





COUNTY: LUMPKIN

### I. GENERAL INSTRUCTIONS:

- FORM 1 is required for ALL SDS submittals. Only one set of these forms should be submitted per county. The completed forms shall clearly present the collective agreement reached by all cities and counties that were party to the service delivery strategy.
- 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/or authority within the county that are continuing without change in Section III, below. (It is acceptable to break a service into separate components if this will facilitate description of the service delivery strategy.)

# OPTION A Revising or Adding to the SDS

#### 4. List all services provided or primarily funded by each general purpose local government and authority within the county which are revised or added to the SDS in Section IV, below. (It is acceptable to break a service into separate components if this will facilitate description of the service delivery strategy.)

- For each service or service component listed in Section IV, complete a separate, updated Summary of Service Delivery Arrangements form (FORM 2).
- Complete one copy of the Certifications form (FORM 4) and have it signed by the authorized representatives of participating local governments. [Please note that DCA cannot validate the strategy unless it is signed by the local governments required by law (see Instructions, FORM 4).]

## OPTION B Extending the Existing SDS

- 4. In Section IV type, "NONE."
- 5. Complete one copy of the Certifications for Extension of Existing SDS form (FORM 5) and have it signed by the authorized representatives of the participating local governments. [Please note that DCA cannot validate the strategy unless it is signed by the local governments required by law (see Instructions, FORM 5).]
- 6. Proceed to step 7, below.

For answers to most frequently asked questions on Georgia's Service Delivery Act, links and helpful publications, visit DCA's website at http://www.dca.ga.gov/development/PlanningQualityGrowth/programs/servicedelivery.asp, or call the Office of Planning and Quality Growth at (404) 679-5279.

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

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

PROCESS DESCRIBED, ABOVE.

## II. LOCAL GOVERNMENTS INCLUDED IN THE SERVICE DELIVERY STRATEGY: In this section, list all local governments (including cities located partially within the county) and authorities that provide services included in the service City of Dahlonega Lumpkin County Lumpkin County Water and Sewer Authority Downtown Development Authority Development Authority of Lumpkin County Hospital Authority of Lumpkin County Housing Authority of the City of Dahlonega, Georgia Lumpkin County Public Building Authority North Georgia Resource Management Authority f/k/a North Georgia Solid Waste Management Authority Joint Development Authority of Dawson, Lumpkin and White Counties CHANGE:

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

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

See attached Exhibit A

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

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

See attached Exhibit B

### **EXHIBIT A**

# SERVICE DELIVERY STRATEGY Summary of Services Being Extended Without Change

•
Ambulance
Building Inspections & Permits
Cooperative Extension Service

Coroner

Airport

Courts

Department of Family & Childrens Services

Emergency 911

Library

**Public Housing** 

**Public Transportation** 

Roads & Bridges

Senior Citizens Center

Soil Erosion Permitting/Enforcement

Solid Waste Collection

Street Lights

Tax Appraisal/Assessment

Tax Collections

## **EXHIBIT B**

### SERVICE DELIVERY STRATEGY Summary of Services Revised or Added

Animal Control
Code Enforcement
Downtown Development
Economic Development
Fire Protection
Health Care
Indigent Defense
Jail
Law Enforcement
Parks
Public Building Financing
Rainbow House - No longer funded by the County and is now operated by a private entity
Recreation
Recycling Collection & Processing
Sewage Collection & Treatment
Solid Waste Disposal
Water Distribution
Water Supply

Voter Registration & Elections







# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

should be reported to the Department of Community Affairs.		
COUNTY: LUMPKIN	Service: AIRPORT	
Check one box that best describes the agreed upo	on delivery arrangement for this service:	
1. Check one box that best describes the agreed upo	in delivery arrangement for this service.	
<ul> <li>a.) Service will be provided countywide (i.e., inc (If this box is checked, identify the government, aut</li> </ul>	cluding all cities and unincorporated areas) by a single service provider. hority or organization providing the service.): LUMPKIN COUNTY	
b.)  Service will be provided only in the unincorp checked, identify the government, authority or organized or services.	porated portion of the county by a single service provider. (If this box is inization providing the service.):	
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the	
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the	
e.)  Other (If this box is checked, <u>attach a legib</u> identify the government, authority, or other organization)	le map delineating the service area of each service provider, and ation that will provide service within each service area.):	
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service	
☐ Yes (if "Yes," you must attach additional docum	entation as described, below)	
⊠No		
If these conditions will continue under this strategy, <u>a</u> overlapping but higher levels of service (See O.C.G.A overlapping service areas or competition cannot be e	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that eliminated).	
If these conditions will be eliminated under the strate, will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.	
	Page 1 of 2	

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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
ees, bonded indebtedness, etc.).

Local Government or Au		g Metnod
LUMPKIN COUNTY	User Fees, County General Fund	
14.60%		
How will the strategy chang	e the previous arrangements for providing and/or fu	nding this service within the county?
NO CHANGE		
10 0111111011		
List any formal service deliv	very agreements or intergovernmental contracts that	will be used to implement the strategy for
List any formal service deliv		
this service:  Agreement Name	Contracting Parties	Effective and Ending Dates
this service:  Agreement Name		
this service:  Agreement Name	Contracting Parties	Effective and Ending Dates
this service:  Agreement Name	Contracting Parties	Effective and Ending Dates
this service:  Agreement Name	Contracting Parties	Effective and Ending Dates
this service:  Agreement Name	Contracting Parties	Effective and Ending Dates
this service:  Agreement Name 2017 SDSA	Contracting Parties  City of Dahlonega/Lumpkin County	Effective and Ending Dates 2/2017-2/2027
this service:  Agreement Name 2017 SDSA  What other mechanisms (if	City of Dahlonega/Lumpkin County  any) will be used to implement the strategy for this s	Effective and Ending Dates 2/2017-2/2027  Service (e.g., ordinances, resolutions, local
Agreement Name 2017 SDSA  What other mechanisms (if	Contracting Parties  City of Dahlonega/Lumpkin County	Effective and Ending Dates 2/2017-2/2027  Service (e.g., ordinances, resolutions, local
this service:  Agreement Name  2017 SDSA  What other mechanisms (if	City of Dahlonega/Lumpkin County  any) will be used to implement the strategy for this s	Effective and Ending Dates 2/2017-2/2027  Service (e.g., ordinances, resolutions, local
this service:  Agreement Name 2017 SDSA  What other mechanisms (if	City of Dahlonega/Lumpkin County  any) will be used to implement the strategy for this s	Effective and Ending Dates 2/2017-2/2027  Service (e.g., ordinances, resolutions, local
this service:  Agreement Name 2017 SDSA  What other mechanisms (if	City of Dahlonega/Lumpkin County  any) will be used to implement the strategy for this s	Effective and Ending Dates 2/2017-2/2027  Service (e.g., ordinances, resolutions, local

7. Person completing form: Dana B. Miles
Phone number: 770-781-4100 Date completed: 2/10/17

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

If not, provide designated contact person(s) and phone number(s) below: STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742 BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133











## FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

should be reported to the Department of Community Affairs.		
COUNTY: LUMPKIN	Service: AMBULANCE	
Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:	
	cluding all cities and unincorporated areas) by a single service provider. chority or organization providing the service.): <b>LUMPKIN COUNTY</b>	
b.) Service will be provided only in the unincorp checked, identify the government, authority or orga	porated portion of the county by a single service provider. (If this box is inization providing the service.):	
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the	
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the	
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):	
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service	
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)	
⊠No		
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).	
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.	
	Page 1 of 2	

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	SDS FORM 2, continued	
3. List each government or aut enterprise funds, user fees, g fees, bonded indebtedness,	hority that will help to pay for this service and indica general funds, special service district revenues, hoto etc.).	ate how the service will be funded (e.g., el/motel taxes, franchise taxes, impact
Local Government or Au	hority Fundin	g Method
LUMPKIN COUNTY	User Fees, County General Fund	
		NA
4. How will the strategy change	the previous arrangements for providing and/or fu	nding this service within the county?
NO CHANGE  5. List any formal service delive this service:	ery agreements or intergovernmental contracts that	will be used to implement the strategy for
·		
Agreement Name 2017 SDSA	Contracting Parties City of Dahlonega/Lumpkin County	Effective and Ending Dates 2/2017-2/2027
2017 SDSA	City of Danionega/Lumpkin County	212011-212021
	ny) will be used to implement the strategy for this s r, rate or fee changes, etc.), and when will they take	
NONE		
7. Person completing form: Dai Phone number: 770-781-410 8. Is this the person who should		whether proposed local government

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projects are consistent with the service delivery strategy? ☐Yes ☒No

If not, provide designated contact person(s) and phone number(s) below: STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133







# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

should be reported to the Department of Community Affairs.		
COUNTY: LUMPKIN	Service: ANIMAL CONTROL	
Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:	
	cluding all cities and unincorporated areas) by a single service provider. chority or organization providing the service.): LUMPKIN COUNTY	
b.) Service will be provided only in the unincorp checked, identify the government, authority or orga	porated portion of the county by a single service provider. (If this box is inization providing the service.):	
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the	
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the	
e.)  Other (If this box is checked, attach a legib identify the government, authority, or other organization)	le map delineating the service area of each service provider, and ation that will provide service within each service area.):	
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service	
Yes (if "Yes," you must attach additional docume	entation as described, below)	
⊠No		
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).	
If these conditions will be eliminated under the strated will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.	
	Page 1 of 2	



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.).

MPKIN COUNTY	User Fees, County General Fund, Fines, SPLOST
TY OF DAHLONEGA	Fines
ow will the strategy change the pr	revious arrangements for providing and/or funding this service within the county?

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

Prior Animal Control was provided by Lumpkin County Sheriff's Office; now provided by Lumpkin County.

Agreement Nan		Effective and Ending Date
017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027

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?

Animal shelter services are provided county-wide by the Lumpkin County. Code Enforcement for Animal Control within the incorporated limits shall be provided by the City of Dahlonega.

7. Person completing form: Dana B. Miles

Phone number: 770-781-4100 Date completed: 2/10/17

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

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

STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742









# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.		
COUNTY: LUMPKIN	Service: BUILDING INSPECTIONS & PERMITS	
Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:	
a.)  Service will be provided countywide (i.e., inc (If this box is checked, identify the government, aut	cluding all cities and unincorporated areas) by a single service provider. thority or organization providing the service.):	
b.) Service will be provided only in the unincorp checked, identify the government, authority or organ	porated portion of the county by a single service provider. (If this box is inization providing the service.):	
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the	
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the	
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):	
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service	
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)	
⊠No		
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).	
If these conditions will be eliminated under the strated will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.	
	Page 1 of 2	

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

Local Government or A	uthority Fundin	ng Method
LUMPKIN COUNTY	User Fees, Special Tax District Fund	
CITY OF DAHLONEGA	User Fees, City General Fund	
How will the strategy chan	ge the previous arrangements for providing and/or fu	inding this service within the county?
NO CHANCE		
NO CHANGE		
List any formal service deli	very agreements or intergovernmental contracts that	t will be used to implement the strategy for
this service:	very agreements of intergovernmental contracts that	t will be used to implement the strategy is
Agreement Name	Contracting Parties	Effective and Ending Date
017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027
		7,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1
1444		
	any) will be used to implement the strategy for this soly, rate or fee changes, etc.), and when will they tak	
	.,,	
NONE		
Person completing form: D Phone number: 770-781-41		
Is this the nerson who shou	ald be contacted by state agencies when evaluating	whether proposed local government
	the service delivery strategy?   Yes   No	whether proposed local government
If not, provide designated c	ontact person(s) and phone number(s) below:	
	I COUNTY MANAGER 706-864-3742	

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# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

Make copies of this form and complete one for each service listed on FORM 1, Section IV. Use EXACTLY the same service names listed on FORM 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this

should be reported to the Department of Community Affairs.	and be reported to the Department of Confirmatily Atlants.	
COUNTY: LUMPKIN	Service: CODE ENFORCEMENT	
Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:	
a.)  Service will be provided countywide (i.e., inc (If this box is checked, identify the government, aut	cluding all cities and unincorporated areas) by a single service provider. chority or organization providing the service.):	
b.) Service will be provided only in the unincorp checked, identify the government, authority or orga	porated portion of the county by a single service provider. (If this box is inization providing the service.):	
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the	
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the	
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):	
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service	
Yes (if "Yes," you must attach additional docume	entation as described, below)	
⊠No		
If these conditions will continue under this strategy, <u>at overlapping</u> but higher levels of service (See O.C.G.A overlapping service areas or competition cannot be expected to the contract of the contract	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).	
If these conditions will be eliminated under the strategorial be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.	
	Page 1 of 2	

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 Auth	ority Funding	g Method
LUMPKIN COUNTY	Special Tax District Fund	
CITY OF DAHLONEGA	City General Fund	
		Ψ
. How will the strategy change t	he previous arrangements for providing and/or fur	naing this service within the county?
No previous arrangement		
List any formal sarvice deliver	v agracements or intergovernmental contracts that	will be used to implement the strategy fo
this service:	agreements or intergovernmental contracts that	will be used to implement the strategy to
Agreement Name	Contracting Parties	Effective and Ending Dates
2017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027
and the second s		
Walter American		
	/) will be used to implement the strategy for this s	
acts of the General Assembly,	rate or fee changes, etc.), and when will they take	e effect?
1-		
NONE		
		4
Person completing form: Dana Phone number: 770-781-4100	B. Miles Date completed: 2/10/17	
Is this the person who should be projects are consistent with the	pe contacted by state agencies when evaluating v service delivery strategy?  ☐Yes  ☑No	whether proposed local government
STAN KELLEY - LUMPKIN CO	act person(s) and phone number(s) below: DUNTY MANAGER 706-864-3742 A CITY MANAGER 706-864-6133	

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# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

should be reported to the Department of Community Affairs.	
COUNTY: LUMPKIN	Service: COOPERATIVE EXTENSION SERVICE
Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:
1. Officer one box that best describes the agreed apo	in delivery arrangement for this service.
	cluding all cities and unincorporated areas) by a single service provider. hority or organization providing the service.):Lumpkin County
b.)  Service will be provided only in the unincorp checked, identify the government, authority or orga	porated portion of the county by a single service provider. (If this box is nization providing the service.):
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
If these conditions will continue under this strategy, <u>a</u> overlapping but higher levels of service (See O.C.G.A overlapping service areas or competition cannot be e	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Page 1 of 2

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	or authority that will help to pay for this service and indicat fees, general funds, special service district revenues, hote ness, etc.).	
Local Government	or Authority Funding	) Method
Lumpkin County	County General Fund, State Funds	The state of the s
4. How will the strategy c	change the previous arrangements for providing and/or fun	nding this service within the county?
NO CHANGE		
5. List any formal service this service:	e delivery agreements or intergovernmental contracts that v	will be used to implement the strategy for
Agreement Nam	e Contracting Parties	Effective and Ending Dates
2017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027
A SAME AND		
	ns (if any) will be used to implement the strategy for this se sembly, rate or fee changes, etc.), and when will they take	
None		
7. Person completing for Phone number: 770-78		
3. Is this the person who	should be contacted by state agencies when evaluating w with the service delivery strategy? ☐Yes ☒No	hether proposed local government
	ed contact person(s) and phone number(s) below: PKIN COUNTY MANAGER 706-864-3742	,

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# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

Make copies of this form and complete one for each service listed on FORM 1, Section IV. Use <u>EXACTLY the same service names listed on FORM 1</u>. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this

should be reported to the Department of Community Affairs.	sary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: LUMPKIN	Service: CORONER
Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:
a.) Service will be provided countywide (i.e., inc	cluding all cities and unincorporated areas) by a single service provider. hority or organization providing the service.):LUMPKIN COUNTY
b.) Service will be provided only in the unincorp checked, identify the government, authority or orga	porated portion of the county by a single service provider. (If this box is nization providing the service.):
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
If these conditions will be eliminated under the strated will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Page 1 of 2



SDS FORM 2, continu	ied
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Local Government or .	Authority	Fundin	g Method
Lumpkin County		County General Fund	
How will the strategy cha	nge the prev	ious arrangements for providing and/or fu	inding this service within the county?
Tiow will alle endlegy end	ingo the prov	read arrangements for providing analysis	
NO CHANGE			
~ · · · · · · · · · · · · · · · · · · ·			
List any formal service de	elivery agree	ments or intergovernmental contracts tha	t will be used to implement the strategy for
this service:	, ,		
Agreement Name		Contracting Parties	Effective and Ending Date
2017 SDSA		of Dahlonega/Lumpkin County	2/2017-2/2027
.017 000/1	Oity c	or Barnonega, Earnprin Gounty	2.2011 2.2021
		e used to implement the strategy for this	
		e used to implement the strategy for this fee changes, etc.), and when will they tak	
acts of the General Asser			
acts of the General Asser			
acts of the General Asser	nbly, rate or	fee changes, etc.), and when will they tak	
None  Person completing form:	nbly, rate or	fee changes, etc.), and when will they tak	
None Person completing form: Phone number: 770-781-4	Dana B. Mil 4100 D	es ate completed: 2/10/17	e effect?
lone  Person completing form: Phone number: 770-781-4	Dana B. Mil 4100 D	es ate completed: 2/10/17 acted by state agencies when evaluating	e effect?
None  Person completing form: Phone number: 770-781-4  Is this the person who sh	Dana B. Mil 4100 D	es ate completed: 2/10/17	e effect?
None  Person completing form: Phone number: 770-781-4  Is this the person who sh projects are consistent with	Dana B. Mil 4100 D ould be cont th the service	es ate completed: 2/10/17 acted by state agencies when evaluating	e effect?

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# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

should be reported to the Department of Community Affairs.	,
COUNTY: LUMPKIN	Service: COURTS
Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:
a.) Service will be provided countywide (i.e., inc (If this box is checked, identify the government, aut	cluding all cities and unincorporated areas) by a single service provider. chority or organization providing the service.):
b.)  Service will be provided only in the unincorp checked, identify the government, authority or orga	porated portion of the county by a single service provider. (If this box is nization providing the service.):
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
f these conditions will be eliminated under the strated will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Page 1 of 2

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

umpkin County	County General Fund, User Fees, State Funds, Fines, SPLOST
City of Dahlonega	City General Fund, User Fees, Fines
How will the strategy change	e the previous arrangements for providing and/or funding this service within the county?

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

D17 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027

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?

Lumpkin County Superior Court, Probate Court, Juvenile Court and Magistrate Court have jurisdiction county-wide. City of Dahlonega Municipal Court has jurisdiction only within the incorporated area to hear traffic violation cases and city ordinance violation cases.

7. Person completing form: Dana B. Miles

Phone number: 770-781-4100 Date completed: 2/10/17

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

If not, provide designated contact person(s) and phone number(s) below: STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742









# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

Answer each question below, attaching additional pages as neces should be reported to the Department of Community Affairs.	ssary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: LUMPKIN	Service: Department of Family & Childrens Services
Check <u>one</u> box that best describes the agreed upon	on delivery arrangement for this service:
	cluding all cities and unincorporated areas) by a single service provider. thority or organization providing the service.):Lumpkin County
b.)  Service will be provided only in the unincorp checked, identify the government, authority or organized or services.	porated portion of the county by a single service provider. (If this box is anization providing the service.):
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the
	only within their incorporated boundaries, and the county will provide the cked, identify the government(s), authority or organization providing the
	ele map delineating the service area of each service provider, and ation that will provide service within each service area.):
<ol><li>In developing this strategy, were overlapping serving identified?</li></ol>	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docum	entation as described, below)
⊠No	
	Attach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that eliminated).
If these conditions will be eliminated under the strate will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Page 1 of 2



3 List each government or a	authority that will help to pay for this service and indica	te how the service will be funded (e.g.
enterprise funds, user fees	s, general funds, special service district revenues, hote	
fees, bonded indebtednes	s, etc.).	
Local Government or A	Authority Flunding	g Method
Lumpkin County	County General Fund, State Funds	
4. How will the strategy char	nge the previous arrangements for providing and/or fur	nding this service within the county?
NO CHANGE		
5. List any formal service del	livery agreements or intergovernmental contracts that	will be used to implement the strategy for
this service:	rest, agreemente et morgetenmental centadote alac	with the deed to implement the ending; let
Agreement Name	Controlled Botton	Effective and Ending Dates
2017 SDSA	Contracting Parties  City of Dahlonega/Lumpkin County	2/2017-2/2027
6 What other mechanisms (i	if any) will be used to implement the strategy for this s	ervice (e.g. ordinances resolutions local
	bly, rate or fee changes, etc.), and when will they take	
None		
7. Person completing form: D	Jana P. Milas	
Phone number: 770-781-4		
	uld be contacted by state agencies when evaluating w □ the service delivery strategy? ☐Yes ⊠No	whether proposed local government
projects are consistent with	The service derivery strategy: [1] 169 [2]140	
	contact person(s) and phone number(s) below:	
	N COUNTY MANAGER 706-864-3742 EGA CITY MANAGER 706-864-6133	
DILL COLIMID - DALLON		

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# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

Answer each question below, attaching additional pages as neces should be reported to the Department of Community Affairs.	ssary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: LUMPKIN	Service: DOWNTOWN DEVELOPMENT
Check <u>one</u> box that best describes the agreed upon	on delivery arrangement for this service:
a.) Service will be provided countywide (i.e., income (if this box is checked, identify the government, aut	cluding all cities and unincorporated areas) by a single service provider. thority or organization providing the service.):
b.) Service will be provided only in the unincorporate checked, identify the government, authority or organized	porated portion of the county by a single service provider. (If this box is anization providing the service.):
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the vn Development Authority
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	ole map delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping serving identified?	ce areas, unnecessary competition and/or duplication of this service
Yes (if "Yes," you must attach additional docum	entation as described, below)
⊠No	
	Attach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that eliminated).
If these conditions will be eliminated under the strate will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Page 1 of 2

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.).

ity General Fund rants, Bonds, User Fees
rants, Bonds, User Fees
arrangements for providing and/or funding this service within the county?
3

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

Agreement Nam	e Contracting Parties	Effective and Ending Dates
2017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027

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?

City of Dahlonega has a Downtown Development Authority charged with encouraging development within the downtown area of the city.

7. Person completing form: Dana B. Miles

Date completed: 2/10/17 Phone number: 770-781-4100

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

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

STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742









## FORM 2: Summary of Service Delivery Arrangements

Instructions:

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

COUNTY:LUMPKIN	Service: Economic Development
1. Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:
	cluding all cities and unincorporated areas) by a single service provider. chority or organization providing the service.):Development Authority ty of Dawson, Lumpkin and White Counties
b.) Service will be provided only in the unincorp checked, identify the government, authority or orga	porated portion of the county by a single service provider. (If this box is nization providing the service.):
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
f these conditions will be eliminated under the strate vill be taken to eliminate them, the responsible party	gy, <u>attach an implementation schedule</u> listing each step or action that and the agreed upon deadline for completing it.

3.	List each government or authority that will	help to	pay for this	s service and ir	ndicate how	the service	will be funde	ed (e.g.,
	enterprise funds, user fees, general funds	, specia	service di	strict revenues,	, hotel/motel	taxes, fran	ichise taxes,	impact
	fees, bonded indebtedness, etc.).							

Local Government or Authority	Funding Method	
Development Authority of Lumpkin	Grants, Bonds, User Fees, SPLOST	
County		
Joint Development Authority of	Grants, Bonds, User Fees, General Fund	
Dawson, Lumpkin and White		
Counties		

4. How will the strategy	change the previous ar	angements for providing	g and/or funding	this service within the county	v?
--------------------------	------------------------	-------------------------	------------------	--------------------------------	----

The Development Authority of Lumpkin County focuses on projects solely in Lumpkin County. The Joint Development Authority of Dawson, Lumpkin and White Counties focuses on projects of regional impact regardless of which of the 3 counties a project is located in.

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
2017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027
40-10-20-		
The second secon		1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1

6. What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinance	es, resolutions, local
acts of the General Assembly, rate or fee changes, etc.), and when will they take effect?	

None

7. Person completing form: Dana B. Miles

Phone number: 770-781-4100 Date completed: 2/10/17

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

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

STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742







# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

should be reported to the Department of Community Affairs.	sary. If the someon person for the service (listed at the section of the page) sharings, the
COUNTY: LUMPKIN	Service: EMERGENCY 911
Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:
	cluding all cities and unincorporated areas) by a single service provider. hority or organization providing the service.):Lumpkin County
b.) Service will be provided only in the unincorp checked, identify the government, authority or orga	orated portion of the county by a single service provider. (If this box is nization providing the service.):
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Page 1 of 2

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Local Government	or Authority Funding	Method
umpkin County	County General Fund, User Fees, SPLO	ST
How will the strategy of	hange the previous arrangements for providing and/or fun	ding this service within the county?
	The state of the s	,
lo Change		
List any formal service	delivery agreements or intergovernmental contracts that v	will be used to implement the strateg
	delivery agreements or intergovernmental contracts that v	will be used to implement the strateg
his service:		
his service:  Agreement Nam	e Contracting Parties	Effective and Ending Da
his service:  Agreement Nam		
his service:  Agreement Nam	e Contracting Parties	Effective and Ending Da
his service:  Agreement Nam	e Contracting Parties	Effective and Ending Da
his service:  Agreement Nam	e Contracting Parties	Effective and Ending Da
his service:  Agreement Nam	e Contracting Parties	Effective and Ending Da
his service:  Agreement Nam	e Contracting Parties	Effective and Ending Da
his service:  Agreement Nam 017 SDSA  What other mechanisn	e: Contracting Parties  City of Dahlonega/Lumpkin County  as (if any) will be used to implement the strategy for this se	Effective and Ending Da 2/2017-2/2027  ervice (e.g., ordinances, resolutions,
this service:  Agreement Nam 017 SDSA  What other mechanisn	e Contracting Parties City of Dahlonega/Lumpkin County	Effective and Ending Da 2/2017-2/2027  ervice (e.g., ordinances, resolutions,
this service:  Agreement Nam 017 SDSA  What other mechanisn	e: Contracting Parties  City of Dahlonega/Lumpkin County  as (if any) will be used to implement the strategy for this se	Effective and Ending Da 2/2017-2/2027  ervice (e.g., ordinances, resolutions,
this service:  Agreement Nam 017 SDSA  What other mechanisn	e: Contracting Parties  City of Dahlonega/Lumpkin County  as (if any) will be used to implement the strategy for this se	Effective and Ending Da 2/2017-2/2027  ervice (e.g., ordinances, resolutions,
this service:  Agreement Nam 017 SDSA  What other mechanisn	e: Contracting Parties  City of Dahlonega/Lumpkin County  as (if any) will be used to implement the strategy for this se	Effective and Ending Da 2/2017-2/2027  ervice (e.g., ordinances, resolutions,
Agreement Nam 017 SDSA  What other mechanism	e: Contracting Parties  City of Dahlonega/Lumpkin County  as (if any) will be used to implement the strategy for this se	Effective and Ending Da 2/2017-2/2027  ervice (e.g., ordinances, resolutions,
Agreement Nam 017 SDSA  What other mechanism	e: Contracting Parties  City of Dahlonega/Lumpkin County  as (if any) will be used to implement the strategy for this se	Effective and Ending Da 2/2017-2/2027  ervice (e.g., ordinances, resolutions,
Agreement Nam 017 SDSA  What other mechanism acts of the General Asselone	City of Dahlonega/Lumpkin County  Ins (if any) will be used to implement the strategy for this seembly, rate or fee changes, etc.), and when will they take	Effective and Ending Da 2/2017-2/2027  ervice (e.g., ordinances, resolutions,
Agreement Nam 017 SDSA  What other mechanism acts of the General Assone	city of Dahlonega/Lumpkin County  ms (if any) will be used to implement the strategy for this seembly, rate or fee changes, etc.), and when will they take	Effective and Ending Da 2/2017-2/2027  ervice (e.g., ordinances, resolutions,
Agreement Nam 017 SDSA  What other mechanism acts of the General Assone	City of Dahlonega/Lumpkin County  ins (if any) will be used to implement the strategy for this seembly, rate or fee changes, etc.), and when will they take  in: Dana B. Miles	Effective and Ending Da 2/2017-2/2027  ervice (e.g., ordinances, resolutions,
Agreement Nam 017 SDSA  What other mechanism acts of the General Asselone  Person completing for Phone number: 770-78	city of Dahlonega/Lumpkin County  ms (if any) will be used to implement the strategy for this seembly, rate or fee changes, etc.), and when will they take	Effective and Ending Da 2/2017-2/2027  ervice (e.g., ordinances, resolutions, effect?

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## FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

COUNTY: LUMPKIN	Service: FIRE PROTECTION
Check <u>one</u> box that best describes the agreed upo	n delivery arrangement for this service:
	cluding all cities and unincorporated areas) by a single service provider. hority or organization providing the service.):Lumpkin County
b.) Service will be provided only in the unincorp checked, identify the government, authority or organ	orated portion of the county by a single service provider. (If this box is nization providing the service.):
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
f these conditions will be eliminated under the strateg	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.

Page 1 of 2

3. List each gove	ernment or authority	that will help to pay	for this service and i	ndicate how the se	rvice will be funded (e.g
					, franchise taxes, impac
fees, bonded i	ndebtedness, etc.).				

Funding Method
County General Fund, Federal Funds, User Fees
City General Fund as set forth in 2017 SDSA

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

See 2017 SDSA (Para.#1) which provides, inter alia, for the acquisition of a ladder truck and supplementary fire services by the County in the City limits in exchange for an annual payment of \$50,000 by the City.

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

Contracting Parties	Effective and Ending Dates
City of Dahlonega/Lumpkin County	2/2017-2/2027
and the second s	

6. What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, local acts of the General Assembly, rate or fee changes, etc.), and when will they take effect?

None

7. Person completing form: Dana B. Miles

Date completed: 2 10 17 Phone number: 770-781-4100

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

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

STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742







## FORM 2: Summary of Service Delivery Arrangements

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COUNTY: LUMPKIN

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

Service: Health Care

1	. Check one box that best describes the agreed upon delivery arrangement for this service:
	a.) 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.):Lumpkin County
	b.) Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):
	c.)  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:
	d.)  One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):
	e.) Other (If this box is checked, <u>attach a legible map delineating the service area of each service provider</u> , and identify the government, authority, or other organization that will provide service within each service area.): T
2	. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?
	☐ Yes (if "Yes," you must attach additional documentation as described, below)
	⊠No
0	these conditions will continue under this strategy, <u>attach an explanation for continuing the arrangement</u> (i.e., verlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that verlapping service areas or competition cannot be eliminated).
	these conditions will be eliminated under the strategy, <u>attach an implementation schedule</u> listing each step or action that ill be taken to eliminate them, the responsible party and the agreed upon deadline for completing it.

Page 1 of 2

Local Government or Author	ority Funding I	flethod
Lumpkin County	General Fund	A Carlotte and the second seco
Hospital Authority of Lumpkin C	County General Fund for Indigent Health Care	10/2017 41/2019 11
. How will the strategy change the	ne previous arrangements for providing and/or fund	ng this service within the county?
	ned "Health Facility". The name change is to indicate alth Department office and at other locations for inc	
Authority of Lumpkin County.	agreements or intergovernmental contracts that wi	Il be used to implement the strategy
Authority of Lumpkin County.  List any formal service delivery this service:		, 0,
Authority of Lumpkin County.  List any formal service delivery this service:  Agreement Name	contracting Parties  City of Dahlonega/Lumpkin County	Il be used to implement the strategy  Effective and Ending Date 2/2017-2/2027
Authority of Lumpkin County.  List any formal service delivery this service:	Contracting Parties	Effective and Ending Date
Authority of Lumpkin County.  List any formal service delivery this service:  Agreement Name	Contracting Parties	Effective and Ending Date
Authority of Lumpkin County.  List any formal service delivery this service:  Agreement Name 2017 SDSA  What other mechanisms (if any	Contracting Parties	Effective and Ending Date 2/2017-2/2027  vice (e.g., ordinances, resolutions, lo
Authority of Lumpkin County.  List any formal service delivery this service:  Agreement Name 2017 SDSA  What other mechanisms (if any	Contracting Parties  City of Dahlonega/Lumpkin County  (1) will be used to implement the strategy for this ser	Effective and Ending Date 2/2017-2/2027  vice (e.g., ordinances, resolutions, lo

projects are consistent with the service delivery strategy? ☐Yes ☒No

STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742 BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

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







# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

sh	should be reported to the Department of Community Affairs.			
С	OUNTY: LUMPKIN	Service: INDIGENT DEFENSE		
1	. Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:		
	a.)  Service will be provided countywide (i.e., inc (If this box is checked, identify the government, aut	cluding all cities and unincorporated areas) by a single service provider. thority or organization providing the service.):		
	b.) Service will be provided only in the unincorpolecked, identify the government, authority or organization.	porated portion of the county by a single service provider. (If this box is anization providing the service.):		
		only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the		
		only within their incorporated boundaries, and the county will provide the cked, identify the government(s), authority or organization providing the		
		ole map delineating the service area of each service provider, and eation that will provide service within each service area.):		
2	. In developing this strategy, were overlapping servi identified?	ice areas, unnecessary competition and/or duplication of this service		
	☐ Yes (if "Yes," you must attach additional docum	nentation as described, below)		
	⊠No			
0	these conditions will continue under this strategy, averlapping but higher levels of service (See O.C.G., verlapping service areas or competition cannot be expressed to the service areas or competition cannot be expressed to the service areas or competition.	Attach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that eliminated).		
	these conditions will be eliminated under the strate ill be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.		

Page 1 of 2

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SDS		a 1 . 7 . 1 . 4			177
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11 0'	/ Funding	Method
Lumpkin County	County General Fund	
City of Dahlonega	City General Fund	
How will the strategy change the r	previous arrangements for providing and/or fund	ding this service within the county?
Tiow will the strategy change the p	revious arrangements for providing and/or fund	ang this service within the county?
City of Dahlonega took over indiger	nt defense in Municipal Court.	
, , , ,	·	
	reements or intergovernmental contracts that w	vill be used to implement the strategy f
this service:		
Agreement Name	Contracting Parties	Effective and Ending Date
	ity of Dahlonega/Lumpkin County	2/2017-2/2027
- COLORD AND COLORD AN	A A A A A A A A A A A A A A A A A A A	
		1
What other mechanisms (if any) w	ill be used to implement the strategy for this se	rvice (e.g., ordinances, resolutions, loc
	ill be used to implement the strategy for this se or fee changes, etc.), and when will they take	
acts of the General Assembly, rate		
acts of the General Assembly, rate		
acts of the General Assembly, rate		
acts of the General Assembly, rate		
acts of the General Assembly, rate	or fee changes, etc.), and when will they take	
lone  Person completing form: Dana B.	or fee changes, etc.), and when will they take	
lone  Person completing form: Dana B. Phone number: 770-781-4100	Miles Date completed: 21017	effect?
one  Person completing form: Dana B. Phone number: 770-781-4100	Miles Date completed: 21017 ontacted by state agencies when evaluating w	effect?
lone  Person completing form: Dana B. Phone number: 770-781-4100  Is this the person who should be c	Miles Date completed: 21017	effect?
Person completing form: Dana B. Phone number: 770-781-4100  Is this the person who should be coprojects are consistent with the ser	Miles Date completed: 21017 ontacted by state agencies when evaluating w	effect?







## FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

COUNTY: LUMPKIN	Service: JAIL			
Check <u>one</u> box that best describes the agreed upon	on delivery arrangement for this service:			
	cluding all cities and unincorporated areas) by a single service provider. thority or organization providing the service.):Lumpkin County			
b.) Service will be provided only in the unincorpolecked, identify the government, authority or organized	porated portion of the county by a single service provider. (If this box is anization providing the service.):			
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the			
	only within their incorporated boundaries, and the county will provide the cked, identify the government(s), authority or organization providing the			
	ole map delineating the service area of each service provider, and ation that will provide service within each service area.):			
2. In developing this strategy, were overlapping servi identified?	ice areas, unnecessary competition and/or duplication of this service			
☐ Yes (if "Yes," you must attach additional docum	entation as described, below)			
⊠No				
	Attach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that eliminated).			
If these conditions will be eliminated under the strate	gy, attach an implementation schedule listing each step or action that			

Page 1 of 2

will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it.

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

Local Government or Authority	Funding Method
Lumpkin County	County General Fund, Reimbursement Fees from other Governments
City of Dahlonega	City General Fund, Municipal Court 10% Add-on Fee Fines (Jail Fund Fines)

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

See 2017 SDSA (Para. #3) which provides, inter alia, for the City to pay the County certain fees collected as compensation for the housing and medical expenses of City inmates in the County jail.

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
2017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027

<ol><li>What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinance)</li></ol>	es, resolutions, local
acts of the General Assembly, rate or fee changes, etc.), and when will they take effect?	

None

7. Person completing form: Dana B. Miles

Phone number: 770-781-4100 Date completed: 2

Tiles
Date completed: 2 10 17

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

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

STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742 BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133







### FORM 2: Summary of Service Delivery Arrangements

Instructions:

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

COUNTY: LUMPKIN	Service:LAW ENFORCEMENT
Check <u>one</u> box that best describes the agreed upon	delivery arrangement for this service:
a.) Service will be provided countywide (i.e., including this box is checked, identify the government, authority	uding all cities and unincorporated areas) by a single service provider. ority or organization providing the service.):Lumpkin County
b.) Service will be provided only in the unincorpor checked, identify the government, authority or organic	rated portion of the county by a single service provider. (If this box is zation providing the service.):
	ly within their incorporated boundaries, and the service will not be ked, identify the government(s), authority or organization providing the
	ly within their incorporated boundaries, and the county will provide the ed, identify the government(s), authority or organization providing the
e.)  Other (If this box is checked, <u>attach a legible</u> identify the government, authority, or other organization	map delineating the service area of each service provider, and ion that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	e areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional documer	ntation as described, below)
⊠No	
If these conditions will continue under this strategy, <u>atternation</u> overlapping but higher levels of service (See O.C.G.A. overlapping service areas or competition cannot be elim	ach an explanation for continuing the arrangement (i.e., 36-70-24(1)), overriding benefits of the duplication, or reasons that minated).
If these conditions will be eliminated under the strategy will be taken to eliminate them, the responsible party at	v, attach an implementation schedule listing each step or action that nd the agreed upon deadline for completing it.

Page 1 of 2

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

Local Government or Author	ty Funding	g Method			
umpkin County	County General Fund, SPLOST				
ity of Dahlonega	City General Fund	City General Fund			
How will the strategy change the	previous arrangements for providing and/or fu	nding this service within the county?			
	provides, inter alia, for payment by the City to penses incurred by the County in the City limits				
List any formal service delivery a his service:	greements or intergovernmental contracts that	will be used to implement the strategy			
Agreement Name	Contracting Parties	Effective and Ending Date			
017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027			
		100,000,000			
	will be used to implement the strategy for this ste or fee changes, etc.), and when will they tak				
Person completing form: <b>Dana E</b> Phone number: <b>770-781-4100</b> Is this the person who should be	Date completed: 21617  contacted by state agencies when evaluating agencies delivery strategy?  Yes  No	whether proposed local government			



# Georgia® Department of Affairs Community Affairs



#### SERVICE DELIVERY STRATEGY

# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

	sted on FORM 1, Section IV. Use EXACTLY the same service names listed on FORM 1. sary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: LUMPKIN	Service:LIBRARY
1. Check one box that best describes the agreed upo	n delivery arrangement for this service:
	cluding all cities and unincorporated areas) by a single service provider. hority or organization providing the service.):Lumpkin County
b.)  Service will be provided only in the unincorp checked, identify the government, authority or organized or the control of	orated portion of the county by a single service provider. (If this box is nization providing the service.):
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
If these conditions will be eliminated under the strated will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Page 1 of 2

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•	-				1111	

Lumpkin County  County General Fund, Chestatee Regional Library System (funded by Lumpkin and Dawson Counties), SPLOST  4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?  No Change  5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy this service:	fees, bonded indebtednes  Local Government or A	Authority Eunding	g Method			
and Dawson Counties), SPLOST  4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?  No Change  5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy this service:  **Agreement Name***  **Contracting Parties**  **Effective and Ending Days of the previous arrangements for providing and/or funding this service within the county?  **Effective and Ending Days of the previous arrangements for providing and/or funding this service within the county?  **Effective and Ending Days of the previous arrangements for providing and/or funding this service within the county?  **Effective and Ending Days of the previous arrangements for providing and/or funding this service within the county?  **Effective and Ending Days of the previous arrangements for providing and/or funding this service within the county?  **Effective and Ending Days of the previous arrangements for providing and/or funding this service within the county?  **Effective and Ending Days of the previous arrangements for providing and/or funding this service within the county?  **Effective and Ending Days of the previous arrangements for providing and/or funding this service within the county?  **Effective and Ending Days of the previous arrangements for providing and/or funding this service within the county?  **Effective and Ending Days of the previous arrangements for providing and/or funding this service within the county?  **Effective and Ending Days of the previous arrangements for providing and/or funding this service within the county?  **Effective and Ending Days of the previous arrangements for providing and/or funding this service within the county?  **Effective and Ending Days of the previous arrangements for providing and the previous arrangements for previous arra						
No Change  5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the stratege this service:  **Agreement Name**  **Contracting Parties**  **Effective and Ending Date:						
5. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategethis service:  **Agreement Name**  **Contracting Parties**  **Effective and Ending Delivery agreements or intergovernmental contracts that will be used to implement the strategethis service:  **Agreement Name**  **Contracting Parties**  **Effective and Ending Delivery agreements or intergovernmental contracts that will be used to implement the strategethis service:  **Agreement Name**  **Contracting Parties**  **Effective and Ending Delivery agreements or intergovernmental contracts that will be used to implement the strategethis service:  **Effective and Ending Delivery agreements or intergovernmental contracts that will be used to implement the strategethis service:  **Effective and Ending Delivery agreements or intergovernmental contracts that will be used to implement the strategethis service:  **Effective and Ending Delivery agreements or intergovernmental contracts that will be used to implement the strategethis service agreement to the strategethis servi	4. How will the strategy char	nge the previous arrangements for providing and/or fur	nding this service within the county?			
Agreement Name Contracting Parties Effective and Ending Da	No Change					
	5. List any formal service de	livery agreements or intergovernmental contracts that	will be used to implement the strategy for			
	List any formal service de this service:					
	List any formal service de 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?

None

7. Person completing form: Dana B. Miles

Date completed: 2/10/17 Phone number: 770-781-4100

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

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

STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742 BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133







# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

**COUNTY: LUMPKIN** 

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

Service: PARKS

1.	. Check <u>one</u> box that best describes the agreed upon delivery arrangement for this service:
	a.)  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.):
	b.)  Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):
	c.)  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:
	d.) 🖂 One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.): Lumpkin County, City of Dahlonega
	e.)   Other (If this box is checked, <u>attach a legible map delineating the service area of each service provider</u> , and identify the government, authority, or other organization that will provide service within each service area.):
2.	In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?
	☐ Yes (if "Yes," you must attach additional documentation as described, below)
	⊠No
0	these conditions will continue under this strategy, <u>attach an explanation for continuing the arrangement</u> (i.e., verlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that verlapping service areas or competition cannot be eliminated).
	these conditions will be eliminated under the strategy, <u>attach an implementation schedule</u> listing each step or action that ill be taken to eliminate them, the responsible party and the agreed upon deadline for completing it.

Page 1 of 2

Local Government or	Authority Funding	Method			
Lumpkin County	County General Fund, User Fees				
City of Dahlonega	City General Fund, User Fees				
How will the strategy sha	inge the previous arrangements for providing and/or fun	ding this service within the county?			
now will the strategy cha	inge the previous arrangements for providing and/or fair	uning this service within the county!			
n the prior SDSA Parks a	and Recreation were combined. They have been divided	d into different services in this SDSA			
	nd County provide Parks services, only the County prov				
,					
List any formal service de	elivery agreements or intergovernmental contracts that v	will be used to implement the strategy for			
this service:	ontoly agreements of interger entires earning and	3,			
	and the Books	Fittadian and Finding Date			
Agreement Name	City of Dahlanga/Lumpkin County	Effective and Ending Date 2/2017-2/2027			
2017 SDSA	City of Dahlonega/Lumpkin County	212011-212021			
- Colores					
The second secon					
. What other mechanisms	(if any) will be used to implement the strategy for this se	ervice (e.g., ordinances, resolutions, loc			
	(if any) will be used to implement the strategy for this sembly, rate or fee changes, etc.), and when will they take				
acts of the General Asser					
acts of the General Asser					
acts of the General Asser					
acts of the General Asser	mbly, rate or fee changes, etc.), and when will they take  Dana B. Miles				
None  Person completing form: Phone number: 770-781-	Dana B. Miles 4100 Date completed: 2/10/17  nould be contacted by state agencies when evaluating w	effect?			
None  Person completing form: Phone number: 770-781-	Dana B. Miles 4100 Date completed: 2/10/17	effect?			
None  Person completing form: Phone number: 770-781-  Is this the person who sh projects are consistent will finot, provide designated	Dana B. Miles 4100 Date completed: 2/10/17  nould be contacted by state agencies when evaluating w	effect?			







# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

COUNTY:LUMPKIN	Service: Public Building Financing
1. Check <u>one</u> box that best describes the agreed to	upon delivery arrangement for this service:
	including all cities and unincorporated areas) by a single service provider. authority or organization providing the service.):Lumpkin County
b.) Service will be provided only in the uninc checked, identify the government, authority or or	orporated portion of the county by a single service provider. (If this box is rganization providing the service.):
	e only within their incorporated boundaries, and the service will not be checked, identify the government(s), authority or organization providing the
	e only within their incorporated boundaries, and the county will provide the necked, identify the government(s), authority or organization providing the
	gible map delineating the service area of each service provider, and nization that will provide service within each service area.):
In developing this strategy, were overlapping se identified?	ervice areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docu	umentation as described, below)
⊠No	
	y, attach an explanation for continuing the arrangement (i.e., G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that e eliminated).
If these conditions will be eliminated under the stra	ategy, 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.

Local Government or Author	rity Funding I	Method A
Lumpkin County Public Building	SPLOST	
Authority		
	www.	and the second s
How will the strategy change the	e previous arrangements for providing and/or fund	ling this service within the county?
	provided arrangements for providing and/or faile	ing this service within the sounty?
	ing Authority was formed to create a mechanism	
	SPLOST. Currently, all construction is complete	and debt paid. The Authority remains
n existence for future projects.		
List any formal service delivery :	agreements or intergovernmental contracts that w	ill he used to implement the strategy fo
this service:	agreements of intergovernmental contracts that w	in be used to implement the strategy to
	The state of the s	
Agreement Name	Contracting Parties	Effective and Ending Dates
2017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027
11 010000000000000000000000000000000000		
What other mechanisms (if any)	will be used to implement the strategy for this ser	rvice (e.g. ordinances resolutions loca
	will be used to implement the strategy for this ser	
	will be used to implement the strategy for this ser te or fee changes, etc.), and when will they take e	
acts of the General Assembly, ra		
acts of the General Assembly, ra		
acts of the General Assembly, ra		
acts of the General Assembly, ra		
acts of the General Assembly, ra	ate or fee changes, etc.), and when will they take e	
None  Person completing form: Dana E	ate or fee changes, etc.), and when will they take e	
None  Person completing form: Dana E Phone number: 770-781-4100	3. Miles Date completed: 2/\omega 10	effect?
lone  Person completing form: Dana E Phone number: 770-781-4100  Is this the person who should be	3. Miles Date completed: 2/10/17 contacted by state agencies when evaluating wh	effect?
None  Person completing form: Dana E Phone number: 770-781-4100  Is this the person who should be projects are consistent with the s	ate or fee changes, etc.), and when will they take each of the complete and the complete and the contacted by state agencies when evaluating where the contacted by state agencies where the contacted by states agencies where the contacted by the contacted by the contacted by the contacted by the	effect?
Person completing form: Dana E Phone number: 770-781-4100  Is this the person who should be projects are consistent with the s	ate or fee changes, etc.), and when will they take each of the complete and the complete and the contacted by state agencies when evaluating where the contacted by state agencies where the contacted by states agencies agencies agencies where the contacted by states agencies	effect?







# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

should be reported to the Department of Community Affairs.				
COUNTY: LUMPKIN	Service: PUBLIC HOUSING			
Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:			
a.) Service will be provided countywide (i.e., inc (If this box is checked, identify the government, aut	cluding all cities and unincorporated areas) by a single service provider. chority or organization providing the service.):			
b.) Service will be provided only in the unincorp checked, identify the government, authority or orga	porated portion of the county by a single service provider. (If this box is nization providing the service.):			
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the			
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the			
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):			
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service			
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)			
⊠No				
If these conditions will continue under this strategy, <u>a</u> overlapping but higher levels of service (See O.C.G.A overlapping service areas or competition cannot be e	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).			
If these conditions will be eliminated under the strate, will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.			
	Page 1 of 2			

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	eneral funds, special ser		ate how the service will be funded (e.g., el/motel taxes, franchise taxes, impact
Local Government or Au	hority	Fundin	g Method
Housing Authority of the City			■ the control of the
Dahlonega, Georgia		- Million - Mill	
4 How will the strategy change	the previous arrangeme	ents for providing and/or fu	nding this service within the county?
4. How will the strategy offeringe	The previous arrangeme	nto for providing difazor to	Traing the solvies with the sounty.
No Change			
List any formal service delive this service:	ery agreements or intergo	overnmental contracts that	will be used to implement the strategy for
Agreement Name	Col		Effective and Ending Dates
2017 SDSA	City of Dahlonega/Lu	mpkin County	2/2017-2/2027
			,
What other mechanisms (if a acts of the General Assembly			service (e.g., ordinances, resolutions, local e effect?
None			
7. Person completing form: Dai Phone number: 770-781-410		2/10/17	
8. Is this the person who should projects are consistent with the	I be contacted by state a ne service delivery strate	gencies when evaluating v gy? ∐Yes ⊠No	whether proposed local government
If not, provide designated cor STAN KELLEY - LUMPKIN O BILL SCHMID - DAHLONEO	COUNTY MANAGER 70	6-864-3742	

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# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.				
COUNTY: LUMPKIN	Service: PUBLIC TRANSPORTATION			
Check <u>one</u> box that best describes the agreed upon	on delivery arrangement for this service:			
	cluding all cities and unincorporated areas) by a single service provider. hority or organization providing the service.):Lumpkin County			
b.) Service will be provided only in the unincorporateked, identify the government, authority or organized	porated portion of the county by a single service provider. (If this box is inization providing the service.):			
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the			
d.)  One or more cities will provide this service of service in unincorporated areas. (If this box is check service.):	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the			
e.) Other (If this box is checked, attach a legib identify the government, authority, or other organization)	le map delineating the service area of each service provider, and ation that will provide service within each service area.):			
2. In developing this strategy, were overlapping servi identified?	ce areas, unnecessary competition and/or duplication of this service			
☐ Yes (if "Yes," you must attach additional docum	entation as described, below)			
⊠No				
If these conditions will continue under this strategy, a overlapping but higher levels of service (See O.C.G.A overlapping service areas or competition cannot be expressed to the continue under this strategy, and overlapping service areas or competition cannot be expressed to the continue under this strategy, and overlapping service areas or competition cannot be expressed to the continue under this strategy, and overlapping but higher levels of service (See O.C.G.A).	A. 36-70-24(1)), overriding benefits of the duplication, or reasons that eliminated).			
If these conditions will be eliminated under the strate will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.			
	Page 1 of 2			

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.).

Federal Funds, State Funds, County Ger	acrel Fund Llear Food
	ierai runu, Osei rees
ge the previous arrangements for providing and/or fun	iding this service within the county?
very agreements or intergovernmental contracts that	will be used to implement the strategy for
Contracting Parties	Effective and Ending Dates
City of Dahlonega/Lumpkin County	2/2017-2/2027
	very agreements or intergovernmental contracts that very agreements of intergovernmental contracts that very agreement of intergovernmental contracts agreement of interpolations

What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, local

None		
None		

7. Person completing form: Dana B. Miles

Date completed: 2/10/17 Phone number: 770-781-4100

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

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

acts of the General Assembly, rate or fee changes, etc.), and when will they take effect?

STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742 BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133











# FORM 2: Summary of Service Delivery Arrangements

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

should be reported to the Department of Community Affa	
COUNTY: LUMPKIN	Service: RECREATION
Check <u>one</u> box that best describes the agree	eed upon delivery arrangement for this service:
	(i.e., including all cities and unincorporated areas) by a single service provider. nent, authority or organization providing the service.):Lumpkin County
b.) Service will be provided only in the checked, identify the government, authority	unincorporated portion of the county by a single service provider. (If this box is or organization providing the service.):
c.)  One or more cities will provide this s provided in unincorporated areas. (If this boservice:	service only within their incorporated boundaries, and the service will not be by is checked, identify the government(s), authority or organization providing the
	service only within their incorporated boundaries, and the county will provide the c is checked, identify the government(s), authority or organization providing the
	a legible map delineating the service area of each service provider, and organization that will provide service within each service area.):
In developing this strategy, were overlapping identified?	ng service areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional	I documentation as described, below)
⊠No	
If these conditions will continue under this str overlapping but higher levels of service (See overlapping service areas or competition can	ategy, <u>attach an explanation for continuing the arrangement</u> (i.e., O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that not be eliminated).
	e strategy, attach an implementation schedule listing each step or action that ble party and the agreed upon deadline for completing it.

Page 1 of 2

	Alba alles		Wether
Local Government or Authority		Funding	The state of the s
Lumpkin County		ounty General Fund, User Fees, SPLOS	51
4. How will the strategy change	e the previous	s arrangements for providing and/or fund	ding this service within the county?
4. How will the strategy change		s arrangements for providing and/or fund	ang the service within the county:
		vere combined. They have been divided le parks services, only the County provi	
List any formal service delive this service:	ery agreemer	nts or intergovernmental contracts that v	vill be used to implement the strategy for
Agreement Name	200	Contracting Parties	Effective and Ending Dates
2017 SDSA	City of Da	ahlonega/Lumpkin County	2/2017-2/2027
			AND THE STATE OF T
		sed to implement the strategy for this se changes, etc.), and when will they take	
acts of the General Assembly			
acts of the General Assembly  None	y, rate or fee		
None  7. Person completing form: Dan Phone number: 770-781-410  8. Is this the person who should	ina B. Miles Date	changes, etc.), and when will they take	







# FORM 2: Summary of Service Delivery Arrangements

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Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.				
COUNTY: LUMPKIN	Service: RECYCLING COLLECTION & PROCESSING			
Check <u>one</u> box that best describes the agreed upon	on delivery arrangement for this service:			
a.) Service will be provided countywide (i.e., income (if this box is checked, identify the government, aut	cluding all cities and unincorporated areas) by a single service provider. thority or organization providing the service.):			
b.) Service will be provided only in the unincorporate checked, identify the government, authority or organized	porated portion of the county by a single service provider. (If this box is anization providing the service.):			
c.)  One or more cities will provide this service of provided in unincorporated areas. (If this box is cheservice:	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the			
	only within their incorporated boundaries, and the county will provide the sked, identify the government(s), authority or organization providing the			
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):			
2. In developing this strategy, were overlapping servi identified?	ce areas, unnecessary competition and/or duplication of this service			
☐ Yes (if "Yes," you must attach additional docum	entation as described, below)			
⊠No				
	Attach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that eliminated).			
If these conditions will be eliminated under the strate will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.			
	Page 1 of 2			

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3.	List each g	government	or auth	nority that will	help to	pay for t	his servi	ice and in	dicate how	the ser	vice will be fur	nded (e.g.,
	enterprise f	funds, user	fees, g	eneral funds,	special	service	district re	evenues,	hotel/mote	l taxes,	franchise taxe	s, impact
	fees, bonde	ed indebted	ness, e	etc.).								

Local Government or Author		g Method
Lumpkin County	County General Fund	
City of Dahlonega	Enterprise Fund	
How will the strategy change the	e previous arrangements for providing and/or fur	nding this service within the county?
No previous arrangements		
this service:	agreements or intergovernmental contracts that	
this service:  Agreement Name	agreements or intergovernmental contracts that  Contracting Parties  City of Dahlonega/Lumpkin County	will be used to implement the strategy f  Effective and Ending Date 2/2017-2/2027
this service:  Agreement Name	Contracting Parties	Effective and Ending Date
this service:  Agreement Name	Contracting Parties	Effective and Ending Date
this service:  Agreement Name  2017 SDSA  What other mechanisms (if any)	Contracting Parties	Effective and Ending Date 2/2017-2/2027  service (e.g., ordinances, resolutions, loc
Agreement Name 2017 SDSA  What other mechanisms (if any) acts of the General Assembly, ra	Contracting Parties  City of Dahlonega/Lumpkin County  will be used to implement the strategy for this s	Effective and Ending Date 2/2017-2/2027  service (e.g., ordinances, resolutions, loc
this service:  Agreement Name  2017 SDSA  What other mechanisms (if any)	Contracting Parties  City of Dahlonega/Lumpkin County  will be used to implement the strategy for this s	Effective and Ending Date 2/2017-2/2027

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

If not, provide designated contact person(s) and phone number(s) below: STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742 BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133











# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

Answer each question below, attaching additional pages as neces should be reported to the Department of Community Affairs.	sary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: LUMPKIN	Service: ROADS & BRIDGES
Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:
The shoot of the same agreed up a	and the state of t
<ul> <li>a.)    Service will be provided countywide (i.e., inc (If this box is checked, identify the government, aut</li> </ul>	cluding all cities and unincorporated areas) by a single service provider. thority or organization providing the service.):
b.)  Service will be provided only in the unincorp checked, identify the government, authority or organized services.	porated portion of the county by a single service provider. (If this box is anization providing the service.):
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the
	only within their incorporated boundaries, and the county will provide the sked, identify the government(s), authority or organization providing the
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docum	entation as described, below)
⊠No	
	A. 36-70-24(1)), overriding benefits of the duplication, or reasons that eliminated).
If these conditions will be eliminated under the strate, will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Page 1 of 2





3.	List each government or au	thority that will	help to pa	ay for this se	rvice and in	dicate how t	he service	will be funde	d (e.g.,
	enterprise funds, user fees,	general funds,	special se	ervice distric	t revenues,	hotel/motel	taxes, frar	nchise taxes, i	mpact
	fees, bonded indebtedness,	etc.).							

Local Government or Authority		
umpkin County	County General Fund, State Funds, Fed	
ity of Dahlonega	City General Fund, State Funds, Federa	I Funds
How will the strategy change the pr	revious arrangements for providing and/or fur	nding this service within the county?
No Change		
List any formal service delivery agr this service:	eements or intergovernmental contracts that	will be used to implement the strategy
Agreement Name	Contracting Parties	Effective and Ending Da
2017 SDSA Cit	y of Dahlonega/Lumpkin County	2/2017-2/2027
	I be used to implement the strategy for this s or fee changes, etc.), and when will they take	
None		
Person completing form: Dana B. M. Phone number: 770-781-4100	Niles Date completed: 2/10/17	
Is this the person who should be co	entacted by state agencies when evaluating w	whether proposed local government

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projects are consistent with the service delivery strategy? ☐Yes ☒No

If not, provide designated contact person(s) and phone number(s) below: STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133







# FORM 2: Summary of Service Delivery Arrangements

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COUNTY: LUMPKIN	Service: SENIOR CITIZENS CENTER		
1. Check one box that best describes the agreed upo  a) Service will be provided countywide (i.e. inc.).	on delivery arrangement for this service:		
	hority or organization providing the service.):Lumpkin County		
b.) Service will be provided only in the unincorp checked, identify the government, authority or orga	orated portion of the county by a single service provider. (If this box is nization providing the service.):		
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the		
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the		
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):		
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service		
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)		
⊠No			
If these conditions will continue under this strategy, at overlapping but higher levels of service (See O.C.G.A overlapping service areas or competition cannot be e	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).		
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.		
	Page 1 of 2		

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Local Government or Au	thority Funding	g Method		
Lumpkin County	County General Fund, Federal Funds, S	County General Fund, Federal Funds, State Funds, User Fees, SPLOST		
How will the strategy change	e the previous arrangements for providing and/or fur	nding this service within the county?		
No Change				
	ery agreements or intergovernmental contracts that	will be used to implement the strategy fo		
this service:				
Agreement Name	Contracting Parties	Effective and Ending Dates		
2017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027		
	any) will be used to implement the strategy for this s			
	any) will be used to implement the strategy for this s y, rate or fee changes, etc.), and when will they take			
acts of the General Assembly				
acts of the General Assembly				
acts of the General Assembly	r, rate or fee changes, etc.), and when will they take			
None  Person completing form: Dar	r, rate or fee changes, etc.), and when will they take			
None  Person completing form: Dar Phone number: 770-781-410	na B. Miles  Date completed: 2/10/17	e effect?		
None  Person completing form: Dar Phone number: 770-781-410	r, rate or fee changes, etc.), and when will they take	e effect?		
None  Person completing form: Dar Phone number: 770-781-4100 projects are consistent with the	na B. Miles  Date completed: 2/10/17  be contacted by state agencies when evaluating was a state of the contacted by the contacted by the contacted by state agencies was a state of the contacted by the co	e effect?		

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# FORM 2: Summary of Service Delivery Arrangements

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COUNTY: LUMPKIN	Service: SEWAGE COLLECTION & TREATMENT
1. Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:
a.)  Service will be provided countywide (i.e., inc (If this box is checked, identify the government, aut	cluding all cities and unincorporated areas) by a single service provider. chority or organization providing the service.):
b.) Service will be provided only in the unincorp checked, identify the government, authority or orga	porated portion of the county by a single service provider. (If this box is nization providing the service.):
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	le map delineating the service area of each service provider, and ation that will provide service within each service area.): City of Authority
<ol><li>In developing this strategy, were overlapping service identified?</li></ol>	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).

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 Dahlonega	Enterprise Fund, City General Fund, User Fees, SPLOST
Lumpkin County Water and Sewer	Enterprise Fund, User Fees
Authority	
Lumpkin County	SPLOST

4. How will the strateg	y change the previous arrang	gements for providing	and/or funding this	s service within the county?
-------------------------	------------------------------	-----------------------	---------------------	------------------------------

Prior agreement(s) to construct sewer infrastructure have been completed.

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
2017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027
	** *** *** *** *** *** *** *** *** ***	
		11 0

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?

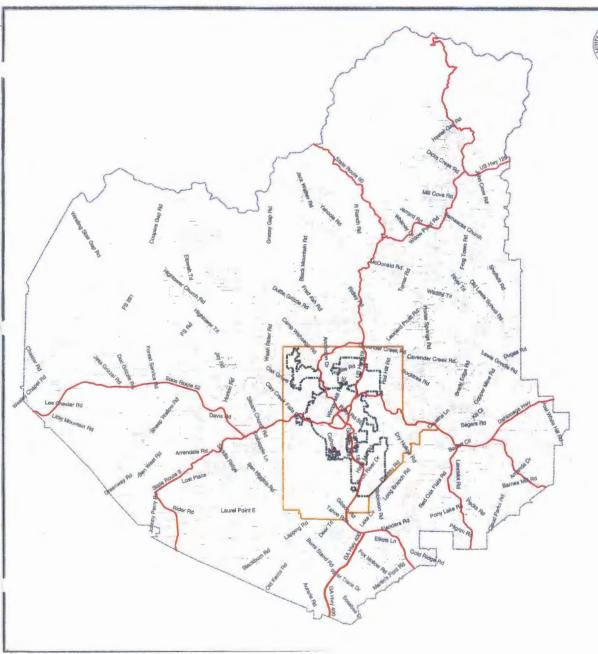
The City of Dahlonega and Lumpkin County Water and Sewer Authority plan to engage in a process of identifying future geographic service areas, existing infrastructure and how to best meet future development needs based upon sound engineering and financial principles. Upon study completion and production of an agreed upon revised service area map, the parties anticipate entering into an Intergovernmental Agreement related to the provision of future services to avoid any duplication, overlap or unnecessary competition.

7. Person completing form: Dana B. Miles Date completed: 2 10 17 Phone number: 770-781-4100

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

If not, provide designated contact person(s) and phone number(s) below: STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133







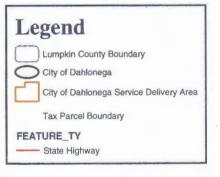
#### LUMPKIN COUNTY/CITY OF DAHLONEGA SERVICE DELIVERY AREA

This is to certify that this Service Delivery Area map was adopted by Lumpkin County and the City of Dahlonega on August 2, 2004.

Gary McCullough, Mayor City of Dahlonega

Stephen W. Gooch, Sole Commissioner Lumpkin County

Water Distribution, Water Supply & Sewage Collection & Treatment





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1 inch equals 2.2 miles

8.550 3.135 0 8.250 12,500 18,750 75.00



# Georgia Department of Affairs



#### SERVICE DELIVERY STRATEGY

# FORM 2: Summary of Service Delivery Arrangements

Instructions:

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should be reported to the Department of Community Affairs.					
COUNTY: LUMPKIN	Service: SOIL EROSION PERMITTING/ENFORCEMENT				
Check <u>one</u> box that best describes the agreed upor	n delivery arrangement for this service:				
a.) 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.):					
b.)  Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):					
	nly within their incorporated boundaries, and the service will not be cked, identify the government(s), authority or organization providing the				
	nly within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the				
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):				
2. In developing this strategy, were overlapping servic identified?	ce areas, unnecessary competition and/or duplication of this service				
Yes (if "Yes," you must attach additional docume	entation as described, below)				
⊠No					
f these conditions will continue under this strategy, <u>attach an explanation for continuing the arrangement</u> (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).					
f 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.					
	Page 1 of 2				

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<ol><li>List each government or authority that will help to pay for this service and indicate how the service enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, fra</li></ol>	
	monise taxes, impact
fees, bonded indebtedness, etc.).	
	STATES OF THE STATE OF THE STAT

Local Government of Lumpkin County		User Fees, Special Tax District Fund			
The state of the s	City General Fund, User Fees	The second secon			
City of Dahlonega	City General Fund, User Fees				
. How will the strategy ch	nange the previous arrangements for providing and/or f	unding this service within the county?			
No Change					
this service:	delivery agreements or intergovernmental contracts tha				
this service:  **Agreement Name**	Contracting Parties	Effective and Ending Dates			
this service:  Agreement Name					
this service:  Agreement Name	Contracting Parties	Effective and Ending Dates			
this service:  Agreement Name	Contracting Parties	Effective and Ending Dates			
this service:  **Agreement Name**	Contracting Parties	Effective and Ending Dates			
	Contracting Parties	Effective and Ending Dates			
this service:  Agreement Name 2017 SDSA  . What other mechanism	Contracting Parties	Effective and Ending Dates 2/2017-2/2027  service (e.g., ordinances, resolutions, local			

7. Person completing form: Dana B. Miles Phone number: 770-781-4100 Date completed: 2/10/17

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

If not, provide designated contact person(s) and phone number(s) below: STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133







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should be reported to the Department of Community Affairs.		
COUNTY: LUMPKIN	Service: SOLID WASTE COLLECTION	
Check <u>one</u> box that best describes the agreed upon	on delivery arrangement for this service:	
a.) Service will be provided countywide (i.e., ind (If this box is checked, identify the government, aut	cluding all cities and unincorporated areas) by a single service provider. thority or organization providing the service.):	
b.)   Service will be provided only in the unincorp checked, identify the government, authority or organized or services.	porated portion of the county by a single service provider. (If this box is anization providing the service.):	
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the	
	only within their incorporated boundaries, and the county will provide the eked, identify the government(s), authority or organization providing the	
	ele map delineating the service area of each service provider, and ation that will provide service within each service area.):	
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service	
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)	
⊠No		
If these conditions will continue under this strategy, <u>a</u> overlapping but higher levels of service (See O.C.G.A overlapping service areas or competition cannot be e	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that eliminated).	
If these conditions will be eliminated under the strate will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.	
	Page 1 of 2	

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					CUI	ш	

List each government or a enterprise funds, user fees fees, bonded indebtedness	uthority that will help to pay for this service and indicate, general funds, special service district revenues, hotel/s, etc.).	how the service will be funded (e.g., motel taxes, franchise taxes, impact
Local Government or A City of Dahlonega	Enterprise Fund, City General Fund, User	
A How will the strategy chan	ge the previous arrangements for providing and/or fund	ling this service within the county?
No Change	ge the previous arrangements for providing and/or fund	ing this service within the county:
this service:	ivery agreements or intergovernmental contracts that w	
Agreement Name	Contracting Parties	Effective and Ending Dates
2017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027

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?

<b>A</b> I		
N	n	0

7. Person completing form: Dana B. Miles

Phone number: 770-781-4100 Date completed: 2/10/17

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

If not, provide designated contact person(s) and phone number(s) below: STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133









### FORM 2: Summary of Service Delivery Arrangements

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C	COUNTY: LUMPKIN	Service: SOLID WASTE DISPOSAL						
1		cluding all cities and unincorporated areas) by a single service provider.						
	(If this box is checked, identify the government, aut b.)  Service will be provided only in the unincorp checked, identify the government, authority or organ	porated portion of the county by a single service provider. (If this box is						
		only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the						
		only within their incorporated boundaries, and the county will provide the cked, identify the government(s), authority or organization providing the						
		ple map delineating the service area of each service provider, and ration that will provide service within each service area.):						
2	. In developing this strategy, were overlapping servi identified?	ice areas, unnecessary competition and/or duplication of this service						
	☐ Yes (if "Yes," you must attach additional docum	entation as described, below)						
	⊠No							
0	f these conditions will continue under this strategy, <u>a</u> overlapping but higher levels of service (See O.C.G./ overlapping service areas or competition cannot be e	Attach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that eliminated).						

Page 1 of 2

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 autl	hority that will h	help to pay for	this service and i	ndicate how the se	rvice will be funded (	e.g.,
	enterprise funds, user fees, g	general funds,	special servic	e district revenues	, hotel/motel taxes,	franchise taxes, imp	pact
	fees, bonded indebtedness, e	etc.).	-				

Local Government or Authority	Funding Method
Lumpkin County	County General Fund, User Fees, Enterprise Fund
City of Dahlonega	City General Fund, Enterprise Fund, User Fees
North Georgia Resource	General Fund
Management Authority	

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

Neither government has a solid waste disposal facility. The County owns a transfer station operated by a private provider. Both the City and the County transport solid waste to a privately held sanitary landfill located in another county by contract with private providers. The City pays for use of the transfer station on a user fee basis. North Georgia Resource Management Authority was formerly known as North Georgia Solid Waste Management Authority. It is a joint authority of Lumpkin, Towns, Union and Banks Counties focused primarily on recycling.

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

Contracting Parties	Effective and Ending Dates
City of Dahlonega/Lumpkin County	2/2017-2/2027
	55 - 55 - 55 - 55 - 55 - 55 - 55 - 55

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?

The City and County dispose of waste via a private provider transporting to a sanitary landfill located in another county.

7. Person completing form: Dana B. Miles

Phone number: 770-781-4100 Date completed: 2 10 17

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

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

STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133







# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

Make copies of this form and complete one for each service listed on FORM 1, Section IV. Use <u>EXACTLY</u> the same service names listed on <u>FORM 1</u> . Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.				
COUNTY: LUMPKIN	Service: STREET LIGHTS			
Check <u>one</u> box that best describes the agreed upo	on delivery arrangement for this service:			
a.) Service will be provided countywide (i.e., inc (If this box is checked, identify the government, aut	cluding all cities and unincorporated areas) by a single service provider. chority or organization providing the service.):			
b.)  Service will be provided only in the unincorp checked, identify the government, authority or organized services.	porated portion of the county by a single service provider. (If this box is nization providing the service.):			
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the			
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the			
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):			
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service			
Yes (if "Yes," you must attach additional docume	entation as described, below)			
⊠No				
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).			
If these conditions will be eliminated under the strated will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.			
	Page 1 of 2			





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	_	AL B. 146				

3. List each government or au	thority tha	t will help to pay for this service and indic	ate how the service will be funded (e.g.,
enterprise funds, user fees, fees, bonded indebtedness,		inds, special service district revenues, ho	tel/motel taxes, franchise taxes, impact
Local Government or Au	ithority	Fundir	ng Method
Lumpkin County	mental canada a respective	County General Fund	
City of Dahlonega		City General Fund	
4. How will the strategy chang	e the prev	ious arrangements for providing and/or fu	unding this service within the county?
No Change			
List any formal service delive this service:      Agreement Name     2017 SDSA		ments or intergovernmental contracts tha  Contracting Parties of Dahlonega/Lumpkin County	t will be used to implement the strategy for  Effective and Ending Dates 2/2017-2/2027
		e used to implement the strategy for this fee changes, etc.), and when will they tak	service (e.g., ordinances, resolutions, local se effect?
None			
7. Person completing form: Da Phone number: 770-781-410	i <b>na B. Mil</b> 0 <b>0</b> D	es ate completed: 2/10/17	
		acted by state agencies when evaluating e delivery strategy?	whether proposed local government
If not, provide designated co		on(s) and phone number(s) below: MANAGER 706-864-3742	

W)



BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133







# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

	ported to the Department of Community Affairs.	issary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY:	LUMPKIN COUNTY	Service: TAX APPRAISAL/ASSESSMENT
1 Chack o	one box that best describes the agreed up	on delivery arrangement for this service:
I. OHECK S	ne box that best describes the agreed up	on delivery arrangement for this service.
		ncluding all cities and unincorporated areas) by a single service provider. uthority or organization providing the service.):Lumpkin County
	ervice will be provided only in the unincor, identify the government, authority or org	rporated portion of the county by a single service provider. (If this box is anization providing the service.):
		only within their incorporated boundaries, and the service will not be necked, identify the government(s), authority or organization providing the
	n unincorporated areas. (If this box is che	only within their incorporated boundaries, and the county will provide the cked, identify the government(s), authority or organization providing the
		ble map delineating the service area of each service provider, and zation that will provide service within each service area.):
2. In devel identified		vice areas, unnecessary competition and/or duplication of this service
☐Yes (	if "Yes," you must attach additional docun	nentation as described, below)
⊠No		
overlappin	nditions will continue under this strategy, g g but higher levels of service (See O.C.G. g service areas or competition cannot be	attach an explanation for continuing the arrangement (i.e., .A. 36-70-24(1)), overriding benefits of the duplication, or reasons that eliminated).
		egy, attach an implementation schedule listing each step or action that

Page 1 of 2

SDS FORM 2, continu	ued
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	rity that will help to pay for this service and indicat neral funds, special service district revenues, hotel c.).	
Local Government or Author	prity Funding	Method
Lumpkin County	County General Fund	metriou
Editipkin County	Codiffy General Fund	
4. How will the strategy change to	he previous arrangements for providing and/or fun-	ding this service within the county?
No Change		
List any formal service delivery this service:	agreements or intergovernmental contracts that v	will be used to implement the strategy for
Agreement Name	Contracting Parties	Effective and Ending Dates
2017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027
What other mechanisms (if any acts of the General Assembly,	y) will be used to implement the strategy for this serate or fee changes, etc.), and when will they take	ervice (e.g., ordinances, resolutions, local effect?
None		
7. Person completing form: Dana Phone number: 770-781-4100	B. Miles Date completed: 2 10 17	
	be contacted by state agencies when evaluating w service delivery strategy?	hether proposed local government
STAN KELLEY - LUMPKIN CO	act person(s) and phone number(s) below: DUNTY MANAGER 706-864-3742 A CITY MANAGER 706-864-6133	







# FORM 2: Summary of Service Delivery Arrangements

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

COUNTY: LUMPKIN	Service: TAX COLLECTIONS
Check <u>one</u> box that best describes the agreed upon	n delivery arrangement for this service:
	cluding all cities and unincorporated areas) by a single service provider. hority or organization providing the service.):Lumpkin County
b.)  Service will be provided only in the unincorp checked, identify the government, authority or organ	orated portion of the county by a single service provider. (If this box is nization providing the service.):
	nly within their incorporated boundaries, and the service will not be cked, identify the government(s), authority or organization providing the
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
e.)  Other (If this box is checked, attach a legible identify the government, authority, or other organization)	le map delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).

Page 1 of 2

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.

Local Government or Auth	ority Funding Metho	d
Lumpkin County	County General Fund	
City of Dahlonega	City General Fund	
3 - 00 - 01 - 02 - 02 - 02 - 02 - 02 - 02		
. How will the strategy change t	he previous arrangements for providing and/or funding thi	s service within the county?
No change		
List any formal service delivery	y agreements or intergovernmental contracts that will be u	used to implement the strategy f
THE SELVICE.		
Agreement Name	Contracting Parties	Effective and Ending Date
Agreement Name	Contracting Parties City of Dahlonega/Lumpkin County	Effective and Ending Date 2/2017-2/2027
Agreement Name		
Agreement Name	City of Dahlonega/Lumpkin County	2/2017-2/2027
Agreement Name 2017 SDSA Agreement for Ad Valorem	City of Dahlonega/Lumpkin County	2/2017-2/2027
Agreement Name 2017 SDSA Agreement for Ad Valorem	City of Dahlonega/Lumpkin County	
Agreement Name 2017 SDSA Agreement for Ad Valorem Tax Billing and Collection  . What other mechanisms (if an	City of Dahlonega/Lumpkin County	2/2017-2/2027 2010 until terminated  e.g., ordinances, resolutions, loc
Agreement Name 2017 SDSA Agreement for Ad Valorem Tax Billing and Collection  . What other mechanisms (if an	City of Dahlonega/Lumpkin County  City of Dahlonega/Lumpkin County/Tax Commissioner  y) will be used to implement the strategy for this service (a	2/2017-2/2027 2010 until terminated  e.g., ordinances, resolutions, loc
Agreement Name 2017 SDSA Agreement for Ad Valorem Tax Billing and Collection  What other mechanisms (if any	City of Dahlonega/Lumpkin County  City of Dahlonega/Lumpkin County/Tax Commissioner  y) will be used to implement the strategy for this service (a	2/2017-2/2027 2010 until terminated  e.g., ordinances, resolutions, locations
Agreement Name 2017 SDSA Agreement for Ad Valorem Tax Billing and Collection  What other mechanisms (if any acts of the General Assembly,	City of Dahlonega/Lumpkin County  City of Dahlonega/Lumpkin County/Tax Commissioner  y) will be used to implement the strategy for this service (arate or fee changes, etc.), and when will they take effect?	2/2017-2/2027 2010 until terminated  e.g., ordinances, resolutions, lo

#### AGREEMENT FOR AD VALOREM TAX BILLING AND COLLECTION

The CITY OF DAHLONEGA, a municipal corporation chartered by the State of Georgia (hereinafter "City") and LUMPKIN COUNTY, a political subdivision of the State of Georgia (hereinafter "County"), in recognition of the agreement as set out in the current Service Delivery Agreement between the parties; and,

In recognition of the change by popular election of the Lumpkin County Tax Commissioner, do here by republish the existing agreement between the parties as follows:

City shall pay County the following rates based on collections made against the annual City digest levy:

```
6% up to $6,000,

5% up to $14,000,

4% up to $24,000,

3% up to $36,000,

2.5% up to $52,000,

2% on all amounts over $52,000.
```

The payments will be deducted from each bi-weekly disbursement made to the City as collections are received by the Tax Commissioner throughout the year, and shall be for reimbursement of the cost to County of providing this service to City.

County shall continue to collect the City's taxes in such manner as the Tax Commissioner is permitted by law to collect taxes, as well as any and all remedies permitted for the collection of municipal taxes, including but not limited to, issuing executions, levying upon properties, conducting tax sales, and pursuing collection through the bankruptcy courts. For the purposes of this Agreement, the Tax Commissioner shall be appointed as the duly authorized agent of City to conduct tax sales for taxes due City.

City shall provide to County the tax rate within City on or before July 1 of each year; this information shall be delivered directly to the Tax Commissioner,

This Agreement shall be governed by and construed and enforced in accordance with the laws of the State of Georgia and as a part of the Service Delivery Agreement between the City and the County.

This Agreement shall be deemed to have been made and performed in Lumpkin County, Georgia. For the purposes of venue, all suits or causes of actions arising out of this Agreement shall be brought in the courts of Lumpkin County, Georgia.

IN WITNESS WHEREOF, the parties hereto have caused the Agreement to be executed in three counterparts, each to be considered as an original by their authorized representative, the day and date hereinabove written.

City of Dahlonega

John Raber, Chairman

Lumpkin County Board of Commissioners

On Behalf of the City of Dahlonega:

Attest: (Seal)

Janet Jarrard
Clerk, City of Dahlonega.

On Behalf of Lumpkin County:

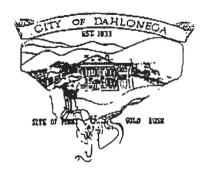
Attest: (Seal)

Ruth A. Bohac Clerk, Lumpkin County

Concurrence:

Rachael Pruitt, Tax Commissioner

1000 RILEY ROAD PHONE (706) 864-6133 FAX (706) 864-4837 DAHLONEGA, GEORGIA 30533



LUMPKIN COUNTY TAX COMMISSIONER JEAN GRIZZLE HAS RECOMMENDED THAT CITY TAX BILLING BE CONSOLIDATED WITH LUMPKIN COUNTY TAX BILLS. EACH YEAR JEAN HAS EXPERIENCED COMPUTER PROBLEMS WHILE RUNNING SEPARATE CITY TAX BILLS. SHE STATED THAT SHE WOULD BE WILLING TO BE RESPONSIBLE FOR BILLING AND COLLECTION OF CITY TAXES FOR THE FOLLOWING COMPENSATION TO BE PAID TO LUMPKIN COUNTY.

APPROXIMATE COST OF THIS SERVICE BASED ON \$200,000 CITY DIGEST:

6% up co \$6,000	\$360.00
5% up to \$14,000	\$400.00
4% up to \$24,000	\$400.00
3% up to \$36,000	\$360.00
2.5% up to \$52,000	\$400.00
2% over \$52,000	\$2,960.00

TOTAL TO BE PAID TO LUMPKIN COUNTY \$4,880.00

\*Jean stated that if there are any questions concerning this proposal she would be happy to explain this to you personally.

#### APPROXIMATE COST IF CITY DOES BILLING:

COMPUTER PROGRAMING	\$3,000
POSTAGE	500
FORMS & ENVELOPES	1,500
TOTAL.	\$5,000



# Georgia Department of Community Affairs



### SERVICE DELIVERY STRATEGY

# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

Make copies of this form and complete one for each service li Answer each question below, attaching additional pages as neces should be reported to the Department of Community Affairs.	sted on FORM 1, Section IV. Use <u>EXACTLY the same service names listed on FORM 1</u> sary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: LUMPKIN	Service: VOTER REGISTRATION & ELECTIONS
1. Check one box that best describes the agreed upo	n delivery arrangement for this service:
a.) Service will be provided countywide (i.e., inc (If this box is checked, identify the government, aut	cluding all cities and unincorporated areas) by a single service provider. hority or organization providing the service.):Lumpkin County
b.) Service will be provided only in the unincorp checked, identify the government, authority or orga	orated portion of the county by a single service provider. (If this box is nization providing the service.):
	only within their incorporated boundaries, and the service will not be ecked, identify the government(s), authority or organization providing the
	only within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	le map delineating the service area of each service provider, and ation that will provide service within each service area.):
In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
If these conditions will continue under this strategy, <u>a</u> overlapping but higher levels of service (See O.C.G.A overlapping service areas or competition cannot be e	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
If these conditions will be eliminated under the strates will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Page 1 of 2

000



# SDS FORM 2, continued

List each government or author enterprise funds, user fees, ger fees, bonded indebtedness, etc.	neral funds, special service of		
Local Government or Author	ority.	Funding Method	
Lumpkin County	County General Fu		15 COMMENSATION OF THE SECOND STREET AND SECOND SEC
City of Dahlonega	City General Fund		
			***************************************
4. How will the strategy change the	ne previous arrangements fo	r providing and/or funding this s	service within the county?
In the event of a City election the County employees and/or faciliti including the hourly wage rates	ies, the City agrees to reimbi	urse the County the expenses of	of the city-only election
List any formal service delivery this service:			•
Agreement Name	Contract		Effective and Ending Dates
2017 SDSA	City of Dahlonega/Lumpkir	County	2/2017-2/2027
What other mechanisms (if any acts of the General Assembly, r			g., ordinances, resolutions, local
None			
<ul> <li>7. Person completing form: Dana Phone number: 770-781-4100</li> <li>8. Is this the person who should be projects are consistent with the</li> </ul>	Date completed: 2/16 se contacted by state agencies	es when evaluating whether pro	oposed local government
If not, provide designated conta	ct person(s) and phone num	nber(s) below:	

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BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133







#### SERVICE DELIVERY STRATEGY

# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

one are repended to the preparation of community random	
COUNTY: LUMPKIN	Service: WATER DISTRIBUTION
Check <u>one</u> box that best describes the agree	ed upon delivery arrangement for this service:
	i.e., including all cities and unincorporated areas) by a single service provider ent, authority or organization providing the service.):
b.) Service will be provided only in the unchecked, identify the government, authority of	nincorporated portion of the county by a single service provider. (If this box is or organization providing the service.):
	rvice only within their incorporated boundaries, and the service will not be a service will not be a service, identify the government(s), authority or organization providing the
	ervice only within their incorporated boundaries, and the county will provide the schecked, identify the government(s), authority or organization providing the
	a legible map delineating the service area of each service provider, and rganization that will provide service within each service area.): City of ewer Authority
In developing this strategy, were overlapping identified?	g service areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional o	documentation as described, below)
⊠No	
	regy, attach an explanation for continuing the arrangement (i.e., o.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that 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.

#### **SDS FORM 2, continued**

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

Funding Method
SPLOST
Enterprise Fund, City General Fund, User Fees, Bonds
Enterprise Fund, User Fees, Grants, Bonds,
֡

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

Prior agreement(s) to construct water distribution infrastructure have been completed.

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
2017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027
	200	L. C.
ON PORT		
Carrier - Carrie		

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?

The City of Dahlonega and Lumpkin County Water and Sewer Authority plan to engage in a process of identifying future geographic service areas, existing infrastructure and how to best meet future development needs based upon sound engineering and financial principles. Upon study completion and production of an agreed upon revised service area map, the parties anticipate entering into an Intergovernmental Agreement related to the provision of future services to avoid any duplication, overlap or unnecessary competition.

7. Person completing form: Dana B. Miles

Phone number: 770-781-4100 Date completed: 2/10/17

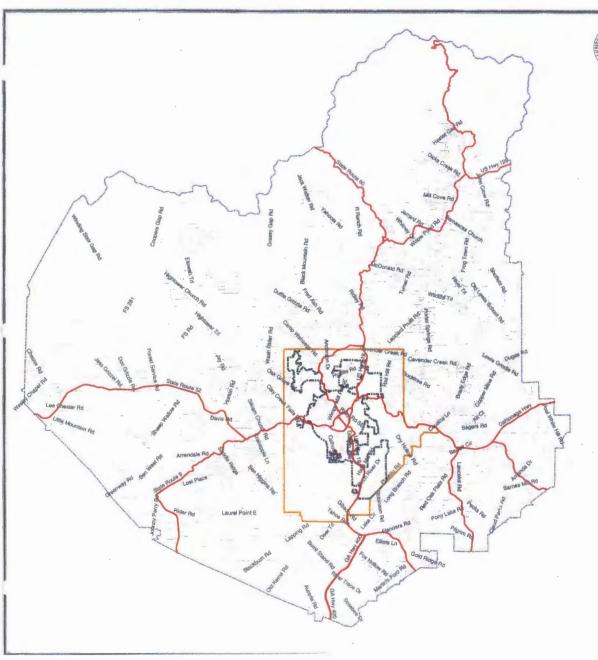
8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? 

Yes 
No

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

STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133







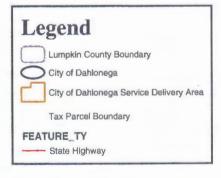
# LUMPKIN COUNTY/CITY OF DAHLONEGA SERVICE DELIVERY AREA

This is to certify that this Service Delivery Area map was adopted by Lumpkin County and the City of Dahlonega on August 2, 2004.

Gary McCullough, Mayor City of Dahlonega

Stephen W. Gooch, Sole Commissioner Lumpkin County

Water Distribution, Water Supply & Sewage Collection & Treatment





The implementation provided by the second of the second of

1 inch equals 2.2 miles







#### SERVICE DELIVERY STRATEGY

# FORM 2: Summary of Service Delivery Arrangements

#### Instructions:

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

should be reported to the Department of Community Affairs.		
COUNTY: LUMPKIN	Service: WATER SUPPLY	
Check <u>one</u> box that best describes the agreed	upon delivery arrangement for this service:	
	., including all cities and unincorporated areas) by a single service provider. , authority or organization providing the service.):	
b.)  Service will be provided only in the uninconnected, identify the government, authority or connected.	corporated portion of the county by a single service provider. (If this box is organization providing the service.):	
	ice only within their incorporated boundaries, and the service will not be checked, identify the government(s), authority or organization providing the	
	ice only within their incorporated boundaries, and the county will provide the checked, identify the government(s), authority or organization providing the	
	egible map delineating the service area of each service provider, and anization that will provide service within each service area.): Lumpkin Water and Sewer Authority	
In developing this strategy, were overlapping s identified?	service areas, unnecessary competition and/or duplication of this service	
☐ Yes (if "Yes," you must attach additional doc	cumentation as described, below)	
⊠No	1	
	gy, attach an explanation for continuing the arrangement (i.e., C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that be eliminated).	
If these conditions will be eliminated under the str	rategy, attach an implementation schedule listing each step or action that	

will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it.

#### **SDS FORM 2, continued**

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
Lumpkin County	Special Tax District Fund
City of Dahlonega	Enterprise Fund, City General Fund, User Fees, Bonds
Lumpkin County Water and Sewer	Enterprise Fund as to wells and purchased water from the City
Authority	

4.	How will the strateg	y change t	he previous	arrangements for	providing and/or	funding this	s service within the county?	?
----	----------------------	------------	-------------	------------------	------------------	--------------	------------------------------	---

Prior agreement(s) to construct water supply infrastructure have been completed.

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
2017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027
Reservoir Agreement		2006 until debt paid
Water Supply Agreement		Expired

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?

The City, County and Authority are operating under prior agreements, some of which have expired, but plan to engage in talks for an Intergeovernmental Agreement to extend/modify the prior agreements as necessary.

7. Person completing form: Dana B. Miles

Phone number: 770-781-4100 Date completed: 7

Date completed: 2 10 17

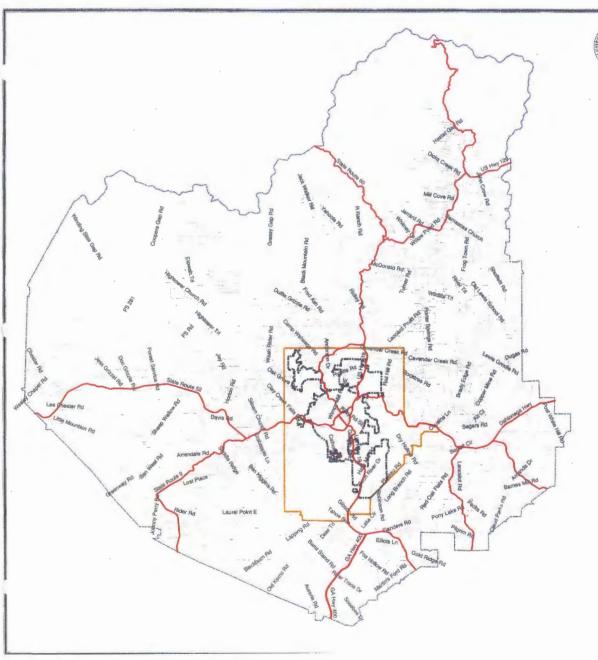
8. Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? 

Yes 
No

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

STAN KELLEY - LUMPKIN COUNTY MANAGER 706-864-3742

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133







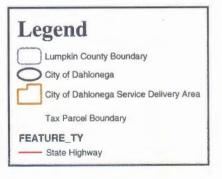
# LUMPKIN COUNTY/CITY OF DAHLONEGA SERVICE DELIVERY AREA

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Gary McCullough, Mayor City of Dahlonega

Stephen W. Gooch, Sole Commissioner Lumpkin County

Water Distribution, Water Supply & Sewage Collection & Treatment





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1 inch equals 2.2 miles

H.250 3.125 0 6250 12,500 18,750 25,000 Fo

# **Intergovernmental Contract**

This INTERGOVERNMENTAL CONTRACT, (hereinafter "Contract") made and entered into as of the 7d day of August, 2006, by and between LUMPKIN COUNTY, GEORGIA, a political subdivision of the State of Georgia, (hereinafter the "County") and the CITY OF DAHLONEGA, GEORGIA, a Georgia Municipal Corporation (hereinafter the "City"), and collectively (the "Parties").

#### WITNESSETH:

WHEREAS, Article IX, Section III, Paragraph I(a) of the Georgia Constitution authorizes, among other things, any county, municipality, or other political subdivision of the State to contract, for a period not exceeding fifty years, with any other public agency, public corporation, or public authority for joint services, for the provision of services, or for the provision or separate use of facilities or equipment, provided that such contract deals with activities, services or facilities which the contracting parties are authorized by law to undertake or to provide; and

WHEREAS, the Parties each by charter or statute are authorized to undertake water reservoir projects, and the Parties have together constructed a reservoir known and identified as "The Yahoola Creek Reservoir Project," (hereinafter "the Reservoir") located within the boundaries of the City in Lumpkin County, Georgia; and

WHEREAS, by appropriate resolutions the Parties obtained a permanent loan on August 1, 2005, from the Georgia Environmental Facilities Authority (GEFA), (the "Loan") in the amount of Fourteen Million Dollars (\$14,000,000.00) to obtain final project funding for completion of the Reservoir; and

WHEREAS, the Parties in connection with the GEFA loan desire to allocate their respective rights and responsibilities with respect to the Loan to be paid by each entity and the procedure for such payment to be made to GEFA;

**NOW, THEREFORE**, for and in consideration of the premises and undertakings as hereinafter set forth and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Parties agree as follows:

1.

This Contract shall become effective immediately and shall continue in effect until the principal and interest on the Loan shall have been fully paid or shall be deemed to have been fully paid in accordance with this Contract. In no event shall the term of this Contract extend for more than fifty (50) years except as noted herein regarding various real and personal property transfers and water allocations which shall be deemed permanent dispositions and not expiring.



The Loan as now constituted is a joint and several obligations of the Parties. However, the Parties desire and pursuant to the Loan requirements must allocate the liability on the loan so as to create a bifurcated liability structure in which there shall no longer be joint and several liability of the Parties as to the entirety of the obligation.

3.

Simultaneously the Parties have elected to allocate in kind the real property interests in the land acquired as part of the Reservoir project.

4

The Parties agree that the obligation under the Loan shall be allocated in the following manner:

City: an allocated percentage of each payment when due based upon a total principal obligation limit of \$6,663,056.80. (Composed of \$596,044.00 – raw water intake; \$616,545.00 – water plant tract; \$5,450,467.80 – 54% of the Reservoir tract.)

County General Obligation: an allocated percentage of each payment when due based upon a total general obligation debt of \$2,693,952.00. (Composed of the Zwerner property not used for the Reservoir tract and not acquired by the City as per Exhibit B.)

County Unincorporated District: an allocated percentage of each payment due based upon a total Unincorporated District obligation debt for the Reservoir tract of \$4,642,991.20 (Composed of 46% of the Reservoir tract.)

The parties will within sixty days reallocate payment already made consistent with the above and account to one another accordingly.

5.

The Parties agree that title to the real and personal property acquired shall be vested permanently in the following manner:

As to the property identified on Exhibit A, the same being the Reservoir property, this property is to be held in an undivided interest of 54% in the City and 46% in the County. This property (the Reservoir Footprint) includes the 150 foot buffer to the extent as originally acquired (portions of the 150-foot buffer were not acquired) and consists of the entirety of the property acquired for the reservoir project except the properties identified in Exhibits B and C attached hereto. Also jointly held in the same percentages shall be any and all real property interests in the Camp Glisson and any other mitigation properties which shall also be part of the Reservoir property. The City, however, shall own in its entirety in fee simple the raw water

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intake and the real property upon which it is located together with its connective lines and buffers incident to the granting and maintaining of a water withdrawal permit for the City.

The City shall be vested with exclusive title in fee simple in the land identified on Exhibit B which shall be conveyed together with the necessary connective easements and buffers sufficient to allow the granting of a water withdrawal permit to the City and to allow connection from a water plant built on this site to the raw water intake located on the Reservoir site located on Exhibit A.

The County shall be vested with the entirety of the fee simple interest in the real property identified on Exhibit C and being the Zwerner property acquired in year 2001 less and except the water plant tract identified on Exhibit B and Tracts 1B-1, 1B-2, 1B-3, 1B-4, 1B-5, 1B-6, 5A, 5B-1 and 5B-2 as identified on that certain plat of survey entitled "Yahoola Creek Reservoir" prepared by Kelley Surveying, dated March 20, 1996, as revised through its last revision date of July 19, 2000.

Conveyances to align the property interest of the parties shall be by quitclaim deed exchanged between the parties within sixty days of the date of this agreement.

The City shall own and may withdraw water from the reservoir on an annual average day basis up to 54% of the safe yield of the reservoir. The County shall own and may withdraw water from the reservoir on an annual average day basis up to 46% of the safe yield of the reservoir. Lumpkin County shall exercise its withdrawal rights exclusively by contract with the City for purchase of treated water from the City's water plant or may designate the Lumpkin County Water and Sewer Authority to be the entity with which the City contracts for purchase of treated water.

All above provisions are permanent and non-expiring.

6

The Parties shall each remit their allocated shares of the loan to GEFA when due and execute independent documents with GEFA reflecting this allocation.

7.

It is stipulated by the parties that the total of payments made to GEFA subsequent to the execution of the promissory note dated August 1, 2005, shall be audited once the full loan amount is drawn down. Each government shall then account to the other for any payment inequity between the two governments.

8

The City will continue to manage the project and draw down as necessary funds from GEFA to complete the project. Each draw down payment shall be allocated for loan repayment purposes based upon the following percentages:

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City of Dahlonega 47.59% Lumpkin County Unincorporated District 33.16% Lumpkin County General Obligation 19.25%

9.

As further consideration for the execution of this document, the City of Dahlonega has agreed to transfer the property known as the Georgia 400 well site to the Lumpkin County Water and Sewer Authority under certain conditions and restrictions identified in the conveyance set forth in Exhibit "D" attached hereto and made a part hereof.

10.

The terms of any prior offers or other communications exchanged between the parties are considered rejected unless otherwise included within this document, this document to be considered the entire agreement between the parties. This Agreement shall not be assignable or transferable.

11.

Any funds held in escrow in account 5142201625 and 5142201692 at BB&T in Dahlonega upon the conclusion of the litigation identified as <u>Herbert Zwerner</u>, <u>Grace Zwerner and Carl Zwerner vs. City of Dahlonega</u>, <u>Georgia</u>, <u>et al</u>, shall be paid to GEFA as a principal reduction on the loan in the percentages as set forth in paragraph 8 hereof.

12.

Each conveyance herein shall be adjusted at the request of either party upon the providing of an accurate survey.

IN WITNESS WHEREOF, the parties, acting by and through their daily authorized officers, have caused this Contract to be executed in multiple counterparts under seals of the day and year first written.

LUMPKIN COUNTY, GEORGIA

By: 1990 A Chairman, Board of Commissioners
Of Lumpkin County, Georgia

County Clerk of Lumpkin County, Georgia

(SEAL)

Call gr

CITY OF DAHLONEGA

By: Hary McCulloux

Attest:

(SEAL)

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#### Exhibit "A"

A 54% interest in and to the following described property is hereby vested in the City of Dahlonega and a 46% interest in and to the following described property is hereby vested in Lumpkin County:

All that tract or parcel of land lying and being in Land Lot 923, 924, 954, 955, 980, 981, 982, 1001, 1002, 1003, 1028, 1029, 1030, 1053, 1054, 1055, 1056, 1057, 1078, 1079, 1080, 1081, 1082, 1104, 1105, 1106, 1107, 1128, 1129 and 1130 of the 12th District, 1st Section of Lumpkin County, Georgia and being more particularly described on a Plat of Survey prepared by Kelley Surveying entitled "Yahoola Creek Reservoir" dated March 20, 1996 as most recently revised on July 19, 2000 and being the following tracts as per said survey:

Tracts 1 (a/k/a 1A) and 2
Tracts 1B-1, 1B-2, 1B-3, 1B-4, 1B-5, 1B-6, 5A, 5B-1, 5B-2;
Tract 11A \*
Tracts 12A and 12B
Tract 13
Tracts 14A and 14B
Tracts 15A, 15B and 15B-1
Tracts 22a and 22B
Tracts 29B-1, 29B-2 and 29B-3
Tracts 9A, 9B-1 and 9B-2
Tracts 10A and 10B
Tract 27B

Tract 11A also known as Tract 11 on that certain plat entitled "Yahoola Creek Reservoir Wetland Delineation" dated March 20, 1996 as revised on April 16, 1996, June 23, 1998 and April 14, 1999, prepared by Precision Land Services.

Also that real property interest represented by a Conservation Easement between Camp Glisson, Inc. and City of Dahlonega dated May 3, 2003, filed May 16, 2003 in Deed Book L-31, Pages 52-51, Lumpkin County, Georgia records.

LESS AND EXCEPT from this conveyance is the existing property owned by the City of Dahlonega and retained solely in the City of Dahlonega's name known as Tracts 16, 17, 18, 19, 20, 21 & 23 as described on the above referenced Plat of Survey prepared by Kelley Surveying.

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#### Exhibit "B"

All that tract or parcel of land lying and being in Land Lots 1027, 1028 and 1029 of the 12<sup>th</sup> District, 1<sup>st</sup> Section of Lumpkin County, Georgia, being 45.67 acres, more or less as more particularly described as Tract 10 on that certain plat of survey prepared by Kelley Surveying for Herbert, Carl & Grace Zwerner on October 19, 1999, as revised July 14, 2000 and July 17, 2000.

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#### Exhibit "C"

All that tract or parcel of land lying and being Land Lots 1053, 1080, 1081, 1104, 1105, 1106, 1079, 1056, 1057 and 1027 of the 12th District, 1st Section, Lumpkin County, Georgia, and being Tracts 1, 6, 7, and 8 as per survey entitled "Plat of Survey for Herbert, Carl and Grace Zwerner," dated October 19, 1999, revised July 14, 2000 and July 17, 2000, prepared by Kelley Surveying, Michael Stewart Kelley, Ga. R.L.S. No. 230, which plat is incorporated herein and made a part hereof.

LESS AND EXCEPT Tracts 1B-1, 1B-2, 1B-3, 1B-4, 1B-5, 1B-6, 5A, 5B-1 and 5B-2 as depicted on that certain plat of survey entitled "Yahoola Creek Reservoir" prepared by Kelley Surveying, dated March 20, 1996, as revised through its last revision date of July 19, 2000.

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#### Exhibit "D"

See attached quit claim deed and legal description

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### QUIT-CLAIM DEED

State of Georgia Lumpkin County	
Six, between CITY OF DAHLONEGA	s day of, in the year of our Lord Two Thousand and a Municipal Corporation of the State of Georgia, hereinafter referred to as a Lumpkin County Water and Sewer Authority, hereinafter referred to as
DOLLARS, in hand paid at and before acknowledged, has granted, bargained, s	party or parties of the first part, for and in consideration of the sum of: TEN the sealing and delivery of these presents, the receipt whereof is hereby sold, and conveyed, and by these presents grants, bargains, sells and conveys id party or parties of the second part, their heirs and assigns, all his right title ribed premises:
	CRIPTION SEE EXHIBIT A ATTACHED HERETO, OF, AND INCORPORATED HEREIN BY REFERENCE.
members, and appurtenances thereof, to	e said bargained premises, together with all and singular the rights, the same being, belonging, or in anywise appertaining, to the only proper or parties of the second part, their heirs, and assigns, forever, in fee simple.
IN WITNESS WHEREOF, the their seal, as of the day and year first ab	said party or parties of the first part have hereunto set their hand and affixed ove written.
Signed, sealed, and delivered this day of, 2006 in the presence of:	City of Dahlonega, a Municipal Corporation of the State of Georgia
UNOFFICIAL WITNESS	By: <u>Hay Malulond</u> Gaty McCullough, Mayor
· · · · · · · · · · · · · · · · · · ·	Attest: Janet Jarrard, City Clerk
NOTARY PUBLIC STATE OF GEORGIA	Janet Jarrard, City Clerk



All that tract or parcel of land lying and being situated in Land Lot 1204, 12th District, 1st Section, Lumpkin County, Georgia, being more particularly described as the 75 foot by 75 foot square well site on that plat of survey prepared for Adams Well Drilling Company, Inc. And Georgia 400 Partners, Ltd., by Frederick F. Kauffman, GRLS, No. 1774, dated January 7, 1997 a copy of which is attached hereto as Exhibit "A-1" attached hereto, said plat being incorporated and made a part of this description by reference thereto.

The subject property si conveyed subject to the following restrictions:

As an inducement to Grantee herein to accept the conveyance of property conveyed herein, Grantor does hereby establish and declare in favor of Grantee and its successors, assigns and successors in title to the property the following restrictions (hereinafter called the "negative restrictions") against certain property owned by grantor and being more fully described as per said plat. The property restricted is that portion of Grantors property which is not conveyed herein, the property within a radius of two hundred and fifty (250) feet from the wellsite the property conveyed herein as shown on said plat. The negative restrictions shall be and constitute covenants running with the land from and after the date of this indenture, and the negative restrictions shall be enforceable by specific performance and injunctive relief as well as all other remedies afforded by law.

#### The restrictions are as follows:

- 1. <u>Restrictions on land applications</u>. No irrigation of waste water, waste water by products, hazardous waste or non-hazardous waste. No application of pesticides, fertilizers or deicing salts.
- 2. <u>Restrictions on disposal</u>. No septic tanks or septic tank systems. No cesspools. The property shall not be used for a landfill of any type including but not limited to industrial, municipal, or residential landfill or illegal dumping. No waste piles or material stockpiles. No surface impoundments. No graveyards. No animal burials.
- 3. Restrictions on storage. No above ground or underground storage tanks or containing hazardous materials, radioactive materials, non hazardous waste or non-waste materials.
- 4. <u>Restrictions on livestock</u>. No animals, livestock or poultry of any kind shall be raised, bred or kept on the property.
- 5. Restrictions on transporting. No pipelines transporting hazardous or non hazardous waste. No transport or transfer of operations of hazardous waste, non hazardous waste or non waste materials.
- 6. Restrictions on mining and oil operations. No oil drilling, oil development operation, oil refining, quarrying or mining operation of any kind shall be permitted upon the property. Nor shall oil wells, tanks, tunnels, mineral excavations or shafts be permitted upon the property. No derrick or other structure designed for use in boring for oil or natural gas shall be erected, maintained or permitted upon the property. No detonation sites. No construction excavation.
- Miscellaneous restrictions. No open burning sites. No activity which has been determined by independent qualified experts to directly contribute to actual ground water contamination to the extent of endangering the health of the general community.

This conveyance is made together with a perpetual non exclusive easement for access, ingress, egress and the installation of utilities including but no limited to water lines as described on said plat above referenced, a copy of which is attached as Exhibit "A-1" attached hereto and made a part of this description by reference thereto said easement connecting the wellsite with Georgia Highway 400.

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# SERVICE DELIVERY STRATEGY

# FORM 3: Summary of Land Use Agreements

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Answer each question below, attaching additional pages as necessary. Please note that any changes to the ar service delivery strategy. If the contact person for this service (listed at the bottom of this page) changes, this s Community Affairs.	
COUNTY:LUMPKIN	
What incompatibilities or conflicts between the land use plans of local governments we developing the service delivery strategy?  None. The City and County both have Land Use Plans as part of their Comprehensive Pl	
2. Check the boxes indicating how these incompatibilities or conflicts were addressed:	NOTE:
☐ Amendments to existing comprehensive plans	If the necessary plan amendments.
Adoption of a joint comprehensive plan	regulations, ordinances, etc. have not yet been formally adopted, indicate when
Other measures (amend zoning ordinances, add environmental regulations, etc.)	each of the affected local governments will adopt them.
If "other measures" was checked, describe these measures:  Describe "Other" Measures Here	wiii adopt trem.
3. What policies, procedures and/or processes have been established by local government authorities) to ensure that new extraterritorial water and sewer service will be consistent and ordinances? The City of Dahlonega, Lumpkin County and Lumpkin County Water are in a process of identifying future geographic service areas, existing infrastructure and how needs based upon the Future Land Use Plans, sound engineering and financial principles production of an agreed upon revised service area map, the parties anticipate entering in related to the provision of future services to avoid any duplication, overlap or unnecessare the Future Land Use Plans.	with all applicable land use plans and Sewer Authority plan to engage w to best meet future development s. Upon study completion and to an Intergovernmental Agreement
4. Person completing form: Dana B. Miles	
Phone number: 770-781-4100 Date completed:	
5. Is this the person who should be contacted by state agencies when evaluating whethe projects are consistent with the service delivery strategy? ☐Yes ☒No	r proposed local government
If not, provide designated contact person(s) and phone number(s) below:	
Stan Kelley - Lumpkin County Manager 706-864-3742 Bill Schmid - Dahlonega C	City Manager 706-864-6133







#### SERVICE DELIVERY STRATEGY

# FORM 4: Certifications

#### Instructions:

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

#### **COUNTY: LUMPKIN**

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

- We have executed agreements for implementation of our service delivery strategy and the attached forms
  provide an accurate depiction of our agreed upon strategy (O.C.G.A 36-70-21);
- Our service delivery strategy promotes the delivery of local government services in the most efficient, effective, and responsive manner (O.C.G.A. 36-70-24 (1));
- Our service delivery strategy provides that water or sewer fees charged to customers located outside the geographic boundaries of a service provider are reasonable and are not arbitrarily higher than the fees charged to customers located within the geographic boundaries of the service provider (O.C.G.A. 36-70-24 (20); and
- 4. Our service delivery strategy ensures that the cost of any services the county government provides (including those jointly funded by the county and one or more municipalities) primarily for the benefit of the unincorporated area of the county are borne by the unincorporated area residents, individuals, and property owners who receive such service (O.C.G.A. 36-70-24 (3)).

PARISDICTION SE	os singers,	NAME	SIGNATURE	DATE
CITY OF DAHLONEGA	Mayor	Gary McCullough	Day M& Cullary	2-10-207
LUMPKIN COUNTY	Chairman, Board of Commissioners	Chris Dockery	US/	2/14/17

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#### 2017 SERVICE DELIVERY STRATEGY AGREEMENT BETWEEN LUMPKIN COUNTY AND CITY OF DAHLONEGA

We, the undersigned authorized representatives of the governing authority of Lumpkin County ("County") and the undersigned authorized representatives of the City of Dahlonega ("City"), hereby enter into the following Service Delivery Strategy Agreement ("SDSA") effective upon the date executed by the last of the parties to sign below. The Lumpkin County Water and Sewer Authority ("Authority") and the Sheriff of Lumpkin County ("Sheriff") are signatories to this SDSA only for the purposes that affect or are related to the Authority and the Sheriff as set forth in the Form 2 attachments hereto.

The terms of this SDSA include the attached Form 2 pages for each service provided which shall be initialed by the County, the City and as applicable the Authority and the Sheriff to indicate acceptance. The Form 1, 2, 3 and 4 attachments are incorporated herein by express reference as if fully set forth herein. The term of this SDSA shall be for a period of ten (10) years from the effective date of execution or until superseded by a subsequent SDSA signed by all applicable parties, whichever shall occur first. In accordance with state law, this SDSA shall be filed with the Georgia Department of Community Affairs on or before February 17, 2017.

This SDSA is based upon the mutual promises and benefits herein and within the attachments and other good and valuable consideration, including, but not limited to the following payments to be made over the term of the SDSA:

- 1. The City will pay to the County the sum of Fifty Thousand Dollars (\$50,000) annually on or before June 1 of each year for the capital acquisition costs of a ladder truck and for supplementary fire services provided by the County to the incorporated area of the City. The County shall first apply these funds toward acquisition of a ladder truck and thereafter to other supplemental fire services deemed necessary or needed within the City limits whether for capital costs or maintenance and operation costs. It is the intention of the parties that the ladder truck be acquired as soon as reasonably possible.
- 2. The City will pay to the County the sum of Eight Thousand Dollars (\$8,000) annually on or before June 1 of each year for supplemental law enforcement expenses within the City incurred by the County by virtue of the City's use of off duty deputies from the Sheriff's Department. This compensation shall be in addition to the direct payments by the City to off duty deputies. The City will provide liability insurance coverage for those deputies assigned to city duties. The City and the Sheriff may agree in writing to additional supplemental law enforcement services during the term of this SDSA with the consent of the County which shall not be unreasonably withheld.
- 3. The City will pay to the County from amounts collected by the City's Municipal Court the 10% court add-on fee designated by state statute for "jail construction and staffing" as an acceptable payment for housing city inmates. The City will also pay to the County the costs associated with medical services for City inmates incarcerated

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#### solely from sentences entered by the Municipal Court.

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Unless set forth differently in any of the attachments hereto, all other services currently provided County-wide by the County will continue to be provided by the County in the City limits as well at no cost to the City.

Executed this 10th day of February, 2017, by the undersigned representatives of the parties.

Lumpkin County, Georgia ("County")

Chris Dockery, Chairman

Lumpkin County Board of Commissioners

Attest:

Kathleen C. Walker

Lumpkin County Clerk

SEAL SONERS

City of Dahlonega, Georgia ("City")

Gary McCullough, 1

Attest:

Kimberly Smith

City of Dahlonega Clerk



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А	greea	10	:

Lumpkin County Water and Sewer Authority ("Authority")

Murl Jones, Chairperson

Kataleen Casalker

Agreed To:

Sheriff's Office of Lumpkin County

Stacy Jarrard, Sheriff

Witness

OM

Page 3 of 3