GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS



SERVICE DELIVERY STRATEGY

FOR Wayne

COUNTY

PAGE 1

I. GENERAL INSTRUCTIONS:

- Only one set of these forms should be submitted per county. The completed forms should clearly present the collective agreement reached by all cities and counties that were party to the service delivery strategy.
- 2. List each local government and/or authority that provides services included in the service delivery strategy in Section II below.
- List all services provided or primarily funded by each general purpose local government and authority within the county in Section III below. It is acceptable to break a service into separate components if this will facilitate description of the service delivery strategy.
- For each service or service component listed in Section III, complete a separate Summary of Service Delivery Arrangements form (page 2).
- 5. Complete one copy of the Summary of Land Use Agreements form (page 3).
- 6. Have the *Certifications* form (page 4) signed by the authorized representatives of participating local governments. Please note that DCA cannot validate the strategy unless it is signed by the local governments required by law (see Instructions, page 4).
- 7. Mail the completed forms along with any attachments to:

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

For answers to most frequently asked questions on Georgia's Service Delivery Act, links and helpful publications, visit DCA's website at www.dca.servicedelivery.org, or call the Office of Coordinated Planning at (404) 679-3114.

Note: Any future changes to the service delivery arrangements described on these forms will require an official update of the service delivery strategy and submittal of revised forms and attachments to the Georgia Department of Community Affairs.

II. LOCAL GOVERNMENTS INCLUDED IN THE SERVICE DELIVERY STRATEGY:

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

Wayne County, City of Jesup, City of Odum, City of Screven, Wayne County Industrial Development Authority, City of Jesup Downtown Development Authority, City of Jesup Housing Authority, Wayne County Solid Waste Authority, Wayne County Hospital Authority

III. SERVICES INCLUDED IN THE SERVICE DELIVERY STRATEGY:

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

Aging Services, Airport, Ambulance Service, Animal Control, Cemeteries, Code Enforcement, Courts, Cultural, E-911, Economic Development, Elections, Emergency Management, Equipment Maintenance/Repair Shop, Extension Service, Fire Protection, Hospital, Indigent Defense, Jail, Law Enforcement, Library, Mapping/GIS, Parks, Planning/Zoning, Probation Service, Public Health, Public Housing, Public Welfare, Recreation, Recycling, Road/Street Construction, Road/Street Maintenance, Sewer, Solid Waste Management, Tax Assessment, Tax Collection, Tourism, Voter Registration, Water

PAGE 2

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS



Instructions:

delivery arrangement for this service: ling all cities and unincorporated areas) by a single service provider. (If this box is organization providing the service.) sted portion of the county by a single service provider. (If this box is checked, on providing the service.) within their incorporated boundaries, and the service will not be provided in entify the government(s), authority or organization providing the service.) within their incorporated boundaries, and the county will provide the service in entify the government(s), authority or organization providing the service.) map delineating the service area of each service provider, and identify the it will provide service within each service area.) the areas, unnecessary competition and/or duplication of this service identified? ttach an explanation for continuing the arrangement (i.e., overlapping but overriding benefits of the duplication, or reasons that overlapping service areas or gy, attach an implementation schedule listing each step or action that will be agreed upon deadline for completing it.
ling all cities and unincorporated areas) by a single service provider. (If this box is arganization providing the service.) Ited portion of the county by a single service provider. (If this box is checked, on providing the service.) within their incorporated boundaries, and the service will not be provided in entify the government(s), authority or organization providing the service.) within their incorporated boundaries, and the county will provide the service in entify the government(s), authority or organization providing the service.) map delineating the service area of each service provider, and identify the at will provide service within each service area.) the areas, unnecessary competition and/or duplication of this service identified? ttach an explanation for continuing the arrangement (i.e., overlapping but overriding benefits of the duplication, or reasons that overlapping service areas or gy, attach an implementation schedule listing each step or action that will be
within their incorporated boundaries, and the service will not be provided in entify the government(s), authority or organization providing the service.) within their incorporated boundaries, and the county will provide the service in entify the government(s), authority or organization providing the service.) map delineating the service area of each service provider, and identify the at will provide service within each service area.) the areas, unnecessary competition and/or duplication of this service identified? ttach an explanation for continuing the arrangement (i.e., overlapping but overriding benefits of the duplication, or reasons that overlapping service areas or gy, attach an implementation schedule listing each step or action that will be
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nap delineating the service area of each service provider, and identify the structure within each service area.) ce areas, unnecessary competition and/or duplication of this service identified? ttach an explanation for continuing the arrangement (i.e., overlapping but overriding benefits of the duplication, or reasons that overlapping service areas or gy, attach an implementation schedule listing each step or action that will be
t will provide service within each service area.) ce areas, unnecessary competition and/or duplication of this service identified? ttach an explanation for continuing the arrangement (i.e., overlapping but overriding benefits of the duplication, or reasons that overlapping service areas or gy, attach an implementation schedule listing each step or action that will be
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overriding benefits of the duplication, or reasons that overlapping service areas or gy, attach an implementation schedule listing each step or action that will be
pay for this service and indicate how the service will be funded (e.g., enterprise rict revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
& State
& State
ments for providing and/or funding this service within the county?

service:	C	Effective and Ending Dates
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
	be used to implement the strategy for this service	
None		
	ones, County Administrator	
7. Person completing form: Nancy J Phone number: 912-427-5900	ones, County Administrator Date completed: 8-5-99	9
7. Person completing form: Nancy J Phone number: 912-427-5900	Date completed: 8-5-99 stacted by state agencies when evaluating whethe	
7. Person completing form: Nancy J Phone number: 912-427-5900 8. Is this the person who should be corconsistent with the service delivery	Date completed: 8-5-99 stacted by state agencies when evaluating whethe	



PAGE 2

Instructions:

County: Wayne	Service: Airport
1. Check the box that best describ	es the agreed upon delivery arrangement for this service:
checked, identify the govern	ntywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ment, authority or organization providing the service.)
	in the unincorporated portion of the county by a single service provider. (If this box is checked, nority or organization providing the service.)
	de this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	de this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
	, attach a legible map delineating the service area of each service provider, and identify the ner organization that will provide service within each service area.)
2. In developing the strategy, wer ☐ Yes ☑ No	e overlapping service areas, unnecessary competition and/or duplication of this service identified?
	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or i.
	ted under the strategy, attach an implementation schedule listing each step or action that will be nsible party and the agreed upon deadline for completing it.
	ity that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Wayne County	General Fund & Fees
1910 - 1000 - 1000 - 1000 - 1000	
	e previous arrangements for providing and/or funding this service within the county?
No change is anticipated.	

service:	and a morgo-termination contracts	that will be used to implement the strategy for this
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
 What other mechanisms General Assembly, rate of None 	r fee changes, etc.), and when will they take effect	
General Assembly, rate of None	r fee changes, etc.), and when will they take effect	
General Assembly, rate of None	r fee changes, etc.), and when will they take effect Nancy Jones, County Administrator	?
General Assembly, rate of None 7. Person completing form: Phone number: 912-427	Nancy Jones, County Administrator Date complete	?



PAGE 2

Instructions:

County: Wayne	Service: Ambulance Service
1. Check the box that best des	cribes the agreed upon delivery arrangement for this service:
	countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is vernment, authority or organization providing the service.)
☐ Service will be provided	only in the unincorporated portion of the county by a single service provider. (If this box is checked, authority or organization providing the service.)
	provide this service only within their incorporated boundaries, and the service will not be provided in f this box is checked, identify the government(s), authority or organization providing the service.)
	rovide this service only within their incorporated boundaries, and the county will provide the service in this box is checked, identify the government(s), authority or organization providing the service.)
	cked, attach a legible map delineating the service area of each service provider, and identify the or other organization that will provide service within each service area.)
2. In developing the strategy, ☐ Yes ☑ No	were overlapping service areas, unnecessary competition and/or duplication of this service identified?
	D.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or ated).
	minated under the strategy, attach an implementation schedule listing each step or action that will be esponsible party and the agreed upon deadline for completing it.
 List each government or au funds, user fees, general fu indebtedness, etc.). 	thority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise nds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Author	ty: Funding Method:
Wayne County	General Fund & Fees
How will the strategy chan No change is anticipated	ge the previous arrangements for providing and/or funding this service within the county?

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
What other mechanisms (if any) will be General Assembly, rate or fee changes,		e (e.g., ordinances, resolutions, local acts of th
None		
None		
None 7. Person completing form: Nancy Jone		
7. Person completing form: Nancy Jone Phone number: 912-427-5900	es, County Administrator Date completed: 8-5-99 ted by state agencies when evaluating whether	



PAGE 2

Instructions:

County: Wayne	Service: Animal Control
1. Check the box that best desc	ribes the agreed upon delivery arrangement for this service:
checked, identify the gove City of Jesup	countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ernment, authority or organization providing the service.) only in the unincorporated portion of the county by a single service provider. (If this box is checked, authority or organization providing the service.)
☐ One or more cities will pro unincorporated areas. (If t	ovide this service only within their incorporated boundaries, and the service will not be provided in this box is checked, identify the government(s), authority or organization providing the service.)
	ovide this service only within their incorporated boundaries, and the county will provide the service in this box is checked, identify the government(s), authority or organization providing the service.)
 Other. (If this box is check government, authority, or 	ked, attach a legible map delineating the service area of each service provider, and identify the other organization that will provide service within each service area.)
 In developing the strategy, w Yes ☑ No 	vere overlapping service areas, unnecessary competition and/or duplication of this service identified?
	e under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or ed).
	inated under the strategy, attach an implementation schedule listing each step or action that will be sponsible party and the agreed upon deadline for completing it.
	nority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise ds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority	
City of Jesup	General Fund
Vayne County	General Fund
Hell -	
	the previous arrangements for providing and/or funding this service within the county? inue to provide this service through contract countywide.

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Animal Control Contract	Wayne County and City of Jesup	2-18-97/open
General Assembly, rate or fee changes None	e used to implement the strategy for this service (e.g., o , etc.), and when will they take effect?	in the state of th
7. Person completing form: Nancy Jon	es, County Administrator	
7. Person completing form: Nancy Jon Phone number: 912-427-5900	es, County Administrator Date completed: 8-5-99	
Phone number: 912-427-5900	Date completed: 8-5-99	ed local government projects are

PAGE 2

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions:

County: Wayne	Service: Cemeteries
	lescribes the agreed upon delivery arrangement for this service:
Service will be provide checked, identify the p	ed countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is government, authority or organization providing the service.)
☐ Service will be provide identify the government	ed only in the unincorporated portion of the county by a single service provider. (If this box is checked, nt, authority or organization providing the service.)
unincorporated areas.	l provide this service only within their incorporated boundaries, and the service will not be provided in (If this box is checked, identify the government(s), authority or organization providing the service.)
☐ One or more cities will	I provide this service only within their incorporated boundaries, and the county will provide the service in (If this box is checked, identify the government(s), authority or organization providing the service.)
 Other. (If this box is c government, authority 	hecked, attach a legible map delineating the service area of each service provider, and identify the r, or other organization that will provide service within each service area.)
2. In developing the strateg ☐ Yes ☑ No	ry, were overlapping service areas, unnecessary competition and/or duplication of this service identified?
	tinue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but the O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or sinated).
	eliminated under the strategy, attach an implementation schedule listing each step or action that will be e responsible party and the agreed upon deadline for completing it.
 List each government or funds, user fees, general indebtedness, etc.). 	authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Auth	ority: Funding Method:
City of Jesup	General Fund & Plot Fees
City of Odum	General Fund & Plot Fees
City of Screven	General Fund & Plot Fees
How will the strategy ch No change is anticipate	ange the previous arrangements for providing and/or funding this service within the county?

A manager Name	Contracting Parties:	Effective and Ending Dates:
Agreement Name:	Contracting Fatties.	Effective and Enting Dates.
General Assembly, rate or fee changes, e	used to implement the strategy for this servicetc.), and when will they take effect?	e (e.g., ordinances, resolutions, local acts of th
None		
	s, County Administrator	
	s, County Administrator Date completed: 8-5-99	
7. Person completing form: Nancy Jones Phone number: 912-427-5900	Date completed: 8-5-99 ed by state agencies when evaluating whether	
7. Person completing form: Nancy Jones Phone number: 912-427-5900 8. Is this the person who should be contacted.	Date completed: 8-5-99 ed by state agencies when evaluating whether egy? Ves No	



PAGE 2

Instructions:

County: Wayne	Service: Code Enforcement
1. Check the box that best descr	ibes the agreed upon delivery arrangement for this service:
	ountywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ment, authority or organization providing the service.)
	ally in the unincorporated portion of the county by a single service provider. (If this box is checked, athority or organization providing the service.)
	vide this service only within their incorporated boundaries, and the service will not be provided in his box is checked, identify the government(s), authority or organization providing the service.)
☐ One or more cities will pro	vide this service only within their incorporated boundaries, and the county will provide the service in his box is checked, identify the government(s), authority or organization providing the service.)
	ed, attach a legible map delineating the service area of each service provider, and identify the other organization that will provide service within each service area.)
2. In developing the strategy, we ☐ Yes ☑ No	ere overlapping service areas, unnecessary competition and/or duplication of this service identified?
	under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or d).
	nated under the strategy, attach an implementation schedule listing each step or action that will be consible party and the agreed upon deadline for completing it.
	ority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise s, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority	Funding Method:
City of Jesup	General Fund & User Fees
- I - I - I - I - I - I - I - I - I - I	
How will the strategy change No change is anticipated.	the previous arrangements for providing and/or funding this service within the county?

List any formal service delivery agreen service:	nents or intergovernmental contracts that will be	used to implement the strategy for this
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
General Assembly, rate or fee changes None		(e.g., ordinances, resolutions, local acts of the
7. Person completing form: Nancy Jon	es, County Administrator	
Phone number: 912-427-5900	Date completed: 8-5-99	
8. Is this the person who should be contact consistent with the service delivery stre	cted by state agencies when evaluating whether pategy? Yes No	proposed local government projects are
If not, provide designated contact person	·	
Also, Mike Deal, Jesup City Manag	er, 912-427-1313	



PAGE 2

Instructions:

1. Check the box that best describes the agreed upon delivery arrangement for this service: Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box checked, identify the government, authority or organization providing the service.) Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.) One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) Other. (If this box is checked, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.) In developing the strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified? Yes No Municipal Courts in Jesup and Bereven are not considered to be a duplication. If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of 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 aken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that wi		Service: Courts
Checked, identify the government, authority or organization providing the service.) Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.) One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) □ Other. (If this box is checked, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.) 2. In developing the strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified? □ Yes ☑ No Municipal Courts in Josup and Service areas, unnecessary competition and/or duplication of this service identified? □ Yes ☑ No Municipal Courts in Josup and Service areas, unnecessary competition and/or duplication of this service identified? □ Yes ☑ No Municipal Courts in Josup and Service areas of competition and/or duplication of this service identified? □ Yes ☑ No Municipal Courts in Josup and Service area not considered to be a duplication. If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but aigher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of competition cannot be eliminated. If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action	l. Check the box that best describe	es the agreed upon delivery arrangement for this service:
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unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) City of Jesusy and City of Serveven (Municipal Courts), Wayne County (all other courts countywide) Other. (If this box is checked, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.) 2. In developing the strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified? Yes No Municipal Courts in Jesus and Serven are not considered to be a duplication. If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but nigher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of 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 aken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.). Local Government or Authority: Funding Method: Vayne County General Fund, Fees, Fines/Forfeitures Ety of Screven General Fund, Fees, Fines/Forfeitures Ety of Screven General Fund, Fees, Fines/Forfeitures		
unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) City of Jesup and tip of Service (Guerts), Wayne County (all other courts countywide) Other. (If this box is checked, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.) 2. In developing the strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified? 1. Yes No Municipal Courts in Jesup and Serven are not considered to be a duplication. 2. If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but nigher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of competition cannot be eliminated). 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.). 2. Local Government or Authority: Funding Method: 2. Vayne County General Fund, Fees, Fines/Forfeitures 3. Sty of Screven General Fund, Fees, Fines/Forfeitures 3. Sty of Screven General Fund, Fees, Fines/Forfeitures 3. Sty of Screven General Fund, Fees, Fines/Forfeitures		
Wayne County Municipal Courts in Jesup and Screven are not considered to be a duplication. If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but nigher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of 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 aken to eliminate them, the responsible party and the agreed upon deadline for completing it. B. 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: Vayne County General Fund, Fees, Fines/Forfeitures Ety of Jesup General Fund, Fees, Fines/Forfeitures General Fund, Fees, Fines/Forfeitures General Fund, Fees, Fines/Forfeitures	unincorporated areas. (If this City of Jesup and City of Screven (Mu Other. (If this box is checked)	box is checked, identify the government(s), authority or organization providing the service.) Inicipal Courts), Wayne County (all other courts countywide) attach a legible map delineating the service area of each service provider, and identify the
Wayne County Municipal Courts in Jesup and Screven are not considered to be a duplication. If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but nigher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of 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 aken to eliminate them, the responsible party and the agreed upon deadline for completing it. B. 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: Vayne County General Fund, Fees, Fines/Forfeitures Ety of Jesup General Fund, Fees, Fines/Forfeitures General Fund, Fees, Fines/Forfeitures General Fund, Fees, Fines/Forfeitures	2. In developing the strategy, were	overlapping service areas, unnecessary competition and/or duplication of this service identified?
nigher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of competition cannot be eliminated). If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.). Local Government or Authority: Funding Method: Wayne County General Fund, Fees, Fines/Forfeitures Sity of Jesup General Fund, Fees, Fines/Forfeitures General Fund, Fees, Fines/Forfeitures General Fund, Fees, Fines/Forfeitures		
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: Vayne County General Fund, Fees, Fines/Forfeitures Sity of Jesup General Fund, Fees, Fines/Forfeitures General Fund, Fees, Fines/Forfeitures General Fund, Fees, Fines/Forfeitures	nigher levels of service (See O.C.6 competition cannot be eliminated). If these conditions will be eliminated.	3.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or ted under the strategy, attach an implementation schedule listing each step or action that will be
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: Vayne County General Fund, Fees, Fines/Forfeitures Eity of Jesup General Fund, Fees, Fines/Forfeitures Eity of Screven General Fund, Fees, Fines/Forfeitures	aken to eliminate them, the respon	nsible party and the agreed upon deadline for completing it.
Vayne County General Fund, Fees, Fines/Forfeitures General Fund, Fees, Fines/Forfeitures General Fund, Fees, Fines/Forfeitures General Fund, Fees, Fines/Forfeitures	funds, user fees, general funds,	
General Fund, Fees, Fines/Forfeitures General Fund, Fees, Fines/Forfeitures General Fund, Fees, Fines/Forfeitures	Local Government or Authority:	Funding Method:
General Fund, Fees, Fines/Forfeitures	Vayne County	General Fund, Fees, Fines/Forfeitures
	ity of Jesup	General Fund, Fees, Fines/Forfeitures
4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?	ity of Screven	General Fund, Fees, Fines/Forfeitures
4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?		
No change is anticipated.		e previous arrangements for providing and/or funding this service within the county?

5. List any formal service delivery a service:	greements or intergovernmental contracts that will b	be used to implement the strategy for this
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
General Assembly, rate or fee cha	vill be used to implement the strategy for this service anges, etc.), and when will they take effect?	e (e.g., ordinarces, resolutions, rocal acts of the
7. Person completing form: Nancy	Jones, County Administrator	
Phone number: 912-427-5900	Date completed: 8-5-99	9
Is this the person who should be consistent with the service deliver	contacted by state agencies when evaluating whether ry strategy? Yes No	r proposed local government projects are
	person(s) and phone number(s) below:	
Also, Mike Deal, Jesup City Ma	anager, 912-427-1313	



PAGE 2

Instructions:

County: Wayne	Service: Cultural
1. Check the box that best d	escribes the agreed upon delivery arrangement for this service:
Service will be provide checked, identify the g	d countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is overnment, authority or organization providing the service.)
Service will be provide	d only in the unincorporated portion of the county by a single service provider. (If this box is checked, at, authority or organization providing the service.)
	provide this service only within their incorporated boundaries, and the service will not be provided in If this box is checked, identify the government(s), authority or organization providing the service.)
	provide this service only within their incorporated boundaries, and the county will provide the service in If this box is checked, identify the government(s), authority or organization providing the service.)
	ecked, attach a legible map delineating the service area of each service provider, and identify the or other organization that will provide service within each service area.)
2. In developing the strategy ☐ Yes ☑ No	, were overlapping service areas, unnecessary competition and/or duplication of this service identified?
	inue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but e O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or nated).
	liminated under the strategy, attach an implementation schedule listing each step or action that will be responsible party and the agreed upon deadline for completing it.
	authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Author	ority: Funding Method:
Wayne County	General Fund
City of Jesup	General Fund
	nge the previous arrangements for providing and/or funding this service within the county?
No change is anticipate	J.

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
5. What other mechanisms (if any) will be	used to implement the strategy for this service	(e.g. ordinances resolutions local sets of the
General Assembly, rate or fee changes	etc.), and when will they take effect?	
None		
None 7. Person completing form: Nancy Jon Phone number: 912-427-5900	es, County Administrator Date completed: 8-5-99 ted by state agencies when evaluating whether	proposed local government projects are

PAGE 2

Instructions:

County: Wayne	Service: E-911
	scribes the agreed upon delivery arrangement for this service:
Service will be provided checked, identify the go	countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is vernment, authority or organization providing the service.)
☐ Service will be provided	only in the unincorporated portion of the county by a single service provider. (If this box is checked, authority or organization providing the service.)
☐ One or more cities will p unincorporated areas. (I	provide this service only within their incorporated boundaries, and the service will not be provided in f this box is checked, identify the government(s), authority or organization providing the service.)
	provide this service only within their incorporated boundaries, and the county will provide the service in f this box is checked, identify the government(s), authority or organization providing the service.)
	cked, attach a legible map delineating the service area of each service provider, and identify the or other organization that will provide service within each service area.)
 In developing the strategy, Yes ✓ No 	were overlapping service areas, unnecessary competition and/or duplication of this service identified?
	once under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or ated).
	minated under the strategy, attach an implementation schedule listing each step or action that will be esponsible party and the agreed upon deadline for completing it.
	uthority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise ands, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Author	ity: Funding Method:
Wayne County	General Fund & Phone Fees
City of Jesup	Swap-out Contract for Fire Protection
	ge the previous arrangements for providing and/or funding this service within the county? It for operation and maintenance as provided by the county will continue.

service:		
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
E-911/Fire Swap-Out Contract	Wayne County and City of Jesup	9-11-96/9-11-99
General Assembly, rate or fee changes	e used to implement the strategy for this service (e.g., o	ordinances, resolutions, local acts of the
None	, etc.), and when will they take effect:	
None		
7. Person completing form: Nancy Jon Phone number: 912-427-5900	es, County Administrator Date completed: 8-5-99 cted by state agencies when evaluating whether propose	ed local government projects are



PAGE 2

Instructions:

Yes No The Downtown Development Authority is considered an enhanced level of service. If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service area competition cannot be eliminated). If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.). Local Government or Authority: Funding Method: Wayne County General Fund - County	County: Wayne	Service: Economic Development
checked, identify the government, authority or organization providing the service.) □ Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.) □ One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) □ One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) □ Provided countywide through industrial tolevolement authority, is submitted by the provider countywide through industrial tolevolement authority, the submitted by the provider countywide through industrial tolevolement authority, the submitted by the provider area.) □ In developing the strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified? □ Yes ☑ No The Downtown Development Authority is considered an enhanced level of service. If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service accompetition cannot be eliminated. If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterpris funds, user fees, general funds, special service district revenues, hotel/motel	1. Check the box that best desc	cribes the agreed upon delivery arrangement for this service:
One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) ✓ One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) Other. (If this box is checked, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service provider, and identify the government, authority, or other organization that will provide service within each service area.) If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service area competition cannot be eliminated.) If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterpris 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: Wayne County General Fund County General Fund County 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? No change is anticipated.	☐ Service will be provided of checked, identify the gov	countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ernment, authority or organization providing the service.)
unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) Provides countywist brough industrial brevelopment Authority, but Jesup also has a Downtham Development Authority. 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.) In developing the strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified? Yes No The Downtown Development Authority is considered an enhanced level of service. If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service area competition cannot be eliminated). If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterpris 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: Wayne County General Fund - County General Fund - County General Fund - County General Fund - County 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? No change is antici		
unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) Provided countywide through industrial Development Authority, but Jesup also has a Downtown Development Authority Other. (If this box is checked, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.) 2. In developing the strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified? Yes No The Downtown Development Authority is considered an enhanced level of service. If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service area competition cannot be eliminated.) If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterpris 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: Wayne County General Fund - County General Fund - County General Fund - County 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? No change is anticipated.		
□ Yes No. The Downtown Development Authority is considered an enhanced level of service. If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service area competition cannot be eliminated). If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.). Local Government or Authority: Funding Method: Wayne County General Fund - County City of Jesup General Fund 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? No change is anticipated.	unincorporated areas. (If Provided countywide through in Other. (If this box is chec	this box is checked, identify the government(s), authority or organization providing the service.) dustrial Development Authority, but Jesup also has a Downtown Development Authority ked, attach a legible map delineating the service area of each service provider, and identify the
higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service area competition cannot be eliminated). If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.). Local Government or Authority: Funding Method: Wayne County General Fund - County City of Jesup General Fund 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? No change is anticipated.		
taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.). Local Government or Authority: Funding Method: Wayne County General Fund - County City of Jesup General Fund 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? No change is anticipated.	higher levels of service (See C	O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
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: Wayne County General Fund - County City of Jesup General Fund 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? No change is anticipated.		
Wayne County General Fund - County General Fund 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? No change is anticipated.	funds, user fees, general fur	
General Fund 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? No change is anticipated.	Local Government or Authorit	y: Funding Method:
4. How will the strategy change the previous arrangements for providing and/or funding this service within the county? No change is anticipated.	Wayne County	General Fund - County
No change is anticipated.	City of Jesup	General Fund
No change is anticipated.	4.77 20.4	
		e the previous arrangements for providing and/or funding this service within the county?

List any formal service delivery agreeme service:	nts or intergovernmental contracts that will be u	used to implement the strategy for this
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
X	ised to implement the strategy for this service (
7. Person completing form: Nancy Jones	s, County Administrator	
Phone number: 912-427-5900	Date completed: 8-5-99	
Is this the person who should be contacted consistent with the service delivery strate.	ed by state agencies when evaluating whether preggy? Yes No	roposed local government projects are
If not, provide designated contact person		
Also, Mike Deal, Jesup City Manager		

PAGE 2

Instructions:

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

County: Wayne	Service: Elections
1. Check the box that best describe	s the agreed upon delivery arrangement for this service:
	tywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is nent, authority or organization providing the service.)
	in the unincorporated portion of the county by a single service provider. (If this box is checked, ority or organization providing the service.)
	le this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	le this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
government, authority, or oth Wayne County (countywide), City of	attach a legible map delineating the service area of each service provider, and identify the er organization that will provide service within each service area.) Jesup, City of Odum, City of Screven overlapping service areas, unnecessary competition and/or duplication of this service identified?
	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
	ted under the strategy, attach an implementation schedule listing each step or action that will be asible party and the agreed upon deadline for completing it.
	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Wayne County	General Fund
City of Jesup	General Fund
City of Odum	General Fund
City of Screven	General Fund
No change is anticipated. Wa	e previous arrangements for providing and/or funding this service within the county? yne County will continue to provide for countywide elections as well as state and federal accorporated areas. The cities of Jesup, Odum, and Screven will provide for municipal

elections.

A	Contracting Parties:	Effective and Ending Dates:
Agreement Name:	Contracting Farites.	
	ill be used to implement the strategy for this service	a (a.c. ordinances resolutions local acts of
	nges, etc.), and when will they take effect?	
7. Person completing form: Nancy Phone number: 912-427-5900	Jones, County Administrator Date completed: 8-5-99	
7. Person completing form: Nancy Phone number: 912-427-5900	Date completed: 8-5-99 ontacted by state agencies when evaluating whether	



PAGE 2

Instructions:

County: Wayne	Service: Emergency Management
1. Check the box that best describe	es the agreed upon delivery arrangement for this service:
	tywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is nent, authority or organization providing the service.)
☐ Service will be provided only	in the unincorporated portion of the county by a single service provider. (If this box is checked, ority or organization providing the service.)
	this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	the this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
	attach a legible map delineating the service area of each service provider, and identify the er organization that will provide service within each service area.)
2. In developing the strategy, were ☐ Yes ☑ No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but 3.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
	ed under the strategy, attach an implementation schedule listing each step or action that will be asible party and the agreed upon deadline for completing it.
	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Wayne County	General Fund
The second secon	
How will the strategy change the No change is anticipated.	e previous arrangements for providing and/or funding this service within the county?

Agreement Name:	Contracting Pa	arties:	Effective and Ending Dates:
Ganaral Accomply rate of			
None	fee changes, etc.), and when will they Nancy Jones, County Administrate		
None	Nancy Jones, County Administrat		
7. Person completing form: Phone number: 912-427	Nancy Jones, County Administrat	or te completed: <mark>8-5-99</mark>	sed local government projects are



PAGE 2

Instructions:

County: Wayne	Service: Equipment Maintenance/Repair Shop
1. Check the box that best describe	s the agreed upon delivery arrangement for this service:
	tywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is tent, authority or organization providing the service.)
	in the unincorporated portion of the county by a single service provider. (If this box is checked, ority or organization providing the service.)
	this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
Other. (If this box is checked,	attach a legible map delineating the service area of each service provider, and identify the er organization that will provide service within each service area.)
	overlapping service areas, unnecessary competition and/or duplication of this service identified?
☐ Yes ☑ No	
	der the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but i.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
	ed under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
3. List each government or authori funds, user fees, general funds, indebtedness, etc.).	y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Wayne County	General Fund
City of Jesup	General Fund
City of Odum	General Fund
City of Screven	General Fund
How will the strategy change the Under the terms of the Anima vehicles operated by the City	e previous arrangements for providing and/or funding this service within the county? Control and Fire Protection agreements, the county will take over the maintenance of of Jesup for these services.

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
General Assembly, rate or fee changes, None	etc.), and when will they take effect?	
7. Person completing form: Nancy Jones	s, County Administrator	
7. Person completing form: Nancy Jones Phone number: 912-427-5900	s, County Administrator Date completed: 8-5-99	
Phone number: 912-427-5900	Date completed: 8-5-99 ed by state agencies when evaluating whether	proposed local government projects are



PAGE 2

Instructions:

County: Wayne	Service: Extension Service
1. Check the box that best describe	es the agreed upon delivery arrangement for this service:
Service will be provided cour checked, identify the government wayne County Extension Service	ntywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ment, authority or organization providing the service.) in the unincorporated portion of the county by a single service provider. (If this box is checked,
identify the government, auth	ority or organization providing the service.)
	de this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	de this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
	attach a legible map delineating the service area of each service provider, and identify the er organization that will provide service within each service area.)
 In developing the strategy, were Yes ✓ No 	overlapping service areas, unnecessary competition and/or duplication of this service identified?
If these conditions will continue un higher levels of service (See O.C.Competition cannot be eliminated)	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
If these conditions will be eliminal taken to eliminate them, the respon	ted under the strategy, attach an implementation schedule listing each step or action that will be asible party and the agreed upon deadline for completing it.
 List each government or authori funds, user fees, general funds, indebtedness, etc.). 	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Vayne County	General Fund & University System
4. How will the strategy change th No change is anticipated.	e previous arrangements for providing and/or funding this service within the county?

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
	y) will be used to implement the strategy for this service (changes, etc.), and when will they take effect?	e.g., ordinances, resolutions, local acts of the
None		
None 7. Person completing form: Nar	ncy Jones, County Administrator	
	ncy Jones, County Administrator Date completed: 8-5-99	

PAGE 2

Instructions:

County: Wayne	Service: Fire Protection
1. Check the box that best describe	es the agreed upon delivery arrangement for this service:
checked, identify the government of Jesup Service will be provided only	ntywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ment, authority or organization providing the service.) In the unincorporated portion of the county by a single service provider. (If this box is checked, nority or organization providing the service.)
☐ One or more cities will provide	de this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	de this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
	, attach a legible map delineating the service area of each service provider, and identify the ter organization that will provide service within each service area.)
 In developing the strategy, were Yes ✓ No 	e overlapping service areas, unnecessary competition and/or duplication of this service identified?
	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or .
	ted under the strategy, attach an implementation schedule listing each step or action that will be asible party and the agreed upon deadline for completing it.
	try that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
City of Jesup	General Fund
Vayne County	Swap-Out Contract for E-911
City of Odum	General Fund
City of Screven	General Fund
The strategy will continue the	e previous arrangements for providing and/or funding this service within the county? present arrangement for operation and management as provided by the City of Jesup. maintenance of vehicles used for this service.

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
E-911/Fire Swap-Out Contract	Wayne County and City of Jesup	9-11-96/9-11-99
What other mechanisms (if any) will be General Assembly, rate or fee changes, None	used to implement the strategy for this service (e.g., o etc.), and when will they take effect?	ordinances, resolutions, local acts of the
None		
7. Person completing form: Nancy Jone	s, County Administrator	
	s, County Administrator Date completed: 8-5-99	
7. Person completing form: Nancy Jone Phone number: 912-427-5900	Date completed: 8-5-99	d local government projects are



PAGE 2

Instructions:

County; Wayne	Service: Hospital
1. Check the box that best describes	the agreed upon delivery arrangement for this service:
Service will be provided county checked, identify the government wayne County Hospital Authority	ywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ent, authority or organization providing the service.)
 Service will be provided only in identify the government, author 	n the unincorporated portion of the county by a single service provider. (If this box is checked, rity or organization providing the service.)
	this service only within their incorporated boundaries, and the service will not be provided in ox is checked, identify the government(s), authority or organization providing the service.)
	this service only within their incorporated boundaries, and the county will provide the service in ox is checked, identify the government(s), authority or organization providing the service.)
	attach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
2. In developing the strategy, were of □ Yes ✓ No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
	der the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
	d under the strategy, attach an implementation schedule listing each step or action that will be ible party and the agreed upon deadline for completing it.
	that will help to pay for this service and indicate how the service will be funded (e.g., enterprise secial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Wayne County Hospital Authority	Bonded Indebtedness & User Fees
How will the strategy change the No change is anticipated.	previous arrangements for providing and/or funding this service within the county?

	g Parties:	Effective and Ending Dates:
None 7. Person completing form: Nancy Jones, County Administ Phone number: 912-427-5900		
None None None None None Nancy Jones, County Administ Phone number: 912-427-5900		
None None None None None Nancy Jones, County Administ Phone number: 912-427-5900		
Phone number: 912-427-5900	they take effect?	g., ordinances, resolutions, local acts of the
	Paragressor Colores	
) In this the manner who should be contacted by the	Date completed: 8-5-99	
3. Is this the person who should be contacted by state agencies consistent with the service delivery strategy? Yes No	The second secon	
If not, provide designated contact person(s) and phone number		oosed local government projects are



PAGE 2

Instructions:

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

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
b. What other mechanisms (if any) v	vill be used to implement the strategy for this service (e	.g., ordinances, resolutions, local acts of the
	inges, etc.), and when will they take effect?	
None		



PAGE 2

Instructions:

Service: Jail
s the agreed upon delivery arrangement for this service:
tywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is nent, authority or organization providing the service.)
in the unincorporated portion of the county by a single service provider. (If this box is checked, ority or organization providing the service.)
this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
box is checked, identify the government(s), authority or organization providing the service.)
attach a legible map delineating the service area of each service provider, and identify the er organization that will provide service within each service area.)
overlapping service areas, unnecessary competition and/or duplication of this service identified?
ider the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but 6.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
ed under the strategy, attach an implementation schedule listing each step or action that will be asible party and the agreed upon deadline for completing it.
ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Funding Method:
General Fund, Fees & Fines
General Fund
e previous arrangements for providing and/or funding this service within the county? present contract between Wayne County and the City of Jesup will continue until a new y will operate the jail and provide two-thirds of the funding. The City of Jesup will provide

List any formal service delivery a service:	agreements or intergovernmental contracts that will be used	to implement the strategy for this
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
Jail Contract	Wayne County and City of Jesup	6/20/72 - 50 yrs.
What other mechanisms (if any) of General Assembly, rate or fee changes. None	will be used to implement the strategy for this service (e.g., anges, etc.), and when will they take effect?	ordinances, resolutions, local acts of the
7. Person completing form: Nancy	Jones, County Administrator	
Phone number: 912-427-5900	Date completed: 8-5-99	
consistent with the service deliver If not, provide designated contact	person(s) and phone number(s) below:	ed local government projects are
Also, Mike Deal, Jesup City M.	anayer, 912-427-1313	*****



PAGE 2

Instructions:

County: Wayne		Service: Law Enforcement
1. Check the box that best describ	es the agreed upon delivery as	rrangement for this service:
	intywide (i.e., including all citi iment, authority or organizatio	ties and unincorporated areas) by a single service provider. (If this box is on providing the service.)
	y in the unincorporated portion hority or organization providing	on of the county by a single service provider. (If this box is checked, ing the service.)
		eir incorporated boundaries, and the service will not be provided in government(s), authority or organization providing the service.)
unincorporated areas. (If thi. Wayne County Sheriff's Department Other. (If this box is checked	s box is checked, identify the g (countywide), City of Jesup Police Departr d, attach a legible map deline	eir incorporated boundaries, and the county will provide the service in government(s), authority or organization providing the service.) tment, City of Screven Police Department eating the service area of each service provider, and identify the vide service within each service area.)
	re overlapping service areas, un s are considered a higher level of service.	nnecessary competition and/or duplication of this service identified?
	G.A. 36-70-24(1)), overriding	explanation for continuing the arrangement (i.e., overlapping but g benefits of the duplication, or reasons that overlapping service areas or
If these conditions will be eliminate taken to eliminate them, the response		an implementation schedule listing each step or action that will be pon deadline for completing it.
		is service and indicate how the service will be funded (e.g., enterprise ues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:	
Wayne County	General Fund	
City of Jesup	General Fund	
City of Screven	General Fund	
How will the strategy change the No change is anticipated.	ne previous arrangements for p	providing and/or funding this service within the county?

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
	l be used to implement the strategy for this service ges, etc.), and when will they take effect?	e (e.g., ordinances, resolutions, local acts of th
7. Person completing form: Nancy J	ones, County Administrator	
7. Person completing form: Nancy J. Phone number: 912-427-5900	ones, County Administrator Date completed: 8-5-99	
Phone number: 912-427-5900	Date completed: 8-5-99	



PAGE 2

Instructions:

County: Wayne	Service: Library
1. Check the box that best describe	es the agreed upon delivery arrangement for this service:
checked, identify the government wayne County Library Board Service will be provided only	ntywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ment, authority or organization providing the service.) In the unincorporated portion of the county by a single service provider. (If this box is checked, nority or organization providing the service.)
☐ One or more cities will provide unincorporated areas. (If this	de this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	de this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
	, attach a legible map delineating the service area of each service provider, and identify the ser organization that will provide service within each service area.)
 In developing the strategy, were ☐ Yes ✓ No 	overlapping service areas, unnecessary competition and/or duplication of this service identified?
	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or .
	ted under the strategy, attach an implementation schedule listing each step or action that will be asible party and the agreed upon deadline for completing it.
	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Vayne County	General Fund
Vayne County School Board	General Fund
	e previous arrangements for providing and/or funding this service within the county? of Jesup funding for this service.

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
General Assembly, rate or fee cha	rill be used to implement the strategy for this service nges, etc.), and when will they take effect?	c.g., ordinances, resolutions, local acts of the
None		
None 7. Person completing form: Nancy	Jones, County Administrator	
	Jones, County Administrator Date completed: 8-5-99	
7. Person completing form: Nancy Phone number: 912-427-5900	Date completed: 8-5-99 ontacted by state agencies when evaluating whether	



PAGE 2

Instructions:

County: Wayne	Service: Mapping/GIS
1. Check the box that best describ	es the agreed upon delivery arrangement for this service:
	ntywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ment, authority or organization providing the service.)
☐ Service will be provided only	in the unincorporated portion of the county by a single service provider. (If this box is checked, hority or organization providing the service.)
	de this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	de this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
	, attach a legible map delineating the service area of each service provider, and identify the ner organization that will provide service within each service area.)
 In developing the strategy, were Yes ✓ No 	e overlapping service areas, unnecessary competition and/or duplication of this service identified?
	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or i.
	ted under the strategy, attach an implementation schedule listing each step or action that will be nsible party and the agreed upon deadline for completing it.
	ity that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Wayne County	General Fund
City of Jesup	General Fund
and the part that any and the property of the property of the party of	e previous arrangements for providing and/or funding this service within the county?
No change is anticipated.	

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
5. What other mechanisms (if any) v General Assembly, rate or fee cha	rill be used to implement the strategy for this service nges, etc.), and when will they take effect?	e (e.g., ordinances, resolutions, local acts of the
None		
None		
7. Person completing form: Nancy Phone number: 912-427-5900	Jones, County Administrator Date completed: 8-5-99 ontacted by state agencies when evaluating whether	



PAGE 2

Instructions:

County: Wayne	Service: Parks
. Check the box that best describe	s the agreed upon delivery arrangement for this service:
☐ Service will be provided coun checked, identify the government.	tywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is nent, authority or organization providing the service.)
	in the unincorporated portion of the county by a single service provider. (If this box is checked, ority or organization providing the service.)
	e this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
unincorporated areas. (If this wayne County, City of Jesup, City of O Other. (If this box is checked,	this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.) Idum, City of Screven attach a legible map delineating the service area of each service provider, and identify the errorganization that will provide service within each service area.)
2. In developing the strategy, were	overlapping service areas, unnecessary competition and/or duplication of this service identified?
	der the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but i.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
	ed under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
	y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
ocal Government or Authority:	Funding Method:
Vayne County	General Fund
ity of Jesup	General Fund
ity of Odum	General Fund
ity of Screven	General Fund
How will the strategy change the No change is anticipated.	previous arrangements for providing and/or funding this service within the county?

Agreement Name:	Contracting Portion	Effective and Ending Dates
Agreement Name.	Contracting Parties:	Effective and Ending Dates:
	anges, etc.), and when will they take effect?	
	Jones, County Administrator	
7. Person completing form: Nancy Phone number: 912-427-5900	Jones, County Administrator Date completed: 8-5-99	
7. Person completing form: Nancy Phone number: 912-427-5900	Date completed: 8-5-99	
7. Person completing form: Nancy Phone number: 912-427-5900 8. Is this the person who should be consistent with the service delive	Date completed: 8-5-99	



PAGE 2

Instructions:

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

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
General Assembly, rate or fee cha	will be used to implement the strategy for this service (anges, etc.), and when will they take effect?	e.g., ordinances, resolutions, local acts of t
	Jones, County Administrator Date completed: 8-5-99 ontacted by state agencies when evaluating whether p	roposed local government projects are



PAGE 2

Instructions:

agreed upon delivery arrangement for this service: e (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is authority or organization providing the service.) unincorporated portion of the county by a single service provider. (If this box is checked, or organization providing the service.) service only within their incorporated boundaries, and the service will not be provided in checked, identify the government(s), authority or organization providing the service.) service only within their incorporated boundaries, and the county will provide the service in checked, identify the government(s), authority or organization providing the service.) the a legible map delineating the service area of each service provider, and identify the anization that will provide service within each service area.) apping service areas, unnecessary competition and/or duplication of this service identified? the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but 6-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or der the strategy, attach an implementation schedule listing each step or action that will be party and the agreed upon deadline for completing it. will help to pay for this service and indicate how the service will be funded (e.g., enterprise
unincorporated portion of the county by a single service provider. (If this box is checked, or organization providing the service.) service only within their incorporated boundaries, and the service will not be provided in checked, identify the government(s), authority or organization providing the service.) service only within their incorporated boundaries, and the county will provide the service in checked, identify the government(s), authority or organization providing the service.) the a legible map delineating the service area of each service provider, and identify the anization that will provide service within each service area.) The apping service areas, unnecessary competition and/or duplication of this service identified? The strategy, attach an explanation for continuing the arrangement (i.e., overlapping but 6-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or the strategy, attach an implementation schedule listing each step or action that will be party and the agreed upon deadline for completing it. will help to pay for this service and indicate how the service will be funded (e.g., enterprise
service only within their incorporated boundaries, and the service will not be provided in checked, identify the government(s), authority or organization providing the service.) service only within their incorporated boundaries, and the county will provide the service in checked, identify the government(s), authority or organization providing the service.) the alegible map delineating the service area of each service provider, and identify the anization that will provide service within each service area.) apping service areas, unnecessary competition and/or duplication of this service identified? the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but 6-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or the strategy, attach an implementation schedule listing each step or action that will be party and the agreed upon deadline for completing it. will help to pay for this service and indicate how the service will be funded (e.g., enterprise
checked, identify the government(s), authority or organization providing the service.) service only within their incorporated boundaries, and the county will provide the service in checked, identify the government(s), authority or organization providing the service.) the a legible map delineating the service area of each service provider, and identify the anization that will provide service within each service area.) apping service areas, unnecessary competition and/or duplication of this service identified? the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but 6-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or the strategy, attach an implementation schedule listing each step or action that will be party and the agreed upon deadline for completing it. will help to pay for this service and indicate how the service will be funded (e.g., enterprise
checked, identify the government(s), authority or organization providing the service.) the a legible map delineating the service area of each service provider, and identify the anization that will provide service within each service area.) apping service areas, unnecessary competition and/or duplication of this service identified? the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but 6-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or the strategy, attach an implementation schedule listing each step or action that will be party and the agreed upon deadline for completing it. will help to pay for this service and indicate how the service will be funded (e.g., enterprise
anization that will provide service within each service area.) apping service areas, unnecessary competition and/or duplication of this service identified? The strategy, attach an explanation for continuing the arrangement (i.e., overlapping but 6-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or the strategy, attach an implementation schedule listing each step or action that will be party and the agreed upon deadline for completing it. will help to pay for this service and indicate how the service will be funded (e.g., enterprise
the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but 6-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or the strategy, attach an implementation schedule listing each step or action that will be party and the agreed upon deadline for completing it. will help to pay for this service and indicate how the service will be funded (e.g., enterprise
6-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or der the strategy, attach an implementation schedule listing each step or action that will be party and the agreed upon deadline for completing it. will help to pay for this service and indicate how the service will be funded (e.g., enterprise
party and the agreed upon deadline for completing it. will help to pay for this service and indicate how the service will be funded (e.g., enterprise
I service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
ling Method:
eral Fund, State, Fees, Fines and Forfeitures
ious arrangements for providing and/or funding this service within the county?

 List any formal service delivery agree service: 	ements or intergovernmental contracts that will be	be used to implement the strategy for this
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
911-1011		
What other mechanisms (if any) will General Assembly, rate or fee change None	be used to implement the strategy for this services, etc.), and when will they take effect?	e (e.g., ordinances, resolutions, local acts of the
7. Person completing form: Nancy Jo	nes, County Administrator	
Phone number: 912-427-5900	Date completed: 8-5-99	
Is this the person who should be contactions that the service delivery st	acted by state agencies when evaluating whether rategy? Yes No	proposed local government projects are
If not, provide designated contact per	son(s) and phone number(s) below:	



PAGE 2

Instructions:

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

List any formal service delivery agreen service:	nents or intergovernmental contracts that will b	be used to implement the strategy for this
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
		e (e.g., ordinances, resolutions, local acts of the
General Assembly, rate or fee changes. None	, etc.), and when will they take effect?	
7. Person completing form: Nancy Jone	es, County Administrator	
Phone number: 912-427-5900	Date completed: 8-5-99	
Is this the person who should be contact consistent with the service delivery straight from the provide designated contact person to the contact pers		proposed local government projects are
1 10 10 10 10 10 10 10 10 10 10 10 10 10		



PAGE 2

Instructions:

County: Wayne	Service: Public Housing
1. Check the box that best describe	s the agreed upon delivery arrangement for this service:
	sywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ent, authority or organization providing the service.)
	in the unincorporated portion of the county by a single service provider. (If this box is checked, ority or organization providing the service.)
unincorporated areas. (If this I	e this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.) e this service only within their incorporated boundaries, and the county will provide the service in
	box is checked, identify the government(s), authority or organization providing the service.)
	attach a legible map delineating the service area of each service provider, and identify the organization that will provide service within each service area.)
2. In developing the strategy, were ☐ Yes ☑ No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
	der the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but .A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
	ed under the strategy, attach an implementation schedule listing each step or action that will be sible party and the agreed upon deadline for completing it.
	y that will help to pay for this service and indicate how the service will be funded (e.g., enterprise pecial service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
City of Jesup Housing Authority	HUD and User Fees
How will the strategy change the No change is anticipated.	previous arrangements for providing and/or funding this service within the county?

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
General Assembly, rate or fee char	Il be used to implement the strategy for this service iges, etc.), and when will they take effect?	,
None		
	Jones, County Administrator	
	Jones, County Administrator Date completed: 8-5-99	
7. Person completing form: Nancy of Phone number: 912-427-5900	Date completed: 8-5-99 ntacted by state agencies when evaluating whether	proposed local government projects are



PAGE 2

Instructions:

County: Wayne	Service: Public Welfare
1. Check the box that best descri	ibes the agreed upon delivery arrangement for this service:
Service will be provided co	ountywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is mment, authority or organization providing the service.)
Service will be provided on	ally in the unincorporated portion of the county by a single service provider. (If this box is checked, athority or organization providing the service.)
One or more cities will pro- unincorporated areas. (If the	vide this service only within their incorporated boundaries, and the service will not be provided in its box is checked, identify the government(s), authority or organization providing the service.)
	vide this service only within their incorporated boundaries, and the county will provide the service in his box is checked, identify the government(s), authority or organization providing the service.)
	ed, attach a legible map delineating the service area of each service provider, and identify the other organization that will provide service within each service area.)
 In developing the strategy, we Yes ✓ No 	ere overlapping service areas, unnecessary competition and/or duplication of this service identified?
	under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or d).
	nated under the strategy, attach an implementation schedule listing each step or action that will be consible party and the agreed upon deadline for completing it.
	ority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise s, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Vayne County	General Fund and State
	the previous arrangements for providing and/or funding this service within the county?
No change is anticipated.	

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
5. What other machanisms (if any) will b	be used to implement the strategy for this service	
	s, etc.), and when will they take effect?	(e.g., ordinarious, resolutions, rocal acts of the
None		
None		
None		
None 7. Person completing form: Nancy Jor	nes, County Administrator	
	nes, County Administrator Date completed: 8-5-99	
7. Person completing form: Nancy Jor Phone number: 912-427-5900	Date completed: 8-5-99	proposed local government projects are



PAGE 2

Instructions:

County: Wayne	Service: Recreation
1. Check the box that best describ	es the agreed upon delivery arrangement for this service:
	ntywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is nent, authority or organization providing the service.)
☐ Service will be provided only	in the unincorporated portion of the county by a single service provider. (If this box is checked, ority or organization providing the service.)
	de this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	le this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
	attach a legible map delineating the service area of each service provider, and identify the er organization that will provide service within each service area.)
2. In developing the strategy, were ☐ Yes ☑ No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but 5.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
	ted under the strategy, attach an implementation schedule listing each step or action that will be asible party and the agreed upon deadline for completing it.
	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Wayne County	General Fund and User Fees
 How will the strategy change the No change is anticipated. 	e previous arrangements for providing and/or funding this service within the county?

List any formal service delivery agree service:	ments or intergovernmental contracts that will be	e used to implement the strategy for this
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
General Assembly, rate or fee change: None	e used to implement the strategy for this service s, etc.), and when will they take effect?	
7. Person completing form: Nancy Jor	nes, County Administrator	
Phone number: 912-427-5900	Date completed: 8-5-99	
8. Is this the person who should be conta consistent with the service delivery str	cted by state agencies when evaluating whether rategy? Yes No	proposed local government projects are
If not, provide designated contact pers	on(s) and phone number(s) below:	

PAGE 2

Instructions:

County: Wayne	Service: Recycling
1. Check the box that best describ	es the agreed upon delivery arrangement for this service:
checked, identify the government of Jesup	ntywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ment, authority or organization providing the service.) In the unincorporated portion of the county by a single service provider. (If this box is checked,
	nority or organization providing the service.)
	de this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	de this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
	, attach a legible map delineating the service area of each service provider, and identify the service organization that will provide service within each service area.)
 In developing the strategy, were Yes No 	overlapping service areas, unnecessary competition and/or duplication of this service identified?
	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or .
	ted under the strategy, attach an implementation schedule listing each step or action that will be usible party and the agreed upon deadline for completing it.
	ity that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
City of Jesup	User Fees and Material Sales
Vayne County	General Fund
City of Screven	General Fund
The City of Jesup will continu payment for a prison work de	e previous arrangements for providing and/or funding this service within the county? e to operate and maintain a recycling center located in the City. The County will assume tail that mans the facility. The City of Screven has applied for a grant in order to obtain ecting recyclable materials in the city. These materials would then be transported to the

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
and the same of th	es, etc.), and when will they take effect?	
7. Person completing form: Nancy Jo	ones, County Administrator	
7. Person completing form: Nancy Jo Phone number: 912-427-5900	ones, County Administrator Date completed: 8-5-99	
7. Person completing form: Nancy Jo Phone number: 912-427-5900	ones, County Administrator Date completed: 8-5-99 tacted by state agencies when evaluating whether strategy?	

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
	ill be used to implement the strategy for this servic nges, etc.), and when will they take effect?	e (e.g., ordinances, resolutions, local acts of t
None		
7 Person completing form: Nancy	Jones, County Administrator	
7. Person completing form: Nancy Phone number: 912-427-5900	Jones, County Administrator Date completed: 8-5-99	
	Date completed: 8-5-99 ontacted by state agencies when evaluating whether	



PAGE 2

Instructions:

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

County: Wayne	Service: Roads/Street Construction
1. Check the box that best describe	es the agreed upon delivery arrangement for this service:
☐ Service will be provided cour checked, identify the government	ntywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is nent, authority or organization providing the service.)
 Service will be provided only identify the government, auth 	in the unincorporated portion of the county by a single service provider. (If this box is checked, nority or organization providing the service.)
 One or more cities will provide unincorporated areas. (If this 	de this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
unincorporated areas. (If this Wayne County, City of Jesup, City of Other. (If this box is checked	de this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.) Screven, City of Odum, attach a legible map delineating the service area of each service provider, and identify the per organization that will provide service within each service area.)
2. In developing the strategy, were ☐ Yes ☑ No	overlapping service areas, unnecessary competition and/or duplication of this service identified?
	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or .
	ted under the strategy, attach an implementation schedule listing each step or action that will be asible party and the agreed upon deadline for completing it.
	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Wayne County	General Fund
City of Jesup	General Fund
City of Odum	General Fund
City of Screven	General Fund
	e previous arrangements for providing and/or funding this service within the county?

The County will take over all basing for streets in the cities.

PAGE 2

Instructions:

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

County: Wayne		_ Service:	Roads/Street Maintenance
1. Check the box that best describe	es the agreed upon delive	ry arrangemen	t for this service:
 Service will be provided cour checked, identify the government 			incorporated areas) by a single service provider. (If this box is g the service.)
☐ Service will be provided only identify the government, authorized the service of the service			unty by a single service provider. (If this box is checked, rice.)
			rated boundaries, and the service will not be provided in at(s), authority or organization providing the service.)
unincorporated areas. (If this Wayne County, City of Jesup, City of	box is checked, identify to Odum, City of Screven , attach a legible map de	the government elineating the	rated boundaries, and the county will provide the service in at(s), authority or organization providing the service.) service area of each service provider, and identify the within each service area.)
2. In developing the strategy, were ☐ Yes ☑ No	overlapping service area	is, unnecessary	competition and/or duplication of this service identified?
	G.A. 36-70-24(1)), overrie		n for continuing the arrangement (i.e., overlapping but of the duplication, or reasons that overlapping service areas or
If these conditions will be eliminal taken to eliminate them, the respon			mentation schedule listing each step or action that will be ne for completing it.
			and indicate how the service will be funded (e.g., enterprise notel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:		
Wayne County	General Fund		
City of Jesup	General Fund		
City of Odum	General Fund		
City of Screven	General Fund		
4. How will the streetery change th	A provious among among to	for providing	and/or funding this service within the county?

4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?
The County will take over maintenance at the same level in the cities as the county performs in the unincorporated areas, including drainage ditches. An agreement will be written and implemented by Jan. 1, 2000. The county will take over two prison work details, one to work at the recycling center and the other to work primarily in the City of Jesup.

The Road Maintenance Prison Detail will work under the Direction of the City of Jesup Department Head of Street and Sanitation with the concurrence of Wayne County Public Works Superintendent.

Agreement Name:	Contracting Parties:	Effective and F. E. D.
Agreement Name,	Contracting Parties:	Effective and Ending Dates:
	be used to implement the strategy for this service (e	.g., ordinances, resolutions, local acts of the
	es, etc.), and when will they take effect?	
None		
7. Person completing form: Nancy Jo Phone number: 912-427-5900	nes, County Administrator Date completed: 8-5-99 acted by state agencies when evaluating whether pro	oposed local government projects are

PAGE 2

Instructions:

County: Wayne	Service: Sewer
1. Check the box that best describe	es the agreed upon delivery arrangement for this service:
 Service will be provided coun checked, identify the govern 	ntywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ment, authority or organization providing the service.)
	in the unincorporated portion of the county by a single service provider. (If this box is checked, nority or organization providing the service.)
	de this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	de this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
government, authority, or oth	, attach a legible map delineating the service area of each service provider, and identify the net organization that will provide service within each service area.)
City of Jesup, City of Odum, City of 2. In developing the strategy, were ☐ Yes ☑ No	e overlapping service areas, unnecessary competition and/or duplication of this service identified?
	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or .
	ted under the strategy, attach an implementation schedule listing each step or action that will be usible party and the agreed upon deadline for completing it.
	ity that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
City of Jesup	Enterprise Fund
City of Odum	Enterprise Fund
City of Screven	Enterprise Fund
4. How will the strategy change th No change is anticipated.	e previous arrangements for providing and/or funding this service within the county?

service:	livery agreements or intergovernmen	ntal contracts that will be used t	to implement the strategy for this
Agreement Name:	Contracting I	Parties:	Effective and Ending Dates:
	fee changes, etc.), and when will the		ordinances, resolutions, local acts of the
	N		
	Nancy Jones, County Administra		
7. Person completing form: Phone number: 912-427-		ator Date completed: 8-5-99	
Phone number: 912-427-8. Is this the person who shou		Date completed: 8-5-99	ed local government projects are
Phone number: 912-427- 8. Is this the person who show consistent with the service If not, provide designated of	5900 D	Date completed: 8-5-99 then evaluating whether propose	ed local government projects are



PAGE 2

Instructions:

County: Wayne	Service: Solid Waste Management
1. Check the box that best de	scribes the agreed upon delivery arrangement for this service:
	countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is vernment, authority or organization providing the service.)
☐ Service will be provided identify the government	only in the unincorporated portion of the county by a single service provider. (If this box is checked, authority or organization providing the service.)
☐ One or more cities will p unincorporated areas. (I	provide this service only within their incorporated boundaries, and the service will not be provided in f this box is checked, identify the government(s), authority or organization providing the service.)
unincorporated areas. (If Wayne County, City of Jesup, □ Other. (If this box is che	provide this service only within their incorporated boundaries, and the county will provide the service in f this box is checked, identify the government(s), authority or organization providing the service.) City of Odum, City of Screven, Wayne County Solid Waste Authority (landfill - countywide) cked, attach a legible map delineating the service area of each service provider, and identify the or other organization that will provide service within each service area.)
 In developing the strategy, Yes ✓ No 	were overlapping service areas, unnecessary competition and/or duplication of this service identified?
higher levels of service (See 6 competition cannot be eliminated these conditions will be eliminated these conditions will be eliminated to the service of the service (See 6).	the under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or ated). In the strategy, attach an implementation schedule listing each step or action that will be esponsible party and the agreed upon deadline for completing it.
	athority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise nds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Author	ity: Funding Method:
Vayne County	Insurance Premium Taxes, Alcohol Bev. Tax
City of Jesup	General Fund & User Fees
ity of Odum	General Fund & User Fees
city of Screven	General Fund & User Fees
4. How will the strategy chan No change is anticipated	ge the previous arrangements for providing and/or funding this service within the county?

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
6. What other mechanisms (if any) wi	I be used to implement the strategy for this service	(a.g. ordinances regulations local esta of th
General Assembly, rate or fee chan	ges, etc.), and when will they take effect?	
None		
None		
7. Person completing form: Nancy S Phone number: 912-427-5900	ones, County Administrator Date completed: 8-5-99 ntacted by state agencies when evaluating whether	proposed local government projects are



PAGE 2

Instructions:

	Service: Tax Assessment
1. Check the box that best d	describes the agreed upon delivery arrangement for this service:
	ed countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is government, authority or organization providing the service.)
☐ Service will be provide	ed only in the unincorporated portion of the county by a single service provider. (If this box is checked, nt, authority or organization providing the service.)
	l provide this service only within their incorporated boundaries, and the service will not be provided in (If this box is checked, identify the government(s), authority or organization providing the service.)
	l provide this service only within their incorporated boundaries, and the county will provide the service in (If this box is checked, identify the government(s), authority or organization providing the service.)
	hecked, attach a legible map delineating the service area of each service provider, and identify the , or other organization that will provide service within each service area.)
 In developing the strategy Yes ✓ No 	y, were overlapping service areas, unnecessary competition and/or duplication of this service identified?
	tinue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but e O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or inated).
	eliminated under the strategy, attach an implementation schedule listing each step or action that will be eresponsible party and the agreed upon deadline for completing it.
	authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
indebtedness, etc.).	H.
	ority: Funding Method:
indebtedness, etc.). Local Government or Author Wayne County	ority: Funding Method: General Fund
Local Government or Author	
Local Government or Author	
Local Government or Authonomy Nayne County 4. How will the strategy cha	General Fund ange the previous arrangements for providing and/or funding this service within the county?
Local Government or Authon Wayne County	General Fund ange the previous arrangements for providing and/or funding this service within the county?
Local Government or Authonomy Nayne County 4. How will the strategy cha	General Fund ange the previous arrangements for providing and/or funding this service within the county?
Local Government or Author Wayne County 4. How will the strategy cha	General Fund ange the previous arrangements for providing and/or funding this service within the county?
Local Government or Author Wayne County 4. How will the strategy cha	General Fund ange the previous arrangements for providing and/or funding this service within the county?
Local Government or Author Wayne County 4. How will the strategy cha	General Fund ange the previous arrangements for providing and/or funding this service within the county?
Local Government or Author Wayne County 4. How will the strategy cha	General Fund ange the previous arrangements for providing and/or funding this service within the county?
Local Government or Author Wayne County 4. How will the strategy cha	General Fund ange the previous arrangements for providing and/or funding this service within the county? ed.

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
	200	
General Assembly, rate or fee char	nges, etc.), and when will they take effect?	e (e.g., ordinances, resolutions, local acts of the
General Assembly, rate or fee char None	iges, etc.), and when will they take effect?	e (e.g., ordinances, resolutions, local acts of the
	iges, etc.), and when will they take effect?	
General Assembly, rate or fee char None 7. Person completing form: Nancy Phone number: 912-427-5900	Jones, County Administrator Date completed: 8-5-99 Intacted by state agencies when evaluating whether	

PAGE 2

Instructions:

1. Check the box that best describes the agreed upon delivery arrangement for this service: Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.) Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.) One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service. (If this box is checked, identify the government(s), authority or organization providing the service.) One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service. (If this box is checked, identify the government(s), authority or organization providing the service.	Service: Tax Collection
checked, identify the government, authority or organization providing the service.) Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.) One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) ✓ One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) ✓ 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.) ✓ One or more cities will provide the 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.) ✓ One or more cities will provide this service only within their incorporated boundaries, and the service will provide the service in unincorporated boundaries, and the serv	es the agreed upon delivery arrangement for this service:
One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) ✓ One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) ✓ Other. (If this box is checked, attach a legible map delineating the service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.) 2. In developing the strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified? ☐ Yes ✓ No If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of competition cannot be eliminated. If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.). Local Government or Authority: Funding Method: Wayne County General Fund Gly of Screven General Fund General Fund A. How will the strategy change the previous arrangements for providing and/or funding this serv	
unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) Wayne County, City of Josup, City of Odum, City of Serveen 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.) In developing the strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified? Yes No If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or competition cannot be eliminated. If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.). Local Government or Authority: Funding Method: Wayne County General Fund Gy of Jesup General Fund A. How will the strategy change the previous arrangements for providing and/or funding this service within the county?	
unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.) Wayne County General Fund Lity of Soreven Unincorporated areas. (If this box is checked, identify the government(s), authority or organization provides service area of each service provider, and identify the government, authority, or other organization that will provide service within each service area.) 2. In developing the strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified? Yes No If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or competition cannot be eliminated). If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.). Local Government or Authority: Funding Method: Wayne County General Fund General Fund General Fund A. How will the strategy change the previous arrangements for providing and/or funding this service within the county?	
2. In developing the strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified? \[\textstyle{\mathbb{Z}}\] No If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of competition cannot be eliminated. If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.). Local Government or Authority: Funding Method: Mayne County	box is checked, identify the government(s), authority or organization providing the service.) Odum, City of Screven , attach a legible map delineating the service area of each service provider, and identify the
If these conditions will continue under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas o competition cannot be eliminated). If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.). Local Government or Authority: Funding Method: Wayne County General Fund City of Jesup General Fund General Fund General Fund General Fund How will the strategy change the previous arrangements for providing and/or funding this service within the county?	
higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas of competition cannot be eliminated). If these conditions will be eliminated under the strategy, attach an implementation schedule listing each step or action that will be taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.). Local Government or Authority: Funding Method: Wayne County General Fund City of Jesup General Fund City of Odum General Fund General Fund At How will the strategy change the previous arrangements for providing and/or funding this service within the county?	
taken to eliminate them, the responsible party and the agreed upon deadline for completing it. 3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g., enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded indebtedness, etc.). Local Government or Authority: Funding Method: Wayne County General Fund City of Jesup General Fund City of Odum General Fund City of Screven General Fund 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?	G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas o
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: Wayne County General Fund City of Jesup General Fund City of Odum General Fund City of Screven General Fund 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?	
Wayne County General Fund City of Jesup General Fund City of Odum General Fund City of Screven General Fund 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?	
City of Jesup General Fund City of Odum General Fund City of Screven General Fund 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?	Funding Method:
City of Odum General Fund General Fund 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?	General Fund
City of Screven General Fund 4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?	General Fund
4. How will the strategy change the previous arrangements for providing and/or funding this service within the county?	General Fund
	General Fund
	e previous arrangements for providing and/or funding this service within the county?
No change is anticipated.	

service:		
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
7. Person completing form: Nancy Jone	s, County Administrator	
7. Person completing form: Nancy Jone Phone number: 912-427-5900	s, County Administrator Date completed: 8-5-99	
Phone number: 912-427-5900	Date completed: 8-5-99 ed by state agencies when evaluating whether pr	roposed local government projects are
Phone number: 912-427-5900 8. Is this the person who should be contact.	Date completed: 8-5-99 ed by state agencies when evaluating whether pregy? ✓ Yes □ No	roposed local government projects are

PAGE 2

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

Instructions:

County: Wayne	Service: Tourism
1. Check the box that best descri	bes the agreed upon delivery arrangement for this service:
checked, identify the govern Wayne County Tourism Board Service will be provided on	intywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ament, authority or organization providing the service.) by in the unincorporated portion of the county by a single service provider. (If this box is checked, thority or organization providing the service.)
	ide this service only within their incorporated boundaries, and the service will not be provided in s box is checked, identify the government(s), authority or organization providing the service.)
	ide this service only within their incorporated boundaries, and the county will provide the service in s box is checked, identify the government(s), authority or organization providing the service.)
	d, attach a legible map delineating the service area of each service provider, and identify the ther organization that will provide service within each service area.)
 In developing the strategy, we ☐ Yes ✓ No 	re overlapping service areas, unnecessary competition and/or duplication of this service identified?
If these conditions will continue higher levels of service (Sec O.C competition cannot be eliminated	under the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or).
If these conditions will be elimin taken to eliminate them, the response	ated under the strategy, attach an implementation schedule listing each step or action that will be onsible party and the agreed upon deadline for completing it.
 List each government or author funds, user fees, general funds indebtedness, etc.). 	rity that will help to pay for this service and indicate how the service will be funded (e.g., enterprise, special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Vayne County	Hotel/Motel Tax
City of Jesup	Hotel/Motel Tax
city of Odum	Hotel/Motel Tax
City of Screven	Hotel/Motel Tax
4. How will the strategy change t No change is anticipated.	he previous arrangements for providing and/or funding this service within the county?

List any formal service delivery agreed service:	ments or intergovernmental contracts that will b	e used to implement the strategy for this
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
General Assembly, rate or fee change. None	be used to implement the strategy for this service s, etc.), and when will they take effect?	
7. Person completing form: Nancy Jor	nes, County Administrator	
Phone number: 912-427-5900	Date completed: 8-5-99	
9 In this the manner who should be some		
consistent with the service delivery st	acted by state agencies when evaluating whether rategy? Yes No	proposed local government projects are
	rategy? 🗹 Yes 🗆 No	proposed local government projects are

PAGE 2 (continued)

(A) ____

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2

Instructions:

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

County: Wayne	Service: Voter Registration
1. Check the box that best describe	es the agreed upon delivery arrangement for this service:
	ntywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is ment, authority or organization providing the service.)
	in the unincorporated portion of the county by a single service provider. (If this box is checked, nority or organization providing the service.)
	de this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	de this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
	attach a legible map delineating the service area of each service provider, and identify the er organization that will provide service within each service area.)
 In developing the strategy, were ☐ Yes ✓ No 	overlapping service areas, unnecessary competition and/or duplication of this service identified?
If these conditions will continue un higher levels of service (See O.C.Competition cannot be eliminated)	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
	ted under the strategy, attach an implementation schedule listing each step or action that will be asible party and the agreed upon deadline for completing it.
	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
Vayne County	General Fund
ity of Jesup	General Fund
ity of Odum	General Fund
city of Screven	General Fund
No change is anticipated. The	e previous arrangements for providing and/or funding this service within the county? county provides the service to both the unincorporated and incorporated areas. fill accept those who wish to walk in and register at that location.

List any formal service delivery ag service:	reements or intergovernmental contracts that will be	e used to implement the strategy for this
Agreement Name:	Contracting Parties:	Effective and Ending Dates:
	ill be used to implement the strategy for this service nges, etc.), and when will they take effect?	(e.g., ordinances, resolutions, rocar acts of the
7. Person completing form: Nancy	Jones, County Administrator	
Phone number: 912-427-5900	Date completed: 8-5-99	
Is this the person who should be consistent with the service deliver	ontacted by state agencies when evaluating whether y strategy? Yes No	proposed local government projects are
	person(s) and phone number(s) below:	
Also, Mike Deal, Jesup City Ma	nager, 912-427-1313	A STATE OF THE STA

PAGE 2 (continued)

SERVICE DELIVERY STRATEGY SUMMARY OF SERVICE DELIVERY ARRANGEMENTS

PAGE 2

Instructions:

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

County: Wayne	Service: Water
1. Check the box that best describe	es the agreed upon delivery arrangement for this service:
	itywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is nent, authority or organization providing the service.)
	in the unincorporated portion of the county by a single service provider. (If this box is checked, ority or organization providing the service.)
	de this service only within their incorporated boundaries, and the service will not be provided in box is checked, identify the government(s), authority or organization providing the service.)
	de this service only within their incorporated boundaries, and the county will provide the service in box is checked, identify the government(s), authority or organization providing the service.)
government, authority, or oth	attach a legible map delineating the service area of each service provider, and identify the er organization that will provide service within each service area.)
,	overlapping service areas, unnecessary competition and/or duplication of this service identified? he service for its incorporated area and the surrounding area.
	nder the strategy, attach an explanation for continuing the arrangement (i.e., overlapping but G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or
	ned under the strategy, attach an implementation schedule listing each step or action that will be asible party and the agreed upon deadline for completing it.
	ty that will help to pay for this service and indicate how the service will be funded (e.g., enterprise special service district revenues, hotel/motel taxes, franchise taxes, impact fees, bonded
Local Government or Authority:	Funding Method:
City of Jesup	Enterprise Fund
City of Odum	Enterprise Fund
City of Screven	Enterprise Fund
 How will the strategy change the No change is anticipated. 	e previous arrangements for providing and/or funding this service within the county?

Agreement Name:	Contracting Parties:	Effective and Ending Dates:
General Assembly, rate or fee chang None	be used to implement the strategy for this service es, etc.), and when will they take effect?	
	ones, County Administrator	
	ones, County Administrator Date completed: 8-5-99	
7. Person completing form: Nancy Jo Phone number: 912-427-5900	Date completed: 8-5-99 tacted by state agencies when evaluating whether	
7. Person completing form: Nancy Jo Phone number: 912-427-5900 8. Is this the person who should be con	Date completed: 8-5-99 tacted by state agencies when evaluating whether strategy? Yes No	

PAGE 2 (continued)



SERVICE DELIVERY STRATEGY SUMMARY OF LAND USE AGREEMENTS

PAGE 3

Instructions:

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

County: Wayne		
1. What incompatibilities or conflicts between the service delivery strategy? None	e land use plans of local governmen	ts were identified in the process of developing the
2. Check the boxes indicating how these incompa	atibilities or conflicts were addressed	d:
☐ amendments to existing comprehensive plan	s	Note: If the necessary plan amendments, regulations, ordinances, etc. have not yet been
 ☐ adoption of a joint comprehensive plan ☐ other measures (amend zoning ordinances, a second comprehensive plan) 	add environmental regulations, etc.	formally adopted, indicate when each of the affected local governments will adopt them.
If "other measures" was checked, describe these		difected total governments was adopt ment.
 Summarize the process that will be used to res areas to be annexed into a city. If the conflict 	olve disputes when a county disagre resolution process will vary for diff	es with the proposed land use classification(s) for erent cities in the county, summarize each proces
Wayne County and its municipalities have a property annexation and land use. (Copy a		ablishes a process for handling disputes on
4. What policies, procedures and/or processes ha	ave been established by local govern	nments (and water and sewer authorities) to ensur
extraterritorial water and sewer service is c	um, and Screven have adopted a ompatible with land use plans ar	a joint resolution to insure that any proposed nd ordinances of the territory of the adjoining
local government in which the new service	is to be extended. (Copy attache	(4)
5. Person completing form: Nancy Jones, Cou	ntv Administrator	
Phone number: 912-427-5900	Date completed: 8-5	-99
Is this the person who should be contacted by consistent with land use plans of applicable ju	state agencies when evaluating whe risdictions? Yes No	ther proposed local government projects are
If not, provide designated contact person(s) an		





SERVICE DELIVERY STRATEGY CERTIFICATIONS

Instructions:

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

SERVICE DELIVERY STRATEGY FOR Wayne

COUNTY

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

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

SIGNATURE:	NAME: (Please print or type)	TITLE:	JURISDICTION:	DATE:
Hear Asali	Gene Graham	Chairman	Wayne County Commissioners	
Nab Sha	Herb Shaw	Mayor	City of Jesup	
Juhrey Mans	Lawrence "Bill" Moseley	Mayor	City of Odum	
Bill Mose	Lawrence "Bill" Moseley	Mayor	City of Screven	

AUG 3 1 2004



36-70-24 (3));

SERVICE DELIVERY STRATEGY UPDATE CERTIFICATIONS

Instructions;

This two page form most, at a minimum, be signed by an authorized representative of the following governments: 1) the county; 2) the city serving as the county sent; 3) all cities having a 2000 population of over 9,000 residing within the county; and 4) no less than 50% of all other cities with a 2000 population of between 500 and 9,000 residing within the county. Cities with a 2000 population below 500 and local authorities providing services under the strategy are not required to sign this form, but are encouraged to do so.

	UPDATED SERVICE DELIVERY STRATEGY FOR WAYNE	COUNTY
1	We, the undersigned authorized representatives of the jurisdictions listed below, certify that:	Counti
1	We have reviewed our existing Service Delivery Strategy and have determined that: (Check only one box for question #1)	*
	A. Our Strategy continues to accurately reflect our preferred arrangements for providing county and no changes in our Strategy are needed at this time; or	ng local services throughout or
	☐ B. Our Strategy has been revised to reflect our preferred arrangements for providing loc	al services.
H	Option A is selected, only this form, signed by the appropriate local government representatives n	nust be provided to DCA.
M	Option B is selected, this form, signed by the appropriate local government representatives, must ith:	be submitted to DCA along
	 an updated "Summary of Service Arrangements" form (page 2) for each local service that any supporting local agreements pertaining to each of these services that has been revised an updated service area map depicting the agreed upon service area for each provider if the provider for each service that has been revised/updated within the county, and if the agreed coincide with local political boundaries. 	updated; and
2_	Each of our governing bodies (County Commission and City Councils) that are a party to this st resolutions agreeing to the Service Delivery arrangements identified in our strategy and have eximplementation of our service delivery strategy (O.C.G.A. 36-70-21);	rategy have adopted ecuted agreements for
3.	Our service delivery strategy continues to promote the delivery of local government services in t and responsive manner for all residents, individuals and property owners throughout the county	the most efficient, effective, (O.C.G.A. 36-70-24(1));
1.	Our service delivery strategy continues to provide that water or sewer fees charged to customers geographic boundaries of a service provider are reasonable and are not arbitrarily higher than the located within the geographic boundaries of the service provider (O.C.G.A. 36-70-24 (2));	located outside the fees charged to customers
	Our service delivery strategy continues to ensure that the cost of any services the county governments jointly funded by the county and one or more municipalities) primarily funded by the county and one or more municipalities)	nent 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.

- Our Service Delivery Strategy continues to ensure that the officially adopted County and City land use plans of all local governments located in the County are compatible and nonconflicting (O.C.G.A. 36-70-24 (4)(A));
- Our Service Delivery Strategy continues to ensure that the provision of extraterritorial water and sewer services by any
 jurisdiction is consistent with all County and City land use plans and ordinances (O.C.G.A. 36-70-24 (4)(B)); and
- Our Service Delivery Strategy continues to contain an agreed upon process between the county government and each city
 located in the county to resolve land use classification disputes when the county objects to the proposed land use of an area to
 be annexed into a city within the county (O.C.G.A. 36-70-24 (4)(C))³ and;
- DCA has been provided a copy of this certification and copies of all forms, maps and supporting agreements needed to accurately depict our agreed upon strategy (O.C.G.A. 36-70-27).

'If the County does not have an Armexation/Land Use dispute resolution process with each of its cities, list the cities where no agreed upon process exists:

SIGNATURE:	NAME: (Please print or type)	TITLE;	JURISDICTION:	DATE:
Jone Arch.	Gene Graham	Chairman	Wayne County Commissioners	8-13-04
Nab Stan	Herb Shaw	Mayor	City of Jesup	8-13-04
when flange	Aubrey Mansfield	Мауог	City of Odum	8-13-04
rock Byt	Donald Boyette	Mayor	City of Screven	8-13-04
		\$		
				_
*				
				•:
*	*			
	X *			

APPENDIX E

Local Government Transmittal Resolutions

Wayne County
City of Jesup
City of Odum
City of Screven

WHEREAS, the Georgia Planning Act of 1989 requires all local governments in Georgia to prepare a comprehensive plan, and the Comprehensive Solid Waste Management Act of 1990 requires all local governments to prepare a solid waste management plan; and

WHEREAS, the Georgia Department of Community Affairs has established "Minimum Planning Standards and Procedures" under the Georgia Planning Act of 1989 for coordinated and comprehensive planning, including standards and procedures for the preparation of local comprehensive plans and implementation thereof, public participation, and coordinated review; and similar "Minimum Planning Standards and Procedures" under the Comprehensive Solid Waste Management Act of 1990; and

WHEREAS, Wayne County, Georgia has participated with the cities of Jesup, Odum, and Screven in a coordinated and comprehensive planning process under the Georgia Planning Act of 1989, the Comprehensive Solid Waste Management Act of 1990, and both of the Minimum Planning Standards and Procedures through the Wayne County Comprehensive Plan Executive and Local Plan Coordination committees, and with the assistance of the Heart of Georgia Altamaha Regional Development Center, to update its existing adopted comprehensive plans and solid waste plans with new full plan updates;

WHEREAS, this coordinated and comprehensive planning process has resulted in the new joint plans, The Joint Wayne County Comprehensive Plan: Wayne County, Jesup, Odum, and Screven 2025, and The Joint Wayne County Solid Waste Management Plan 2014, including separate "Five-Year Short-Term Work Programs" for Wayne County in each plan;

WHEREAS, requirements for public participation in the development of these comprehensive and solid waste management plans as mandated by the appropriate Minimum Planning Standards and Procedures have been met, including an initial joint public hearing prior to development of the plans held on January 6, 2004 to receive input, and a final public hearing held on June 29, 2004 to brief the public on the draft plans and receive further input prior to submission of the plans for review and comment; and

WHEREAS, Wayne County has participated in the development, reviewed, and approved both The Joint Wayne County Comprehensive Plan and The Joint Wayne County Solid Waste Management Plan, including the Wayne County Short-Term Work Programs, as its local comprehensive plan under the Georgia Planning Act of 1989 and as a guide for its future growth and development, and as its solid waste management plan under the Comprehensive Solid Waste Management Act of 1990, respectively.

NOW, THEREFORE BE IT RESOLVED that the Wayne County Board of Commissioners certifies that public participation and other requirements of the Minimum Planning Standards and Procedures for both plans have been met, and that The Joint Wayne County Comprehensive Plan: Wayne County, Jesup, Odum, and Screven 2025, and the Joint Wayne County Solid Waste Management Plan 2014 are hereby authorized to be submitted to the Heart of Georgia Altamaha Regional Development Center and the Georgia Department of Community Affairs for formal review, comment, and recommendation before formal adoption of both plans by the Wayne County Board of Commissioners as mandated by Georgia law and the Georgia Department of Community Affairs.

SO RESOLVED, this /Zaday of July, 2004.

ATTEST: Hancy Jones

RESOLUTION

WHEREAS, the Georgia Planning Act of 1989 requires all local governments in Georgia to prepare a comprehensive plan, and the Comprehensive Solid Waste Management Act of 1990 requires all local governments to prepare a solid waste management plan; and

WHEREAS, the Georgia Department of Community Affairs has established "Minimum Planning Standards and Procedures" under the Georgia Planning Act of 1989 for coordinated and comprehensive planning, including standards and procedures for the preparation of local comprehensive plans and implementation thereof, public participation, and coordinated review; and similar "Minimum Planning Standards and Procedures" under the Comprehensive Solid Waste Management Act of 1990; and

WHEREAS, the City of Jesup, Georgia has participated with Wayne County and the cities of Odum and Screven in a coordinated and comprehensive planning process under the Georgia Planning Act of 1989, the Comprehensive Solid Waste Management Act of 1990, and both of the Minimum Planning Standards and Procedures through the Wayne County Comprehensive Plan Executive and Local Plan Coordination committees, and with the assistance of the Heart of Georgia Altamaha Regional Development Center, to update its existing adopted comprehensive plans and solid waste plans with new full plan updates;

WHEREAS, this coordinated and comprehensive planning process has resulted in the new joint plans, The Joint Wayne County Comprehensive Plan: Wayne County, Jesup, Odum, and Screven 2025, and The Joint Wayne County Solid Waste Management Plan 2014, including separate "Five-Year Short-Term Work Programs" for the City of Jesup in each plan;

WHEREAS, requirements for public participation in the development of these comprehensive and solid waste management plans as mandated by the appropriate Minimum Planning Standards and Procedures have been met, including an initial joint public hearing prior to development of the plans held on January 6, 2004 to receive input, and a final public hearing held on June 29, 2004 to brief the public on the draft plans and receive further input prior to submission of the plans for review and comment, and

WHEREAS, the City of Jesup has participated in the development, reviewed, and approved both The Joint Wayne County Comprehensive Plan and The Joint Wayne County Solid Waste Management Plan, including the City of Jesup Short-Term Work Programs, as its local comprehensive plan under the Georgia Planning Act of 1989 and as a guide for its future growth and development, and as its solid waste management plan under the Comprehensive Solid Waste Management Act of 1990, respectively.

NOW, THEREFORE BE IT RESOLVED that the Mayor and City Commissioners of the City of Jesup certify that public participation and other requirements of the Minimum Planning Standards and Procedures for both plans have been met, and that The Joint Wayne County Comprehensive Plan: Wayne County, Jesup, Odum, and Screven 2025, and the Joint Wayne County Solid Waste Management Plan 2014 are hereby authorized to be submitted to the Heart of Georgia Altamaha Regional Development Center and the Georgia Department of Community Affairs for formal review, comment, and recommendation before formal adoption of both plans by the City of Jesup as mandated by Georgia law and the Georgia Department of Community Affairs.

SO RESOLVED, this \(\text{day of July, 2004.} \)

BY: Mike Deaf

ATTEST: Conda Cake la cordard

WHEREAS, the Georgia Planning Act of 1989 requires all local governments in Georgia to prepare a comprehensive plan, and the Comprehensive Solid Waste Management Act of 1990 requires all local governments to prepare a solid waste management plan; and

WHEREAS, the Georgia Department of Community Affairs has established "Minimum Planning Standards and Procedures" under the Georgia Planning Act of 1989 for coordinated and comprehensive planning, including standards and procedures for the preparation of local comprehensive plans and implementation thereof, public participation, and coordinated review; and similar "Minimum Planning Standards and Procedures" under the Comprehensive Solid Waste Management Act of 1990; and

WHEREAS, the City of Odum, Georgia has participated with Wayne County and the cities of Jesup and Screven in a coordinated and comprehensive planning process under the Georgia Planning Act of 1989, the Comprehensive Solid Waste Management Act of 1990, and both of the Minimum Planning Standards and Procedures through the Wayne County Comprehensive Plan Executive and Local Plan Coordination committees, and with the assistance of the Heart of Georgia Altamaha Regional Development Center, to update its existing adopted comprehensive plans and solid waste plans with new full plan updates;

WHEREAS, this coordinated and comprehensive planning process has resulted in the new joint plans, The Joint Wayne County Comprehensive Plan: Wayne County, Jesup, Odum, and Screven 2025, and The Joint Wayne County Solid Waste Management Plan 2014, including separate "Five-Year Short-Term Work Programs" for the City of Odum in each plan;

WHEREAS, requirements for public participation in the development of these comprehensive and solid waste management plans as mandated by the appropriate Minimum Planning Standards and Procedures have been met, including an initial joint public hearing prior to development of the plans held on January 6, 2004 to receive input, and a final public hearing held on June 29, 2004 to brief the public on the draft plans and receive further input prior to submission of the plans for review and comment; and

WHEREAS, the City of Odum has participated in the development, reviewed, and approved both The Joint Wayne County Comprehensive Plan and The Joint Wayne County Solid Waste Management Plan, including the City of Odum Short-Term Work Programs, as its local comprehensive plan under the Georgia Planning Act of 1989 and as a guide for its future growth and development, and as its solid waste management plan under the Comprehensive Solid Waste Management Act of 1990, respectively.

NOW, THEREFORE BE IT RESOLVED that the Mayor and City Council of the City of Odum certifies that public participation and other requirements of the Minimum Planning Standards and Procedures for both plans have been met, and that The Joint Wayne County Comprehensive Plan: Wayne County, Jesup, Odum, and Screven 2025, and the Joint Wayne County Solid Waste Management Plan 2014 are hereby authorized to be submitted to the Heart of Georgia Altamaha Regional Development Center and the Georgia Department of Community Affairs for formal review, comment, and recommendation before formal adoption of both plans by the City of Odum as mandated by Georgia law and the Georgia Department of Community Affairs.

SO RESOLVED, this 6th day of July, 2004.

By auchry Manefill

ATTEST: Karn Howard

WHEREAS, the Georgia Planning Act of 1989 requires all local governments in Georgia to prepare a comprehensive plan, and the Comprehensive Solid Waste Management Act of 1990 requires all local governments to prepare a solid waste management plan; and

WHEREAS, the Georgia Department of Community Affairs has established "Minimum Planning Standards and Procedures" under the Georgia Planning Act of 1989 for coordinated and comprehensive planning, including standards and procedures for the preparation of local comprehensive plans and implementation thereof, public participation, and coordinated review; and similar "Minimum Planning Standards and Procedures" under the Comprehensive Solid Waste Management Act of 1990; and

WHEREAS, the City of Screven, Georgia has participated with Wayne County and the cities of Jesup and Odum in a coordinated and comprehensive planning process under the Georgia Planning Act of 1989, the Comprehensive Solid Waste Management Act of 1990, and both of the Minimum Planning Standards and Procedures through the Wayne County Comprehensive Plan Executive and Local Plan Coordination committees, and with the assistance of the Heart of Georgia Altamaha Regional Development Center, to update its existing adopted comprehensive plans and solid waste plans with new full plan updates;

WHEREAS, this coordinated and comprehensive planning process has resulted in the new joint plans, The Joint Wayne County Comprehensive Plan: Wayne County, Jesup, Odum, and Screven 2025, and The Joint Wayne County Solid Waste Management Plan 2014, including separate "Five-Year Short-Term Work Programs" for the City of Screven in each plan;

WHEREAS, requirements for public participation in the development of these comprehensive and solid waste management plans as mandated by the appropriate Minimum Planning Standards and Procedures have been met, including an initial joint public hearing prior to development of the plans held on January 6, 2004 to receive input, and a final public hearing held on June 29, 2004 to brief the public on the draft plans and receive further input prior to submission of the plans for review and comment; and

WHEREAS, the City of Screven has participated in the development, reviewed, and approved both *The Joint Wayne County Comprehensive Plan* and *The Joint Wayne County Solid Waste Management Plan*, including the City of Screven Short-Term Work Programs, as its local comprehensive plan under the Georgia Planning Act of 1989 and as a guide for its future growth and development, and as its solid waste management plan under the Comprehensive Solid Waste Management Act of 1990, respectively.

NOW, THEREFORE BE IT RESOLVED that the Mayor and City Council of the City of Screven certifies that public participation and other requirements of the Minimum Planning Standards and Procedures for both plans have been met, and that The Joint Wayne County Comprehensive Plan: Wayne County, Jesup, Odum, and Screven 2025, and the Joint Wayne County Solid Waste Management Plan 2014 are hereby authorized to be submitted to the Heart of Georgia Altamaha Regional Development Center and the Georgia Department of Community Affairs for formal review, comment, and recommendation before formal adoption of both plans by the City of Screven as mandated by Georgia law and the Georgia Department of Community Affairs.

SO RESOLVED, this 6 day of July, 2004.

BY: Senel byth

ATTEST: Biomeg Jackson 883

WAYNE COUNTY INTERGOVERNMENTAL AGREEMENT

Process to Insure Compatibility with Applicable Land Use Plans and Ordinances Pursuant to the Provision of New Extraterritorial Water and Sewer Services

WHEREAS, the respective member governments of Wayne County, which include the Wayne County Board of Commissioners, and the Mayor/Councils of the cities of Jesup, Odum and Screven have, pursuant to Georgia Laws and Acts, prepared and adopted a joint countywide comprehensive plan and service delivery strategy including compatible future land use plans; and

WHEREAS, the respective governments party to this agreement have found it necessary, desirable and in the public interest to establish a formal process to insure that the provision of new extraterritorial water and sewer service is consistent with all applicable land use plans and ordinances so as to meet both the requirements of law and spirit of cooperation and coordination outlined in the Georgia Service Delivery Act.

NOW THEREFORE BE IT RESOLVED THAT: The Wayne County Board of Commissioners of Wayne County, Georgia and the governing bodies of the cities of Jesup, Odum and Screven, hereby agree to implement the following process for the provision of extraterritorial water and sewer services effective immediately upon the adoption of this Resolution by the respective governments.

- 1. Prior to initiating any extension of water or sewer outside the boundaries of that respective local government, the City seeking such an extension will notify the county government of the proposed extension. The notification will provide information on location of property, size of the proposed extension, proposed purpose of the extension (i.e. proposed change in land use), and the existing land use classification of the property. Official notification of the county as required by this agreement shall be achieved by delivery of the required information to the county clerk.
- 2. Within ten working day following receipt of the above information, the county will forward to the city proposing the extension a statement:
 - (a) Indicating that the proposed extraterritorial water or sewer extension is deemed compatible with the county's land use plan and all applicable ordinances and that the county has no objection to the proposal; or
 - (b) Describing its bona fide objections to the proposed water or sewer extension stating why the proposal is incompatible with the land use plan or ordinances, and providing supporting information including a listing of any possible stipulations or conditions that would alleviate the county's objections;
- If the county has no objections, or fails to respond within ten
 working days, to the city's proposed extraterritorial water or sewer
 extension, the city is free to proceed with the provision of the
 service.

city will respond to the county in writing within ten working days by either:

- (a) agreeing with the county and stopping action on the proposed extraterritorial water or sewer service or extension;
- (b) agreeing to implement the county's stipulations and conditions and thereby resolving the county's objection;
- (c) requesting a meeting and informal resolution of the issues; including discussing a formal change, if necessary, to the land use plan:
- (d) disagreeing that the county's objection is bona fide and asking for county reconsideration, or requesting a meeting and informal resolution as in step 4(c);
- (e) If the informal dispute resolution process in steps 4(c) or 4(d) do not result in agreement, the city or county may initiate a formal mediation process.
- 5. If the city and county reach agreement as described in 4(c) or 4(d), the city is free to proceed with the extraterritorial service extension as agreed.
- 6. In the event the respective jurisdictions seek mediation, the governments will agree on a mediator, mediation schedule and determine participants in the mediation. The city and county shall agree to share equally any costs associated with mediation.
- A proposal to extend extraterritorial water and sewer service shall not be implemented until any bona fide land use plan or land use ordinance inconsistencies are resolved pursuant to the dispute resolution process, or have been taken to mediation.
- 8. If no resolution of the county's objection(s) occurs even after mediation, the city may:
 - (a) drop the proposal and not proceed with the extension: or
 - (b) take court action to obtain a declaratory judgment or otherwise take appropriate action which lawfully allow the extension.
- 9. However, the final determination of the compatibility of the proposes extension with the land use plan or land use ordinances will be accorded to the governing body receiving the proposed service extension, unless court action determines that the county's objection(s) is not bona fide and a declaratory judgment is obtained.

This extraterritorial process for water and sewer services shall remain in force and effect until amended by agreement of each party or unless otherwise terminated by operation of law.

IN WITNESS WHEREOF the undersig names and seals on this 7th day	ned parties have hereunto affixed its of september, 1999.
Stene Lakan	Hat Shan
Chairman, County Commission	Mayor, City of Jesup
Attest, County Clerk	Attest, City Clerk
Mayor, City of Odum	Mayor, City of Screven
Karen Haward Attest, City Clerk	Attest, City Clerk

A RESOLUTION ESTABLISHING A PROCESS TO RESOLVE INTER-GOVERNMENTAL LAND USE CLASSIFICATION DISPUTES PURSUANT TO PROPERTY ANNEXATIONS AND LAND USE PLANS

WHEREAS, the Wayne County Board of Commissioners and the Mayors and Councils of the municipal corporations in Wayne County have found it necessary, desirable and in the public interest to establish a formal process to resolve land use disputes as these relate to property annexation and land use plans, and

WHEREAS, the Wayne County Board of Commissioners and the governing bodies of the County's municipal corporations have jointly developed a cooperative plan to resolve said issues.

BE IT THEREFORE RESOLVED by the Wayne County Board of Commissioners of Wayne County, Georgia, and the governing bodies of the Cities of Jesup, Odum and Screven, as follows:

Section 1. Effective immediately upon the adoption of this Resolution by the respective governments, the following process for resolving land use disputes shall be implemented:

1. Prior to initiating any formal annexation activities, the municipality will notify the county of a proposed annexation and provide information on location of property, size of area, and proposed land use or zoning classification(s) (if applicable) of the property. Within 30 days following receipt of the above information, the county will forward to the city a statement either: (a) indicating that the county has no objection to the proposed land use for the property; or (b) describing its bona fide objection(s) to the city's proposed land use classification, providing supporting

- evidence, and listing any possible stipulations or conditions that would alleviate the county's objection(s);
- 2. If the county has no objection to the city's proposed land use or zoning classification, the city is free to proceed with the annexation. If the county fails to respond to the city's notice in writing within the deadline, the city is free to proceed with the annexation and the county loses its right to invoke or otherwise utilize the dispute resolution process, or object to land use change after the annexation.
- 3. If the county notifies the city that it has a bona fide land use classification objection(s), the city will respond to the county in writing within 30 days of receiving the county's objection(s) by either: (a) agreeing to implement the county's stipulation and conditions and thereby resolve the county's objection(s); (b) agreeing with the county and stopping action on the proposed annexation; (c) disagreeing that the county's objection(s) are bona fide, the city will initiate a joint meeting of the respective governments to resolve the issue(s); (d) initiating mediation, as set forth in paragraph 4 below if the joint meeting of the respective governmental bodies fails to resolve the issue(s).
- 4. If the city initiates mediation, the city and county will agree on a mediator, mediation schedule and

determine participants in the mediation. The city and county agree to share equally any costs associated with the mediation. Both the city and county shall be bound by the decision of the mediator.

5. An annexation proposal shall not be effective until any bona fide land use classification objections properly raised by the county are resolved pursuant to the dispute resolution process.

Section 2. All ordinances and resolutions in conflict herewith are hereby repealed.

SO RESOLVED by the respective governmental bodies of Wayne County on the dates listed below.

ATTEST: 7-6-98 Sean Hiros County Clerk	By: Remarks Board OF COMMISSIONERS By: Remarks Adopted Chairperson
ATTEST: City Clerk	BOARD OF COMMISSIONERS OF THE CITY OF JESUP By: HERB SHAW Adopted Mayor
ATTEST: Karen Howard City Clerk	By: Manufield 6-11-98 AUBREY MANSFIELD Adopted Mayor
Burgo B. Jackson	By: Mayor Moseley Adopted Mayor