





FORM 1

COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY

I. GENERAL INSTRUCTIONS:

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

OPTION A Revising or Adding to the SDS

- 4. List all services provided or primarily funded by each general purpose local government and authority within the county which are revised or added to the SDS in Section IV, below. (It is acceptable to break a service into separate components if this will facilitate description of the service delivery strategy.)
- 5. For **each** service or service component listed in Section IV, complete a separate, updated *Summary of Service Delivery Arrangements* form (FORM 2).
- 6. Complete one copy of the *Certifications* form (FORM 4) and have it signed by the authorized representatives of participating local governments. [Please note that DCA cannot validate the strategy unless it is signed by the local governments required by law (see Instructions, FORM 4).]

OPTION B Extending the Existing SDS

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

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

- 7. If any of the conditions described in the existing Summary of Land Use Agreements form (FORM 3) have changed or if it has been ten (10) or more years since the most recent FORM 3 was filed, update and include FORM 3 with the submittal.
- 8. Email the completed forms and any attachments as .pdf attachments to: pemd.opqga@dca.ga.gov, or mail the completed forms along with any attachments to: GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS
 OFFICE OF PLANNING AND QUALITY GROWTH
 60 Executive Park South, N.E.

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 UNDER THE "OPTION A" PROCESS DESCRIBED, ABOVE.

Atlanta, Georgia 30329

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.

Unified Government of Webster County (as of 1/1/09) Industrial Development Authority

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

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

This is a comprehensive revision for the new, unified government

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

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

This is a comprehensive revision for the new, unified government:

animal control-3

cooperative extension-5

coroner-7

courts-9

E-911-11

economic development-13

elections-15

emergency management-17

emergency medical services-19 recycling-37

family and children's services-21

fire protection-23

indigent defense-25

iail-27

law enforcement-29

library-31

public health-33

recreation-35

roads/streets and bridges-39

solid waste-41

street lighting-43

tax appraisal/assessment-45

tax collection-47

voter registration-49

water treatment and distribution-51

certifications-53







FORM 2: Summary of Service Delivery Arrangements

Instructions:

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

Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.		
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Animal Control	
1. Check the box that best describes the agreed upon delivery arrangement for this service:		
Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.): Unified Government of Webster County		
Service will be provided only in the unincorporate checked, identify the government, authority or orga	ed portion of the county by a single service provider. (If this box is nization providing the service.):	
	within their incorporated boundaries, and the service will not be provided ntify the government(s), authority or organization providing the service:	
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the	
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):	
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service	
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)	
⊠No		
	tach an explanation for continuing the arrangement (i.e., a 36-70-24(1)), overriding benefits of the duplication, or reasons that iminated).	
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	y, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.	
	Down 4 of 2	

Local Government or Au	thority Funding	Method
Unified Government of	general fund	
Nebster County		
How will the strategy chang	e the previous arrangements for providing and/or fund	ding this service within the county?
riow will the strategy chang	e the previous arrangements for providing analor fund	and the county:
onsolidation became effecti	ve January 1, 2009; there is only one general purpos	e local government
onconductor booding oncod	we canally 1, 2000, there is only one general purpos	o local government.
List any formal service deliv	ery agreements or intergovernmental contracts that w	vill be used to implement the strategy f
his service:	, ,	
Agreement Name	Contracting Parties	Effective and Ending Date
o formal agreement	Webster and Sumter Counties	2005; open ended
mply pay per use		
imply pay per use		
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	any) will be used to implement the strategy for this se	
	any) will be used to implement the strategy for this se y, rate or fee changes, etc.), and when will they take	
acts of the General Assembl		
acts of the General Assembl		
acts of the General Assembl		
acts of the General Assembl		
acts of the General Assembl	y, rate or fee changes, etc.), and when will they take	
one Person completing form: Ge	y, rate or fee changes, etc.), and when will they take	
one Person completing form: Ge	y, rate or fee changes, etc.), and when will they take	
one Person completing form: Ge Phone number: 229-828-577	y, rate or fee changes, etc.), and when will they take or fee Moore Torge Moore Date completed: September 9, 2009	effect?
Person completing form: GePhone number: 229-828-577	y, rate or fee changes, etc.), and when will they take orge Moore To Date completed: September 9, 2009 d be contacted by state agencies when evaluating when the contacted by state agencies when the contacted by the cont	effect?
Person completing form: Ge Phone number: 229-828-577 Is this the person who shoul	y, rate or fee changes, etc.), and when will they take or fee Moore Torge Moore Date completed: September 9, 2009	effect?
Person completing form: Ge Phone number: 229-828-577 Is this the person who shoul projects are consistent with t	orge Moore '5 Date completed: September 9, 2009 d be contacted by state agencies when evaluating when service delivery strategy? ⊠Yes □No	effect?
none Person completing form: Ge Phone number: 229-828-577 Is this the person who shoul projects are consistent with t	y, rate or fee changes, etc.), and when will they take orge Moore To Date completed: September 9, 2009 d be contacted by state agencies when evaluating when the contacted by state agencies when the contacted by the cont	effect?
none Person completing form: Ge Phone number: 229-828-577 Is this the person who shoul projects are consistent with t	orge Moore '5 Date completed: September 9, 2009 d be contacted by state agencies when evaluating when service delivery strategy? ⊠Yes □No	effect?







FORM 2: Summary of Service Delivery Arrangements

Instructions:

Make copies of this form and complete one for each service listed on FORM 1, Section III. Use exactly the same service names listed on FORM 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.			
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Cooperative Extension		
-			
1. Check the box that best describes the agreed upon	n delivery arrangement for this service:		
Service will be provided countywide (i.e., including this box is checked, identify the government, authounified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):		
Service will be provided only in the unincorporate checked, identify the government, authority or organized	ed portion of the county by a single service provider. (If this box is nization providing the service.):		
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:		
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the		
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):		
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service		
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)		
⊠No	*		
	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).		
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.		
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fees, bonded indebtedness, e				
Local Government or Auth	hority			
Unified Government of		general fund		
Webster County				
		4		
. How will the strategy change	the previ	ous arrangements for providing and/or fundin	g this service within the county?	
Consolidation became effective	e January	1, 2009; there is only one general purpose le	ocal government.	
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	ry agreen	nents or intergovernmental contracts that will	be used to implement the strategy fo	
this service:				
Agreement Name	in the	Contracting Parties	Effective and Ending Dates	
Memo. of Understanding	Webst	er County and University of Georgia	current and renewed annually	
		*		
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		used to implement the strategy for this services changes etc.) and when will they take eff		
		used to implement the strategy for this service changes, etc.), and when will they take effe		
acts of the General Assembly,				
acts of the General Assembly,				
acts of the General Assembly,				
acts of the General Assembly,	rate or fe	ee changes, etc.), and when will they take effor		
None Person completing form: Geo	rate or fe	ee changes, etc.), and when will they take effor		
Jone Person completing form: Geor Phone number: 229-828-5775 Is this the person who should	rge Moor Da	ee changes, etc.), and when will they take effected by state agencies when evaluating whetle	ect?	
Person completing form: Geor Phone number: 229-828-5775 Is this the person who should projects are consistent with the	rge Moor Da be contacted service	re te completed: September 9, 2009 cted by state agencies when evaluating whetle delivery strategy? ⊠Yes □No	ect?	
Person completing form: Geor Phone number: 229-828-5775 Is this the person who should projects are consistent with the	rge Moor Da be contacted service	ee changes, etc.), and when will they take effected by state agencies when evaluating whetle	ect?	
Person completing form: Geor Phone number: 229-828-5775 Is this the person who should projects are consistent with the	rge Moor Da be contacted service	re te completed: September 9, 2009 cted by state agencies when evaluating whetle delivery strategy? ⊠Yes □No	ect?	







FORM 2: Summary of Service Delivery Arrangements

Instructions:

Make copies of this form and complete one for each service listed on FORM 1, Section III. Use exactly the same service names listed on FORM 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.			
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Coroner		
1. Check the box that best describes the agreed upor Service will be provided countywide (i.e., includithis box is checked, identify the government, author Unified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If		
Service will be provided only in the unincorporate checked, identify the government, authority or organ	ed portion of the county by a single service provider. (If this box is inization providing the service.):		
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:		
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the		
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):		
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service		
☐ Yes (if "Yes," you must attach additional documed ☑ No	entation as described, below)		
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).		
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party a	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.		
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	ity that will help to pay for this service and in eral funds, special service district revenues,).	
Local Government or Author	rity Fun	ding Method
Unified Government of	general fund	
Webster County		
. How will the strategy change th	e previous arrangements for providing and/o	or funding this service within the county?
Consolidation became effective	anuary 1, 2009; there is only one general pu	urpose local government.
List any formal service delivery this service:	agreements or intergovernmental contracts t	that will be used to implement the strategy for
Agreement Name	Contracting Parties	Effective and Ending Dates
none		
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	will be used to implement the strategy for the te or fee changes, etc.), and when will they	nis service (e.g., ordinances, resolutions, loca take effect?
None		
. Person completing form: Georg Phone number: 229-828-5775	e Moore Date completed: September 9, 2009	e e
	contacted by state agencies when evaluatir ervice delivery strategy? ⊠Yes ⊡No	ng whether proposed local government
If not, provide designated contact	t person(s) and phone number(s) below:	







FORM 2: Summary of Service Delivery Arrangements

Instructions:

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Make copies of this form and complete one for each service listed on FORM 1, Section III. Use exactly the same service names listed on FORM 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.			
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Courts; Superior, Probate, Magistrate		
w.			
1. Check the box that best describes the agreed upor	n delivery arrangement for this service:		
Service will be provided countywide (i.e., including this box is checked, identify the government, author Unified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):		
Service will be provided only in the unincorporate checked, identify the government, authority or organized	ed portion of the county by a single service provider. (If this box is nization providing the service.):		
	vithin their incorporated boundaries, and the service will not be provided ntify the government(s), authority or organization providing the service:		
	vithin their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the		
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):		
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service		
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)		
⊠No			
	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).		
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	yy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.		

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FORM 2: Summary of Service Delivery Arrangements

Instructions:

	ssary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: <i>E-911</i>
Check the box that best describes the agreed upon	n delivery arrangement for this service:
	ing all cities and unincorporated areas) by a single service provider. (If
Service will be provided only in the unincorporate checked, identify the government, authority or organized	ed portion of the county by a single service provider. (If this box is nization providing the service.):
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
f these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Down 4 of 2

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

Local Government or Authority	Funding Method
Unified Government of	telephone surcharge; general fund
Webster County	
1,	
How will the strategy change the prev	rious arrangements for providing and/or funding this service within the county?

Consolidation became effective January 1, 2009; there is only one general purpose local government.

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

Agreement Name	Contracting Parties	Effective and Ending Dates
Intergovernmental Agreement	Webster County and the Middle Flint Regional E-911	7/23/03 - 7/23/13;
for Operation of the Middle	Authority	automatically renewable
Flint Regional E-911 Center		thereafter
	,	

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

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ı			
	None		
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7. Person completing form: George Moore

Phone number: **229-828-5775** Date completed: September 9, 2009

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







FORM 2: Summary of Service Delivery Arrangements

Instructions:

	isted on FORM 1, Section III. Use exactly the same service names listed on FORM 1. ssary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Economic Development
Check the box that best describes the agreed upor	n delivery arrangement for this service:
Service will be provided countywide (i.e., includi this box is checked, identify the government, author	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):
Service will be provided only in the unincorporate checked, identify the government, authority or organ	ed portion of the county by a single service provider. (If this box is inization providing the service.):
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
identify the government, authority, or other organiza	ap delineating the service area of each service provider, and ation that will provide service within each service area.): ustrial Development Authority working cooperatively countywide
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party a	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.

Page 1 of 2

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

Local Covernment on Authorities	Four-discuss 84	lathad
Local Government or Authority Unified Government of	general fund; revolving loan fund; possible	
	general fund, revolving loan fund, possible	grants and loans
Webster County	very obsigned a confirmation and the	van banda
Industrial Development Authority	revolving loan fund; possible grants and loa	ins; bonds
· · · · · · · · · · · · · · · · · · ·		
. How will the strategy change the prev	vious arrangements for providing and/or fundir	ng this service within the county?
. List any formal service delivery agree	ry 1, 2009; there is only one general purpose lements or intergovernmental contracts that will	-
this service: Agreement Name	Contracting Parties	Effective and Ending Dates
none	3	
	be used to implement the strategy for this servi fee changes, etc.), and when will they take eff	
N		
None		
Person completing form: George Mod Phone number: 229-828-5775	ore ate completed: September 9, 2009	
Is this the person who should be cont projects are consistent with the service	acted by state agencies when evaluating whet e delivery strategy? ⊠Yes ⊡No	ther proposed local government
	(-) - - - - - - - -	
If not, provide designated contact pers	son(s) and phone number(s) below:	







FORM 2: Summary of Service Delivery Arrangements

Instructions:

	isted on FORM 1, Section III. Use exactly the same service names listed on FORM 1. sary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Elections
Check the box that best describes the agreed upon	n delivery arrangement for this service:
Service will be provided countywide (i.e., including this box is checked, identify the government, authounified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):
Service will be provided only in the unincorporate checked, identify the government, authority or organization.	ed portion of the county by a single service provider. (If this box is nization providing the service.):
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:
	vithin their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
f these conditions will be eliminated under the strated will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Dono 4 of 9

Local Government or Authorit	Funding I	Method
Unified Government of	general fund	
Webster County		
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How will the strategy change the p	revious arrangements for providing and/or fundi	ing this service within the county?
Consolidation became effective Jar	uary 1, 2009; there is only one general purpose	local government
periodication populitie directive car	dary 1, 2000, there is only one general purpose	result government.
*		
List any formal service delivery ag	reements or intergovernmental contracts that wi	Il be used to implement the strategy fo
List any formal service delivery ag this service:	reements or intergovernmental contracts that wi	Il be used to implement the strategy fo
this service:		
this service: Agreement Name	reements or intergovernmental contracts that wi	Il be used to implement the strategy for Effective and Ending Dates
this service: Agreement Name		
this service: Agreement Name none	Contracting Parties	Effective and Ending Dates
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this service: Agreement Name none What other mechanisms (if any) w	Contracting Parties If be used to implement the strategy for this serv	Effective and Ending Dates vice (e.g., ordinances, resolutions, loc
this service: Agreement Name none What other mechanisms (if any) w	Contracting Parties If be used to implement the strategy for this serv	Effective and Ending Date.
Agreement Name none What other mechanisms (if any) wacts of the General Assembly, rate	Contracting Parties If be used to implement the strategy for this serv	Effective and Ending Date.
Agreement Name none What other mechanisms (if any) wacts of the General Assembly, rate	Contracting Parties If be used to implement the strategy for this serv	Effective and Ending Dates vice (e.g., ordinances, resolutions, loc
Agreement Name none What other mechanisms (if any) wacts of the General Assembly, rate	Contracting Parties If be used to implement the strategy for this serv	Effective and Ending Dates vice (e.g., ordinances, resolutions, loc
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Agreement Name none What other mechanisms (if any) wacts of the General Assembly, rate	Contracting Parties If be used to implement the strategy for this server or fee changes, etc.), and when will they take en	Effective and Ending Date







FORM 2: Summary of Service Delivery Arrangements

Instructions:

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	isted on FORM 1, Section III. Use exactly the same service names listed on FORM 1. sary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Emergency Management
1. Check the box that best describes the agreed upon	n delivery arrangement for this service:
Service will be provided countywide (i.e., including this box is checked, identify the government, authound Unified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):
Service will be provided only in the unincorporate checked, identify the government, authority or organization.	ed portion of the county by a single service provider. (If this box is nization providing the service.):
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
Other (If this box is checked, <u>attach a legible maidentify</u> the government, authority, or other organization	ap delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
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Page 1 of 2

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

Local Government or Authority	Funding Method	d
Unified Government of	general fund; possible grants	
Webster County		
	3	
4. How will the strategy change the p	revious arrangements for providing and/or funding this	s service within the county?
Consolidation became effective Jan	uary 1, 2009; there is only one general purpose local (government.
this service:	reements or intergovernmental contracts that will be us	
Agreement Name	Contracting Parties	Effective and Ending Dates
none		
¥		
	Il be used to implement the strategy for this service (e or fee changes, etc.), and when will they take effect?	.g., ordinances, resolutions, local
none		
none		
7. Person completing form: George N Phone number: 229-828-5775	floore Date completed: September 9, 2009	
B. Is this the person who should be co projects are consistent with the serv	ontacted by state agencies when evaluating whether p vice delivery strategy? ⊠Yes ⊡No	roposed local government
If not, provide designated contact p	erson(s) and phone number(s) below:	







FORM 2: Summary of Service Delivery Arrangements

Instructions:

Answer e		listed on FORM 1, Section III. Use exactly the same service names listed on FORM 1. essary. If the contact person for this service (listed at the bottom of the page) changes, this
	Y: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Emergency Medical Services
×	196	
1. Chec	k the box that best describes the agreed upon	on delivery arrangement for this service:
this bo	rvice will be provided countywide (i.e., including is checked, identify the government, authored Government of Webster County	ding all cities and unincorporated areas) by a single service provider. (If ority or organization providing the service.):
	vice will be provided only in the unincorporate ed, identify the government, authority or orga	anization providing the service.):
		within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:
	e in unincorporated areas. (If this box is chec	within their incorporated boundaries, and the county will provide the cked, identify the government(s), authority or organization providing the
		nap delineating the service area of each service provider, and zation that will provide service within each service area.):
2. In devidentif		rice areas, unnecessary competition and/or duplication of this service
□Yes	(if "Yes," you must attach additional docume	nentation as described, below)
⊠No		
overlapp		attach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that eliminated).
		egy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.

Unified Government of user fees; general fund; SPLOST; possible grants Webster County . How will the strategy change the previous arrangements for providing and/or funding this service within the county? Consolidation became effective January 1, 2009; there is only one general purpose local government. . List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy this service: Agreement Name Contracting Parties Effective and Ending Date on the General Assembly, rate or fee changes, etc.), and when will they take effect? None Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No	Local Government or Author	ority F	unding Method
How will the strategy change the previous arrangements for providing and/or funding this service within the county? Consolidation became effective January 1, 2009; there is only one general purpose local government. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy this service: Agreement Name Contracting Parties Effective and Ending Data none What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, leads of the General Assembly, rate or fee changes, etc.), and when will they take effect? None Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes ☐ No			
Consolidation became effective January 1, 2009; there is only one general purpose local government. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy this service: Agreement Name	Webster County		
Consolidation became effective January 1, 2009; there is only one general purpose local government. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy this service: Agreement Name			
Consolidation became effective January 1, 2009; there is only one general purpose local government. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy this service: Agreement Name	y.		
Consolidation became effective January 1, 2009; there is only one general purpose local government. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy this service: Agreement Name			
List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy this service: Agreement Name Contracting Parties Effective and Ending Date of the Contracting Parties What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, leads of the General Assembly, rate or fee changes, etc.), and when will they take effect? Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes \[\]No	How will the strategy change th	e previous arrangements for providing and	d/or funding this service within the county?
List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy this service: **Agreement Name** Contracting Parties* Effective and Ending Date one** What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, leacts of the General Assembly, rate or fee changes, etc.), and when will they take effect? **None** Person completing form: George Moore** Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No	, *		
List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy this service: **Agreement Name**	Consolidation became effective	January 1, 2009: there is only one general	purpose local government
Agreement Name Contracting Parties Effective and Ending Data none What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, leacts of the General Assembly, rate or fee changes, etc.), and when will they take effect? None Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No		sandary i, 2000, alore to only one general	parposs issai go tommenti
Agreement Name Contracting Parties Effective and Ending Data none What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, leacts of the General Assembly, rate or fee changes, etc.), and when will they take effect? None Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No	,		
Agreement Name Contracting Parties Effective and Ending Data The projects are consistent with the service delivery strategy? Effective and Ending Data Effective and Ending Data		agreements or intergovernmental contract	ts that will be used to implement the strategy fo
What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, leacts of the General Assembly, rate or fee changes, etc.), and when will they take effect? None Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No	this service:		
What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, loacts of the General Assembly, rate or fee changes, etc.), and when will they take effect? None Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No	Agreement Name	Contracting Parties	Effective and Ending Dates
Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No	ione		
Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No			
Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No			
Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No			
Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No			
Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No			
Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? ⊠Yes □No			
Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? ⊠Yes □No			
Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? ⊠Yes □No			
Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes No	acts of the General Assembly, r		
Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? Yes □No	acts of the General Assembly, r		
projects are consistent with the service delivery strategy? ⊠Yes □No	acts of the General Assembly, r		
If not provide decignated contact person(s) and phone number(s) helevir	None Person completing form: Georg	ate or fee changes, etc.), and when will the	
LITOL DIOVIGE DESIGNATED CONTACT DEISONS) AND DITONE HUMBERS) DEIGW:	lone Person completing form: George Phone number: 229-828-5775 Is this the person who should be	ge Moore Date completed: September 9, 2009 e contacted by state agencies when evaluations.	ey take effect?
	Person completing form: George Phone number: 229-828-5775 Is this the person who should be projects are consistent with the	ge Moore Date completed: September 9, 2009 e contacted by state agencies when evaluations.	ey take effect?







FORM 2: Summary of Service Delivery Arrangements

Instructions:

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

should be reported to the Department of Community Affairs.		
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Family and Children's Services	
1. Check the box that best describes the agreed upor	n delivery arrangement for this service:	
Service will be provided countywide (i.e., includi this box is checked, identify the government, author Unified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):	
Service will be provided only in the unincorporate checked, identify the government, authority or organ	ed portion of the county by a single service provider. (If this box is nization providing the service.):	
	within their incorporated boundaries, and the service will not be provided ntify the government(s), authority or organization providing the service:	
	vithin their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the	
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):	
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service	
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)	
⊠No		
If these conditions will continue under this strategy, <u>at</u> overlapping but higher levels of service (See O.C.G.A overlapping service areas or competition cannot be el	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).	
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.	
	David of 0	

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

Local Government or Authority	Funding Method
Unified Government of	general fund; client fees; possible grants
Webster County	
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ar a	
N	
How will the strategy change the prev	vious arrangements for providing and/or funding this service within the county?

Consolidation became effective January 1, 2009; there is only one general purpose local government.

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

Agreement Name	Contracting Parties	Effective and Ending Dates
Third Party Lease Agreement	Webster and Georgia Department of Community Health	current and renewed annually
·		

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

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1.4	v		·

7. Person completing form: George Moore

Phone number: **229-828-5775** Date completed: September 9, 2009

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







FORM 2: Summary of Service Delivery Arrangements

Instructions:

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

should be reported to the Department of Community Alians.	
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Fire Protection
1. Check the box that best describes the agreed upon	n delivery arrangement for this service:
Service will be provided countywide (i.e., include this box is checked, identify the government, authountified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):
Service will be provided only in the unincorporate checked, identify the government, authority or organization.	ed portion of the county by a single service provider. (If this box is nization providing the service.):
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
f these conditions will be eliminated under the strategorial be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Page 1 of 2

Local Government or Authority	/ Funding	Method
Inified Government of	general fund; SPLOST; possible grants	
Vebster County		
	uary 1, 2009; there is only one general purpos	
List any formal service delivery ag		e local government.
onsolidation became effective Jar List any formal service delivery ag his service:	uary 1, 2009; there is only one general purpose	e local government.
onsolidation became effective Jar	uary 1, 2009; there is only one general purpos	e local government.
onsolidation became effective Jar List any formal service delivery ag nis service: Agreement Name	uary 1, 2009; there is only one general purpose	e local government.
consolidation became effective Jar List any formal service delivery agnis service: Agreement Name	uary 1, 2009; there is only one general purpose	e local government. ill be used to implement the strategy
onsolidation became effective Jar List any formal service delivery ag nis service: Agreement Name	uary 1, 2009; there is only one general purpose	e local government. ill be used to implement the strategy
onsolidation became effective Jar List any formal service delivery ag nis service: Agreement Name	uary 1, 2009; there is only one general purpose	e local government.

None

7. Person completing form: **George Moore**Phone number: **229-828-5775**Date completed: September 9, 2009

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







FORM 2: Summary of Service Delivery Arrangements

Instructions:

	listed on FORM 1, Section III. Use exactly the same service names listed on FORM 1. ssary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Indigent Defense
1. Check the box that best describes the agreed upo	on delivery arrangement for this service:
Service will be provided countywide (i.e., include this box is checked, identify the government, author Unified Government of Webster County	ling all cities and unincorporated areas) by a single service provider. (If brity or organization providing the service.):
Service will be provided only in the unincorporate checked, identify the government, authority or organization.	ted portion of the county by a single service provider. (If this box is anization providing the service.):
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:
	within their incorporated boundaries, and the county will provide the cked, identify the government(s), authority or organization providing the
	nap delineating the service area of each service provider, and ration that will provide service within each service area.):
2. In developing this strategy, were overlapping servi identified?	ice areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docum	nentation as described, below)
⊠No	
	Attach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that eliminated).
If these conditions will be eliminated under the strate will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Dono 4 of 2

Page 1 of 2

3. List each government or authority that will help to pay for this service and indicate how the service will be funded (e.g.,

Local Government or Authority	Funding Method
Inified Government of	general fund; possible grants
Vebster County	
	*
	*

Consolidation became effective January 1, 2009; there is only one general purpose local government.

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

Agreement Name	Contracting Parties	Effective and Ending Dates
none		
4. · · ·		
× ×		

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

None	

7. Person completing form: George Moore

Phone number: **229-828-5775** Date completed: September 9, 2009

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







FORM 2: Summary of Service Delivery Arrangements

Instructions:

Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.			
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Jail		
1. Check the box that best describes the agreed upon	n delivery arrangement for this service:		
Service will be provided countywide (i.e., includ this box is checked, identify the government, autho Unified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):		
Service will be provided only in the unincorporate checked, identify the government, authority or organization.	ed portion of the county by a single service provider. (If this box is nization providing the service.):		
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:		
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the		
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):		
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service		
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)		
⊠No	,		
	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).		
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.		
	Daniel 4 of 0		

Page 1 of 2

Local Government or Auth	hority Funding	Method
Unified Government of	general fund	
Webster County		
3		
*		
How will the strategy change	the previous arrangements for providing and/or fund	ing this service within the county?
	·	
Consolidation became effective	e January 1, 2009; there is only one general purpose	e local government
yonoonaanon yooanno onoonv	o dandary 1, 2000, and o only one general purpose	noodi governinoni.
List any formal service deliver this service:	ry agreements or intergovernmental contracts that w	ill be used to implement the strategy fo
Agreement Name	Contracting Parties	Effective and Ending Dates
Agreement Name Jail contract	Contracting Parties Webster and Sumter Counties	Effective and Ending Dates 1999: open ended
		Effective and Ending Dates 1999; open ended
Jail contract What other mechanisms (if ar		vice (e.g., ordinances, resolutions, local
Jail contract What other mechanisms (if ar	Webster and Sumter Counties ny) will be used to implement the strategy for this ser	vice (e.g., ordinances, resolutions, loc
What other mechanisms (if aracts of the General Assembly,	Webster and Sumter Counties ny) will be used to implement the strategy for this ser	vice (e.g., ordinances, resolutions, loc
What other mechanisms (if ar acts of the General Assembly,	Webster and Sumter Counties ny) will be used to implement the strategy for this ser	vice (e.g., ordinances, resolutions, local
Jail contract What other mechanisms (if ar	Webster and Sumter Counties ny) will be used to implement the strategy for this ser	vice (e.g., ordinances, resolutions, local
What other mechanisms (if aracts of the General Assembly,	Webster and Sumter Counties ny) will be used to implement the strategy for this ser rate or fee changes, etc.), and when will they take e	vice (e.g., ordinances, resolutions, loc
What other mechanisms (if ar acts of the General Assembly, None Person completing form: Geo Phone number: 229-828-5775 Is this the person who should	Webster and Sumter Counties ny) will be used to implement the strategy for this ser rate or fee changes, etc.), and when will they take e	vice (e.g., ordinances, resolutions, loc







FORM 2: Summary of Service Delivery Arrangements

Instructions:

	isted on FORM 1, Section III. Use exactly the same service names listed on FORM 1. sary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Law Enforcement
1. Check the box that best describes the agreed upor	n delivery arrangement for this service:
Service will be provided countywide (i.e., includ this box is checked, identify the government, autho Unified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):
Service will be provided only in the unincorporate checked, identify the government, authority or organization.	ed portion of the county by a single service provider. (If this box is inization providing the service.):
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
f these conditions will be eliminated under the strategoill be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.

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

Local Government or Authority	Funding M	ethod
Unified Government of	general fund; SPLOST; possible grants	
Webster County		
	· · · · · · · · · · · · · · · · · · ·	
	, · · · · ·	
How will the strategy change the pre	evious arrangements for providing and/or fundin	g this service within the county?
consolidation became effective Janu	ary 1, 2009; there is only one general purpose le	ocal government.
	a.y ., 2000, more to omy one general parpoor .	ood. govorriment
		, and the second second
	ements or intergovernmental contracts that will	be used to implement the strategy f
this service:		
Agroomant Nama	Contracting Parties	Effective and Ending Date
Agreement Name	Contracting Farties	Effective and Ending Date
one		
		2
	be used to implement the strategy for this servi	
	be used to implement the strategy for this serving fee changes, etc.), and when will they take eff	
acts of the General Assembly, rate o		
acts of the General Assembly, rate o		
acts of the General Assembly, rate o		

Phone number: 229-828-5775 Date completed: September 9, 2009

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







FORM 2: Summary of Service Delivery Arrangements

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

hould be reported to the Department of Community Affairs.		
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Library	
4		
1. Check the box that best describes the agreed upor	n delivery arrangement for this service:	
Service will be provided countywide (i.e., including this box is checked, identify the government, authountified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):	
Service will be provided only in the unincorporate checked, identify the government, authority or organized	ed portion of the county by a single service provider. (If this box is nization providing the service.):	
One or more cities will provide this service only v	vithin their incorporated boundaries, and the service will not be provided	
in unincorporated areas. (If this box is checked, ide	ntify the government(s), authority or organization providing the service:	
THE REPORT OF THE PROPERTY OF	vithin their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the	
Other (If this hav is checked, attach a legible m	ap delineating the service area of each service provider, and	
	ation that will provide service within each service area.):	
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service	
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)	
⊠No	÷	
	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).	
f these conditions will be eliminated under the strategorial be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.	
	Dana 4 of 0	

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

Local Government or Authority	Funding Method
Unified Government of	general fund; Lake Blackshear Regional Library System; possible grants
Webster County	
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in the same of the	
	·

4. How will the strategy change the previous arrang	ements for providing	and/or funding this	service within the county	y?
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Consolidation became effective January 1, 2009; there is only one general purpose local government.

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

Agreement Name	Contracting Parties	Effective and Ending Dates
Library Services	Webster County and the Lake Blackshear Regional	renewed annually
1	Library System	
7		
6		
a 150		

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

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IN	U	ш	C

7. Person completing form: George Moore

Phone number: **229-828-5775** Date completed: September 9, 2009

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







FORM 2: Summary of Service Delivery Arrangements

Instructions:

s

	isted on FORM 1, Section III. Use exactly the same service names listed on FORM 1. ssary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Public Health
1. Check the box that best describes the agreed upon	n delivery arrangement for this service:
Service will be provided countywide (i.e., including this box is checked, identify the government, author Unified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If brity or organization providing the service.):
Service will be provided only in the unincorporate checked, identify the government, authority or organized	ed portion of the county by a single service provider. (If this box is anization providing the service.):
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:
	within their incorporated boundaries, and the county will provide the sked, identify the government(s), authority or organization providing the
Other (If this box is checked, attach a legible maidentify the government, authority, or other organization)	ap delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
If these conditions will continue under this strategy, at overlapping but higher levels of service (See O.C.G.A overlapping service areas or competition cannot be elements.)	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.

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.).

		Method
Unified Government of	general fund; client fees; possible grants	
Webster County	×	*
How will the strategy change the prev	vious arrangements for providing and/or fund	ling this service within the county?
onsolidation became effective Janua	ry 1, 2009; there is only one general purpose	e local government.
List any formal service delivery agree his service:	ments or intergovernmental contracts that w	rill be used to implement the strategy t
Agreement Name	Contracting Parties	Effective and Ending Date
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	be used to implement the strategy for this ser fee changes, etc.), and when will they take e	
cts of the General Assembly, rate or		
cts of the General Assembly, rate or		
cts of the General Assembly, rate or		
cts of the General Assembly, rate or one Person completing form: George Mod	fee changes, etc.), and when will they take e	
one Person completing form: George Mochone number: 229-828-5775	fee changes, etc.), and when will they take entered by state agencies when evaluating wh	effect?







FORM 2: Summary of Service Delivery Arrangements

Instructions:

	isted on FORM 1, Section III. Use exactly the same service names listed on FORM 1. sary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Recreation
Check the box that best describes the agreed upon	n delivery arrangement for this service:
Service will be provided countywide (i.e., include this box is checked, identify the government, authound the county of the county the county is serviced by the county is ser	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):
Service will be provided only in the unincorporate checked, identify the government, authority or organization.	ed portion of the county by a single service provider. (If this box is nization providing the service.):
	within their incorporated boundaries, and the service will not be provided intify the government(s), authority or organization providing the service:
	vithin their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):
In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.

Unified Government of general fund; SPOST; possible grants Webster County How will the strategy change the previous arrangements for providing and/or funding this service within the county? Consolidation became effective January 1, 2009; there is only one general purpose local government. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy this service: Agreement Name Contracting Parties Effective and Ending Date none What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, locacts of the General Assembly, rate or fee changes, etc.), and when will they take effect? Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? ⊠Yes □No If not, provide designated contact person(s) and phone number(s) below:	Local Government or Author	ority Funding I	Method
How will the strategy change the previous arrangements for providing and/or funding this service within the county? Consolidation became effective January 1, 2009; there is only one general purpose local government. List any formal service delivery agreements or intergovernmental contracts that will be used to implement the strategy of this service: Agreement Name Contracting Parties Effective and Ending Date one What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, locacts of the General Assembly, rate or fee changes, etc.), and when will they take effect? Person completing form: George Moore Phone number: 229-828-5775 Date completed: September 9, 2009 Is this the person who should be contacted by state agencies when evaluating whether proposed local government projects are consistent with the service delivery strategy? ⊠Yes □No	Unified Government of	general fund; SPOST; possible grants	
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projects are consistent with the service delivery strategy? ⊠Yes □No	What other mechanisms (if any acts of the General Assembly, r	v) will be used to implement the strategy for this ser	vice (e.g., ordinances, resolutions, loc
finat provide designated contact person(s) and phane number(s) below:	What other mechanisms (if any acts of the General Assembly, rone Person completing form: Georg	y) will be used to implement the strategy for this servate or fee changes, etc.), and when will they take e	vice (e.g., ordinances, resolutions, loc
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FORM 2: Summary of Service Delivery Arrangements

	isted on FORM 1, Section III. Use exactly the same service names listed on FORM 1. sary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Recycling
1. Check the box that best describes the agreed upon	n delivery arrangement for this service:
Service will be provided countywide (i.e., including this box is checked, identify the government, authomorphism Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):
Service will be provided only in the unincorporate checked, identify the government, authority or organized	ed portion of the county by a single service provider. (If this box is nization providing the service.):
	within their incorporated boundaries, and the service will not be provided ntify the government(s), authority or organization providing the service:
	vithin their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Page 1 of 2

Local Government or Author	ority Funding M	ethod
Unified Government of	general fund; possible grants	
Webster County		
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e .		
How will the strategy change the	ne previous arrangements for providing and/or fundir	ng this service within the county?
Consolidation became effective	January 1, 2009; there is only one general purpose	ocal government.
γ		
List any formal service delivery this service:	agreements or intergovernmental contracts that will	be used to implement the strategy f
Agreement Name	Contracting Parties	Effective and Ending Date
Agreement Name Recycling Services	Contracting Parties Webster County and Jones Sanitation	renewed annually
Recycling Services What other mechanisms (if any		renewed annually ce (e.g., ordinances, resolutions, loc
Recycling Services What other mechanisms (if any	Webster County and Jones Sanitation (v) will be used to implement the strategy for this servi	renewed annually ce (e.g., ordinances, resolutions, loc
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What other mechanisms (if any	Webster County and Jones Sanitation (i) will be used to implement the strategy for this servicate or fee changes, etc.), and when will they take eff	renewed annually ce (e.g., ordinances, resolutions, loc







FORM 2: Summary of Service Delivery Arrangements

Instructions:

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

should be reported to the Department of Community Analis.	
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Roads/Streets and Bridges
* v v v	
1. Check the box that best describes the agreed upon	n delivery arrangement for this service:
Service will be provided countywide (i.e., including this box is checked, identify the government, authounified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):
Service will be provided only in the unincorporate checked, identify the government, authority or organization.	ed portion of the county by a single service provider. (If this box is nization providing the service.):
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
f these conditions will be eliminated under the strategorial be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.

	eral funds, special service		te how the service will be funded (e.g., el/motel taxes, franchise taxes, impact
Local Government or Author	rity	Funding	g Method
Unified Government of		OST; DOT/LARP; poss	
Webster County			
		,	
4. How will the strategy change th	e previous arrangements f	or providing and/or fun	nding this service within the county?
Consolidation became effective of the service delivery this service:			se local government. will be used to implement the strategy for
Agreement Name	Contrac	ting Parties	Effective and Ending Dates
none			
*			
	19		,
7 2 2			
What other mechanisms (if any acts of the General Assembly, re			ervice (e.g., ordinances, resolutions, loc effect?
none		-	
7. Person completing form: Georg Phone number: 229-828-5775	e Moore Date completed: Septe	ember 9, 2009	
3. Is this the person who should be projects are consistent with the			hether proposed local government
If not, provide designated contact	t person(s) and phone nun	nber(s) below:	







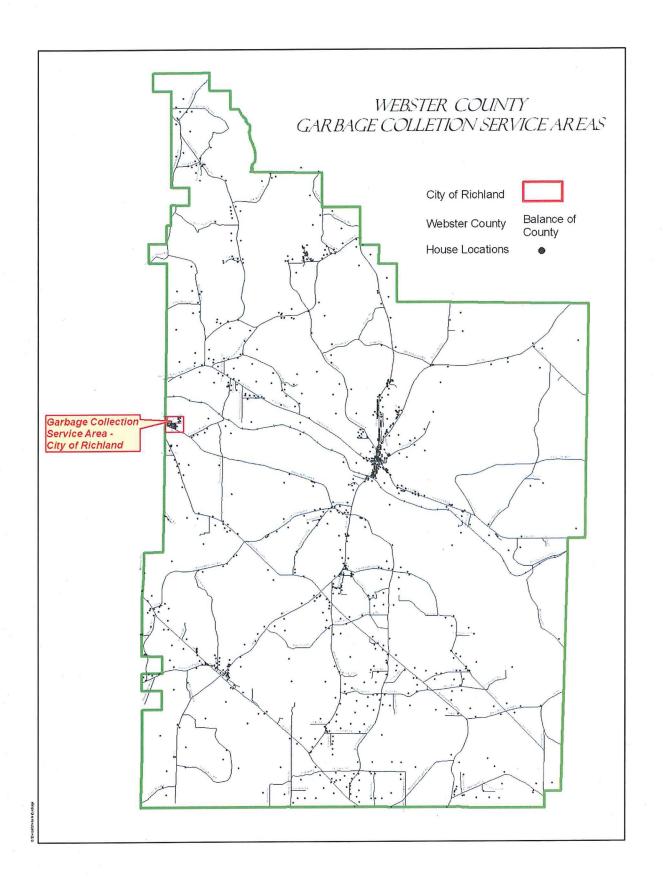
FORM 2: Summary of Service Delivery Arrangements

	sary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Solid Waste
Check the box that best describes the agreed upon	n delivery arrangement for this service:
Service will be provided countywide (i.e., including this box is checked, identify the government, authority	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):
Service will be provided only in the unincorporate checked, identify the government, authority or organized	ed portion of the county by a single service provider. (If this box is nization providing the service.):
	vithin their incorporated boundaries, and the service will not be provided ntify the government(s), authority or organization providing the service:
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	ap delineating the service area of each service provider, and ation that will provide service within each service area.): Richland (Stewart County)
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	tach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that iminated).
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	y, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.

3		will help to pay for this service and indicate how the service will be funded (e.g., ds, special service district revenues, hotel/motel taxes, franchise taxes, impact
ſ	Local Government or Authority	Funding Method

Local Government or Autho	rity Funding Meth	od	
Unified Government of	user fees; general fund; SPLOST; possible gra	user fees; general fund; SPLOST; possible grants	
Webster County			
City of Richland (Stewart County	y) user fees		
4. How will the strategy change the	e previous arrangements for providing and/or funding t	nis service within the county?	
Consolidation became effective J	lanuary 1, 2009; there is only one general purpose loca	ıl government.	
this service:	agreements or intergovernmental contracts that will be		
Agreement Name	Contracting Parties Webster County and the City of Biobland (Stouget Co	Effective and Ending Dates	
Garbage Collection	Webster County and the City of Richland (Stewart Co.	2005 open ended	
9	(see service area map)		
		1	
	will be used to implement the strategy for this service tte or fee changes, etc.), and when will they take effect		
None 7. Person completing form: George Phone number: 229-828-5775	ite or fee changes, etc.), and when will they take effect	?	

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



42-A

INTERGOVERNMENTAL AGREEMENT BETWEEN WEBSTER COUNTY AND THE CITY OF RICHLAND FOR THE PROVISION OF SOLID WASTE SERVICES

WHEREAS the Webster County Commission is interested in providing efficient, effective solid waste collection and disposal services to the citizens of the unincorporated county; and

WHEREAS the County has provided solid waste collection services to the citizens of the unincorporated county via a network of green boxes located throughout the county; and

WHEREAS the County Commission is desirous of reducing the number of green boxes located within the unincorporated county; and

WHEREAS certain residents of the unincorporated county receive municipal water service from the City of Richland; and

WHEREAS the population density of said residents makes it practical to collect solid waste on a curbside or door-to-door basis; and

WHEREAS the City of Richland provides curbside or door-to-door solid waste collection within its corporate limits; and

WHEREAS the City of Richland is desirous of working with the Webster County Commission to establish the most efficient, effective system of solid waste collection feasible for each municipal water customer residing in the unincorporated county:

THEREFORE the Webster County Commission and the City of Richland do agree as follows:

Beginning on September 1, 2005, the City of Richland shall provide solid waste collection and disposal services to each of its municipal water customers residing within the unincorporated county.

The City of Richland shall establish and bill such fees to said residents of unincorporated Webster County as it bills its own residents for the same service. The City of Richland may, however, establish a higher differential rate for the residents of the unincorporated county, but only if the higher rate is necessary to pay for the cost of providing said service. The City of Richland agrees not to charge a higher differential fee for the purpose of raising revenue for other purposes.

October, 2009 42-B

It is expressly agreed that the City of Richland shall **not** be responsible for the collection of any past due indebtedness owed by said customers to the Webster County Solid Waste Department and shall not undertake any effort to collect, for itself or Webster County, any past due accounts owed to Webster County.

The City of Richland shall have all legal jurisdiction to enforce collection of such fees as it may levy upon said customers for solid waste collection and disposal.

The City of Richland agrees to provide solid waste collection services to any and all new customers of its municipal water system, residential and commercial, within the unincorporated county at such time as the customer is added to the municipal water system.

Webster County agrees to relinquish responsibility for solid waste collection to those residents of unincorporated Webster County who receive municipal water service from the City of Richland.

Webster County agrees to remain the responsible party for the collection of past due accounts owed to the Webster County Solid Waste Department.

Webster County agrees to notify each customer who will be affected by this contract, via a letter mailed to the customer address on file, informing them of the pending change in service and of the change in billing.

This agreement shall remain in force until the Webster County Commission or the Richland City Council, or both, shall vote in favor of its termination, subject to the following: upon a vote to end said agreement, the termination of the agreement and the resumption of services by the county or its contractor, shall occur on the first day of the month, following the expiration of 90 days.

SO AGREED:	NOTE: A signed copy of the agreement could not be located. A copy of the resolution mailed to residents affected by the service is included on the following page.	
Olin Faulk, Mayor	Dave Wills, Chairman	

SEAL

SEAL

October, 2009 42-C

WEBSTER COUNTY SOLID WASTE

MEMORANDUM

DATE:

JULY 28, 2005

TO:

SOLID WASTE CUSTOMERS

FROM:

WEBSTER COUNTY SOLID WASTE DEPARTMENT

SUBJECT:

CURBSIDE PICKUP

The Webster County Commission and the City Council of Richland have agreed to provide curbside garbage collection, beginning on September 1, 2005, for those of you who live outside of the city limits of Richland, but who receive municipal water service from the city. As of that date, you will no longer be a customer of the Webster County Solid Waste Department. Instead, you will receive service from the City of Richland and will be billed by the city in conjunction with your water bill. You will remit your payment to the City of Richland.

As a customer of the City of Richland, you will have your trash picked up at your residence on the same day that trash is picked up within the city. Currently that is on Thursday of each week. Please note that you will no longer be a customer of the county, so you should not use the dumpsters that remain in the county.

We would also like to inform you that the County Commission is attempting to work out a plan for the collection and disposal or recycling of items, such as appliances, furniture, tires, etc., that have, in too many cases, been discarded at dumpsters. The intent is to devise a system that will be available to all residents of the county, including within the cities, so that there is a safe, legal manner in which to handle these items. At such time as this system is worked out, you will be notified.

Finally, if you owe past due fees to the Webster County Solid Waste Department, you will still be held liable for those fees. If you have a credit balance, a refund check will be issued to you. Please note that you will receive a bill from the County at the end of August for solid waste services for August. Thereafter, your bill will be sent by the City of Richland.

If you have any questions in this regard, please feel free to call us at 828-5775.







FORM 2: Summary of Service Delivery Arrangements

Instructions:

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

Answer each question below, attaching additional pages as neces should be reported to the Department of Community Affairs.	ssary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Street Lighting
1. Check the box that best describes the agreed upon	n delivery arrangement for this service:
Service will be provided countywide (i.e., including this box is checked, identify the government, authound the Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):
Service will be provided only in the unincorporate checked, identify the government, authority or organized	ed portion of the county by a single service provider. (If this box is inization providing the service.):
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.
	Page 4 of 2

ente	erprise funds, user fees, general fu	will help to pay for this service and indicate how the service will be funded (e.g., nds, special service district revenues, hotel/motel taxes, franchise taxes, impact
rees	s, bonded indebtedness, etc.).	
Lo	ocal Government or Authority	Funding Method
Unifi	ed Government of	franchise fee
Web	ster County	
4	-	
Y		
4. Hov	v will the strategy change the previ	ous arrangements for providing and/or funding this service within the county?
Cons	solidation became effective January	y 1, 2009; there is only one general purpose local government.
	any formal service delivery agreen service:	nents or intergovernmental contracts that will be used to implement the strategy for

Agreement Name	Contracting Parties	Effective and Ending Dates
none		
9		
- FG		
Xin		-

6. What other mechanisms (if any) will be used to implement the strategy for this service (e.g., ordinances, resolutions, local acts of the General Assembly, rate or fee changes, etc.), and when will they take effect?
none

7. Person completing form: George Moore

Phone number: 229-828-5775 Date completed: September 9, 2009

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

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







FORM 2: Summary of Service Delivery Arrangements

Instructions:

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

Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.		
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Tax Appraisal and Assessment	
r		
Check the box that best describes the agreed upon	n delivery arrangement for this service:	
Service will be provided countywide (i.e., including this box is checked, identify the government, author Unified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If writy or organization providing the service.):	
Service will be provided only in the unincorporate checked, identify the government, authority or organization.	ed portion of the county by a single service provider. (If this box is inization 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:		
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the	
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):	
In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service	
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)	
⊠No		
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).	
these conditions will be eliminated under the strated will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.	

	ity that will help to pay for this service and indieral funds, special service district revenues, h	
Local Government or Author		ing Method
Unified Government of	general fund	ing wethou
Webster County	generarium	
l. How will the strategy change th	e previous arrangements for providing and/or	funding this service within the county?
Consolidation became effective	January 1, 2009; there is only one general pur	pose local government.
i. List any formal service delivery this service:	agreements or intergovernmental contracts the	at will be used to implement the strategy for
Agreement Name	Contracting Parties	Effective and Ending Dates
none		
, 2		
*	A	
	will be used to implement the strategy for this ate or fee changes, etc.), and when will they ta	
None		
- 1 ¹ · 2		
. Person completing form: Georg Phone number: 229-828-5775	e Moore Date completed: September 9, 2009	
. Is this the person who should be projects are consistent with the	e contacted by state agencies when evaluating service delivery strategy? ⊠Yes ⊡No	whether proposed local government
If not, provide designated contact	et person(s) and phone number(s) below:	







FORM 2: Summary of Service Delivery Arrangements

	isted on FORM 1, Section III. Use exactly the same service names listed on FORM 1. sary. If the contact person for this service (listed at the bottom of the page) changes, this
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Tax Collection
Max.	
1. Check the box that best describes the agreed upon	n delivery arrangement for this service:
Service will be provided countywide (i.e., include this box is checked, identify the government, authountified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):
Service will be provided only in the unincorporate checked, identify the government, authority or organization.	ed portion of the county by a single service provider. (If this box is inization providing the service.):
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:
	within their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)
⊠No	
	ttach an explanation for continuing the arrangement (i.e., A. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).
f these conditions will be eliminated under the strated will be taken to eliminate them, the responsible party	gy, <u>attach an implementation schedule</u> listing each step or action that and the agreed upon deadline for completing it.

Unified Government of Webster County	rity Funding	Method
Webster County	general fund	*
10 (10 kg)	*	
How will the strategy change the	e previous arrangements for providing and/or fund	ling this service within the county?
	v	
Consolidation became effective J	anuary 1, 2009; there is only one general purpose	e local government
-	anaan, 1, 2000, menere to only only general purpose	9 · · · · · · · · · · · · · · · · · · ·
List any formal service delivery	agreements or intergovernmental contracts that w	ill be used to implement the strategy for
this service:	agreemente et intergevernmental eentraete that w	in so deed to implement the educacy is
		56 (15)
Agreement Name	Contracting Parties	Effective and Ending Dates
one		*
925 gr		
.u		
	will be used to implement the strategy for this ser	
		PITECT'/
	te or fee changes, etc.), and when will they take e	Sirect:
	te or fee changes, etc.), and when will they take e	SHOOL:
	te or fee changes, etc.), and when will they take e	SHOOL:
acts of the General Assembly, ra	te or fee changes, etc.), and when will they take e	
acts of the General Assembly, ra	te or fee changes, etc.), and when will they take e	
acts of the General Assembly, ra	te or fee changes, etc.), and when will they take e	oneot:
lone Person completing form: George		
Jone Person completing form: George Phone number: 229-828-5775 Is this the person who should be	e Moore	
None Person completing form: George Phone number: 229-828-5775 Is this the person who should be	e Moore Date completed: September 9, 2009 contacted by state agencies when evaluating wh	
	e Moore	







FORM 2: Summary of Service Delivery Arrangements

Make copies of this form and complete one for each service listed on FORM 1, Section III. Use exactly the same service names listed on FORM 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.		
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Voter Registration	
1. Check the box that best describes the agreed upon	n delivery arrangement for this service:	
Service will be provided countywide (i.e., including this box is checked, identify the government, authounified Government of Webster County	ing all cities and unincorporated areas) by a single service provider. (If rity or organization providing the service.):	
Service will be provided only in the unincorporate checked, identify the government, authority or organization.	ed portion of the county by a single service provider. (If this box is nization providing the service.):	
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:	
	vithin their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the	
	ap delineating the service area of each service provider, and ation that will provide service within each service area.):	
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service	
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)	
⊠No	· · · · · · · · · · · · · · · · · · ·	
If these conditions will continue under this strategy, <u>attach an explanation for continuing the arrangement</u> (i.e., overlapping but higher levels of service (See O.C.G.A. 36-70-24(1)), overriding benefits of the duplication, or reasons that overlapping service areas or competition cannot be eliminated).		
If these conditions will be eliminated under the strateg will be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.	

	ty that will help to pay for this service and in eral funds, special service district revenues,).	
Local Government or Author		ading Method
Unified Government of	general fund	ding wethou
Webster County	general fund	
. How will the strategy change the	e previous arrangements for providing and/o	or funding this service within the county?
a		
Consolidation became effective J	anuary 1, 2009; there is only one general pu	urpose local government.
List any formal service delivery this service:	agreements or intergovernmental contracts	that will be used to implement the strategy fo
Agreement Name	Contracting Parties	Effective and Ending Dates
none		
2 · · · · · · · · · · · · · · · · · · ·		
acts of the General Assembly, ra	will be used to implement the strategy for the te or fee changes, etc.), and when will they	nis service (e.g., ordinances, resolutions, locatake effect?
None		
Person completing form: Georg Phone number: 229-828-5775	P Moore Date completed: September 9, 2009	
	contacted by state agencies when evaluating ervice delivery strategy? ⊠Yes □No	ng whether proposed local government
If not, provide designated contac	t person(s) and phone number(s) below:	







FORM 2: Summary of Service Delivery Arrangements

Make copies of this form and complete one for each service listed on FORM 1, Section III. Use exactly the same service names listed on FORM 1. Answer each question below, attaching additional pages as necessary. If the contact person for this service (listed at the bottom of the page) changes, this should be reported to the Department of Community Affairs.			
COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY	Service: Water Treatment and Distribution		
Check the box that best describes the agreed upor	n 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.):			
	within their incorporated boundaries, and the service will not be provided entify the government(s), authority or organization providing the service:		
	vithin their incorporated boundaries, and the county will provide the ked, identify the government(s), authority or organization providing the		
⊠Other (If this box is checked, <u>attach a legible maidentify</u> the government, authority, or other organiza Unified Government of Webster County and City	ap delineating the service area of each service provider, and ation that will provide service within each service area.): y of Richland (Stewart County)		
2. In developing this strategy, were overlapping service identified?	ce areas, unnecessary competition and/or duplication of this service		
☐ Yes (if "Yes," you must attach additional docume	entation as described, below)		
⊠No			
	ttach an explanation for continuing the arrangement (i.e., a. 36-70-24(1)), overriding benefits of the duplication, or reasons that liminated).		
f these conditions will be eliminated under the strategwill be taken to eliminate them, the responsible party	gy, attach an implementation schedule listing each step or action that and the agreed upon deadline for completing it.		
99	Page 1 of 2		

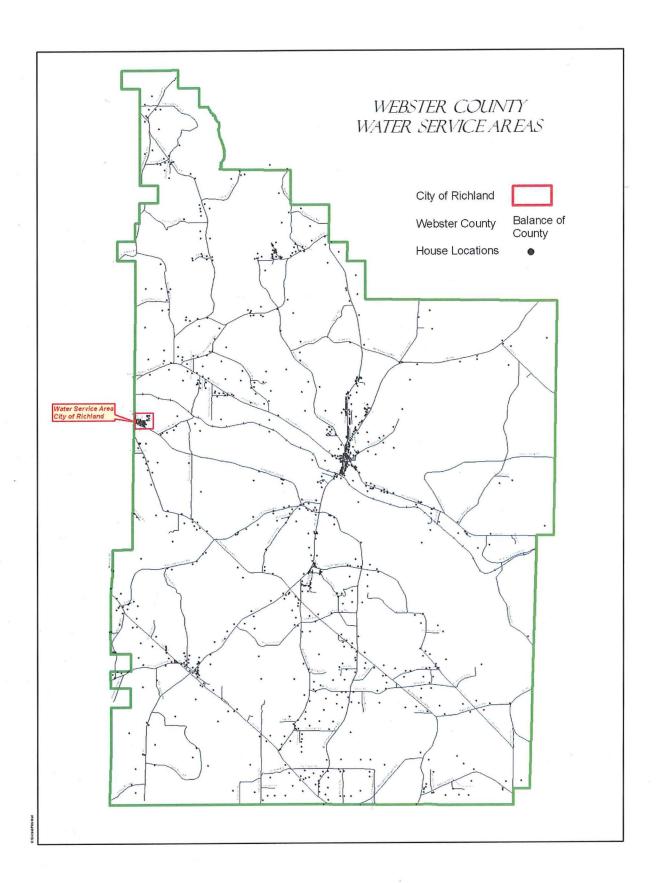
3	List each government or authority that will help to pay for this service and indicate how the service will be funded (e	e.g.,
	enterprise funds, user fees, general funds, special service district revenues, hotel/motel taxes, franchise taxes, imp	pact
	fees, bonded indebtedness, etc.).	

Local Government or Authority		Funding Method		
Unified Government of us		user fees; SPLOST; general fund; possible grants for infrastructure		
Webster County				
City of Richland		user fees; SPLOST; general fund; possible grants for infrastructure		
		ous arrangements for providing and/or funding		
this service:	ry agreen	nents or intergovernmental contracts that will	be used to implement the strategy for	
Agreement Name		Contracting Parties	Effective and Ending Dates	
	Webst	Contracting Parties er County and City of Richland	Effective and Ending Dates open ended	
Agreement Name				
Agreement Name		er County and City of Richland		
Agreement Name		er County and City of Richland		
Agreement Name		er County and City of Richland		
Agreement Name		er County and City of Richland		

7. Person completing form: **George Moore**Phone number: **229-828-5775** Date completed: September 9, 2009

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

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



Intergovernmental Agreement for Residential Water Service between The City of Richland and

The Unified Government of Webster County

WHEREAS; the Webster County Board of Commissioners did request the City of Richland to extend residential water service into Webster County to meet the domestic water needs of residents of Wildwood Estates, a residential subdivision adjacent to the western boundary of Webster County, and the immediate surrounding environs of said subdivision, and

WHEREAS; the City of Richland did agree to said request to extend residential water service across the county line into Webster County to serve the domestic water needs of residents of said area, and

WHEREAS; the City of Richland did obligate and expend local funds to extend residential water service into said service area, and

WHEREAS; the City of Richland must charge all customers of said water service, resident and non-resident, a user fee to cover the costs of providing and maintaining said service, and

WHEREAS; said user fee changes from time to time for all customers to reflect the changing costs of providing said service, and

WHEREAS; said user fee assessed the residents of Wildwood Estates and the immediately surrounding environs is higher than the fees assessed residents of Richland because of extra costs associated with providing and maintaining a lengthy service extension into the extra-territorial service area.

THE PARTIES HERETO DO HERBY AGREE AS FOLLOWS:

- 1. The Commissioners of the Unified Government of Webster County do hereby request that the City of Richland continue to maintain residential water service delivery to the Wildwood Estates subdivision and the immediately surrounding environs as indicated on the attached map, identified as "Webster County Water Service Areas", and
- 2. The City of Richland affirms that user fees charged customers of the Richland water system will change from time to time depending on the changing costs of providing said service, and that said user fees assessed residents and non-residents alike will not be arbitrary, and that user fees will be based on such costs of providing service as debt service on capital outlays, equipment/material replacement costs, personnel costs, costs of monitoring water pressure, et al.

Agreed to on the dates set forth below:

CITY OF RICHLAND	0
Alphane Ja	[] 24. Dag = 1-2,5=1 &
Mayor /	date
^	

UNIFIED GOVERNMENT OF WEBSTER COUNTY

Chairman

date

Vitness da

Witnes

date







FORM 4: Certifications

Instructions:

This two page form must, at a minimum, be signed by an authorized representative of the following governments: 1) the county; 2) the city serving as the county seat; 3) all cities having a 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.

COUNTY: UNIFIED GOVERNMENT OF WEBSTER COUNTY

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

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

JURISDICTION	TITLE	NAME	SIGNATURE	DATE
UNIFIED GOVERNMENT OF WEBSTER COUNTY	chairman	George Moore	Sey mon	10/15/09
				4
October, 2009	2.	P	53	У.

UNIFIED GOVERNMENT OF WEBSTER COUNTY

Office: (229) 828-5775 Fax: (229) 828-2105 Post Office Box 29 Preston, Georgia 31824 George Moore, Chairman Melvin Crimes Jack Holbrook Jonah McCluster David Scott

RESOLUTION APPROVING AND AUTHORIZING EXECUTION SERVICE DELIVERY STRATEGY

WHEREAS; O.C.G.A. 36-70-20 requires each County of the State of Georgia and municipalities therein to develop a Service Delivery Strategy to identify overlap(s) and/or gaps in delivery of local public service(s), and to develop a rational approach to allocating delivery and funding of local public services, and

WHEREAS; consolidation of the general purpose local governments of Webster County, the City of Preston and the City of Weston into the Unified Government of Webster County, effective January 1, 2009, necessitates revision of the current Service Delivery Strategy, and

WHEREAS; the Board of Commissioners of the Unified Government of Webster County has reviewed the services provided by the county and has prepared a Service Delivery Strategy for the Unified Government, and

WHEREAS; the governing body desires to approve the new Service Delivery Strategy, to authorize appropriate officials of Webster County to execute same on behalf of Webster County, and to submit the duly executed Service Delivery Strategy to the Georgia Department of Community Affairs as required by law

NOW, THEREFORE, BE IT RESOLVED by the Board of Commissioners of the Unified Government of Webster County, as follows:

- 1. That the Service Delivery Strategy of the Unified Government of Webster County is hereby approved, and
- 2. That the Chairman is authorized to execute the Service Delivery Strategy on behalf of the Unified Government of Webster County, and
- 3. The Clerk of Commissioners of the Unified Government of Webster County is authorized to attest the signature of the Chairman on the certifications page of said revision, and
- 4. That a copy of this resolution along with the Service Delivery Strategy be submitted to the Georgia Department of Community Affairs for verification pursuant to Georgia law.

BOARD OF COMMISSIONERS	
WEBSTER COUNTY, GEORGIA	
George Mare Chairman	Delhi Willia
George Moore, Chairman	Debbie Willis, Clerk of Commissioners

Duly approved and executed in session this 15th day of October, 2009.