



GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS

SERVICE DELIVERY STRATEGY

FOR ELBERT COUNTY

I. GENERAL INSTRUCTIONS

- 1. 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).
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.

ELBERT COUNTY, CITY OF BOWMAN AND CITY OF ELBERTON

Verified

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.

- Administrative
Police Protection
Superior and State Courts
Probate Court
Magistrate Court
Juvenile Court
Municipal Court
District Attorney
Public Defender
Probation Services
Jail
Fire Protection
Fire Safety & Building Inspection
Emergency Communication E-911
Emergency Management Aging Rescue
Emergency Medical Service
Hospital
Public Health
Mental Health
Aging Center
Public Transportation
Animal Control
Airport
Rights-of-Way and Parks Maintenance
Cemeteries, Parks, and Rights-of-Way Maintenance
Public Housing
Economic Development
Tax Appraisal
Tax Equalization Board
Planning and Zoning
Library
Voter Registration
Recreation
Infrastructure Construction & Maintenance
Solid Waste Collection
Solid Waste Disposal
Recycling
Natural Gas Utility
Electric Utility
Water Utility
Sewer Utility
Fiber Optic Network
Telecommunications
Mapping (GIS)
Election

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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Administrative

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 on 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 governments(s), authority or organization providing the service.)
 Elbert County, City of Bowman and City of Elberton Service Providers
- 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 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:
Elbert County	General
City of Bowman	General
City of Elberton	General

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?
 Resolution

7. Person Completing Form: Niles Poole City of Elberton
 Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, Co. Admin. 706/283-2000, L. B. Berryman, Mayor, City of Bowman 7-6/245-5432, D. Scott Wilson, City Manager. 706/283-3100



SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions

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County: Elbert Service: Police Protection

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.
A single service provider will provide Service only on the unincorporated portion of the county.
One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas.
One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas.
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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Rows include Elbert County, City of Bowman, and City of Elberton, all with General funding.

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates. All cells are empty.

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? Resolution

7. Person Completing Form: Niles Poole City of Elberton
Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, Co. Admin. 706/283-2000, L. B. Bergman, Mayor, City of Bowman 7-6/245-5432, D. Scott Wilson, City Manager. 706/283-3100

MEMORANDUM

DATE: 27 January 1999
TO: Mr. Niles Poole
FROM: Chief Welsh
SUBJECT: Agency Statistics

We currently have allocations for 24 sworn personnel
We have a total of 7 operational marked patrol vehicles.

Here are a breakdown of the statistics you requested.

Uniformed officer on duty breakdown with 4 to a shift:

- Each officer would be responsible for .88 square miles of area.
- Population breakdown would be 1446 citizens per officer.
- Breakdown for businesses would be 45 per officer.
- Residential breakdown would be 650 residences per officer.

Uniformed officer breakdown for the full complement of 24 troops:

- Each officer would be responsible for .15 square miles of area.
- Population breakdown would be 241 citizens per officer.
- Breakdown for businesses would be 7.5 per officer.
- Residential breakdown would be 108 per officer.

Average response time for general calls is estimated at 2.65 minutes, emergency calls shows an average response time of 2.19 minutes. These statistics were accumulated over a one month time period.

These are the basic breakdowns based on the information provided to Tabatha last month if further or more detailed accounting is required please let me know and we will comply.

MCW
mcw

STATE OF GEORGIA
COUNTY OF ELBERT

CONTRACT BETWEEN CITY OF BOWMAN, GEORGIA AND THE SHERIFF OF
ELBERT COUNTY, GEORGIA - ESTABLISHMENT OF LAW ENFORCEMENT
AGREEMENT.

RECITALS

- A. The City of Bowman desires to establish adequate law enforcement within its city limits.
- B. The Sheriff of Elbert County already provides enforcement of State law within the city limits of Bowman.
- C. The establishment of a Law Enforcement Agreement appears to be the most desirable and economic plan for the establishment of adequate law enforcement in the city limits of the City of Bowman.
- D. The establishment of such a law enforcement agreement is authorized by the Official Code of Georgia 15-15-13.

In consideration of the mutual covenants contained herein and for other good and valuable considerations, the parties agree as follows:

SECTION ONE

The City of Bowman covenants as follows to-wit:

- (a) To make available to the Sheriff's Department its existing radio facilities.

SECTION TWO

The Sheriff of Elbert County, Georgia covenants and agrees as follows, to-wit:

(a) The Sheriff of Elbert County, Georgia will furnish complete enforcement of all the laws, State, local and municipal within the City limits of the City of Bowman, Georgia.

(b) When making arrests the Sheriff shall at his sole discretion, make them returnable to the proper Court having jurisdiction of the offense charged.

(c) When an arrest is made involving the violation of State law and also the violation of one or more City ordinances; the Sheriff may at his sole discretion return the state cases to the proper State Court having jurisdiction and the violations of City ordinances to the Recorder's Court of the City of Bowman, GA.

(d) The Sheriff of Elbert County, Georgia shall furnish the City of Bowman ten (10) hours of night patrol during each twenty-four (24) hour day, and shall spot patrol during the remaining hours of each twenty-four (24) hour period. The

AVENDER&LAVENDER

TEL No.404-283-2994

Nov.12,90 10:27 P.03

SECTION THREEMUTUAL COVENANTS

The City of Bowman, Georgia and the Sheriff of Elbert County mutually covenant and agree to enter into this Contract and agree to execute and administer the same in strict compliance with the terms of the Official Code of Georgia 15-15-13.

SECTION FOUREFFECTIVE DATE AND TERMINATION

(a) The effective date of this Contract shall be January 1, 1988.

(b) This Contract shall terminate at mid-night December 31, 1988.

(c) This Contract may be renewed from year to year by written consent of the parties and the written consent of the

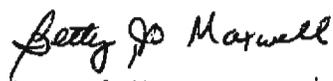
Signed, sealed and delivered this _____ Continue 002

January, 1983.

CITY OF BOWMAN, GEORGIA

BY: 
L. B. Berryman, Mayor

ATTEST:


Betty Joe Maxwell Clerk



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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Superior and State Courts

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. Elbert County)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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:
<u>Elbert County</u>	<u>General</u>

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, Co. Administrator 706/283-2000



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County: Elbert Service: Probate Court

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. Elbert County)
A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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.

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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.).

Table with 2 columns: Local Government or Authority, Funding Method. Row 1: Elbert County, General.

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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? Resolution

7. Person Completing Form: Niles Poole City of Elberton
Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below: Charles W. Kinney, Co. Administrator 706/283-2000



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County: Elbert Service: Magistrate Court

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. Elbert County)
A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Row 1: Elbert County, General.

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton
Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, Co. Administrator 706/283-2000



**SERVICE DELIVERY STRATEGY
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County: Elbert Service: Juvenile Court

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. Elbert County)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(s), authority or organization providing the service.) Elbert County and City of Elberton Service Providers
- 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.

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Local Government or Authority:	Funding Method:
<u>Elbert County</u>	<u>General</u>

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?
Resolution

7. Person Completing Form: Niles Poole City of Elberton
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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

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County: Elbert Service: District Attorney

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. Elbert County)
- A single service provider will provide Service only on the unincorporated portion of the county. (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.)
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Local Government or Authority:	Funding Method:
<u>Elbert County</u>	<u>General</u>

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?
Resolution

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Phone Number: 706-213-3100 Date Completed: 4-10-99

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

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Charles W. Kinney, Co. Administrator 706/283-2000



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County: Elbert Service: Public Defender

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

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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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Row 1: Elbert County, General.

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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? Resolution

7. Person Completing Form: Niles Poole City of Elberton
Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, Co. Administrator 706/283-2000



**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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Probation Services

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.)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(s), authority or organization providing the service.)
Service Providers Elbert County and City of Elberton
- 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 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:
Elbert County	General
City of Elberton	General

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton
Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, Co. Administrator 706/283-2000, D. Scott Wilson, City Manager 706/283-3100



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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Jail

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.)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(s), authority or organization providing the service.)
 Elbert County and the City of Elberton
- 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 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:
Elbert County	General
City of Elberton	General

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000, D. Scott Wilson, City Manager 706283-3100

MEMORANDUM

DATE: 20 May 1999

TO: Mr. Niles Poole

FROM: Mr. Mark C. Welsh
Chief of Police

SUBJECT: Care of Jail inmates.

Please be advised that we currently have a verbal agreement with Sheriff Anderson that we can house his overflow of prisoners until we reach a capacity of twelve inmates. We do not charge him a per diem for this. In exchange he has agreed to feed all inmates three times a day and to provide all sundries/toiletries, i.e. soap, toothpaste shampoo, towels and etc. This arrangement has been beneficial in that it serves both our needs and has shown a saving of funds on our part. If you need further information let me know.

MCW



**SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS**

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County: Elbert Service: Fire Protection

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.)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(s), authority or organization providing the service.)
Elbert County and the City of Elberton
- 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. **Elbert County provides fire protection for all areas of Elbert County except the City of Elberton. See attachments level of service and mutual aid agreement between Elbert County and the City of Elberton. Also the City of Elberton provides this service as a means of higher level of service to it's citizens.**

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:
Elbert County	General
City of Elberton	General

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:
Mutual Aid Agreement	City of Elberton 706283-3100	6-3-96 until terminated

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, Co. Administrator 706/283-2000 D. Scott Wilson, City Manager 706/283-3100

Mutual Aid Agreement
to City & County

GEORGIA)
ELBERT COUNTY)

THIS CONTRACT AND AGREEMENT, made and entered into this
3rd day of June, 1996, by and between ELBERT
COUNTY, a political subdivision of the State of Georgia,
hereinafter referred to as "County", and CITY OF ELBERTON, a
political subdivision of the State of Georgia, hereinafter
referred to as "City";

W I T N E S S E T H:

WHEREAS, County has a volunteer fire department consisting
of eight (8) different stations in the unincorporated areas of
the County; and

WHEREAS, City has a fire department which serves the City of
Elberton; and

WHEREAS, from time to time, certain fires may require joint
efforts on the part of the County and City; and County and City
thereby desire to render mutual aid and assistance in those
instances; and

WHEREAS, the parties desire to enter into an
intergovernmental contract pursuant to the provisions of Art. IX,
§III, Par. I, which will provide for the joint provisioning of
services;

NOW, THEREFORE, in consideration of the premises stated, the mutual promises hereinafter expressed, and other good and valuable consideration, receipt whereof is hereby acknowledged, it is hereby agreed as follows:

1.

MUTUAL AID AND ASSISTANCE

County and City agree that they will render assistance to each other in the event of a major fire or other disaster beyond each fire department's ability to control. It is understood by both County and City, that neither County nor City will be required to render aid and assistance to the other which would jeopardize the ability of the furnishing political subdivision to render services within its own jurisdiction. Such aid may be in the form of equipment, manpower or both.

2.

REQUEST FOR MUTUAL AID AND ASSISTANCE

The County Manager, or in his absence, the County Clerk, or in any event, the Chairman of the Commissioners and such other person as the Commissioners may designate, may make a request for assistance on behalf of the County. The City Manager, the Mayor, or any other person or persons designated by the City Council shall have the authority to make the request on behalf of the City. Each political subdivision will notify the other of the persons so designated to exercise this authority.

COMPENSATION

The parties hereto anticipate that the mutual aid services rendered hereunder will be substantially equal, but in any event, each political subdivision rendering service to the other shall maintain a record of the scope of its commitment and expenses, and at the end of the year, if one political subdivision believes that it has rendered services substantially in excess of that which it received, the parties will meet and resolve the question of compensation. If they are unable to agree on the compensation, the matter shall be resolved by arbitration by submitting same to the Judge of the Superior Court, and if he declines to serve, then the parties will agree on an impartial arbitrator to make the decision.

IN WITNESS WHEREOF, the parties hereto have caused these presents to be executed by their duly authorized officials and their official seals to be attached hereto on the date and year first above written.

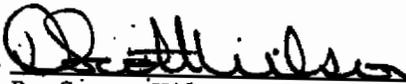
ELBERT COUNTY

Signed, sealed and delivered
in the presence of:

BY: _____
Chairman, County Commissioners

ATTEST: _____
Clerk

Notary Public, Elbert County,
Georgia
My Commission Expires: _____



D. Scott Wilson, City Manager



**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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Fire Safety and Building Inspections

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. City of Elberton)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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:
Elbert County	General
City of Elberton	General
City of Bowman	General

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:
Fire and Building Inspection Services	D. Scott Wilson, City Manager	1/12/94 until Elbert County and Bowman have their own program.
	Charles W. Kinney, County Administrator	

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton
Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

D. Scott Wilson, City Manager 706/283-3100

**ELBERT COUNTY
INTER-GOVERNMENTAL CONTRACT
001-96
BUILDING INSPECTOR AND FIRE SAFETY SERVICES**

This Intergovernmental Contract (the "CONTRACT") is made and entered into this 8th day July, 1996, by and between ELBERT COUNTY, a political subdivision of the State of Georgia, and the CITY OF ELBERTON, a Georgia Municipal Corporation ("CITY").

WITNESSETH:

WHEREAS: The City has a qualified Building and Fire Safety Inspector for the purpose of inspecting for violations and/or conformity of state and local building and safety code; and

WHEREAS: The County desires to contract with the City for the purpose of inspections within Elbert County on an individual basis at a pre-agreed contract price, and

WHEREAS: Personal liability to the City Building and Fire Safety Inspector exists during County authorized inspection visits, and

WHEREAS: The County and the City desire to enter into this contract with each other all in the best interest of the residents of the County.

NOW, THEREFORE, in consideration of the premises stated and the mutual promises hereinafter expressed, it is hereby agreed as follows:

(1) Upon request by the County Administrator to the City Manager, the latter will make available to the County, the City's Building and Fire Safety Inspector or Inspectors, for the purpose of inspecting for violations of state and local building codes in those areas of the County outside the incorporated areas of the City of Elberton and the City of Bowman. The City Manager will make such Building and Fire Safety Inspector or Inspectors available for use by the County, but at such time as will not interfere with the performance of such inspector's or inspectors' duties on behalf of the City.

(2) The County shall be entitled to charge a fee for such inspection services in such reasonable amounts as it may deem appropriate and the county will pay to the City not more than \$50.00 for each inspection conducted by the City Building and Fire Safety Inspector or Inspectors. The City shall bill the County sometime after the first of each month itemizing the particular inspections conducted and the County shall remit the cost for such inspections so submitted within fourteen days thereafter.

(3) During the time the City Building and Fire Safety Inspector is conducting inspections on behalf of the County, the County shall assume liability for damage to person and property arising out of the activities of the Building and Fire Safety Inspector while performing work for the County. The City agrees that the Building and Fire Safety Inspector or Inspectors are covered by policies of errors and omissions or other liability insurance insuring against liability for damage to person and property arising out of the acts and conduct of the Building and Fire Safety Inspector or Inspectors, and the City agrees that it will obtain an endorsement on said policy extending coverage to instances where the inspector or inspectors are performing building and fire safety inspections for the County. If said endorsement results in any extra premium, the County will pay same.

(4) The execution of this document by the undersigned officials of the city of Elberton and Elbert County constitutes representations and warranties by each that this contract has been duly authorized by the Mayor and Council of Elberton and the Board of Commissioners of Elbert County.

IN WITNESS WHEREOF the parties hereto, acting through their duly authorized officers, have caused this contract to be executed and their Corporate Seals to be affixed and attested all as of the date and year first above written.

CITY OF ELBERTON

ELBERT COUNTY

BY: *[Signature]*
Mayor

BY: *[Signature]*
Chairman

ATTEST:

ATTEST:

[Signature]
City Clerk

[Signature]
County Clerk

Read and approved:
[Signature]

Read and approved:
[Signature]



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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Emergency Communications (E-911)

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. Elbert County)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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:
<u>Elbert County</u>	<u>General</u>

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000



SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

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County: Elbert Service: Emergency Management Agency/Rescue

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. Elbert County)
A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Rows include Elbert County (General) and City of Elberton (General).

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000, D. Scott Wilson, City Manager



SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions

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County: Elbert Service: Emergency Medical Services

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. Elbert County)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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:
Elbert County	User Fees and General Fund

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000,



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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Hospital

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. Elbert County Hospital Authority)
A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Row 1: Elbert County Hospital Authority, User Fees.

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000,



SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

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County: Elbert Service: Public Health

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. Elbert County)
A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Row 1: Elbert County, User Fees and General Fund.

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000,



SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

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County: Elbert Service: Mental Health

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. Elbert County)
A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Row 1: Elbert County, User Fees and General Fund.

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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

With the service delivery strategy? Yes No

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

Charles W. Kinney, County Administrator 706/283-2000,



SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

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County: Elbert Service: Aging Center

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. Elbert County)
A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Rows include Elbert County (User Fees and General Fund) and City of Elberton (General Fund).

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000,



SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

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County: Elbert Service: Public Transportation for Aging

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. Elbert County)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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:
Elbert County	User Fees and General Fund

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000,



**SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS**

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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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Animal Control

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. City of Elberton)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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:
City of Elberton	General Fund
Elbert County	General Fund

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton
Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

D. Scott Wilson, City Manager 706/283-3100



SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

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County: Elbert Service: Airport

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. Elbert County)
A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Row 1: Elbert County, General Fund.

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton
Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-3100



SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

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County: Elbert Service: Cemetery Maintenance

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. Elbert County)
- A single service provider will provide Service only on the unincorporated portion of the county. (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.)
City of Elberton and City of Bowman
- 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 governments(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 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:
City of Elberton	General Fund
City of Bowman	General Fund

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

D. Scott Wilson, City Manager 706/283-3100, L. B. Berryman, Mayor, 706/245-5432



**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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Rights of Way and Parks Maintenance

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. Elbert County)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(s), authority or organization providing the service.)
Elbert County, City of Bowman and City of Elberton
- 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 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:
Elbert County	General Fund
City of Elberton	General Fund
City of Bowman	General Fund

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000, D. Scott Wilson, City Manager 706/283-3100, L. B. Berryman, Mayor, 706/245-5432



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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Public Housing

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. Federal Government)
A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Row 1: Federal Government, General Fund and User Fees.

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Mary Ann Smith, Executive Director of Elberton Housing Authority 706/283-5801



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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Economic Development

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.
A single service provider will provide Service only on the unincorporated portion of the county.
One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas.
One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas.
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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Rows include Elbert County (General Fund), City of Elberton (General Fund and Hotel Motel Tax Fund), and City of Bowman (General Fund).

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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

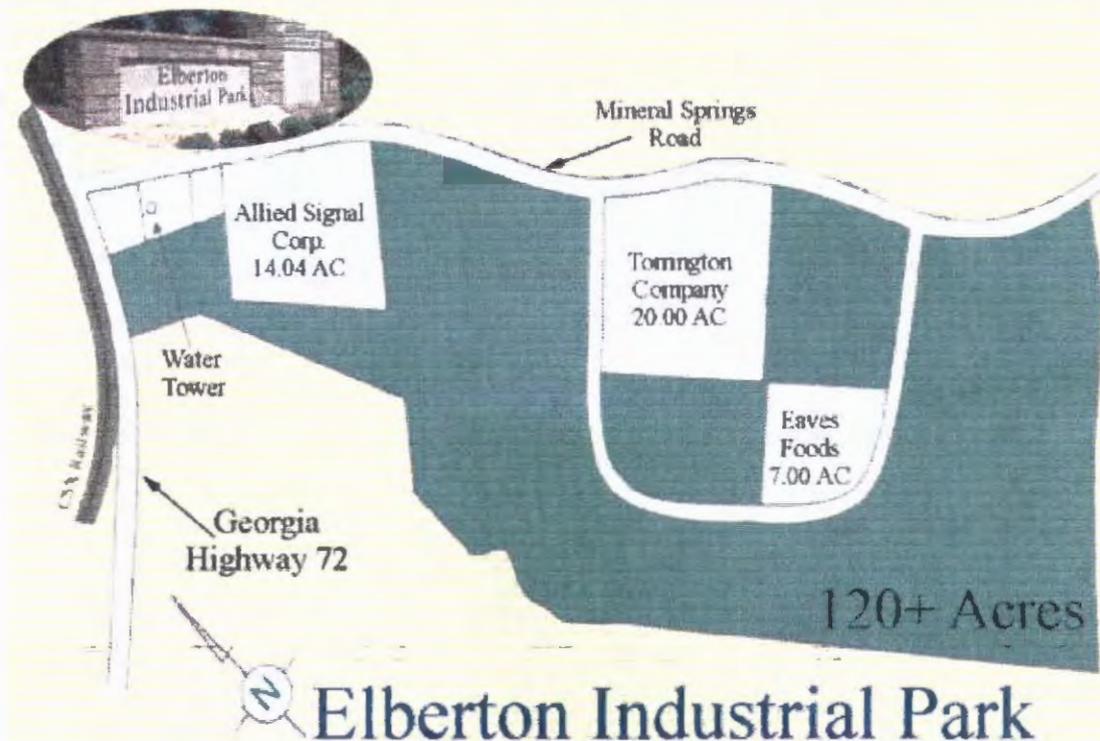
With the service delivery strategy? Yes No

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

D. Scott Wilson, City Manager 706/283-3100, Charles W. Kinney, County Administrator 706/283-2000

Economic Development

The Development Authority of Elberton, Elbert County and Bowman support economic development efforts through public finance activities. In partnership with the Elbert County Chamber of Commerce and the city and county governments, the development authority helps new and expanding businesses purchase sites in the Elberton Industrial Park. The authority also assists prospective clients in arranging financing for building construction.



A revolving loan fund (RLF) is available for industries that want to locate in Elbert County. This loan is available at a lower interest rate with the loan amount tied to the number of jobs created in a low to moderate income bracket.

Elbert County grants ad valorem abatements for new and expanding businesses. The City of Elberton does not levy ad valorem taxes on businesses operating within the city limits.

The City of Elberton will provide assistance with utility connections at the Elberton Industrial Park.

The Elbert County
Chamber of Commerce
148 College Avenue
P.O. Box 537
Elberton, GA 30635
(706) 283-5651
(706) 283-5722 FAX



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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Tax Appraisal

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. Elbert County, the City of Elberton, and Bowman)
- Service will be provided only on 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 governments(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. **See attachment for justification providing a higher level of service. See map of service area only 3.5 sq. miles**

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:
Elbert County	General Fund
City of Elberton	General Fund
City of Bowman	General Fund

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contracting Parties:	Effective and Ending Dates:

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?

Resolution.

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

D. Scott Wilson, City Manager City of Elberton 706/213-3100, Charles W. Kinney, County Administrator 706-283-2000
L. B. Berryman, Mayor of Bowman 706/245-5432

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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Tax Equalization Board

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. Elbert County, the City of Elberton, and Bowman)
 - Service will be provided only on 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 governments(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. **See attachment for justification providing a higher level of service. See map of service area only 3.5 sq. miles**

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:
Elbert County	General Fund
City of Elberton	General Fund
City of Bowman	General Fund

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:
- | Agreement name: | Contracting Parties: | Effective and Ending Dates: |
|-----------------|----------------------|-----------------------------|
| | | |
| | | |
| | | |

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?
Resolution.

7. Person Completing Form: Niles Poole City of Elberton
 Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:
D. Scott Wilson, City Manager City of Elberton 706/213-3100, Charles W. Kinney, County Administrator 706-283-2000
L. B. Berryman, Mayor of Bowman 706/245-5432



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 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: Elbert Service: Planning and Zoning

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

- Service will be provided countywide...
A single service provider will provide Service only on the unincorporated portion of the county...
One or more cities will provide this service only within their incorporated boundaries...
One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas...
Other.

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...)

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.).

Table with 2 columns: Local Government or Authority, Funding Method. Row 1: City of Elberton, General Fund.

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

D. Scott Wilson, City Manager 706/283-3100

SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions

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County: Elbert Service: Library

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. Elbert County and City of Elberton)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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:
Elbert County	General Fund
City of Elberton	General Fund

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

D. Scott Wilson, City Manager 706/283-3100, Charles W. Kinney, County Administrator 706/283-2000



**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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Voter Registration

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. Elbert County)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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:
<u>Elbert County</u>	<u>General Fund</u>

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000



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 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: Elbert Service: Recreation

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. Elbert County)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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:
Elbert County	General Fund and User Fees
City of Elberton	General Fund

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

No changes

*Amended
12/29/03*

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:
Intergovernmental Agreement	Recreation	11-14-97
Recreation	City of Elberton	11-14-02
	City of Bowman	

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000

STATE OF GEORGIA)
)
COUNTY OF ELBERT)

INTERGOVERNMENTAL AGREEMENT - RECREATION

THIS AGREEMENT, made and entered into this 14th day of November, 1997, by, between and among ELBERT COUNTY, GEORGIA, a body politic organized and existing under the laws of the State of Georgia ("Elbert County"); CITY OF ELBERTON, a municipal corporation organized and existing under the laws of the State of Georgia ("Elberton"); and CITY OF BOWMAN, a municipal corporation organized and existing under the laws of the State of Georgia ("Bowman").

RECITALS

WHEREAS, the parties to this Agreement acknowledge and confirm their mutual and joint interest in supplying all citizens of Elbert County, Georgia, including those residing in the corporate limits of Elberton and Bowman, a quality recreation program, for all ages and gender; and

WHEREAS, given the existing recreation facilities of Elberton and Bowman, combined with the largess spirit of the late Kathleen Hall McWilliams as contained in her Last Will and Testament, for

the benefit of Elbert County, an opportunity is provided to the governing bodies of Elbert County, Elberton and Bowman to provide such a program of recreation; and

WHEREAS, the parties, through their respective governing bodies, have met with one another and reached an agreement on the issue of a county-wide recreation program; and

WHEREAS, the parties desire to reduce that agreement to writing, as hereinafter set forth;

NOW THEREFORE, in consideration of the Recitals made, the terms, conditions and provisions hereinafter set forth and contained, and in further consideration of the best interests of all citizens of Elbert County, Georgia, including its corporate municipalities, it is agreed as follows:

1. **AUTHORITY FOR AND NATURE OF AGREEMENT.** This Agreement is entered into pursuant to the provisions of the Constitution of the State of Georgia, Article 9, Section 2, Paragraph 3, as codified in Volume 2 of the Official Code of Georgia Annotated (OCGA), and pursuant to the authority granted in OCGA § 36-34-3.

2. **PURPOSE.** The purpose of this Agreement is to provide a unified recreation program, comprehensive in its nature and

application, which will serve all citizens of Elbert County, Georgia, including those residing in Elberton and Bowman, and to further include citizens of all ages and gender, and as a part of same, to incorporate existing recreation facilities with recreation facilities presently under construction and those to be constructed, developed or purchased in the future toward such stated purpose.

3. **NAME.** The name of the department being created by this Agreement shall be: **ELBERT PARKS AND RECREATION DEPARTMENT** ("Department"). The Department shall be a Department of Elbert County, and shall operate under the direction of that governing body.

4. **DIRECTOR AND ADVISORY BOARD; DUTIES; TERMS.** The Department shall be operated under the supervision and control of a Director. It shall be the responsibility of Elbert County to select the Director, which shall include the right to hire and fire, and the Director shall be responsive and accountable to the Board of Commissioners of Elbert County, Georgia.

There will further be a Recreation Board ("Board"), consisting of nine (9) members, and which shall sit in an advisory capacity

consistent with the rights, duties, and authority hereinafter set forth. The composition of the Board shall be comprised as follows: Five (5) members appointed by Elbert County; three (3) members appointed by Elberton; and one (1) member appointed by Bowman, for a total of nine (9). There shall be no stated requirements or qualifications for being a member of the Board, other than to be a resident of Elbert County, Georgia, and at least eighteen (18) years of age. Board members will serve terms of three (3) years, or until a member's successor is appointed and qualified, and Board members shall be eligible for reappointment. There shall be no requirement that an elected official or officials be appointed to the Board, but such shall not be prohibited. Terms of Board members may be staggered so as to insure a rotation of participation and experience on the Board. Additionally, the Administrator for Elbert County, the City Manager for Elberton, and the City Clerk of Bowman shall be ex officio members of the Board. For purposes of initial terms of members, the following shall apply: Elbert County - two (2) one year appointments, one (1) two year appointment, and two (2) three year appointments; Elberton - one (1) one year appointment, one (1) two year appointment, and one (1) three year appointment; Bowman - one (1) two year appointment.

It shall be the responsibility of the Board to provide public input and recommendations for recreation programs and activities to the Director. It shall further be the responsibility of the Board, in consultation and conference with the Director, to recommend a proposed budget for the Department and to present same to Elbert County, Elberton and Bowman by March 1 of each calendar year, with the recommendation to include that the proposed budget be approved by the three (3) governmental entities as a lump sum, subject to funding obligations as hereinafter contained in Paragraph 7 hereof. Additionally, the Board, in consultation with the Director, shall submit a five (5) year capital improvements plan, together with a proposed budgetary schedule for same within six (6) months of the signing of this Agreement.

The Board will meet as a collective body on a monthly basis at a minimum. The Board shall collectively designate a set time when the monthly meeting will occur. The Board shall further have the right to meet at such other times and places as the Board may collectively designate. The Board shall approve its own internal rules of procedure and operation, including selection of a presiding officer, and such shall be reduced to writing with a copy of same provided to Elbert County, Elberton and Bowman. Minutes of

all Board meetings shall be maintained, and on file in the county offices of Elbert County.

The Director shall provide the governing bodies of Elbert County, Elberton and Bowman for their respective information, consideration, review and comments the following information: a monthly financial report, seasonal program reports, and an annual report, the latter to be presented at the regular January meeting of each body. The Director shall further be responsible for maintaining a master calendar of facility use and recreational activities.

Notice of all Board meetings shall be provided, in writing, to all members and ex officio members of the Board, to all elected officials of Elbert County, Elberton and Bowman, and to the local press, including radio. All Board meetings shall be open to the public.

5. **PROPERTIES.** All public parks and recreation facilities lying within Elbert County, Georgia, and its corporate municipalities, Elberton and Bowman, and to further include any facilities under construction or which may be acquired or constructed in the future during a time when this Agreement remains in effect, shall be leased to the Department for the sum of One

Dollar (\$1.00) per year by the governmental entity which claims ownership of same. Said properties are leased, and accepted, by the Department "as is".

If any property leased should cease to be regularly and actively utilized by the Department for the purposes hereinabove set forth, that is, to provide recreation, then ownership of said property shall revert by the terms hereof to the rightful owner of same.

For purposes of this Agreement, the properties to be leased by Elberton and Bowman are as follows:

Elberton -

Heard Street Recreation Park, including building, field, swimming pool and tennis courts;

Burke Street Recreation Park, including gym and field;

Senior League Field, with Elberton to retain upper parking lot, but parking to be permitted for recreation activities;

Hickory Drive Recreation Park, including fields and tennis courts.

Bowman -

Bowman Recreation Park, including fields, activity grounds and shelter.

Both Elberton and Bowman, for themselves and their agents, reserve the right of ingress and egress for the purpose of servicing their respective utilities, including electrical and sewer.

Excluded from the terms hereof are all mowers, vans, vehicles and equipment owned and utilized by Elberton and Bowman, which shall remain the property of Elberton and Bowman, respectively. Further excluded is that property owned by Elberton and commonly known and referred to as the Taylor-McMullan property.

It is further understood, acknowledged and agreed that all equipment, bats, uniforms and other property utilized in connection with youth sports is the property of the Youth Sports Board, and that such properties are not included as a part of this Agreement.

6. MAINTENANCE OF FACILITIES. The maintenance, repair, upkeep and improvements to any facilities leased to the Department shall be the responsibility of Elbert County, except as to funding participation by Elberton and Bowman as hereinafter provided in Paragraph 7 hereof. Services provided by Elberton and Bowman in connection with maintenance, repair, upkeep and improvements of any facilities shall be by contract, and for consideration and not in-kind.

7. FUNDING OF PROGRAM. Funding for the recreation program by Elbert County, Elberton and Bowman shall be as follows:

YEAR ONE - Elbert County - 70% ; Elberton - 25%, but in no event to exceed \$80,000.00 ; Bowman - 5% (If Bowman should elect not to participate financially, its share shall be borne by Elbert County.)

YEAR TWO - Elbert County - 76% ; Elberton - 20%, but in no event to exceed \$64,000.00 ; Bowman - 4%, with non-participation financially as above.

YEAR THREE - Elbert County - 82% ; Elberton - 15%, but in no event to exceed \$48,000.00 ; Bowman - 3%, with non-participation financially as above.

YEAR FOUR - Elbert County - 88% ; Elberton - 10%, but in no event to exceed \$32,000.00 ; Bowman - 2%, with non-participation financially as above.

YEAR FIVE - Elbert County - 94% ; Elberton - 5%, but in no event to exceed \$16,000.00 ; Bowman - 1%, with non-participation financially as above.

Funding shall include all costs associated with the operation of the program, including, but not limited to, staff and capital improvements and expenditures.

8. **ACCOUNTING, PAYROLL, BENEFITS.** Elbert County will be responsible for all accounting, payroll and providing of employee benefits.

9. **EXISTING STAFF.** Each employee of the Elberton and Bowman recreation departments shall be guaranteed a lateral move of twelve (12) months employment, unless terminated sooner for just cause. As hereinafter provided, should this Agreement be terminated at any time within the initial three (3) years, each employee of the Department shall revert to his/her employment with his/her original employer.

10. **INVENTORY ASSESSMENT.** A complete inventory of all parks and recreation facilities available for use shall be submitted to the Department by Elbert County, Elberton and Bowman within thirty (30) days of the signing of this Agreement.

11. **EFFECTIVE DATE AND TERM OF AGREEMENT.** This Agreement shall have an effective date of November 15, 1997, and shall remain in effect for a period of five (5) years, ending at 12:01 A.M. on November 15, 2002. Any party may terminate this Agreement, however, with six (6) months prior written notice to the other parties, in which event all terms, conditions and provisions hereof shall terminate, including reversion to the rightful owner of all property.

12. **AUTHORITY TO ENTER.** Elbert County, Elberton and Bowman have caused their governing bodies to approve this Agreement, and have authorized its execution by the official signing on behalf of that respective party.

IN WITNESS WHEREOF, this Agreement is executed on this the 28 day of November, 1997, in triplicate, each to be considered an original.

ELBERT COUNTY, GEORGIA

BY: Rodney Daniel

ATTEST: Phyllis H. Thompson
Its Clerk

CITY OF ELBERTON

BY: *John A. Stone, Mayor*

ATTEST: *D. H. Wilson*
Its Clerk

CITY OF BOWMAN

BY: *J. A. Doup*

ATTEST: *Betty Go Maxwell*
Its Clerk



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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Infrastructure Construction and Maintenance

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.)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(s), authority or organization providing the service.)
 Elbert County, City of Bowman and City of Elberton
- 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 (Sec 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:
Elbert County	General Fund
City of Elberton	General Fund
City of Bowman	General Fund

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000, D. Scott Wilson, City Manager, 706/283-3100



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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Solid Waste Collection

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.
A single service provider will provide Service only on the unincorporated portion of the county.
One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas.
One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas.
Other.

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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Rows include Elbert County (General Fund), City of Elberton (General Fund and User Fees), and City of Bowman (General Fund).

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000, D. Scott Wilson, City Manager, 706/283-3100



SERVICE DELIVERY STRATEGY
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County: Elbert Service: Solid Waste Disposal

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. Elbert County)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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:
Elbert County	Enterprise Fund and User Fees
City of Elberton	General Fund
City of Bowman	General Fund

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000, D. Scott Wilson, City Manager, 706/283-3100



**SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS**

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County: Elbert Service: Recycling

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. Elbert County, City of Elberton and City of Bowman)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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 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:
Elbert County	General Fund
City of Elberton	Enterprise Fund
City of Bowman	General Fund

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000, D. Scott Wilson, City Manager, 706/283-3100



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County: Elbert Service: Natural Gas Utility

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.
A single service provider will provide Service only on the unincorporated portion of the county.
One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas.
One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas.
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.)

See attached maps for service delivery areas

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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Rows include City of Elberton (General Fund) and City of Bowman (General Fund).

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates.

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton
Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

D. Scott Wilson, City Manager 706/283-3100, Betty Jo Maxwell, City Clerk 706/245-5432



SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

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County: Elbert Service: Electric Utility

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.)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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.) City of Elberton

See attached maps for service delivery areas

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 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:
City of Elberton	Enterprise Fund

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

D. Scott Wilson, City Manager 706/283-3100



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County: Elbert Service: Water and Sewer Utility

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.)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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.) City of Elberton City of Bowman

See attached maps for service delivery areas

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 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:
City of Bowman	General
City of Elberton	Enterprise Fund
Elbert County	General

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

D. Scott Wilson, City Manager 706/283-3100, Betty Jo Maxwell, City Clerk Bowman 706/245-5432



SERVICE DELIVERY STRATEGY
SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

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County: Elbert Service: Dark Fiber Optic Network

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. City of Elberton)
- A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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.)

See attached maps for service delivery areas

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 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:
City of Elberton	Enterprise Fund and General

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:
Fiber Optics	City of Elberton Elbert County Board of Education	1998-2003

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

D. Scott Wilson, City Manager 706/283-3100



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County: Elbert Service: Telecommunications

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. City of Elberton)
A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(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.)

See attached maps for service delivery areas

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 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.).

Table with 2 columns: Local Government or Authority, Funding Method. Row 1: City of Elberton, Enterprise Fund

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

No changes

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Table with 3 columns: Agreement name, Contacting Parties, Effective and Ending Dates

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton

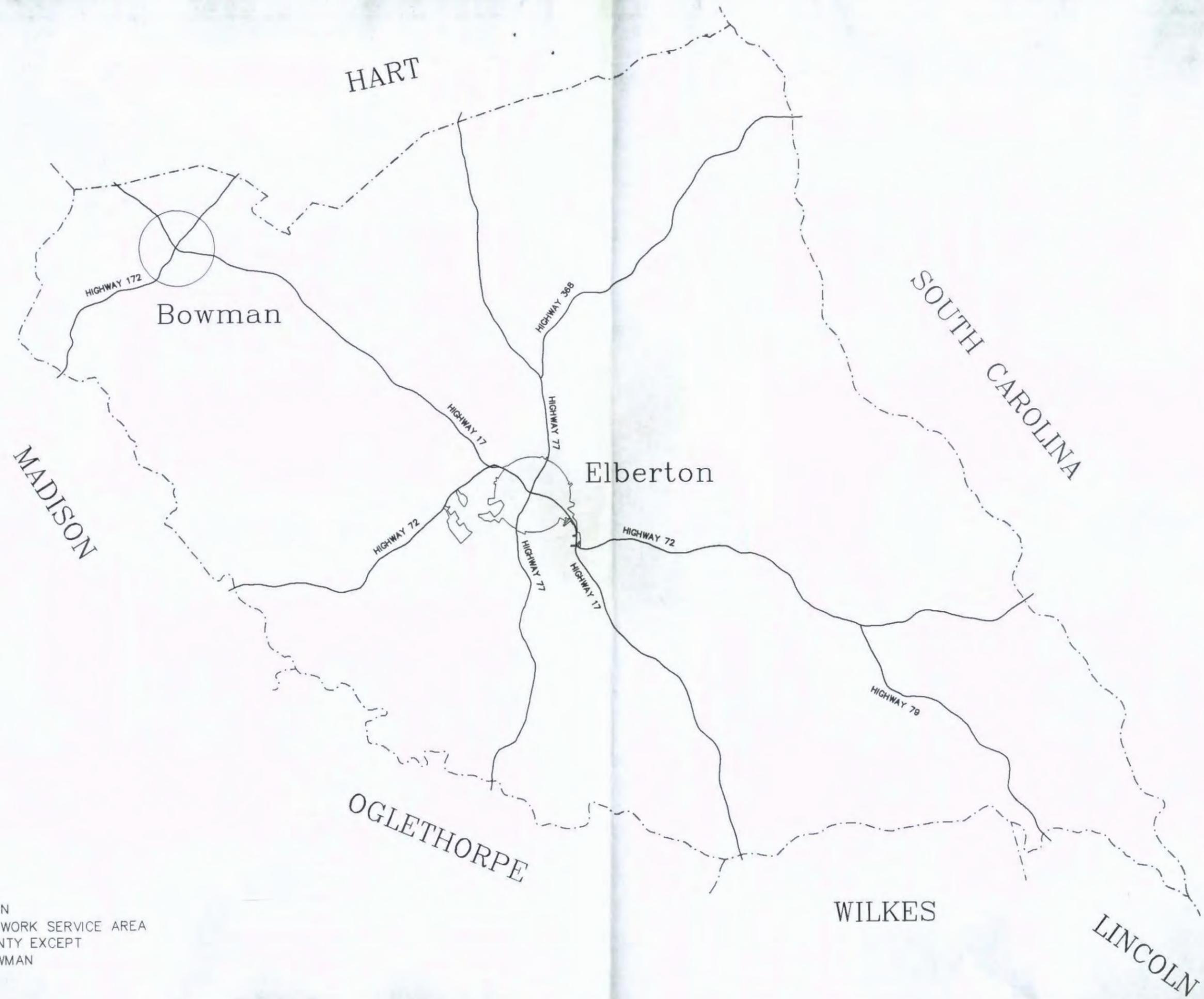
Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

D. Scott Wilson, City Manager 706/283-3100



CITY OF ELBERTON
FIBER-OPTIC NETWORK SERVICE AREA
FOR ENTIRE COUNTY EXCEPT
THE CITY OF BOWMAN

STATE OF GEORGIA)
)
COUNTY OF ELBERT)

FIBER OPTICS LEASE AGREEMENT

THIS FIBER OPTICS LEASE AGREEMENT ("Agreement") is made and entered into as of the 9th day of April, 1998, by and between the **CITY OF ELBERTON**, a Municipal Corporation created and existing under the laws of the State of Georgia ("Lessor"); and the **ELBERT COUNTY SCHOOL DISTRICT**, a political subdivision of the State of Georgia, existing pursuant to Article VIII, Section 5, Paragraph II, of the Constitution of the State of Georgia ("Lessee").

W I T N E S S E T H:

WHEREAS, Lessor owns and maintains certain fiber optics lines in the City of Elberton, Georgia;

WHEREAS, Lessee owns and operates certain schools within the City of Elberton and in Elbert County, Georgia, and desires to lease the use of certain fiber optic lines at various schools sites in and around Elberton, Georgia, and at Lessee's Central Office Complex on Laurel Drive in Elberton, Georgia;

WHEREAS, Lessor and Lessee desire to enter into this Agreement to memorialize their agreements concerning Lessor's provision of such lines, and Lessee's use of such lines;

WHEREAS, the parties desire to enter into this Agreement, and structure it as a multi-year lease contract pursuant to Section 20-2-506 of the Official Code of Georgia Annotated;

NOW, THEREFORE, for and in consideration of TEN DOLLARS (\$10.00) in hand paid, the mutual promises herein after expressed, and other good and valuable consideration, the receipt and sufficiency of which is hereby expressly acknowledged by the parties, the parties hereby agree as follows:

1. Recitals Made Part of Agreement. The above recital of facts is hereby incorporated into and made a part of this Agreement, as if fully set forth herein.

2. Lease of Fiber Optic Lines. Lessor hereby agrees to lease to Lessee, and Lessee hereby accepts such lease and agrees to lease from Lessor, on the terms and conditions provided in this Agreement, fiber optic lines to serve each of the following schools and sites:

- (a) Elbert County Comprehensive High School, 600 Jones Street, Elberton, Georgia;
- (b) Blackwell Elementary School, 373 Campbell Street, Elberton, Georgia;
- (c) Beaverdam Elementary School, 739 New Ruckersville Road, Elberton, Georgia;
- (d) Elbert County Middle School, 45 Forest Avenue, Elberton, Georgia;
- (e) Falling Creek Elementary School, 1019 Falling Creek Circle, Elberton, Georgia; and
- (f) Central Office Complex, 50 Laurel Drive, Elberton, Georgia.

Such fiber optic lines are being leased for a wide area network application.

3. **Term.** This Agreement shall become effective upon the execution of this Agreement by the last party to sign, and the term of this lease shall commence on August 1, 1998, and shall continue until 5:00 p.m. on December 31, 1998, at which time this lease shall terminate absolutely and without further obligation on the part of either party; provided, however, that on December 31, 1998, and each succeeding year on December 31, this Agreement shall be automatically renewed for an additional one-year term, which additional term shall begin immediately upon termination and shall continue until the immediately following December 31, and the lease shall be so renewed, unless terminated as provided in **Paragraph 7** of this Agreement, until December 31, 2003, when this Agreement, and the parties' respective obligations pursuant to this Agreement, shall cease and terminate absolutely, unless terminated sooner pursuant to this Agreement.

4. **Rental.** In exchange for the lease of fiber optic lines provided in this Agreement, and Lessor's other obligations set forth in this Agreement, Lessee shall pay to Lessor the sum of \$35.55 per month per site, for a total of \$213.30 per month, beginning on August 1, 1998, and continuing monthly thereafter until this Lease is terminated. All such payments shall be due and payable on the first of the month in advance, but a payment shall not be deemed late, and shall not constitute a default under this

Agreement, if such payment is received by Lessor on or before the fifteenth (15th) of the month.

5. **Annual Obligation**. The total rent obligation of Lessee for the calendar year of execution of this Agreement, and every succeeding year, shall be as follows, assuming that this Agreement is not terminated before December 31, 2003:

<u>Year</u>	<u>Total Rent Obligation</u>
1998	\$1,066.50
1999	\$2,559.60
2000	\$2,559.60
2001	\$2,559.60
2002	\$2,559.60
2003	\$2,559.60

This paragraph is intended to comply with O.C.G.A. § 20-2-506(a)(3).

6. **Maintenance**. The parties acknowledge and agree that the fiber optic lines shall terminate at a junction box to be located on the interior of the building at each of the sites where service will be provided by Lessor, listed in **Paragraph 2** of this Agreement. In exchange for Lessee's payment of rentals provided in this Agreement, Lessor shall also maintain the fiber optic lines on Lessor's side of the junction box at each of the sites. Lessee shall be responsible for connecting its system within each site into the junction box at each site, but the parties shall cooperate

in selecting a location for the junction box at each site and in connecting lines and each party's system into each junction box. Lessee shall permit Lessor and Lessor's agents and representatives to enter Lessee's property during reasonable business hours for the purpose of inspecting, maintaining and repairing Lessor's fiber optic lines, but Lessor covenants that it shall give Lessee and its agents reasonable notice of any entry which is not requested by Lessee. Such notice may be given verbally to the Superintendent of Elbert County Schools or, if Lessor needs to obtain access only to one school site, such notice may be given verbally to the principal of such school. After being notified by Lessee of any interruption in service, Lessor shall restore service within forty-eight (48) hours.

7. **Termination.**

(a) **Without Cause.** Either party may terminate this Agreement at the conclusion of a term (December 31, at 5:00 p.m.) by giving ~~shall give~~ the other party written notice at least thirty (30) days before the conclusion of the then-current term, in accordance with this Agreement, that such party does not wish to renew this Agreement for a succeeding term. If either party gives the other party such notice in a timely manner, then this Agreement shall terminate at the conclusion of the term.

(b) **For Cause.** In addition to the termination provided in **Paragraph 7(a)** of this Agreement, either party may terminate this Agreement in the event that the other party fails to comply with

any provision of this Agreement; provided, however, that no party may terminate this Agreement unless such party has first given the other party written notice, in accordance with **Paragraph 13** of this Agreement, of the other party's default and allowed such other party ten (10) calendar days from the date of such notice to cure such default. Notwithstanding this right to cure, Lessor shall not be obligated to give Lessee such notice and right to cure more than twice in a twelve-month period for failure to pay rent in a timely manner.

8. **Title**. Title to every fiber optic line provided by Lessor pursuant to this Agreement, up to the point at which such line connects into the junction box inside each site, shall remain the property of Lessor at all times. All lines on the other side of each junction box shall be installed by, and shall remain the property of, Lessee.

9. **Compliance With Applicable Laws**. Both parties covenant and agree that, in the performance of their obligations under this Agreement, they shall comply with all applicable laws, rules, regulations and ordinances.

10. **No Assignment**. Neither party shall have any right to assign its respective rights or obligations under this Agreement.

11. **Modification**. This Agreement may not be amended or modified unless such an amendment or modification is placed in writing and signed by all parties to this Agreement.

12. Severability of Provisions. Any provision of this Agreement which is prohibited or unenforceable shall be ineffective to the extent of such prohibition or unenforceability without invalidating the remaining provisions of this Agreement, and the remaining provisions of this Agreement shall be fully valid and enforceable, as if such unenforceable or prohibited provision were not contained herein.

13. Notices. Any and all notices, elections or demands permitted or required to be made under this Agreement shall be in writing (unless provided otherwise herein), signed by the parties giving such notice, and shall be delivered personally or sent by registered or certified United States mail, postage pre-paid, as set forth below:

If to Lessor:

The City of Elberton
203 Elbert Street
Elberton, Georgia 30635

ATTN: City Manager

If to Lessee:

Elbert County School District
50 Laurel Drive
Elberton, Georgia 30635

ATTN: Superintendent

The date of personal delivery or the date of mailing, as the case may be, shall be the date of such notice, election, demand or statement.

14. Time of the Essence. Time is of the essence in interpreting and performing all the obligations, covenants and agreements contained in this Agreement.

15. **Entire Agreement.** This Agreement contains the entire terms of the agreement between the parties regarding subject matter hereof, and in representation or promise not included or contained in this Agreement shall be of no force or effect.

16. **Headings.** This headings of the sections, paragraphs and other portions of this Agreement are for convenience of reference only, are not to be considered a part hereof and shall not limit or otherwise effect any of the terms hereof.

17. **Governing Law.** This Agreement shall be interpreted, construed and enforced in accordance with the laws of the State of Georgia.

IN WITNESS WHEREOF, the parties have caused their authorized agents to set their hands and affix their seals on behalf of their respective entities on the date first above written.

Lessor:

CITY OF ELBERTON

By: *Yola Stone*
Yola Stone, Mayor

Attest: *D. Scott Wilson*
D. Scott Wilson,
City Manager

[SEAL]

(Signatures Continued On Next Page)

Lessee:

ELBERT COUNTY SCHOOL DISTRICT

By: *Steve Howe*
Steve Howe, Chairman of
Elbert County Board of
Education

Attest: *Frank Griffith*
Frank Griffith,
Superintendent of
Schools and Ex-Officio
Secretary of the
Elbert County Board of
Education

[SEAL]



**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 pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported of the Department of community Affairs.

County: Elbert Service: Elections (VOTER REGISTRATION)

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.)
 - A single service provider will provide Service only on the unincorporated portion of the county. (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 governments(s), authority or organization providing the service.)
Elbert County, City of Bowman and City of Elberton
 - 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.)

See attached maps for service delivery areas

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. Elbert Co. will provide elections for all federal, state and county elections

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:
Elbert County	General Fund
City of Elberton	General Fund
City of Bowman	General Fund

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

5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy for this service:

Agreement name:	Contacting Parties:	Effective and Ending Dates:

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?

Resolution

7. Person Completing Form: Niles Poole City of Elberton
Phone Number: 706-213-3100 Date Completed: 4-10-99

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 the designated contact person(s) and phone number(s) below:

Charles W. Kinney, County Administrator 706/283-2000, D. Scott Wilson, City Manager 706/283-3100



SERVICE DELIVERY STRATEGY
SUMMARY OF LAND USE AGREEMENTS

Instructions:

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

County: Elbert

1. What incompatibilities or conflicts between the land use plans of local governments were identified in the process of developing the service delivery strategy?

The City of Elberton does have a Land Use/Zoning Ordinance and Elbert County and the City of Bowman does not. Elbert County and Bowman both show Zoning Maps in the Comprehensive Plan but do not have ordinances nor enforcement; therefore we have not had any conflicts over land use.

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.)

Note: If the necessary plan amendments, regulations, ordinances, etc. have not yet been formally adopted, indicate when each of the affected local governments will adopt them.

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

3. Summarize the process that will be used to resolve disputes when a county disagrees with the proposed land use classification(s) for areas to be annexed into a city. If the conflict resolution process will vary for different cities in the county, summarize each process.

See attached Joint Municipality Land Use Classification Dispute Resolution Process.

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?

The master service delivery agreement specifies that new extension of water, sewerage, and natural gas service by cities outside their city limits and any extension of service by the City of Elberton and the City of Bowman will be consistent with any host government's land use plans and ordinances. If consistency with land use plans or ordinances is disputed by the host government, the dispute will be resolved using the same procedures adopted for resolving land use disputes arising from annexation.

5. Person completing form: Niles Poole

Phone number: 706/283-3100 Date completed: April 10, 1999

6. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with land use plans of applicable jurisdictions? yes no

If not, provide designated contact person(s) and phone number(s) below: D. Scott Wilson, City Manager
Charles W. Kinney, County Administrator 706/283-2000 706-213-3100



SERVICE DELIVERY STRATEGY CERTIFICATIONS

Instructions:

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

SERVICE DELIVERY STRATEGY FOR ELBERT COUNTY

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

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

SIGNATURE:	NAME: <small>(Please print or type)</small>	TITLE:	JURISDICTION:	DATE:
	SALLIE M. HOOD	CHAIRPERSON ELBERT COUNTY BOARD OF COMMISSIONERS	ELBERT COUNTY	
	IOLA S. STONE	MAYOR CITY OF ELBERTON	CITY OF ELBERTON	
	L. B. BERRYMAN	MAYOR CITY OF BOWMAN	CITY OF BOWMAN	

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H



- CITY OF ELBERTON**
- 1. CITY HALL (D-5)
 - 2. FIRE DEPT. (D-5)
 - 3. POLICE DEPT. (D-5)
 - 4. CITY UTILITIES (C-5)
 - 5. PUBLIC WORKS (C-5)
 - 6. RECYCLING CENTER (D-6)

- EDUCATIONAL**
- 1. HIGH SCHOOL (D-3)
 - 2. MIDDLE SCHOOL (D-5)
 - 3. NEW ELEM. SCHOOL (D-2)
 - 4. BLACKWELL ELEM. (C-6)
 - 5. FALLING CREEK ELEM. (H-7)
 - 6. PUBLIC LIBRARY (D-6)
 - 7. GRANITE BOWL (D-6)
 - 8. BEAVERDAM ELEM. (A-8)
 - (SEE INSET)
 - 9. TRUETT MCCONNELL COLLEGE (E-3)
 - 10. ATHENS TECH (D-2)
 - 11. 4-H CENTER (B-5)
 - 12. ELBERT COUNTY BOARD OF EDUCATION (B-5)

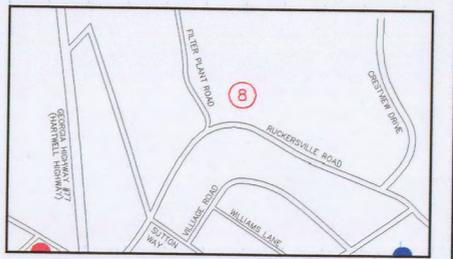
- BUSINESSES/ORGANIZATIONS**
- 1. ALLIED SIGNAL (E-1)
 - 2. BI-LO SHOPPING CENTER (E-7)
 - 3. DAYS INN (D-6)
 - 4. ELBERTON OAKS APPTS. (G-7)
 - 5. ELMHURST CEMETARY (B-6)
 - 6. FAIRGROUNDS (B-5)
 - 7. DRY CLEANERS (D-6)
 - 8. LAUNDRY MATS (D-6, E-5, F-7)
 - 9. GRANITE CITY MOTEL (G-7)
 - 10. HOLIDAY INN (G-7)
 - 11. INGLES SHOPPING CENTER (F-7)
 - 12. JOLISE INN (G-7)
 - 13. MAGNOLIA ESTATES (C-5)
 - 14. CHURCHES (B-4, B-6, C-5, C-6, D-4, D-5, D-6, G-6, H-7)

- 16. MILL VILLAGE (E-7)
- 17. OAK LANE APPTS. (C-6)
- 18. PETERSBURG TOWERS (G-7)
- 19. PREMIER ELECTRONICS (G-7)
- 20. RADIO STATION (C-4)
- 21. SEABOARD FARMS (F-8)
- 22. SUNNY BROOK APPTS. (F-3)
- 23. SPRING VALLEY APPTS. (F-3)
- 24. SPRING VALLEY NURSING HOME (F-3)
- 25. TALL TIMBERS APPTS. (C-4)
- 26. TORRINGTON (F-2)
- 27. VFW (G-7)
- 28. WAL-MART (F-7)

- MEDICAL**
- 1. ELBERT MEMORIAL HOSPITAL (C-4)
 - 2. THE WELLNESS CENTER (C-4)
 - 3. THE MEDICAL CENTER (C-4)
 - 4. CLINICS AND VARIOUS OFFICES (C-4, C-5, D-4, D-5, D-6, E-6, E-7)
 - 5. DIALYSIS CENTER (B-5)
 - 6. PHARMACIES (C-4, D-5, D-6, E-6)

- ELBERT COUNTY & OTHERS**
- 1. COURTHOUSE (D-5)
 - 2. COUNTY COMMISSIONERS OFFICE (D-5)
 - 3. SHERIFF DEPT./DETENTION CENTER (D-5)
 - 4. HEALTH DEPT./RECREATION OFFICE (D-5)
 - 5. CHAMBER OF COMMERCE/CIVIC CENTER (C-5)
 - 6. GRANITE ASSOCIATION (C-5)
 - 7. GRANITE MUSEUM (C-4)
 - 8. RESCUE CENTER (911) (C-6)
 - 9. POST OFFICE (D-5)
 - 10. RECREATION CENTERS (D-5)
 - 11. LITTLE LEAGUE FIELD (A-5, D-7, E-5)
 - 12. SENIOR LEAGUE FIELD (C-5)

- FINANCIAL**
- 1. PINNACLE BANK (F-7)
 - 2. PINNACLE BRANCH (C-5)
 - 3. REGIONS BANK (D-5)
 - 4. REGIONS BRANCH (F-7)
 - 5. REGIONS BRANCH (B-4)
 - 6. NORTHEAST GEORGIA BANK (F-7)
 - 7. ELBERTON FEDERAL SAVINGS & LOAN ASSOC. (D-5)

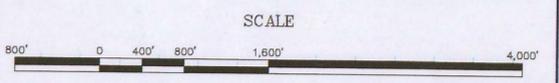


INDUSTRIAL PARK

CITY OF ELBERTON

ELEM. SCHOOL

ATHENS TECH

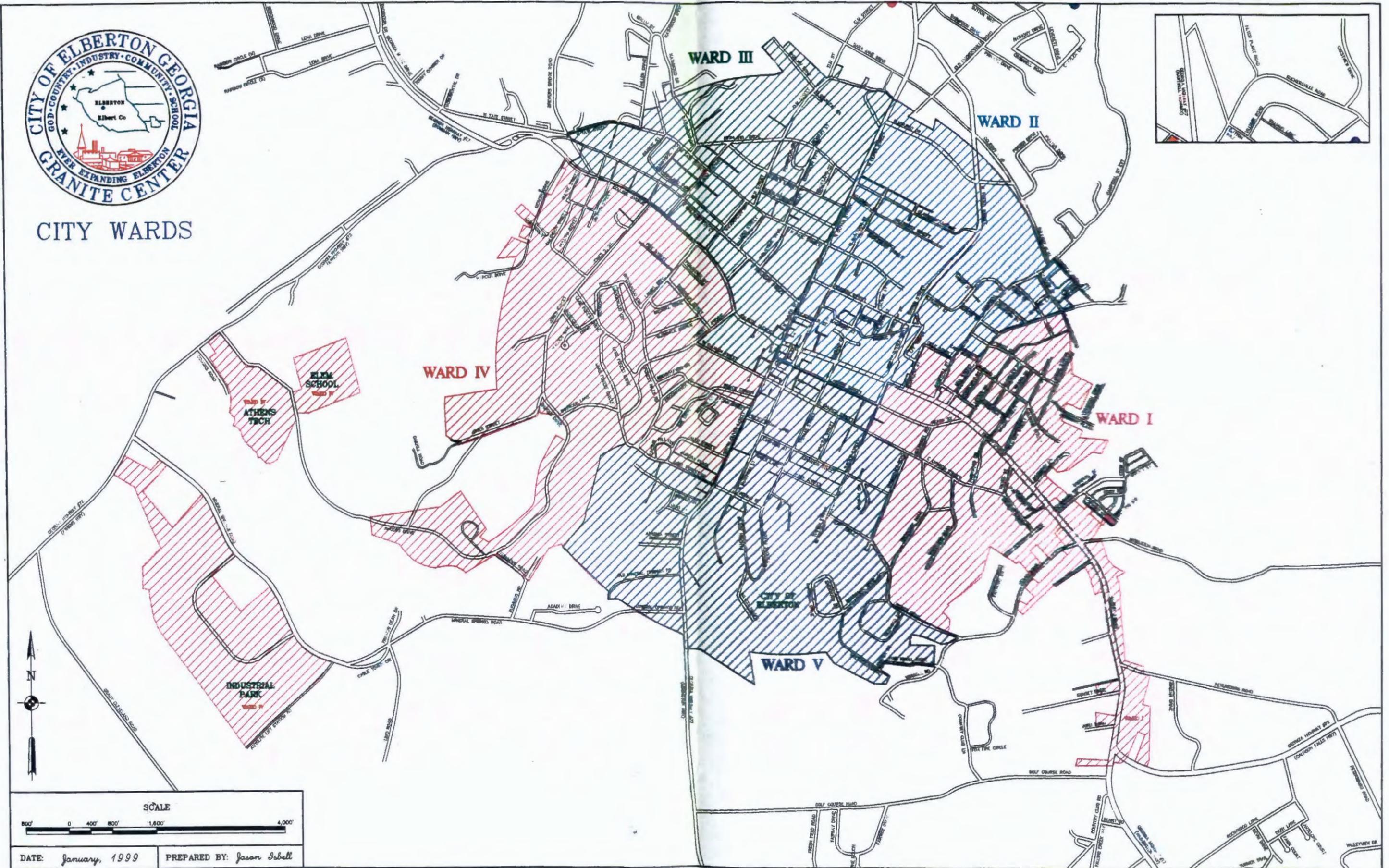


DATE: January, 1999 PREPARED BY: Jason Isbell

The mission of the City of Elberton is to provide our community with services essential for growth, development and enhancement of its quality of life. We will be professional, courteous, efficient, showing genuine concern for individual's needs and well being.

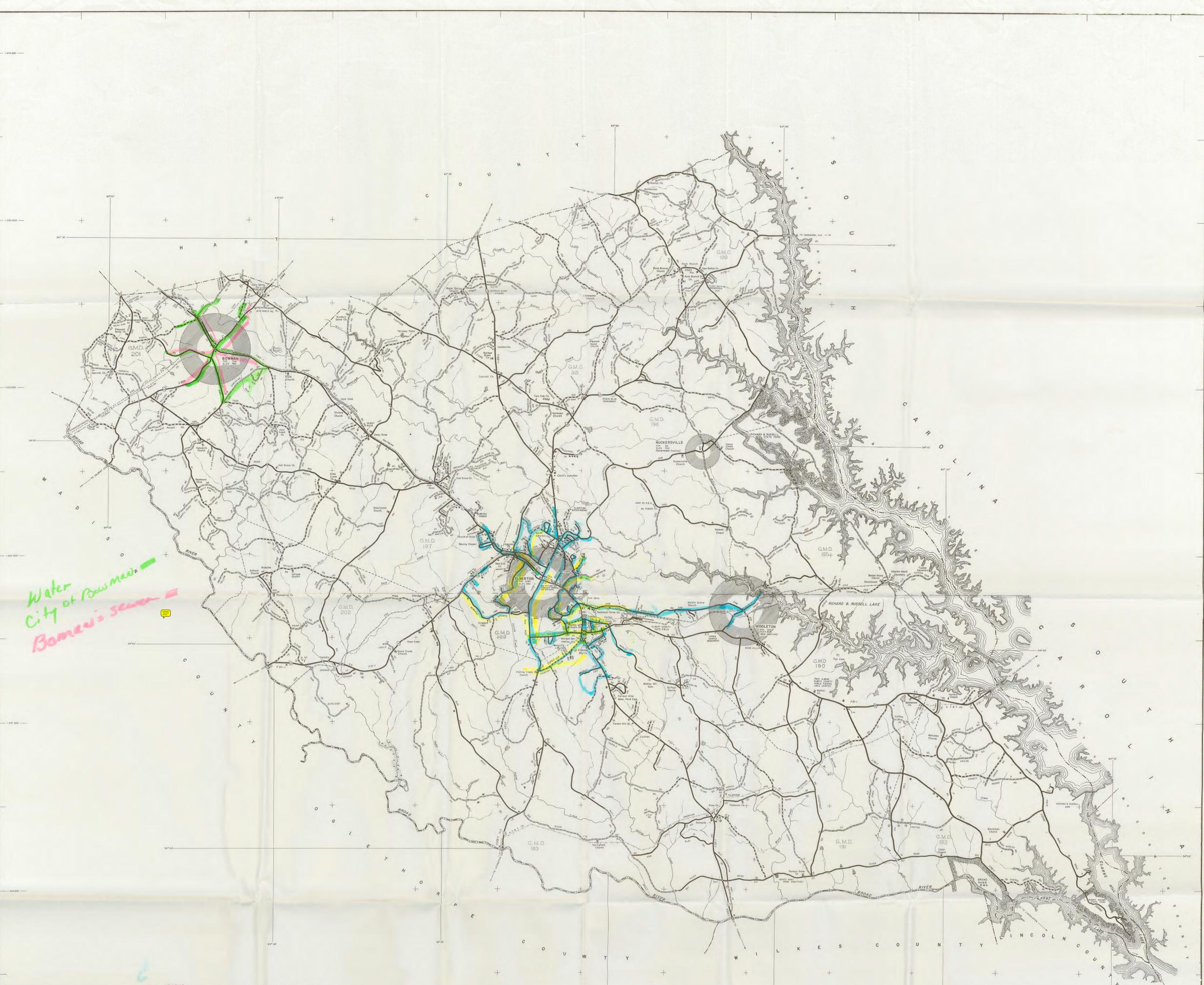


CITY WARDS



DATE: January, 1999

PREPARED BY: Jason Isbell



Water City of Bowman
Bowman's Sewer

Water City of Elberton
Sewer city of Elberton

LEGEND

BOUNDARIES	CULTURE GENERAL	NAVIGATION AND DRAINAGE	EDUCATIONAL AND CORRECTIONAL
STATE	HEAD OF NAVIGATION	TRUCK HALL OF COMMERCE, RESTROOM	UNIVERSITY
COUNTY	NAVIGATION	TRUCK HALL OF COMMERCE, RESTROOM	UNIVERSITY
MUNICIPALITY	NAVIGATION	TRUCK HALL OF COMMERCE, RESTROOM	UNIVERSITY
GENERAL MUNICIPAL DISTRICT	NAVIGATION	TRUCK HALL OF COMMERCE, RESTROOM	UNIVERSITY
...

EDUCATIONAL AND CORRECTIONAL	NAVIGATION AND DRAINAGE	NAVIGATION AND DRAINAGE
UNIVERSITY	TRUCK HALL OF COMMERCE, RESTROOM	TRUCK HALL OF COMMERCE, RESTROOM
...



GENERAL HIGHWAY MAP
ELBERT COUNTY
GEORGIA

PREPARED BY THE
DEPARTMENT OF TRANSPORTATION
DIVISION OF PLANNING AND PROGRAMMING
PLANNING DATA SERVICES
IN COOPERATION WITH
U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL HIGHWAY ADMINISTRATION

SCALE IN MILES

1991



TRANSVERSE MERCATOR PROJECTION
12,800-FOOT GRID BASED UPON
GEORGIA COORDINATE SYSTEM OF 1985

REVISION	DATE	BY
...

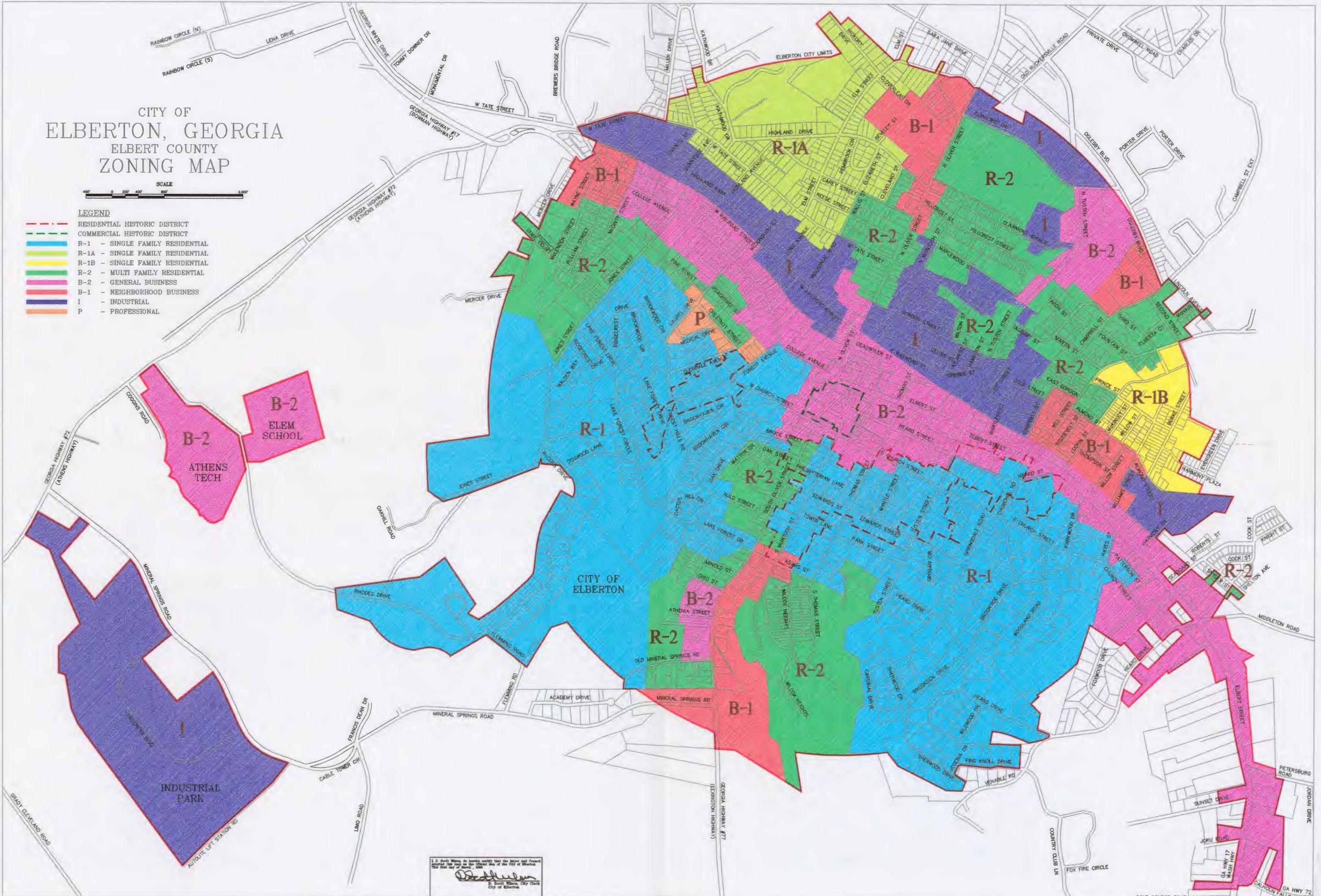
CITY OF ELBERTON, GEORGIA

ELBERT COUNTY ZONING MAP



LEGEND

- RESIDENTIAL HISTORIC DISTRICT
- COMMERCIAL HISTORIC DISTRICT
- R-1 - SINGLE FAMILY RESIDENTIAL
- R-1A - SINGLE FAMILY RESIDENTIAL
- R-1B - SINGLE FAMILY RESIDENTIAL
- R-2 - MULTI FAMILY RESIDENTIAL
- B-2 - GENERAL BUSINESS
- B-1 - NEIGHBORHOOD BUSINESS
- I - INDUSTRIAL
- P - PROFESSIONAL



I, J. Scott Wilson, do hereby certify that the Mayor and Council have approved this as the Official Zoning Map of the City of Elberton, Georgia, this 1st day of March, 2000.

J. Scott Wilson
 J. Scott Wilson, City Clerk
 City of Elberton