





FORM 1

COUNTY: CRAWFORD

I. GENERAL INSTRUCTIONS:

- 1. <u>FORM 1 is required for **ALL** SDS submittals</u>. Only one set of these forms should be submitted per county. The completed forms shall clearly present the collective agreement reached by all cities and counties that were party to the service delivery strategy.
- List each local government and/or authority that provides services included in the service delivery strategy in Section II below.
- 3. List all services provided or primarily funded by each general purpose local government and/or authority within the county that are continuing *without change* in Section III, below. (It is acceptable to break a service into separate components if this will facilitate description of the service delivery strategy.)

OPTION A Revising or Adding to the SDS	OPTION B Extending the Existing SDS
 List all services provided or primarily funded by each general purpose local government and authority within the county which are revised or added to the SDS in Section IV, below. (It is acceptable to break a service into separate components if this will facilitate description of the service delivery strategy.) For each service or service component listed in Section IV, complete a separate, updated Summary of Service Delivery Arrangements form (FORM 2). Complete one copy of the Certifications form (FORM 4) and have it 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, FORM 4).] 	 4. In Section IV type, "NONE." 5. Complete one copy of the Certifications for Extension of Existing SDS form (FORM 5) and have it signed by the authorized representatives of the participating local governments. [Please note that DCA cannot validate the strategy unless it is signed by the local governments required by law (see Instructions, FORM 5).] 6. Proceed to step 7, below. For answers to most frequently asked questions on Georgia's Service Delivery Act, links and helpful publications, visit DCA's website at http://www.dca.ga.gov/development/PlanningQ ualityGrowth/programs/servicedelivery.asp, or call the Office of Planning and Quality Growth at (404) 679-5279.

- 7. If any of the conditions described in the existing *Summary of Land Use Agreements* form (FORM 3) have changed or if it has been ten (10) or more years since the most recent FORM 3 was filed, update and include FORM 3 with the submittal.
- 8. Provide the completed forms and any attachments to your regional commission. The regional commission will upload digital copies of the SDS documents to the Department's password-protected web-server.

NOTE: ANY FUTURE CHANGES TO THE SERVICE DELIVERY ARRANGEMENTS DESCRIBED ON THESE FORMS WILL REQUIRE AN UPDATE OF THE SERVICE DELIVERY STRATEGY AND SUBMITTAL OF REVISED FORMS AND ATTACHMENTS TO THE GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS UNDER THE "OPTION A"

PROCESS DESCRIBED, ABOVE.

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.

Crawford County City of Roberta

III. SERVICES INCLUDED IN THE EXISTING SERVICE DELIVERY STRATEGY THAT ARE BEING EXTENDED WITHOUT CHANGE:

In this section, list each service or service component already included in the existing SDS which will continue as previously agreed with no need for modification.

911 Communications

Ambulance

Building Inspection

Coroner

Courts

Economic Development

Emergency Management

Fire Protection

Jail Operations

Law Enforcement

Library Services

Public Transportation

Recreation

Roads and Bridges

Sewerage Collection/Treatment

Street Lighting

Solid Waste Collection/Recycling

Stormwater Management

IV. SERVICES THAT ARE BEING REVISED OR ADDED IN THIS SUBMITTAL:

In this section, list each new service or new service component which is being added and each service or service component which is being revised in this submittal. For each item listed here, a separate Summary of Service Delivery Arrangements form (FORM 2) must be completed.

Natural Gas

Water Services







FORM 2: Summary of Service Delivery Arrangements

Instructions:

Make copies of this form and complete one for each service listed on FORM 1, Section IV. Use <u>EXACTLY the same service names listed on FORM 1</u>. 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.

should be reported to the Department of Community Affairs.	
COUNTY:CRAWFORD COUNTY	Service: NATURAL GAS
4. 01	
 Check <u>one</u> box that best describes the agreed upo 	n delivery arrangement for this service:
	cluding all cities and unincorporated areas) by a single service provider. hority or organization providing the service.): Fort Valley Utility
	porated portion of the county by a single service provider. (If this box is nization providing the service.): Type Name of Government, Authority
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the r Organization Here
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the or Organization Here
	le map delineating the service area of each service provider, and ation that will provide service within each service area.): Type Name of
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
f these conditions will be eliminated under the strated	gy, 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.

SDS FORM 2, continued

	ty that will help to pay for this service and inderal funds, special service district revenues, h	
Local Government or Author	ity Fund	ding Method
Fort Valley Utility Commission	Enterprise Fund & User Fees	
How will the strategy change the	e previous arrangements for providing and/or	funding this service within the county?
The Fort Valley Utilities Commiss County.	ion will provide service to the City of Roberta	a and portions of unincorporated Crawford
5. List any formal service delivery a this service:	agreements or intergovernmental contracts th	hat will be used to implement the strategy for
Agreement Name	Contracting Parties	Effective and Ending Dates
	will be used to implement the strategy for the tee or fee changes, etc.), and when will they t	is service (e.g., ordinances, resolutions, locatake effect?
Strategy. Provision of this service	d to use resolutions adopted by each governi will be carried out as outlined and authorize ally, any agreements outlined above will gove	d by the governing bodies upon passage of
7. Person completing form: Kaylei Phone number: 478-751-6160	gh Sullivan, Government Services Specia Date completed: 1/27/2017	list, MGRC
	e contacted by state agencies when evaluating service delivery strategy? ☐Yes ☒No	ng whether proposed local government
If not, provide designated contact FABIAN HOLLIS, COUNTY MA	t person(s) and phone number(s) below: NAGER, 478-836-3782	







FORM 2: Summary of Service Delivery Arrangements

Instructions:

	ce listed on FORM 1, Section IV. Use EXACTLY the same service names listed on FORM 1. ecessary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY:CRAWFORD COUNTY	Service: WATER SERVICES
1. Check one box that best describes the agreed u	upon delivery arrangement for this service:
	including all cities and unincorporated areas) by a single service provider. authority or organization providing the service.): Type Name of
	corporated portion of the county by a single service provider. (If this box is rganization providing the service.): Type Name of Government, Authority
	ce only within their incorporated boundaries, and the service will not be checked, identify the government(s), authority or organization providing the y or Organization Here
	ce only within their incorporated boundaries, and the county will provide the hecked, identify the government(s), authority or organization providing the
	gible map delineating the service area of each service provider, and nization that will provide service within each service area.):
2. In developing this strategy, were overlapping se identified?	ervice areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional doc	umentation as described, below)
⊠No	
	y, attach an explanation for continuing the arrangement (i.e., G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that be eliminated).
	ategy, attach an implementation schedule listing each step or action that array and the agreed upon deadline for completing it.

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5D5	FORI	VI Z. CO	ntinued

	eral fui	will help to pay for this service and indicate how the nds, special service district revenues, hotel/motel ta	
Local Government or Author	rity	Funding Method	
City of Roberta		General Fund	
Crawford County		General Fund, State/Federal Grants, & User Fees	
			_
4. How will the strategy change the	e previ	ous arrangements for providing and/or funding this	service within the county?
reflect the true provision of service	es.	nisrepresented water service areas. The water ser	
this service:	agreer		
Agreement Name		Contracting Parties	Effective and Ending Dates
		e used to implement the strategy for this service (e.gee changes, etc.), and when will they take effect?	g., ordinances, resolutions, local
Strategy. Provision of this service	will b	se resolutions adopted by each governing body to in e carried out as outlined and authorized by the gove by agreements outlined above will govern the deliver	erning bodies upon passage of
Phone number: 478-751-6160	Da	Ilivan, Government Services Specialist, MGRC ate completed: 1/27/2017 acted by state agencies when evaluating whether pr	roposed local government
projects are consistent with the	service et pers	e delivery strategy? ☐Yes ☒No on(s) and phone number(s) below:	,







FORM 3: Summary of Land Use Agreements

Instructions:

Answer each question below, attaching additional pages as necessary. Please note that any changes to the answers provided will require an update 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:CRAWFORD
 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: Describe "Other" Measures Here	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. What policies, procedures and/or processes have been established by local governmental authorities) to ensure that new extraterritorial water and sewer service will be consistent and ordinances? Consistency with all applicable land use plans and ordinances will be of the existing ordinances and existing and future land use maps as set forth in the most before services are put into place.	with all applicable land use plans ensured through a systematic check
4. Person completing form: Kayleigh Sullivan, Government Services Specialist, MGF Phone number: 478-751-6160 Date completed: 1/27/2017	RC
5. Is this the person who should be contacted by state agencies when evaluating whether projects are consistent with the service delivery strategy? ☐Yes ☒No	er proposed local government
If not, provide designated contact person(s) and phone number(s) below:	
FARIAN HOLLIS COUNTY MANAGER 478-836-3782	







FORM 4: Certifications

Instructions:

This form must, at a minimum, be signed by an authorized representative of the following governments: 1) the county; 2) the city serving as the county seat; 3) all cities having a 2010 population of over 9,000 residing within the county; and 4) no less than 50% of all other cities with a 2010 population of between 500 and 9,000 residing within the county. Cities with a 2010 population below 500 and local authorities providing services under the strategy are not required to sign this form, but are encouraged to do so.

COUNTY: CRAWFORD

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

- 1. We have executed agreements for implementation of our service delivery strategy and the attached forms provide an accurate depiction of our agreed upon strategy (O.C.G.A 36-70-21);
- 2. Our service delivery strategy promotes the delivery of local government services in the most efficient, effective, and responsive manner (O.C.G.A. 36-70-24 (1));
- Our service delivery strategy provides that water or sewer fees charged to customers located outside the geographic boundaries of a service provider are reasonable and are not arbitrarily higher than the fees charged to customers located within the geographic boundaries of the service provider (O.C.G.A. 36-70-24 (20); 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)).

JURISDICTION	TITLE	NAME	SIGNATURE	DATE
CITY OF ROBERTA	Mayor	Becky Smith	Buky Smith	בן דין ב
CRAWFORD COUNTY	Chairman	Paul Chapman	ParlChap	2/21/17
			C 4	

Crawford County Service Delivery Strategy

Adopted September 1999

Amended February 1, 2006

Amended January 2017

Prepared by:
Crawford County
City of Roberta
In Cooperation With
The Middle Georgia Regional Commission

RESOLUTION CRAWFORD COUNTY

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

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

WHEREAS, the Service Delivery Strategy must be officially adopted and verified by the Georgia Department of Community Affairs by February 28, 2017;

WHEREAS, city and county officials have worked diligently to prepare the county's Service Delivery Strategy; and

WHEREAS, city and county officials authorizes Paul Chapman to sign the requisite documents acknowledging approval of the Service Delivery Strategy.

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

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

Adopted this 21st day of February 2017 at the county's commission meeting.

Chairman Paul Chapman

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Crawford County Board of Commissioners

AFFIX SEAL

RESOLUTION CITY OF ROBERTA

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

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

WHEREAS, the Service Delivery Strategy must be officially adopted and verified by the Georgia Department of Community Affairs by February 28, 2017; and

WHEREAS, city and county officials have worked diligently to prepare the county's Service Delivery Strategy; and

WHEREAS, city and county officials authorize Becky Smith to sign the requisite documents acknowledging approval of the Service Delivery Strategy.

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

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

Mayor Becky Smith City of Roberta

Witness