



**SERVICE DELIVERY STRATEGY
 FORM 1**

COUNTY: **LUMPKIN**

I. GENERAL INSTRUCTIONS:

1. 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 <i>Revising or Adding to the SDS</i>	OPTION B <i>Extending the Existing SDS</i>
<ol style="list-style-type: none"> 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.) 5. For each service or service component listed in Section IV, complete a separate, updated <i>Summary of Service Delivery Arrangements</i> form (FORM 2). 6. Complete one copy of the <i>Certifications</i> 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).] 	<ol style="list-style-type: none"> 4. In Section IV type, "NONE." 5. Complete one copy of the <i>Certifications for Extension of Existing SDS</i> 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. <div data-bbox="831 1171 1533 1402" style="background-color: black; color: white; padding: 5px; text-align: center;"> <p><i>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.</i></p> </div>

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

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

II. LOCAL GOVERNMENTS INCLUDED IN THE SERVICE DELIVERY STRATEGY:

In this section, list all local governments (including cities located partially within the county) and authorities that provide services included in the service delivery strategy.

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

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

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

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**

Airport

Ambulance

Building Inspections & Permits

Cooperative Extension Service

Coroner

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



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.

COUNTY: LUMPKIN

Service: AIRPORT

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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

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

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

CBP DM

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	User Fees, County General Fund

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 for this service:

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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

CPD *AM*



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.

COUNTY: LUMPKIN

Service: *AMBULANCE*

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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

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

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

CPP *bm*

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	User Fees, County General Fund

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 for this service:

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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133



SERVICE DELIVERY STRATEGY

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COUNTY: LUMPKIN

Service: ANIMAL CONTROL

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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

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

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

Handwritten initials: CPO and JSM

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
LUMPKIN COUNTY	User Fees, County General Fund, Fines, SPLOST
CITY OF DAHLONEGA	Fines

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

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

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

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

CDP *DM*



SERVICE DELIVERY STRATEGY

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COUNTY: LUMPKIN

Service: *BUILDING INSPECTIONS & PERMITS*

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.):

- 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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

CDP *JGM*

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
LUMPKIN COUNTY	User Fees, Special Tax District Fund
CITY OF DAHLONEGA	User Fees, City General Fund

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 for this service:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

CDP JM



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COUNTY: LUMPKIN

Service: CODE ENFORCEMENT

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.):
- 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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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

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

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

Handwritten initials: CDP and JM

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	City General Fund

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

No previous arrangement

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

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**
 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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COUNTY: LUMPKIN

Service: COOPERATIVE EXTENSION SERVICE

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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

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

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

CPD *BM*

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	County General Fund, State Funds

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 for this service:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

CDD *KM*



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COUNTY: LUMPKIN

Service: CORONER

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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

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

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

CPP

AM

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	County General Fund

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 for this service:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

CSA

JM



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.

COUNTY: LUMPKIN

Service: COURTS

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.):
- 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.): **City of Dahlonega, Lumpkin County**
- e.) Other (If this box is checked, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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

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

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

Handwritten initials: CDP and JMN

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	County General Fund, User Fees, State Funds, Fines, SPLOST
City of Dahlonega	City General Fund, User Fees, Fines

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 for this service:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

CDP km



SERVICE DELIVERY STRATEGY

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COUNTY: LUMPKIN

Service: Department of Family & Childrens Services

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

CPD *JM*

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	County General Fund, State Funds

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 for this service:

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?

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

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133





SERVICE DELIVERY STRATEGY

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COUNTY: LUMPKIN

Service: DOWNTOWN DEVELOPMENT

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.):
- 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: **City of Dahlonega through the Downtown Development Authority**)
- 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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

CDD *JM*

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
City of Dahlonega	City General Fund
Downtown Development Authority	Grants, Bonds, User Fees

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

No previous arrangement

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

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**
 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

CDP JM



SERVICE DELIVERY STRATEGY

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COUNTY:LUMPKIN

Service:Economic Development

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.): **Development Authority of Lumpkin County; Joint Development Authority of Dawson, Lumpkin and White Counties**
- 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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

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.).

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

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

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:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133



SERVICE DELIVERY STRATEGY

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COUNTY: LUMPKIN

Service: EMERGENCY 911

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, **attach a legible map delineating the service area of each service provider**, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

Handwritten initials: CD and M

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	County General Fund, User Fees, 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 for this service:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

CDP *JM*



SERVICE DELIVERY STRATEGY

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COUNTY: LUMPKIN

Service: FIRE PROTECTION

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, **attach a legible map delineating the service area of each service provider**, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	County General Fund, Federal Funds, User Fees
City of Dahlonega	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:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133



SERVICE DELIVERY STRATEGY

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COUNTY:LUMPKIN

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.): 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

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

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

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	General Fund
Hospital Authority of Lumpkin County	General Fund for Indigent Health Care

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

The service was previously named "Health Facility". The name change is to indicate an expansion in scope to include both services provided at the Health Department office and at other locations for indigent residents paid for by the Hospital Authority of Lumpkin County.

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

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133



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COUNTY: LUMPKIN

Service: INDIGENT DEFENSE

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.):

- 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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	County General Fund
City of Dahlonega	City General Fund

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

City of Dahlonega took over indigent defense in Municipal Court.

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

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133



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Instructions:

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COUNTY: LUMPKIN

Service: JAIL

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
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:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
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.

COUNTY: LUMPKIN

Service: LAW ENFORCEMENT

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	County General Fund, SPLOST
City of Dahlonega	City General Fund

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

See 2017 SDSA (Para. #2) which provides, inter alia, for payment by the City to the County of \$8,000 per year for supplemental law enforcement expenses incurred by the County in the City limits.

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

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133



SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

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COUNTY: LUMPKIN

Service: LIBRARY

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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

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

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

CDP *JAM*

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	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 for this service:

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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

CDP JM



SERVICE DELIVERY STRATEGY

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COUNTY: LUMPKIN	Service: PARKS
------------------------	-----------------------

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.):

- 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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	County General Fund, User Fees
City of Dahlonega	City General Fund, User Fees

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

In the prior SDSA, Parks and Recreation were combined. They have been divided into different services in this SDSA because while both City and County provide Parks services, only the County provides Recreation services.

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

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133



SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

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COUNTY:LUMPKIN	Service:Public Building Financing
-----------------------	--

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, **attach a legible map delineating the service area of each service provider**, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County Public Building Authority	SPLOST

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

The Lumpkin County Public Building Authority was formed to create a mechanism to fund public building construction and financing with repayment through SPLOST. Currently, all construction is complete and debt paid. The Authority remains in existence for future projects.

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

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133



SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

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COUNTY: LUMPKIN

Service: PUBLIC HOUSING

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.):
- 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: **City of Dahlonega**)
- 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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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

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

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

Handwritten initials: CDP and gm

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Housing Authority of the City of Dahlonega, Georgia	Federal Funds, User Fees

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 for this service:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

OBD *JM*



SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

Instructions:

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COUNTY: LUMPKIN

Service: PUBLIC TRANSPORTATION

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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

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

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

CDD *BM*

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	Federal Funds, State Funds, County General Fund, User Fees

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 for this service:

Agreement Name	Contracting Parties	Effective and Ending Dates
2017 SDSA	City of Dahionega/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?

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

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

CAD

SM



SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

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COUNTY: LUMPKIN	Service: RECREATION
------------------------	----------------------------

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	County General Fund, User Fees, SPLOST

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

In the prior SDSA, Parks and Recreation were combined. They have been divided into different services in this SDSA because while both City and County provide parks services, only the County provides Recreation services.

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

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133



SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

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COUNTY: LUMPKIN

Service: *RECYCLING COLLECTION & PROCESSING*

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.):
- 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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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

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

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

CPD *JM*

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	County General Fund
City of Dahlonega	Enterprise Fund

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

No previous arrangements

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

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**
 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






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.

COUNTY: LUMPKIN

Service: *ROADS & BRIDGES*

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.):

- 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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

Handwritten initials: CDD and JGM

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	County General Fund, State Funds, Federal Funds, SPLOST
City of Dahlonega	City General Fund, State Funds, Federal Funds

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 for this service:

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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133






SERVICE DELIVERY STRATEGY

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 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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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

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

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

CDD JM

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	County General Fund, Federal Funds, State Funds, User Fees, 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 for this service:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

CBO SM



SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

Instructions:

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COUNTY: LUMPKIN

Service: SEWAGE COLLECTION & TREATMENT

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.):

- 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, **attach a legible map delineating the service area of each service provider**, and identify the government, authority, or other organization that will provide service within each service area.): **City of Dahlonega, Lumpkin County Water and Sewer Authority**

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**

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

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

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
City of Dahlonega	Enterprise Fund, City General Fund, User Fees, SPLOST
Lumpkin County Water and Sewer Authority	Enterprise Fund, User Fees
Lumpkin County	SPLOST

4. How will the strategy change the previous arrangements for providing and/or funding this 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:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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



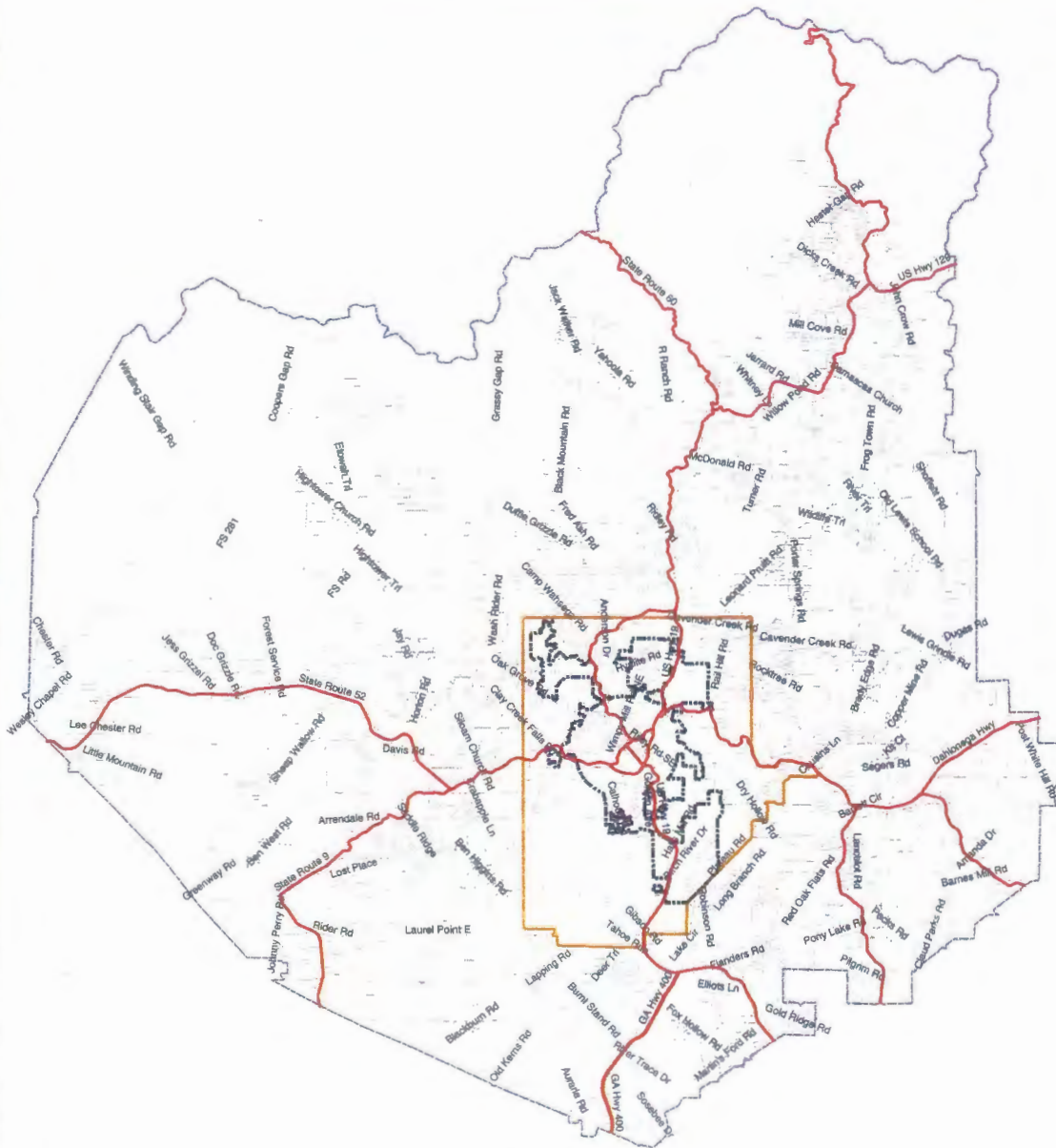
LUMPKIN COUNTY/CITY OF DAHLONEGA SERVICE DELIVERY AREA

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
Gary McCullough, Mayor
City of Dahlonega

Stephen W. Gooch
Stephen W. Gooch, Sole Commissioner
Lumpkin County

Water Distribution, Water Supply & Sewage Collection & Treatment



Legend

- Lumpkin County Boundary
- City of Dahlonega
- City of Dahlonega Service Delivery Area
- Tax Parcel Boundary
- STATE_Highway



1 inch equals 2.2 miles



THIS MAP WAS PREPARED BY THE CITY OF DAHLONEGA AND LUMPKIN COUNTY. THE CITY OF DAHLONEGA AND LUMPKIN COUNTY ARE NOT RESPONSIBLE FOR ANY ERRORS OR OMISSIONS. THE CITY OF DAHLONEGA AND LUMPKIN COUNTY ARE NOT RESPONSIBLE FOR ANY DAMAGES, INCLUDING CONSEQUENTIAL DAMAGES, ARISING FROM THE USE OF THIS MAP. THE CITY OF DAHLONEGA AND LUMPKIN COUNTY ARE NOT RESPONSIBLE FOR ANY DAMAGES, INCLUDING CONSEQUENTIAL DAMAGES, ARISING FROM THE USE OF THIS MAP.



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.

COUNTY: LUMPKIN

Service: SOIL EROSION PERMITTING/ENFORCEMENT

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.):
- 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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

CDD
AM

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	User Fees, Special Tax District Fund
City of Dahlonega	City General Fund, User Fees

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 for this service:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

CDP *bm*



SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

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COUNTY: LUMPKIN

Service: SOLID WASTE COLLECTION

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.):

- 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: **City of Dahlonega**)

- 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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

OPD *JAM*

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
City of Dahlonega	Enterprise Fund, City General Fund, User Fees

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 for this service:

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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133





SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

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COUNTY: LUMPKIN

Service: SOLID WASTE DISPOSAL

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.):

- 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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

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	County General Fund, User Fees, Enterprise Fund
City of Dahlonega	City General Fund, Enterprise Fund, User Fees
North Georgia Resource Management Authority	General Fund

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:

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?

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



SERVICE DELIVERY STRATEGY

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COUNTY: LUMPKIN

Service: STREET LIGHTS

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.):
- 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.): **City of Dahlonega, Lumpkin County**
- e.) Other (If this box is checked, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

Handwritten initials: CJD and BM

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	County General Fund
City of Dahlonega	City General Fund

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 for this service:

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?

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
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.

COUNTY: LUMPKIN COUNTY

Service: TAX APPRAISAL/ASSESSMENT

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, **attach a legible map delineating the service area of each service provider**, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

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	County General Fund

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 for this service:

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?

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

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133



SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

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COUNTY: LUMPKIN

Service: TAX COLLECTIONS

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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**

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

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

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	County General Fund
City of Dahlonega	City General Fund

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 for this service:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
2017 SDSA	City of Dahlonega/Lumpkin County	2/2017-2/2027
Agreement for Ad Valorem Tax Billing and Collection	City of Dahlonega/Lumpkin County/Tax Commissioner	2010 until terminated

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

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

BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

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.

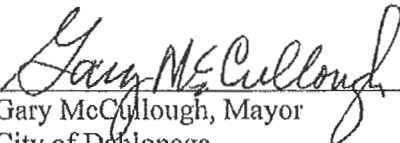
This Agreement shall be deemed to have been made and performed in Lumpkin County, Georgia. For the purposes of venue, all suits or causes of actions arising out of this Agreement shall be brought in the courts of Lumpkin County, Georgia.

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.

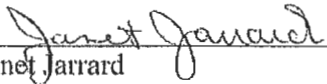
On Behalf of the City of Dahlonega:



Attest: (Seal)

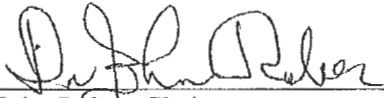


Gary McCullough, Mayor
City of Dahlonega



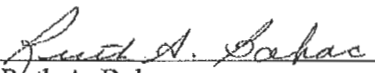
Janet Jarrard
Clerk, City of Dahlonega.

On Behalf of Lumpkin County:



John Raber, Chairman
Lumpkin County Board of Commissioners

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 to \$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



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.

COUNTY: LUMPKIN

Service: VOTER REGISTRATION & ELECTIONS

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, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.):

2. In developing 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

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

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

Handwritten initials: CDD

Handwritten initials: JGM

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	County General Fund, SPLOST
City of Dahlonega	City General Fund

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

In the event of a City election that is not held at the same time as a county-wide election and the City decides to use the County employees and/or facilities, the City agrees to reimburse the County the expenses of the city-only election including the hourly wage rates (exclusive of benefits) of the County employees that hold the City-only election.

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

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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
BILL SCHMID - DAHLONEGA CITY MANAGER 706-864-6133

DM *SM*



SERVICE DELIVERY STRATEGY

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 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: WATER DISTRIBUTION

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.):

- 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, **attach a legible map delineating the service area of each service provider**, and identify the government, authority, or other organization that will provide service within each service area.): **City of Dahlonega, Lumpkin County Water and Sewer Authority**

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

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

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

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	SPLOST
City of Dahlonega	Enterprise Fund, City General Fund, User Fees, Bonds
Lumpkin County Water and Sewer Authority	Enterprise Fund, User Fees, Grants, Bonds,

4. How will the strategy change the previous arrangements for providing and/or funding 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:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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?

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



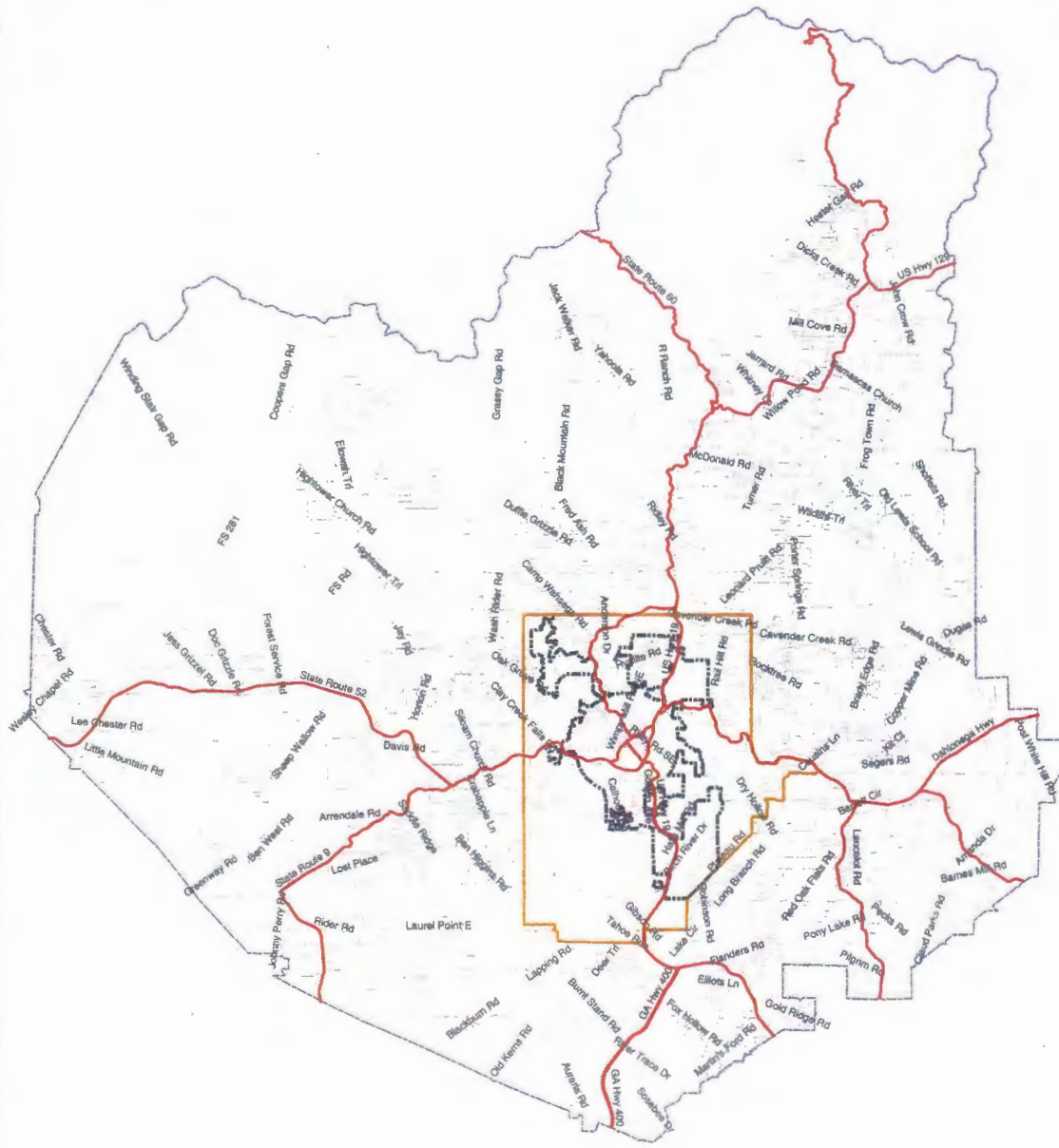
LUMPKIN COUNTY/CITY OF DAHLONEGA SERVICE DELIVERY AREA

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
Gary McCullough, Mayor
City of Dahlonega

Stephen W. Gooch
Stephen W. Gooch, Sole Commissioner
Lumpkin County

Water Distribution, Water Supply & Sewage Collection & Treatment



Legend

- Lumpkin County Boundary
- City of Dahlonega
- City of Dahlonega Service Delivery Area
- Tax Parcel Boundary
- FEATURE_TY**
- State Highway



THIS INFORMATION IS PROVIDED AS A SERVICE TO THE PUBLIC AND IS NOT GUARANTEED. THE CITY OF DAHLONEGA AND LUMPKIN COUNTY ARE NOT RESPONSIBLE FOR ANY ERRORS OR OMISSIONS. THE USER ASSUMES ALL LIABILITY FOR ANY DAMAGE OR LOSS OF DATA. THE CITY OF DAHLONEGA AND LUMPKIN COUNTY ARE NOT RESPONSIBLE FOR ANY DAMAGE OR LOSS OF DATA. THE USER ASSUMES ALL LIABILITY FOR ANY DAMAGE OR LOSS OF DATA.



SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

Instructions:

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COUNTY: LUMPKIN

Service: WATER SUPPLY

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.):

- 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, **attach a legible map delineating the service area of each service provider**, and identify the government, authority, or other organization that will provide service within each service area.): **Lumpkin County, City of Dahlonega, Lumpkin County Water and Sewer Authority**

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

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

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

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.).

<i>Local Government or Authority</i>	<i>Funding Method</i>
Lumpkin County	Special Tax District Fund
City of Dahlonega	Enterprise Fund, City General Fund, User Fees, Bonds
Lumpkin County Water and Sewer Authority	Enterprise Fund as to wells and purchased water from the City

4. How will the strategy change the previous arrangements for providing and/or funding this 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:

<i>Agreement Name</i>	<i>Contracting Parties</i>	<i>Effective and Ending Dates</i>
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 Intergovernmental Agreement to extend/modify the prior agreements as necessary.

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



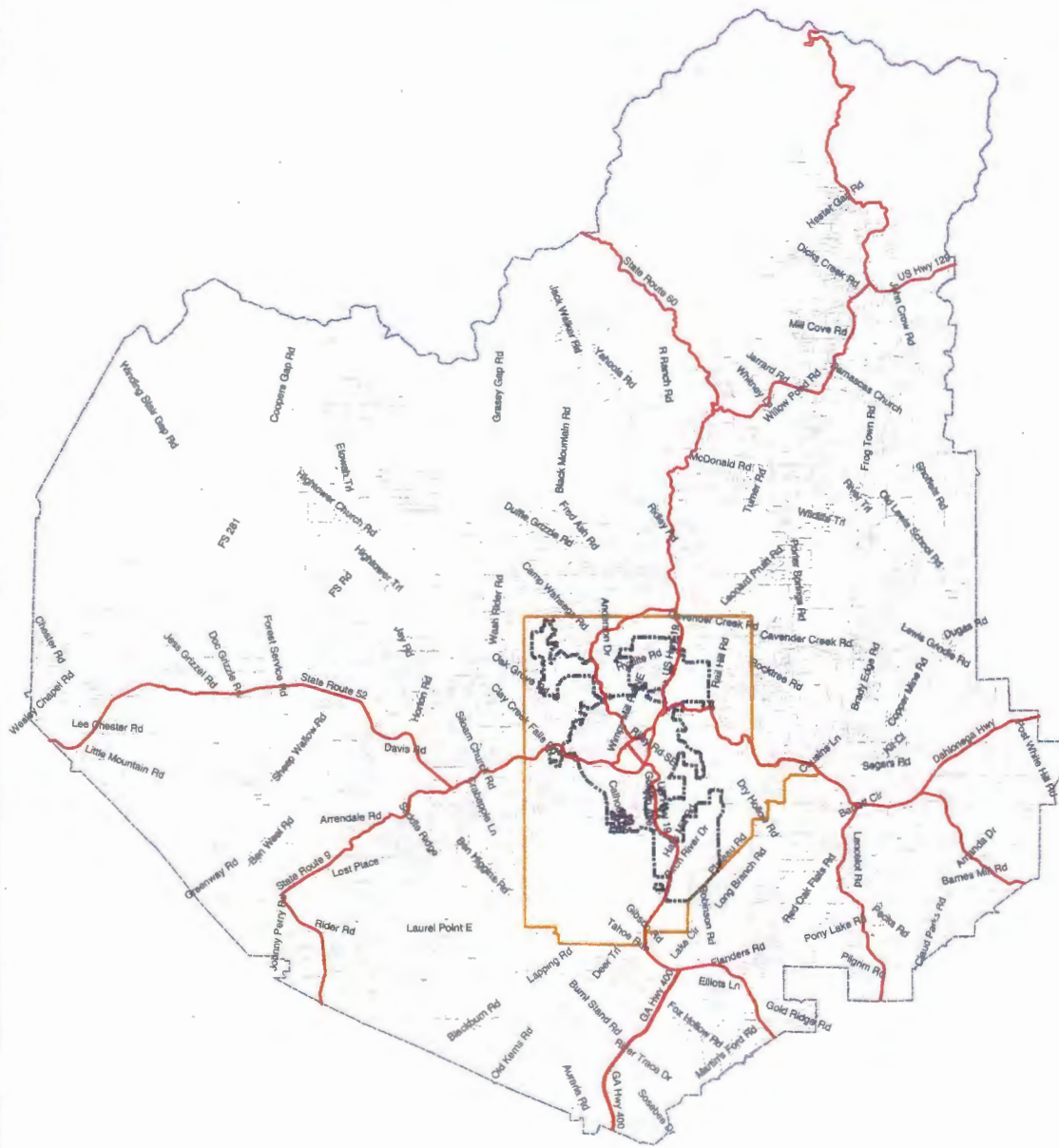
LUMPKIN COUNTY/CITY OF DAHLONEGA SERVICE DELIVERY AREA

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
Gary McCullough, Mayor
City of Dahlonega

Stephen W. Gooch
Stephen W. Gooch, Sole Commissioner
Lumpkin County

Water Distribution, Water Supply & Sewage Collection & Treatment



Legend

- Lumpkin County Boundary
- City of Dahlonega
- City of Dahlonega Service Delivery Area
- Tax Parcel Boundary
- FEATURE_TY**
- State Highway

1 inch equals 2.2 miles

0 3,125 6,250 12,500 18,750 25,000 Feet

THE INFORMATION CONTAINED HEREIN IS FOR INFORMATIONAL PURPOSES ONLY. IT IS NOT INTENDED TO BE USED FOR ANY OTHER PURPOSE. THE USER OF THIS INFORMATION SHALL BE RESPONSIBLE FOR OBTAINING NECESSARY PERMITS AND APPROVALS FROM THE APPROPRIATE AGENCIES. THE CITY OF DAHLONEGA AND LUMPKIN COUNTY DO NOT WARRANT THE ACCURACY OF THIS INFORMATION. THE CITY OF DAHLONEGA AND LUMPKIN COUNTY SHALL NOT BE LIABLE FOR ANY DAMAGES, INCLUDING CONSEQUENTIAL DAMAGES, ARISING FROM THE USE OF THIS INFORMATION. THE CITY OF DAHLONEGA AND LUMPKIN COUNTY SHALL NOT BE LIABLE FOR ANY DAMAGES, INCLUDING CONSEQUENTIAL DAMAGES, ARISING FROM THE USE OF THIS INFORMATION.

Intergovernmental Contract

This INTERGOVERNMENTAL CONTRACT, (hereinafter "Contract") made and entered into as of the 7th 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

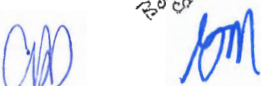
WHEREAS, the Parties in connection with the GEFA loan desire to allocate their respective rights and responsibilities with respect to the Loan to be paid by each entity and the procedure for such payment to be made to GEFA;

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.

2-22-2007
copy
BOB
CO. MGR
CO. ATTY
FINANCE
BO. LEG
COUNCIL



2.

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

CAD

gm

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:

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 Herbert Zwerner, Grace Zwerner and Carl Zwerner vs. City of Dahlonega, Georgia, et al, shall be paid to GEFA as a principal reduction on the loan in the percentages as set forth in paragraph 8 hereof.

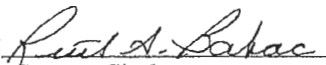
12.

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: 
Chairman, Board of Commissioners
Of Lumpkin County, Georgia

Attest: 
County Clerk
of Lumpkin County, Georgia
(SEAL)

CITY OF DAHLONEGA

By: Gary McCullough
Mayor

Attest: Janet Jamar
City Clerk (SEAL)

CDS

bn

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.

CRB

SM

Exhibit "B"

All that tract or parcel of land lying and being in Land Lots 1027, 1028 and 1029 of the 12th District, 1st 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.

CSB
GM

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.

MS

JMS

Exhibit "D"

See attached quit claim deed and legal description

CND

GM

QUIT-CLAIM DEED

State of Georgia
Lumpkin County

THIS INDENTURE, Made this ____ day of _____, in the year of our Lord Two Thousand and Six, between CITY OF DAHLONEGA, a Municipal Corporation of the State of Georgia, hereinafter referred to as party of the first part (Grantor), and The Lumpkin County Water and Sewer Authority, hereinafter referred to as party of the second part (Grantees).

WITNESSETH, That the said party or parties of the first part, for and in consideration of the sum of: **TEN DOLLARS**, in hand paid at and before the sealing and delivery of these presents, the receipt whereof is hereby acknowledged, has granted, bargained, sold, and conveyed, and by these presents grants, bargains, sells and conveys, and forever QUIT-CLAIMS unto the said party or parties of the second part, their heirs and assigns, all his right title and interest in and to the following described premises:

**FOR LEGAL DESCRIPTION SEE EXHIBIT A ATTACHED HERETO,
MADE A PART HEREOF, AND INCORPORATED HEREIN BY REFERENCE.**

TO HAVE AND TO HOLD the said bargained premises, together with all and singular the rights, members, and appurtenances thereof, to the same being, belonging, or in anywise appertaining, to the only proper use, benefit and behoof of the said party or parties of the second part, their heirs, and assigns, forever, in fee simple.

IN WITNESS WHEREOF, the said party or parties of the first part have hereunto set their hand and affixed their seal, as of the day and year first above 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: *Gary McCullough*
Gary McCullough, Mayor

NOTARY PUBLIC
STATE OF GEORGIA

Attest: _____
Janet Jarrard, City Clerk

Handwritten initials: JMD and JM

Exhibit "A"

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 is 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. Restrictions on land applications. No irrigation of waste water, waste water by products, hazardous waste or non-hazardous waste. No application of pesticides, fertilizers or deicing salts.
2. Restrictions on disposal. 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 containers containing hazardous materials, radioactive materials, non hazardous waste or non-waste materials.
4. Restrictions on livestock. 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.
7. 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.





SERVICE DELIVERY STRATEGY

FORM 3: Summary of Land Use Agreements

Instructions:

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

COUNTY:LUMPKIN

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

None. The City and County both have Land Use Plans as part of their Comprehensive Plans.

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

- Amendments to existing comprehensive plans
- Adoption of a joint comprehensive plan
- Other measures (amend zoning ordinances, add environmental regulations, etc.)

If "other measures" was checked, describe these measures:
 Describe "Other" Measures Here

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

3. What policies, procedures and/or processes have been established by local governments (and water and sewer authorities) to ensure that new extraterritorial water and sewer service will be consistent with all applicable land use plans and ordinances? The City of Dahlonega, Lumpkin County 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 the Future Land Use Plans, 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 that is consistent with the Future Land Use Plans.

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 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



Georgia[®] Department of
Community Affairs



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:

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

JURISDICTION	TITLE	NAME	SIGNATURE	DATE
<u>CITY OF DAHLONEGA</u>	Mayor	Gary McCullough		2-10-2017
<u>LUMPKIN COUNTY</u>	Chairman, Board of Commissioners	Chris Dockery		2/14/17

CD

BM

**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:

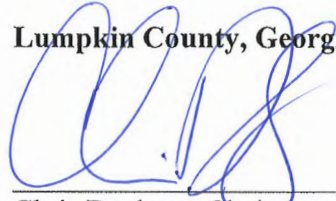
1. The City will pay to the County the sum of Fifty Thousand Dollars (\$50,000) annually on or before June 1 of each year for the capital acquisition costs of a ladder truck and for supplementary fire services provided by the County to the incorporated area of the City. The County shall first apply these 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

solely from sentences entered by the Municipal Court.

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.

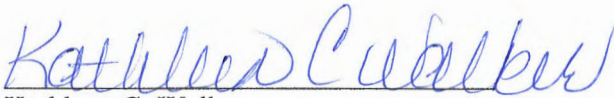
Executed this 10th day of February, 2017, by the undersigned representatives of the parties.

Lumpkin County, Georgia ("County")



Chris Dockery, Chairman
Lumpkin County Board of Commissioners

Attest:



Kathleen C. Walker
Lumpkin County Clerk

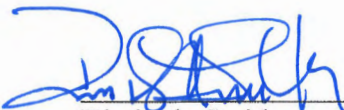


City of Dahlonega, Georgia ("City")



Gary McCullough, Mayor

Attest:




Kimberly Smith
City of Dahlonega Clerk

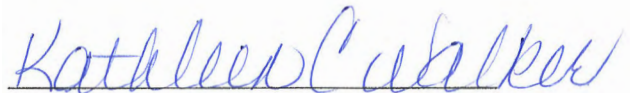


Agreed To:

**Lumpkin County Water and Sewer
Authority ("Authority")**



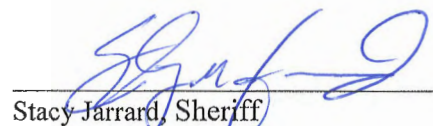
Murl Jones, Chairperson



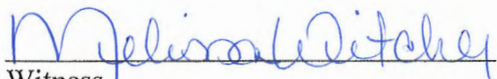
Witness

Agreed To:

Sheriff's Office of Lumpkin County



Stacy Jarrard, Sheriff



Witness



