portion of the county by a single service provider. (If this box is checked, prity or organization providing the service.)
	e this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	e this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
	attach a legible map delineating the service area of each service provider, and identify the rorganization that will provide service within each service area.)
ん. In developing the strategy, were む Yes ロ No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
If these conditions will continue und higher levels of service (See O.C.G competition cannot be eliminated).	der the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but .A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
	d under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
	y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
DeKalb County, Atlanta, Chamblee,	General Fund, User Fees and Bonded Debt.
Decatur, Doraville,	
Pine Lake, and	
Stone Mountain	
4. How will the strategy change the	previous arrangements for providing and/or funding this service within the county?

N,	service:	greements or i	ntergovernmental	contracts that wil	I be used to imp	plement the strat	egy for this
t A	Agreement Name:		Contracting Part	ies:		Effective and	Ending Dates:
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6	. What other mechanisms (if any) w General Assembly, rate or fee cha				ice (e.g., ordina	nces, resolution:	s, local acts of the
.	None needed.		·			- *	
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7	. Person completing form:H.	Russell	Crider			•	
		71-2883	Date	completed:	September	1. 1999	
-	. Is this the person who should be c					,	rojects are
0	consistent with the service deliver			evaluating when	er proposed toe	ai government p	lojects are
	If not, provide designated contact	person(s) and	phone number(s)	below:	· · ·	· .	-
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Jurisdiction	
DeKalb County	X
Atlanta	X
Avondale Estates	
Chamblee	X
Clarkston	
Decatur	Х
Doraville	X
Lithonia	•
Pine Lake	X
Stone Mountain	X
Other:	
Other:	



SERVICE DELIVERY ARRANGEMENTS

PAGE 2

Instructions:

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

County: DeKalb

Service: Library Services

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- 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.)
- 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.)
- 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?

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

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

List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.).

Local Government or Authority: Funding Method:

Local Ouvernment of Hudsondy.		a de la companya de l		
DeKalb County	General Fund, State Grants &	L	 · · · · · · · · · · · · · · · · · · ·	
	Bonded Debt.		 	
City of Doraville	General Fund	· · · · · · · · · · · · · · · · · · ·	 · · · · · · · · · · · · · · · · · · ·	· ·
City of Decatur	General Fund		· · · · · · · · · · · · · · · · · · ·	
			·	

4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? There will be no changes.

service:		•
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Library Services	City of Decatur with Library Board	·. · .
	of Trustees	3/5/98 - 3/4/01
	City of Doraville with DeKalb	
	County Public Library	1991- (year to y

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? None Needed

7. Person completing form: H. Russell Crider

Phone number: <u>404/371-2883</u>

Date completed: 9/1/99

8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? • Yes • No

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

PAGE 2 (continued)

Explanation for Continuing the Arrangement:

Overlapping but higher level of service.

			÷ .	
Jurisdiction].
DeKalb County		• .	X	
Atlanta				
Avondale Estates				
Chamblee				
Clarkston	· · · · ·			
Decatur				
Doraville				-
Lithonia				
Pine Lake				
Stone Mountain				
Other:			*	. *
Other:	· · ·			

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Identification of government(s), authority or organization providing service.


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Health and Social Services	Atlanta	Avondale Estates	Chamblee	Clarkston	Decatur	Doraville	Lithonia	Pine Lake	Stone Mountain	DeKalb County
Physical Health/ Environmental Health	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	J
Hospital	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	A
Mental Health/ Substance Abuse	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	. N/A	j
Welfare	N/A	"N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	J
-Senior Services	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	° C

Services in DeKalb County Cities

DEFINITIONS

PHYSICAL HEALTH/ENVIRONMENTAL HEALTH: Services provided by the DeKalb County Board of Health, including primary health care and clinical laboratory services such as immunizations, flu shots, hearing and vision examinations, prenatal services, adolescent health services and communicable disease clinics. Services also include injury control, birth and death certificates, health data collection and through the Environmental Health Division the inspection of restaurants, swimming pools and septic tanks. The Board of Health is funded through the Georgia Department of Human Resources, along with fees for services, grants and contributions.

HOSPITAL: Services provided through the Fulton-DeKalb Hospital Authority, known as the Grady Health System. This is a joint authority, with partial funding by Fulton and DeKalb counties. Services are also provided through the DeKalb Hospital Authority, which is DeKalb Medical Center.

MENTAL HEALTH/SUBSTANCE ABUSE: Services are provided through the DeKalb County Community Service Board. The services include comprehensive preventive, early detection, rehabilitation and treatment services for five major groups: adults with serious or chronic mental illness, children and adolescents who are severely emotionally disturbed, people who are mentally retarded, adults addicted to alcohol or other drugs and teens with alcohol and drug problems. Services are provided through community mental health center clinics, mental retardation day training centers, detoxification units, day treatment programs, and a variety of residential programs for all disability groups. A number of the community programs are operated through contracts with private nonprofit agencies. WELFARE: (Temporary Assistance for Needy Families/TANF) - State program based in DeKalb County. TANF provides assistance to

needy families with children on a temporary basis and provides parents with job preparation, work opportunities and other support services such as child care, to enable them to become self-sufficient and leave the program as soon as possible. Services also include foster care and adoption where appropriate, helps parents collect child support and provide adult protection services.

SENIOR SERVICES: Services provided through Senior Connections, a non-profit organization designated by the County to provide comprehensive services for persons 55 and older. Services include congregate meals and fellowship, transportation, home-delivered meals, home health care and home maintenance programs. Programs are designed to help older people maintain independence and avoid premature institutionalization.

D - Direct

IG-DC - Intergovernmental Agreement with DeKalb IG-A - Intergovernmental Agreement with an Authority J - Joint C - Contractor - Pvt. A - Authority IG-ATL - Intergovernmental Agreement with Atlanta N/A - Not Available DC - DeKalb County

September 8, 1999 \\MALOOF1\DATA\HOME\LAW\CRITTNDN\TABLE3.AVB

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PAGE 2



Instructions:

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

County: DeKalb	Service: Physical Health / Environmental Health
1 Check the box that best describes t	he agreed upon delivery arrangement for this service:
Service will be provided county checked, identify the government	wide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box 1s at, authority or organization providing the service.)
Service will be provided only in identify the government, author	the unincorporated portion of the county by a single service provider. (If this box is checked, ity or organization providing the service.)
One or more cities will provide unincorporated areas. (If this bo	this service only within their incorporated boundaries, and the service will not be provided in x is checked, identify the government(s), authority or organization providing the service.)
	this service only within their incorporated boundaries, and the county will provide the service in x is checked, identify the government(s), authority or organization providing the service.)
D Other (If this hox is checked a	ttach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
2. In developing the strategy, were o	verlapping service areas, unnecessary competition and/or duplication of this service identified?
higher levels of service (See O.C.G. competition cannot be eliminated).	er the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
'en to eliminate them, the respons	l under the strategy, attach an implementation schedule listing each step or action that will be ble party and the agreed upon deadline for completing it.
J. List each government or authority funds, user fees, general funds, sp indebtedness, etc.).	that will help to pay for this service and indicate how the service will be funded (e.g., enterprise ecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
DeKalb County	County General Fund, State and User Fees.
Board of Health	
the second s	
4. How will the strategy change the There will be no changes.	previous arrangements for providing and/or funding this service within the county?

6. What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, local acts General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. 7. Person completing form: 7. Person completing form: 7. Person completing form: 7. Possen number: 404-371-2883 Date completed: September 1, 1999 8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? df Ves U No 14 not, provide designated contact person(s) and phone number(s) below: 7. PAGE 2 (continued	Agreement Name:	Contracting Parties:	Effective and Ending D	ates:
General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. 7. Person completing form:	······································			
General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. H. Russell Crider Person completing form:				
General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. H. Russell Crider Person completing form: Phone number:404-371-2883 Date completed: Date completed: September 1, 1999 3. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? @Yes D No If not, provide designated contact person(s) and phone number(s) below:	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. H. Russell Crider Person completing form: Phone number:404-371-2883 Date completed: Date completed: September 1, 1999 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy?	· · · · · · · · · · · · · · · · · · ·			
General Assembly, rate or fee changes, etc.), and when will they take effect? None Needed. T. Person completing form:	What other mechanisms (if any) will be used to	implement the strategy for this service (e.g.	ordinances resolutions local ac	
H. Russell Crider 7. Person completing form: Phone number:404-371-2883 Date completed:September 1, 1999 8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? If Yes I No If not, provide designated contact person(s) and phone number(s) below:			., 01011111003, 100010101013, 10001 40	
7. Person completing form:	None Needed.			
7. Person completing form:		· · · · · · · · · · · · · · · · · · ·		
7. Person completing form:				
7. Person completing form:				
7. Person completing form:				
Phone number: 404-371-2883 Date completed: September 1, 1999 8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? If yes I No If not, provide designated contact person(s) and phone number(s) below: If not, provide designated contact person(s) and phone number(s) below:	. Person completing form:	lider		
B. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? If not, provide designated contact person(s) and phone number(s) below:	Phone number: 404-371-2883	Date completed, Septer	nber 1, 1999	
consistent with the service delivery strategy? 2 Yes D No If not, provide designated contact person(s) and phone number(s) below:		Date completed:		
If not, provide designated contact person(s) and phone number(s) below:	. Is this the person who should be contacted by sta	tate agencies when evaluating whether prop	osed local government projects ar	e
PAGE 2 (continued	in not, provide designated contact person(s) and	phone number(s) below:		
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Chamblee	
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Lithonia	
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Stone Mountain	
Other:	
Other:	

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Instruction	s:
1 Ancular e	es of this form and complete one for each service listed on page 1, Section III. Use exactly the same service names listed on page ach question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) is should be reported to the Department of Community Affairs.
County: DeKalb	Service: Public Hospital
	describes the agreed upon delivery arrangement for this service:
Service will be provid checked, identify the	led countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is government, authority or organization providing the service.)
Service will be provide identify the governme	led only in the unincorporated portion of the county by a single service provider. (If this box is checked, ent, authority or organization providing the service.)
	ill provide this service only within their incorporated boundaries, and the service will not be provided in . (If this box is checked, identify the government(s), authority or organization providing the service.)
	ill provide this service only within their incorporated boundaries, and the county will provide the service in (If this box is checked, identify the government(s), authority or organization providing the service.)
□ Other. (If this box is government, authorit	checked, attach a legible map delineating the service area of each service provider, and identify the y, or other organization that will provide service within each service area.)
2. In developing the strate	egy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?
higher levels of service (S competition cannot be elin	ontinue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but Gee O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or minated).
en to eliminate them, t	e eliminated under the strategy, attach an implementation schedule listing each step or action that will be he responsible party and the agreed upon deadline for completing it.
J. List each government of funds, user fees, generatindebtedness, etc.).	or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise al funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Au	thority: Funding Method:
Fulton-DeKalb	Special Tax Assessment
Hospital Authority	
. /	
4. How will the strategy	change the previous arrangements for providing and/or funding this service within the county?
There will be no char	
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greement Name:		Contracting Par	ties:		Effective and l	Ending Dates:
		DeKalb Count			1/1/84_	-12/31/
	· · · · · · · · · · · · · · · · · · ·		o Hospital Auth	nority		12/ 32/
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	<u>.</u>					
What other mechanisms (if any General Assembly, rate or fee o lone Needed.) will be used to i changes, etc.), and	i when will they	take effect?			,
	an an trèine 1970 1970 - Charles Anna Anna Anna Anna Anna Anna Anna Ann					
H.	Russell	Crider	· · · · · · · · · · · · · · · · · · ·			
. Person completing form:	04-371-288			Sontombor	 1 1000	
Phone number: 40	J4-3/1-200	<u> </u>	te completed:	September		
. Is this the person who should b consistent with the service deli If not, provide designated conta	very strategy?	X Yes 🖸 No		•••	- · ·	
<u> </u>			· · · · · · · · · · · · · · · · · · ·	·	PAGE 2	(continued)
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Jurisdiction	
DeKalb County	
Atlanta	
Avondale Estates	
Chamblee	
Clarkston	
Decatur	
Doraville	
Lithonia	
Pine Lake	
Stone Mountain	
Other: Fulton-DeKalb Hospital Authority	x
Other:	

Instructions:

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

County: DeKalb	Service: Mental Health/Substance Abuse
	the agreed upon delivery arrangement for this service:
Service will be provided count	ywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ent, authority or organization providing the service.)
Service will be provided only i identify the government, author	n the unincorporated portion of the county by a single service provider. (If this box is checked, rity or organization providing the service.)
One or more cities will provide	e this service only within their incorporated boundaries, and the service will not be provided in tox is checked, identify the government(s), authority or organization providing the service.)
• One or more cities will provide unincorporated areas. (If this b	e this service only within their incorporated boundaries, and the county will provide the service in tox is checked, identify the government(s), authority or organization providing the service.)
Other. (If this box is checked, government, authority, or othe	attach a legible map delineating the service area of each service provider, and identify the rorganization that will provide service within each service area.)
2. In developing the strategy, were a Yes 🗹 No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
If these conditions will continue un higher levels of service (See O.C.G competition cannot be eliminated).	der the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but .A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
these conditions will be eliminate ken to eliminate them, the response	ed under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
. List each government or authorit funds, user fees, general funds, s indebtedness, etc.).	y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
DeKalb County	
Community Service	
Board	

4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? There will be no changes.

	Contracting Parties:	a start a	Effective and Ending Dates:
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· · ·			
		· · · · ·	
H. Russell C	rider	· · ·	
		September 1	, 1999
e delivery strategy? 🛛	Yes 🗆 No	hether proposed local	government projects are
	H. Russell C 404-371-2883 uld be contacted by sta e delivery strategy?	if any) will be used to implement the strategy for this r fee changes, etc.), and when will they take effect? H. Russell Crider 404-371-2883 Date completed:	if any) will be used to implement the strategy for this service (e.g., ordinand r fee changes, etc.), and when will they take effect? H. Russell Crider 404-371-2883 Date completed:September 1 uld be contacted by state agencies when evaluating whether proposed local edelivery strategy?

Jurisdiction	· .	
DeKalb County		X
Atlanta		
Avondale Estates		
Chamblee		
Clarkston		. · ·
Decatur		
Doraville		
Lithonia		
Pine Lake		
Stone Mountain		
Other:		
Other:		



Instructions:

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

	Service: Welfare	
County: DeKalb	es the agreed upon delivery arrangement for this service:	
Service will be provided cou	ntywide (i.e., including all cities and unincorporated areas) b ment, authority or organization providing the service.)	y a single service provider. (If this box is
Service will be provided onl identify the government, aut	y in the unincorporated portion of the county by a single serv hority or organization providing the service.)	
unincorporated areas. (If thi	ide this service only within their incorporated boundaries, and s box is checked, identify the government(s), authority or org	anization providing the services,
	ide this service only within their incorporated boundaries, and s box is checked, identify the government(s), authority or org	d the county will provide the service in
D Other (If this box is checke	d, attach a legible map delineating the service area of each her organization that will provide service within each service	service provider, and identify the
2. In developing the strategy, we	e overlapping service areas, unnecessary competition and/or	duplication of this service identified?
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these conditions will be elimin ken to eliminate them, the resp List each government or author funds, user fees, general funds indebtedness, etc.).	ated under the strategy, attach an implementation schedule onsible party and the agreed upon deadline for completing it. rity that will help to pay for this service and indicate how the , special service district revenues, hotel/motel taxes, franchis Funding Method:	service will be funded (e.g., enterprise
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 these conditions will be eliminities the eliminate them, the resp . List each government or author funds, user fees, general funds indebtedness, etc.). Local Government or Authority: DeKalb County 	onsible party and the agreed upon deadline for completing it. rity that will help to pay for this service and indicate how the , special service district revenues, hotel/motel taxes, franchis Funding Method:	service will be funded (e.g., enterprise
these conditions will be elimin ken to eliminate them, the resp List each government or author funds, user fees, general funds indebtedness, etc.). Local Government or Authority: DeKalb County	onsible party and the agreed upon deadline for completing it. rity that will help to pay for this service and indicate how the , special service district revenues, hotel/motel taxes, franchis Funding Method:	service will be funded (e.g., enterprise
these conditions will be elimin ken to eliminate them, the resp List each government or author funds, user fees, general funds indebtedness, etc.). Local Government or Authority: DeKalb County	onsible party and the agreed upon deadline for completing it. rity that will help to pay for this service and indicate how the , special service district revenues, hotel/motel taxes, franchis Funding Method:	service will be funded (e.g., enterprise
these conditions will be elimin ken to eliminate them, the resp List each government or author funds, user fees, general funds indebtedness, etc.). Local Government or Authority: DeKalb County	onsible party and the agreed upon deadline for completing it. rity that will help to pay for this service and indicate how the , special service district revenues, hotel/motel taxes, franchis Funding Method:	e service will be funded (e.g., enterprise e taxes, impact fees, bonded
these conditions will be elimin ken to eliminate them, the resp List each government or author funds, user fees, general funds indebtedness, etc.). Local Government or Authority: DeKalb County	onsible party and the agreed upon deadline for completing it. rity that will help to pay for this service and indicate how the , special service district revenues, hotel/motel taxes, franchis Funding Method: State Funds	e service will be funded (e.g., enterprise e taxes, impact fees, bonded
these conditions will be elimin ken to eliminate them, the resp List each government or author funds, user fees, general funds indebtedness, etc.). Local Government or Authority: DeKalb County	onsible party and the agreed upon deadline for completing it. rity that will help to pay for this service and indicate how the , special service district revenues, hotel/motel taxes, franchis Funding Method: State Funds	e service will be funded (e.g., enterprise e taxes, impact fees, bonded
these conditions will be elimin ken to eliminate them, the resp List each government or author funds, user fees, general funds indebtedness, etc.). Local Government or Authority: DeKalb County	onsible party and the agreed upon deadline for completing it. rity that will help to pay for this service and indicate how the , special service district revenues, hotel/motel taxes, franchis Funding Method: State Funds	e service will be funded (e.g., enterprise e taxes, impact fees, bonded
these conditions will be elimin ken to eliminate them, the resp List each government or author funds, user fees, general funds indebtedness, etc.). Local Government or Authority: DeKalb County	onsible party and the agreed upon deadline for completing it. rity that will help to pay for this service and indicate how the , special service district revenues, hotel/motel taxes, franchis Funding Method: State Funds	e service will be funded (e.g., enterprise e taxes, impact fees, bonded

Agreement Name:		Contracting Parties:	Effective and Ending Dates:
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6. What other mechanic General Assembly, 1 None Needed.	sms (if any) will be used to rate or fee changes, etc.), a	o implement the strategy for this service (e.g., o nd when will they take effect?	ordinances, resolutions, local acts of
			• •
7. Person completing for	H. Russell	Crider	······································
Phone number:	404-371-288	Date completed:Septemb	<u>er 1</u> , 1999
consistent with the s	o should be contacted by s ervice delivery strategy? nated contact person(s) and		ed local government projects are
			PAGE 2 (continued)
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Other:	
Other:	а. 1

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

County: DeKalb	an Anna an Anna Anna Anna Anna Anna Anna	Service:	Senior Servic	es		
1. Check the box that best describes the	agreed upon deli	· .				.*
Service will be provided countywi checked, identify the government,	de (i.e., including authority or organ	all cities and uni nization providin	ncorporated are g the service.)	eas) by a single s	•	
Service will be provided only in the identify the government, authority	ne unincorporated or organization p	portion of the co roviding the serv	unty by a single ice.)		•	
One or more cities will provide the unincorporated areas. (If this box	is service only wit is checked, identif	hin their incorpo fy the governmer	rated boundarie at(s), authority of	of ofganization p	ioviding the set (10-1)	
One or more cities will provide the unincorporated areas. (If this box	is service only wit	hin their incomo	rated boundarie	es, and the county	y will provide the ser	vice in
Other. (If this box is checked, atta government, authority, or other or	ach a legible map	delineating the	service area o	f each service p	rovider, and identify	the
2. In developing the strategy, were ove	rlapping service a	reas, unnecessary	competition a	nd/or duplication	of this service identi	ified?
If these conditions will continue under higher levels of service (See O.C.G.A. competition cannot be eliminated). these conditions will be eliminated u en to eliminate them, the responsible	36-70-24(1)), ove under the strategy, le party and the ag	attach an imple reed upon deadli	mentation sch ne for completi	edule listing eac	h step or action that v	will be
3. List each government or authority the funds, user fees, general funds, spece indebtedness, etc.).	cial service distric	y for this service revenues, hotel/	and indicate ho motel taxes, fra	w the service wi inchise taxes, imp	ll be funded (e.g., ent pact fees, bonded	erprise
Local Government or Authority: Fu	unding Method:				<u></u>	
DeKalb County			······		<u></u>	
		·.	. <u></u>		·	
					the country?	
4. How will the strategy change the pr There will be no changes.	evious arrangeme	nts for providing	and/or funding	g unis service will	min the county?	

Agreement Name: Annual Non-Project/Standard Contract Form 5 6. What other mechanisms (if any) will be used to General Assembly, rate or fee changes, etc.), a None Needed	Contracting Parties: DeKalb County with Senior Connections o implement the strategy for this service (e.g., ordinan- and when will they take effect?	Effective and Ending Date 1/1/99-12/31/99 ces, resolutions, local acts o
 Contract Form 5 6. What other mechanisms (if any) will be used to General Assembly, rate or fee changes, etc.), a 	Connections o implement the strategy for this service (e.g., ordinan	
6. What other mechanisms (if any) will be used to General Assembly, rate or fee changes, etc.), a	o implement the strategy for this service (e.g., ordinan	ces, resolutions, local acts o
General Assembly, rate or fee changes, etc.), a		ces, resolutions, local acts o
General Assembly, rate or fee changes, etc.), a		ces, resolutions, local acts o
General Assembly, rate or fee changes, etc.), a		ces, resolutions, local acts o
7. Person completing form: H. Russell Crider		
Phone number: 404/371-2883	Date completed: 9/1/99	
	state agencies when evaluating whether proposed local	· · · ·
)		PAGE 2 (continued)
		-
and the state of the		
		· · ·

Jurisdiction	
DeKalb County	x
Atlanta	
Avondale Estates	
Chamblee	
Clarkston	
Decatur	
Doraville	· ·
Lithonia	
Pine Lake	
Stone Mountain	
Other: Senior Connections	
Other:	

1

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DeKalb County Law Department

1300 Commerce Drive, 5th Floor Decatur, Georgia 30030

Robyn A. Crittenden Assistant County Attorney

October 5, 1999

RECEMED

VIA HAND DELIVERY

OCT - 5 P.M.

Kevin DuBose Department of Community Affairs 60 Executive Park South, N.E. Atlanta, GA 30329-2231

Re: Future Comm. Legislation (Our File No. 01-0426)

Dear Mr. DuBose:

6.

As we discussed last Thursday, September 30, 1999, I enclose the following documents for inclusion in the Service Delivery Strategy submitted by DeKalb County and the Cities of Decatur, Doraville, Chamblee, Avondale Estates, Lithonia, Clarkston, Pine Lake and Atlanta:

- 1. Map of the DeKalb County Water System Lines.
- 2. Map of the City of Atlanta-in-DeKalb Water System Lines.
- 3. Map of the DeKalb County Sewer Lines.
- 4. Map of the City of Atlanta-in-DeKalb Sewer Lines.
- 5. Revised page 2 (Summary of Service Delivery Arrangements) for: a. Water Treatment and Distribution; and
 - b. Wastewater Collection & Treatment.
 - Revised page 2 (Summary of Service Delivery Arrangements) and attachments for Animal Control.
- 7. Explanation of "Higher Level of Services" for:
 - a. Police;
 - b. Parks;
 - c. Landfill;
 - d. Recreation Programs; and
 - e. Library Services.

Letter to Mr. DuBose October 5, 1999 Page 2

In addition, as you requested, the cities have been informed of your questions and the information being submitted to you.

Please feel free to contact me at (404) 371-3011 if you have any questions or comments concerning this matter.

Very truly yours,

Røbyn A. Crittenden Assistant County Attorney

RAC/pew

Encl. cc:

j,

Liane Levetan, Chief Executive Officer Future Communities Committee H. Russell Crider, Executive Assistant Morris E. Williams, III, Assistant County Administrator Jonathan Weintraub, County Attorney Joan F. Roach, Chief Assistant County Attorney



Instructions:

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

	Water Treatment & Distribution
- DoKalb	Service: Water Treatment & Distribution
County: DeKalb	Bei (100:

1	Check the box that !	est describes the agree	ed upon delivery	arrangement for this service:
1	C hear the hay inst i	DEST DESCRIDES THE ARTE		un i migeriteriteriteriteriteriteriteriteriterit

- 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.)
- □ 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.)
- 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?

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

- If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be en to eliminate them, the responsible party and the agreed upon deadline for completing it.
- J. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.).

Local Government or Authority: Funding Method:

DeKalb County		Enterpris	e Funds	 <u> </u>		 ······································
City of Atlanta		Enterpris	e Funds	 -	·	
	•			 	·	
						· · ·
<u></u>						

4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? There will be no changes.

PAGE 2



Instructions:

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

~	DeKalb	
County*	Dertain	

WastewaterCollection & Treatment Service:

- 1. Check the box that best describes the agreed upon delivery arrangement for this service:
 - Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this 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.)
 - 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.)
 - 1 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? I Yes No

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

- If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be en to eliminate them, the responsible party and the agreed upon deadline for completing it.
- 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.).

Funding Method: Local Government or Authority:

DeKalb County	Enterprise Funds			
City of Atlanta	Enterprise Funds			
		· · · · · · · · · · · · · · · · · · ·		
			·	

4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?

There will be no changes.

PAGE 2



County: DeKalb

Instructions:

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

Service: Street Const. & Mnt.

Check the box that best describes the agreed upon delivery arrangement	

- 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.)
- 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.)
- 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?

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

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

J. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.).

Local Government or Authority: Funding Method:

DeKalb County	General Fund	
City of Atlanta &		·
Decatur	General Fund & User Fees	<u></u>
		·····

4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?

There will be no changes.

PAGE 2



Instructions:

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County: DeKalb		Service: Anima	al Control		
1. Check the box that best describe	s the agreed upon deliver	ry arrangement for th	is service:		
Service will be provided count checked, identify the governm	tywide (i.e., including all ent, authority or organiz	cities and unincorpo ation providing the s	orated areas) by a ervice.)		
Service will be provided only identify the government, authority	ority or organization prov	viding the service.)			
• One or more cities will provid unincorporated areas. (If this	box is checked, identify t	the government(s), at	unformy of organiz	Lauon providing the	
One or more cities will provid unincorporated areas. (If this	le this service only within box is checked, identify t	n their incorporated b the government(s), au	oundaries, and the uthority or organized	e county will provid zation providing the	e the service in service.)
Other. (If this box is checked, government, authority, or othe	attach a legible map de er organization that will p	el ineating the servic provide service withi	e area of each se n each service are	rvice provider, and ea.)	identify the
2. In developing the strategy, were	overlapping service area	as, unnecessary comp	etition and/or dup	lication of this servi	
If these conditions will continue un higher levels of service (See O.C.C competition cannot be eliminated).	J.A. 36-70-24(1)), overn	iding benefits of the c	uplication, of rea	Sous and overheppin	.g
If these conditions will be eliminate en to eliminate them, the respon	nsible party and the agree	ed upon deadline for	completing it.		
J. List each government or authori funds, user fees, general funds, indebtedness, etc.).	special service district re	or this service and inc evenues, hotel/motel t	licate how the ser taxes, franchise ta	vice will be funded xes, impact fees, bo	(e.g., enterprise nded
Local Government or Authority:	Funding Method:				
All	General Fund	· · · · · · · · · · · · · · · · · · ·			
		- - -			
4. How will the strategy change the	e previous arrangements	s for providing and/or	r funding this serv	vice within the count	ty?
There will be no changes.	-				
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greement Name:	Contracting Derties	
	Contracting Parties:	Effective and Ending Dates:
· · · ·		
What other machanisms (if		
General Assembly rate or fourth	be used to implement the strategy for this service (e.g., ordinances, resolutions, local acts of the
Soucial Assembly, fale of fee change	es, etc.), and when will they take effect?	
one Needed.		
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Person completing form:		
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101	271 0000	-
Phone number: 404-	371-2883 Date completed: Septer	<u>mber 1, 1999</u>
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s this the person who should be cont	acted by state agencies when evaluating whether pro-	·
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<u> </u>	
Jurisdiction	
DeKalb County	X
Atlanta	
Avondale Estates	
Chamblee	x
Clarkston	
Decatur	x
Doraville	x
Lithonia	
Pine Lake	
Stone Mountain	
Other:	
Other:	



ANIMAL CONTROL

The County property taxes levied by the County in the cities of Avondale Estates, Clarkston, Lithonia, Pine Lake and Stone Mountain includes the provision of Animal Control services. Each of those cities has adopted the County's Animal Control Code and authorized the County to enforce it and collect applicable fees within the city. A copy of the authorization/code for each city is attached. Atlanta contracts with the board of public health of DeKalb County for the enforcement of its Animal Control Code. A copy of the applicable Atlanta code section is attached. Chamblee, Decatur and Doraville provide this service. **Police**

Explanation for Continuing the Arrangement:

DeKalb County provides primary police services for unincorporated DeKalb County and back up police services upon request to the cities. The cities provide primary police services for their residents.

Library Services

Explanation for Continuing the Arrangement:

The County provides library services for residents of unincorporated and incorporated cities in DeKalb. The City of Doraville operates its own library and provides additional services. The City of Decatur contracts with DeKalb County for library services. Parks

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Explanation for Continuing the Arrangement:

DeKalb County maintains parks throughout the County that can be used by residents of incorporated and unincorporated DeKalb. The cities maintain parks that can be used by city and non-city residents. Some cities charge additional fees for use by non-city residents.

<u>Landfill</u>

Explanation for Continuing the Arrangement:

The County maintains a landfill that can be used by the cities. Cities pay the posted rates when they use the County landfill.

Recreation Programs

Explanation for Continuing the Arrangement:

The County provides recreational programs for residents of unincorporated and incorporated cities in DeKalb. The cities provide additional recreational programs for city and non-city residents. Some cities charge additional fees for participation by non-city residents.

Local Government Services Provided by the Jurisdictions in DeKalb County

1. DeKalb County not provided county <	
2. Avondale Estates not provided authority authority authority shared NA city 3. Chamblee private shared shared shared shared NA city 4. Clarkston NA city 5. Decatur not provided not provided not provided not provided city 6. Doraville NA	•
3. Chamblee private shared shared<	
4. Clarkston NA city 5. Decatur not provided not provided not provided city NA city 6. Doraville NA	1
5. Decatur not provided not provided not provided not provided city 6. Doraville NA	1
6. Doraville NA	1
7 Lithonia private authority authority authority authority NA city	
autionity autionity autionity autionity autionity in the city	
8. Pine Lake not provided not provided not provided not provided NA city	
9. Stone Mountain NA	
Emergency Emergency Senior	
Recreation Bridge/road medical telephone Animal citizen	;
programs maintenance Hospital services (911) control program	S T
Jurisdiction (H) (I) (J) (K) (L) (M) (N)	
1. DeKalb County county county authority county county county private	
2. Avondale Estates shared shared not provided shared shared shared not provide	ed
3. Chamblee city shared not provided shared shared city not provided	
4. Clarkston	cu
5. Decatur city city not provided not provided city city city	
6. Doraville	
7. Lithonia city city not provided shared shared shared shared	
8. Pine Lake not provided shared not provided not provided shared shared not provided	ed
9. Stone Mountain	
Construction Health	
Child & code screening Economic	
day care enforcement Planning Zoning services development Cable T	V
Jurisdiction (O) (P) (Q) (R) (S) (T) (U)	
1. DeKalb County not provided county county county county county county	
1. DeKalb County not provided county county <thcounty< th=""> county <thcounty< th=""></thcounty<></thcounty<>	ed
3. Chamblee not provided city private city shared shared city	
4. Clarkston city private	
5. Decatur city city city not provided city not provided	
6. Doraville	
7. Lithonia shared shared city city shared city city	

not provided

shared

private

shared

Notes:

8. Pine Lake

9. Stone Mountain

Not provided - the service is not provided by the jurisdiction

County or city - the county or city is directly responsible for providing the service.

shared

shared

Shared - service is shared by agreement with another county or city.

Authority – service is provided by an authority. Contract – service is provided by a private supplier.

not provided

NA - may not apply to the particular government "---" - no response to the question.

Source: Local government responses to the 1995 Survey of Local Government Operations, DCA.