Service Delivery Strategy

Houston County and the Cities of Centerville, Perry, and Warner Robins

FEBRUARY 2017

Previous Versions:
May 1999
July 2006
May 2009
April 2014

Georgia Department of Community Affairs

SERVICE DELIVERY STRATEGY

FORM 1

COUNTY: HOUSTON

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***	**OPTION B** ***Extending the Existing 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).]	4. In Section IV type, "NONE." 5. Complete one copy of the *Certifications for Extension of Existing SDS* form (FORM 5) and have it signed by the authorized representatives of the participating local governments. [Please note that DCA cannot validate the strategy unless it is signed by the local governments required by law (see Instructions, FORM 5).] 6. Proceed to step 7, below. ***For answers to most frequently asked questions on Georgia's Service Delivery Act, links and helpful publications, visit DCA's website at http://www.dca.ga.gov/development/PlanningQualityGrowth/programs/servicedelivery.asp, or call the Office of Planning and Quality Growth at (404) 679-5279.***

7. If any of the conditions described in the existing *Summary of Land Use Agreements* form (FORM 3) have changed or if it has been ten (10) or more years since the most recent FORM 3 was filed, update and include FORM 3 with the submittal.

8. Provide the completed forms and any attachments to your regional commission. The regional commission will upload digital copies of the SDS documents to the Department's password-protected web-server.

NOTE: ANY FUTURE CHANGES TO THE SERVICE DELIVERY ARRANGEMENTS DESCRIBED ON THESE FORMS WILL REQUIRE AN 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.

II. Local Governments Included in the Service Delivery Strategy:

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

City of Centerville, Houston County, City of Perry, City of Warner Robins, Perry-Houston County Airport Authority, Houston County Development Authority, Jointly Owned Natural Gas

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.

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.

Airport, Animal Control, Building Code Enforcement & Inspection, Court Services, E-911 Communications, Economic Development, Emergency Management Services, Fire Protection/Prevention, Landfill, Law Enforcement, Library, Natural Gas, Recreation, Roads and Bridges, Sewerage Collection, Sewerage Treatment, Solid Waste Collection/Recycling, Stormwater Management, Street Lighting, Tourism-Convensions and Visitors, Water Services

Georgia Department of Community Affairs

SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

Instructions:

Make copies of this form and complete one for each service 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: HOUSTON	**Service: *Airport***

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

☒ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.): **Perry-Houston County Airport Authority**

☐ Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐ One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☐ One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

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

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐ ***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒ ***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Perry-Houston County Airport Auth.	Revenues from Houston County and City of Perry
Houston County	General Fund
City of Perry	General Fund and User Fees

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

The strategy for service delivery does not change from the county's previous Service Delivery Strategy.

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*
Airport Agreement and	Houston County & City of Perry	Feb. 1994 - Perpetual
local legislation		

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated. Local governments may in the future consider SPLOST funding for capital improvements associated with this service.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

Instructions:

Make copies of this form and complete one for each service listed on FORM 1, Section 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: HOUSTON	**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.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☒One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.): **Houston County and the Cities of Centerville, Perry, and Warner Robins**

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

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County	Insurance Premium Tax
City of Centerville	General Fund
City of Perry	General Fund and User Fees
City of Warner Robins	General Fund and User Fees

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

The strategy for service delivery does not change significantly from the previous Service Delivery Strategy. The City of Centerville has joined in the animal boarding agreement between Houston County and Warner Robins. Animals from all three jurisdictions now are boarded by the City of Warner Robins. The City of Perry has also added User Fees as a source of funding.

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*
Animal Control (Bording)	Houston County, Centerville, & Warner Robins	July 2008 - Auto Renewal

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

Instructions:

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COUNTY: HOUSTON	**Service: *Building Code Enforcement & Inspection***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☒One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.): **Houston County and the Cities of Centerville, Perry, and Warner Robins**

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

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County	User Fees and Insurance Premium Tax
City of Centerville	General Fund and User Fees
City of Perry	General Fund and User Fees
City of Warner Robins	General Fund and User Fees

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

Houston County has added the Insurance Premium Tax as a source of funding for this service. The delivery of services is unchanged from the last Service Delivery Strategy.

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

Agreement Name	*Contracting Parties*	*Effective and Ending Dates*

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

Georgia Department of Community Affairs

SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

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COUNTY: HOUSTON	**Service: *Court Services***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☐One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

☒Other (If this box is checked, **attach a legible map delineating the service area of each service provider,** and identify the government, authority, or other organization that will provide service within each service area.): **Houston County provides service of five courts countywide, and all cities provide municipal court services within their incorporated boundaries.**

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County	General Fund
City of Centerville	General Fund
City of Perry	General Fund and User Fees
City of Warner Robins	General Fund

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

The strategy for service delivery does not change from the previous Service Delivery Strategy. No overlapping service areas, unnecessary competition, or duplication of services occur, as Houston County provides Superior, State, Magistrate, Probate, and Juvenile Court services, and the cities provide Municipal Court services.

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

Agreement Name	*Contracting Parties*	*Effective and Ending Dates*

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

Georgia Department of Community Affairs

SERVICE DELIVERY STRATEGY

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COUNTY: HOUSTON	**Service: *E-911 Communications***

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.): **Houston County (Sheriff's Office)**

☐ Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐ One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☐ One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

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

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐ ***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒ ***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County	E-911 Telephone Fund
City of Centerville	General Fund
City of Perry	General Fund
City of Warner Robins	General Fund

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

The strategy for service delivery does not change from the previous Service Delivery Strategy. Houston County has designated a separate fund for E-911 service. Revenue from the County and all Cities support the Houston County Sheriff's Office in providing this service.

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*
E-911 Agreement	Houston County and all Cities	June 1996 - Auto Renewal

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

SERVICE DELIVERY STRATEGY

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COUNTY: HOUSTON	**Service: *Economic Development***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☐One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

☒Other (If this box is checked, **attach a legible map delineating the service area of each service provider,** and identify the government, authority, or other organization that will provide service within each service area.): **Houston County Development Authority, City of Centerville, City of Perry, City of Warner Robins**

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☒***Yes*** (if "Yes," you must attach additional documentation as described, below)

☐***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County Development Auth.	General Fund
City of Centerville	General Fund
City of Perry	General Fund
City of Warner Robins	General Fund

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

Since the last Service Delivery Strategy Agreement, each city has also begun activities in providing economic development services within their incorporated boundaries. Houston County continues to solely fund the Houston County Development Authority, which provides economic development services countywide. The cities provide a higher level of specialized service in their incorporated boundaries through their provision of economic development services.

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

Agreement Name	*Contracting Parties*	*Effective and Ending Dates*

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

Instructions:

Make copies of this form and complete one for each service listed on FORM 1, Section 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: HOUSTON	**Service: *Emergency Management Services***

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

☒ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.): **Houston County**

☐ Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐ One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☐ One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

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

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐ ***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒ ***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County	General Fund

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

The strategy for service delivery does not change from the previous Service Delivery Strategy.

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*
Emergency Management Svc.	Houston County, all Cities, GEMA	Oct 1993 - Perpetual

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

Georgia Department of Community Affairs

SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

Instructions:

Make copies of this form and complete one for each service 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: HOUSTON	**Service: *Fire Protection/Prevention***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☒One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.): **Houston County and the Cities of Centerville, Perry, and Warner Robins**

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

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County	Special Tax District
City of Centerville	General Fund
City of Perry	General Fund and Special Tax District
City of Warner Robins	General Fund

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

The strategy for service delivery does not change from the previous Service Delivery Strategy. The City of Perry has added a Special Tax District to assist in funding these services.

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*
Mutual Aid Agreements	Houston County and all Cities	2011 - 2021

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

Georgia Department of Community Affairs

SERVICE DELIVERY STRATEGY

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COUNTY: HOUSTON	**Service: *Landfill***

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.): **Houston County**

☐ Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐ One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☐ One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

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

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐ ***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒ ***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County	Enterprise Fund

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

The strategy for service delivery does not change from the previous Service Delivery Strategy. Houston County remains the sole provider of landfill services within the county boundaries. Agreements of Houston County and the City of Perry send all collected waste to this landfill. Warner Robins does not currently use the Houston County landfill for disposal of solid waste. The City of Centerville does not have a set agreement for landfill services, as their contractor for solid waste disposal regularly reviews tipping costs in the local area for the best price.

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*
Landfill Services Agreement	Houston County with City of Perry, City of Hawkinsville	Jan 1997 - Annual Renewal
	& Pulaski County, and City of Cochran & Bleckley Co.	
Landfill Services Agreement	Crisp Co. Solid Waste Auth. with City of Warner Robins	1996 - 2021

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

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COUNTY: HOUSTON	**Service: *Law Enforcement***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☐One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

☒Other (If this box is checked, **attach a legible map delineating the service area of each service provider,** and identify the government, authority, or other organization that will provide service within each service area.): **Houston County (Sheriff's Office) provides this service countywide and all Cities provide within their incorporated areas.**

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☒***Yes*** (if "Yes," you must attach additional documentation as described, below)

☐***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County	General Fund
City of Centerville	General Fund
City of Perry	General Fund
City of Warner Robins	General Fund

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

The strategy for service delivery does not change from the previous Service Delivery Strategy. Each city continues to provide a higher level of specialized service within their incorporated boundaries. Houston County, though the Sheriff's Office, continues to provide this service countywide.

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

Agreement Name	*Contracting Parties*	*Effective and Ending Dates*

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

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COUNTY: HOUSTON	**Service: *Library***

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

☒ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.): **Houston County**

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☐One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

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

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County	General Fund

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

The strategy for service delivery does not change from the previous Service Delivery Strategy.

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

Agreement Name	*Contracting Parties*	*Effective and Ending Dates*

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

Georgia Department of Community Affairs

SERVICE DELIVERY STRATEGY

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COUNTY: HOUSTON	**Service: *Natural Gas***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☐One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

☒Other (If this box is checked, **attach a legible map delineating the service area of each service provider,** and identify the government, authority, or other organization that will provide service within each service area.): **City of Perry provides service within the Perry city limits; City of Warner Robins provides service within the Warner Robins City Limits; and Jointly Owned Natural Gas provides service within the Centerville City Limits, part of the Warner Robins City Limits and in the unincorporated county.**

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
City of Perry	Enterprise Fund
City of Warner Robins	Enterprise Fund
Jointly Owned Natural Gas	Enterprise Fund

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

The strategy for service delivery does not change from the previous Service Delivery Strategy. The City of Byron has joined the partnership of Jointly Owned Natural Gas.

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*
Jointly Owned Transmission	Byron, Cochran, Hawkinsville, Perry, & Warner Robins	July 1958 - Perpetual

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

SERVICE DELIVERY STRATEGY

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COUNTY: HOUSTON	**Service: *Recreation***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☐One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

☒Other (If this box is checked, **attach a legible map delineating the service area of each service provider,** and identify the government, authority, or other organization that will provide service within each service area.): **City of Perry and City of Warner Robins both provide recreational opportunities that are available to residents countywide.**

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☒***Yes*** (if "Yes," you must attach additional documentation as described, below)

☐***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
City of Perry	General Fund and User Fees
City of Warner Robins	General Fund and User Fees

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

The City of Centerville no longer provides recreation services. Perry and Warner Robins continue to do so, with city residents receiving a discount on user fees. Out-of-county residents may also use recreation services offered by the City of Perry or City of Warner Robins for an additional cost.

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*
Recreation Agreement	Houston County and all Cities	July 1991 - Perpetual

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

Georgia Department of Community Affairs

SERVICE DELIVERY STRATEGY

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COUNTY: HOUSTON	**Service: *Roads and Bridges***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☒One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.): **Houston County and Cities of Centerville, Perry, and Warner Robins**

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

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County	General Fund
City of Centerville	General Fund
City of Perry	General Fund
City of Warner Robins	General Fund

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

The strategy for service delivery does not change from the previous Service Delivery Strategy. The existing traffic light maintenance agreement between Houston County and the City of Warner Robins expired in 2010.

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*
WRATS-DOT Agreement	Houston County & All Cities, Peach County, & Byron	2004 - Perpetual

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

Georgia Department of Community Affairs

SERVICE DELIVERY STRATEGY

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COUNTY: HOUSTON	**Service: *Sewerage Collection***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☐One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

☒Other (If this box is checked, **attach a legible map delineating the service area of each service provider,** and identify the government, authority, or other organization that will provide service within each service area.): **Cities of Centerville, Perry, and Warner Robins**

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
City of Centerville	Enterprise Fund
City of Perry	Enterprise Fund
City of Warner Robins	Enterprise Fund

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

The City of Centerville and Warner Robins have continued their wastewater agreement. Centerville continues to collect sewerage within their service area before transmitting it to Warner Robins for treatment. No other service delivery has changed since the last strategy.

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*
Wastewater 201 Facilities Plan	Houston County & Cities of Centerville & Warner Robins	Aug 1980 - Perpetual
Wastewater Agreement	City of Centerville & City of Warner Robins	June 1976 - Ongoing

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated. Local governments may in the future consider SPLOST funding for capital improvements associated with this service.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

Instructions:

Make copies of this form and complete one for each service listed on FORM 1, Section 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: HOUSTON	**Service: *Sewerage Treatment***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☐One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

☒Other (If this box is checked, **attach a legible map delineating the service area of each service provider,** and identify the government, authority, or other organization that will provide service within each service area.): **City of Perry and City of Warner Robins**

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
City of Perry	Enterprise Fund
City of Warner Robins	Enterprise Fund

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

The City of Centerville and Warner Robins have renewed their wastewater agreement. Centerville continues to collect sewerage within their service area before transmitting it to Warner Robins for treatment. No other service delivery has changed since the last strategy.

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*
Wastewater 201 Facilities Plan	Houston County & Cities of Centerville & Warner Robins	Aug 1980 - Perpetual
Wastewater Agreement	City of Centerville & City of Warner Robins	June 1976 - Ongoing

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated. Local governments may in the future consider SPLOST funding for capital improvements associated with this service.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

Instructions:

Make copies of this form and complete one for each service listed on FORM 1, Section 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: HOUSTON	**Service: *Solid Waste Collection/Recycling***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☒One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.): **Houston County and the Cities of Centerville, Perry, and Warner Robins**

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

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County	Insurance Premium Tax and User Fees
City of Centerville	User Fees
City of Perry	Enterprise Fund
City of Warner Robins	Enterprise Fund and User Fees

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

The strategy does not change from the county's previous Service Delivery Strategy.

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

Agreement Name	*Contracting Parties*	*Effective and Ending Dates*

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated. Local governments may in the future consider SPLOST funding for capital improvements associated with this service.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

Instructions:

Make copies of this form and complete one for each service listed on FORM 1, Section 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: HOUSTON	**Service: *Stormwater Management***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☒One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.): **Houston County and the Cities of Centerville, Perry, and Warner Robins**

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

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County	Insurance Premium Tax, User Fees, and General Fund
City of Centerville	Enterprise Fund
City of Perry	Enterprise Fund
City of Warner Robins	Enterprise Fund

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

Each local government has changed their funding arrangements for this service since the last Service Delivery Strategy. The service areas and strategy for provision are unchanged.

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*
Water Resources Ordinance	Houston County and all Cities	Jan 2006 - Perpetual

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated. Local governments may in the future consider SPLOST funding for capital improvements associated with this service.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

Georgia Department of Community Affairs

SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

Instructions:

Make copies of this form and complete one for each service 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: HOUSTON	**Service: *Street Lighting***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☒One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service: **Cities of Centerville, Perry, and Warner Robins**

☐One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

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

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
City of Centerville	General Fund
City of Perry	General Fund
City of Warner Robins	General Fund

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

The strategy for service delivery does not change from the county's previous Service Delivery Strategy.

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

Agreement Name	*Contracting Parties*	*Effective and Ending Dates*

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated. Local governments may in the future consider SPLOST funding for capital improvements associated with this service.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

SERVICE DELIVERY STRATEGY

FORM 2: Summary of Service Delivery Arrangements

Instructions:

Make copies of this form and complete one for each service listed on FORM 1, Section 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: HOUSTON	**Service: *Tourism-Conventions and Visitors***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☒One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service: **City of Perry and City of Warner Robins**

☐One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

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

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
City of Perry	Hotel/Motel Tax Funds
City of Warner Robins	Hotel/Motel Tax Funds and General Fund

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

The strategy for service delivery does not change from the county's previous Service Delivery Strategy. General Fund has been added as a potential revenue source for City of Warner Robins.

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

Agreement Name	*Contracting Parties*	*Effective and Ending Dates*

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated. Local governments may in the future consider SPLOST funding for capital improvements associated with this service.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

SERVICE DELIVERY STRATEGY

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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: HOUSTON	**Service: *Water Services***

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

☐ Service will be provided countywide (i.e., including all cities and unincorporated areas) by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐Service will be provided only in the unincorporated portion of the county by a single service provider. (If this box is checked, identify the government, authority or organization providing the service.):

☐One or more cities will provide this service only within their incorporated boundaries, and the service will not be provided in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service:

☐One or more cities will provide this service only within their incorporated boundaries, and the county will provide the service in unincorporated areas. (If this box is checked, identify the government(s), authority or organization providing the service.):

☒Other (If this box is checked, **attach a legible map delineating the service area of each service provider,** and identify the government, authority, or other organization that will provide service within each service area.): **Houston County and the Cities of Centerville, Perry, and Warner Robins**

2. In developing this strategy, were overlapping service areas, unnecessary competition and/or duplication of this service identified?

☐***Yes*** (if "Yes," you must attach additional documentation as described, below)

☒***No***

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

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

SDS FORM 2, continued

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

Local Government or Authority	*Funding Method*
Houston County	Enterprise Fund
City of Centerville	Enterprise Fund
City of Perry	Enterprise Fund
City of Warner Robins	Enterprise Fund

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

The strategy for service delivery does not change from the county's previous Service Delivery Strategy.

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*
Water Services Agreement	Houston County and Cities of Perry and Warner Robins	Ongoing
Water Services Agreement	Cities of Centerville and Warner Robins	Ongoing

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

The Service Delivery Strategy resolution adopted by each local government will formally initiate any changes to this Service Delivery Strategy, and any associated intergovernmental agreements listed in this document will remain in effect, unless otherwise stated. Local governments may in the future consider SPLOST funding for capital improvements associated with this service.

7. Person completing form: **Greg Boike, Middle Georgia Regional Commission**
Phone number: **(478) 751-6160** Date completed: January 17, 2017

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:
BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

Georgia Department of Community Affairs

SERVICE DELIVERY STRATEGY

FORM 3: Summary of Land Use Agreements

Instructions:

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

COUNTY: HOUSTON

1. What incompatibilities or conflicts between the land use plans of local governments were identified in the process of developing the service delivery strategy?
Houston County and the Cities of Centerville, Perry, and Warner Robins have adopted a Joint Comprehensive Plan that contains a compatible and nonconflicting Land Use element. The County and all three Cities utilize the existing Land Use element contained within the Joint Comprehensive Plan as a basis for land use classifications within their jurisdictions.

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

☒ Amendments to existing comprehensive plans

☒ Adoption of a joint comprehensive plan

☐ Other measures (amend zoning ordinances, add environmental regulations, etc.)

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

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

3. What policies, procedures and/or processes have been established by local governments (and water and sewer authorities) to ensure that new extraterritorial water and sewer service will be consistent with all applicable land use plans and ordinances? Houston County and the Cities of Centerville, Perry, and Warner Robins have adopted a process for addressing water and sewer line extensions. The jurisdiction proposing to expand its services must notify the other jurisdiction and give it sufficient time to analyze and comment on its potential impact.

4. Person completing form: **Greg Boike, Middle Georgia Regional Commission**

Phone number: **(478) 751-6160** Date completed: January 17, 2017

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

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

BARRY HOLLAND, HOUSTON COUNTY DIRECTOR OF ADMINISTRATION, (478) 542-2115

Georgia Department of Community Affairs

SERVICE DELIVERY STRATEGY

FORM 4: Certifications

Instructions:

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

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
HOUSTON COUNTY	Chairman	Tommy Stalnaker		
CITY OF CENTERVILLE	Mayor	John Harley		
CITY OF PERRY	Mayor	Jimmy Faircloth		
CITY OF WARNER ROBINS	Mayor	Randy Toms		

Middle Georgia Regional Commission
175 Emery Highway, Suite C · Macon, Georgia 31217 · (478) 751-6160 · FAX (478) 751-6517 · www.middlegeorgiarc.org

M. A. "Butch" Hall, Chairman

Laura Mathis, Executive Director

MEMORANDUM

TO: Jon West, Georgia Department of Community Affairs

FROM: Greg Boike, Middle Georgia Regional Commission GMB

DATE: January 17, 2017

SUBJECT: Overlapping Service Areas in 2017 Houston County SDS Update

cc: Chairman Tommy Stalnaker, Houston County; Mayor John Harley, City of Centerville; Mayor Jimmy Faircloth, City of Perry; Mayor Randy Toms, City of Warner Robins

BACKGROUND:

Under the Service Delivery Act, as amended in 2008, local governments across the State of Georgia are periodically required to review the delivery of services among jurisdictions within each of Georgia's 159 counties. This law requires local governments to identify and attempt to avoid overlapping areas of service delivery; however, it notes that municipalities providing a service at a higher level than the base level of service throughout the county shall not be considered a duplication of the county service.

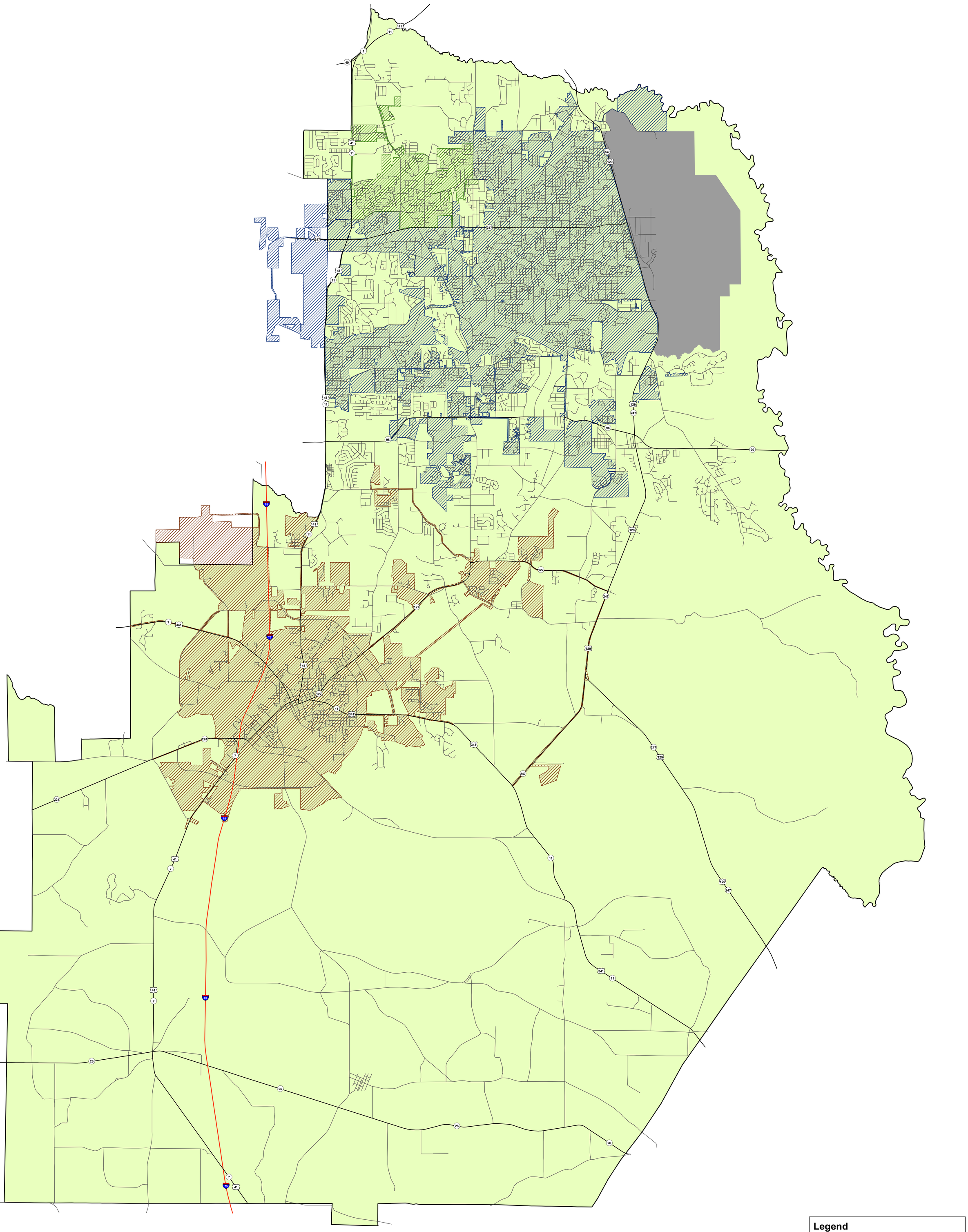
POTENTIAL OVERLAPPING SERVICE AREAS:

Under the 2017 Service Delivery Strategy for Houston County, several services may appear to contain overlapping service areas. Economic Development services are provided by the Houston County Development Authority on a countywide basis, and are also provided within each city. Law Enforcement services are also provided countywide by the Houston County Sheriff's Office, as well as being provided within each city. Finally, Warner Robins and Perry both provide recreation services, which are available countywide.

EXPLANATION OF CONTINUED ARRANGEMENT:

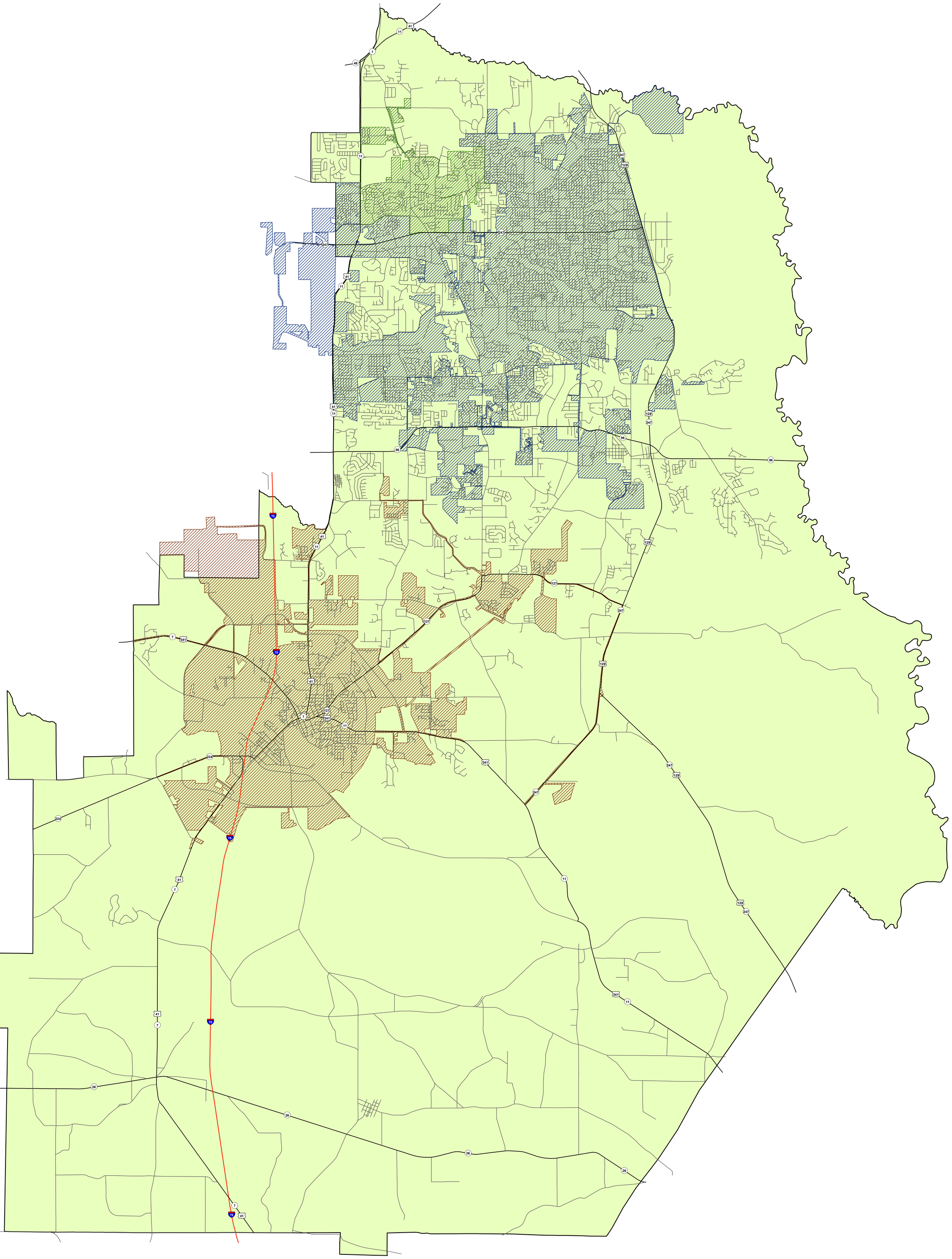
In the case of economic development services and law enforcement services, the municipalities provide a higher level of the base level of service throughout the county and should not be considered a duplication of services. For recreation services, an overriding benefit of duplication exists due to the geographic distance between the two jurisdictions, and due to the variety of specific recreational opportunities provided by each community. Finally, the difficulty in creating exclusionary public spaces also provides justification for this continued arrangement.

Houston County Court Services Service Area



Houston County Economic Development Service Area

N
W E
S



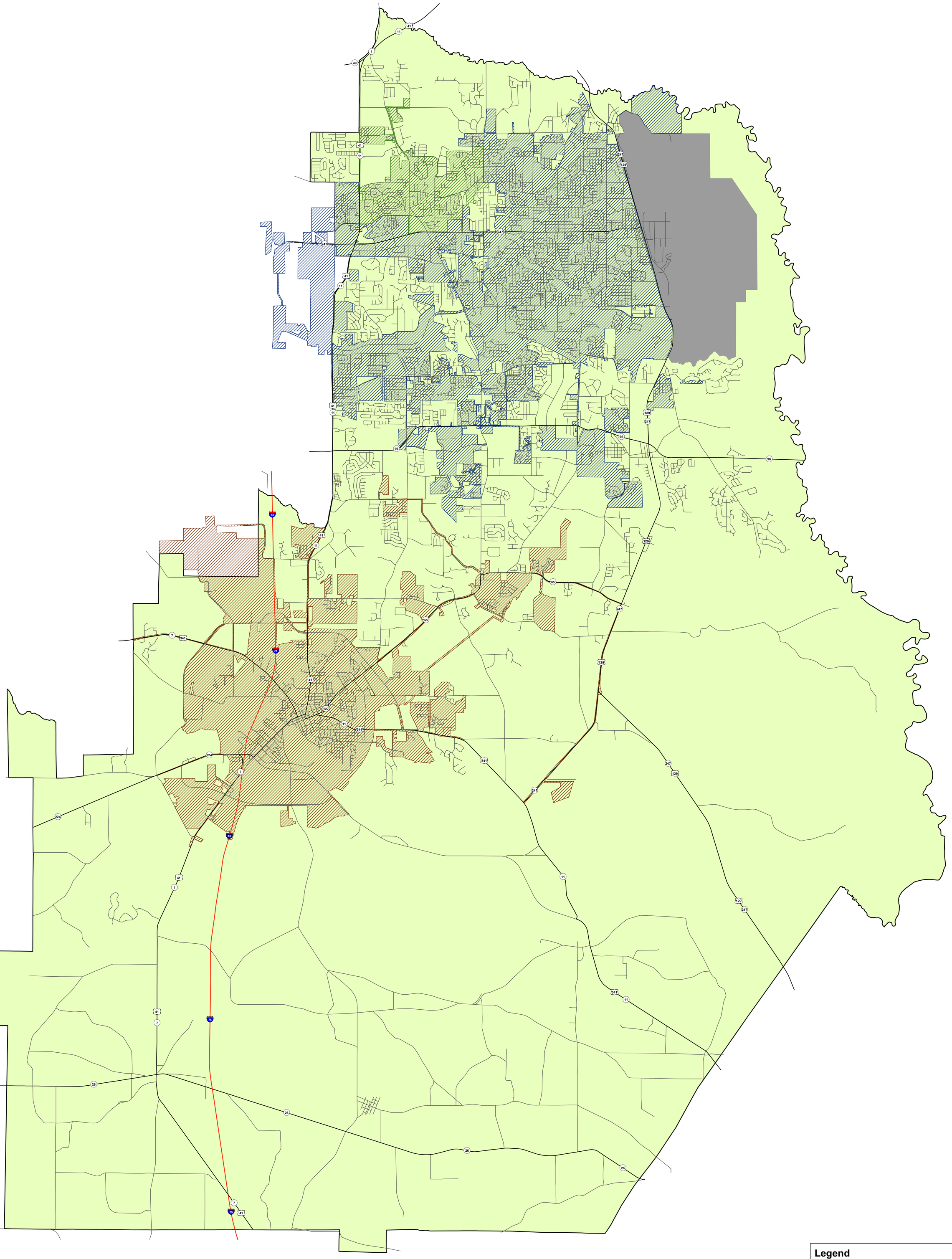
Legend

- City of Centerville Service Area
- City of Perry Service Area
- City of Warner Robins Service Area
- Houston County Development Authority Service Area

MGRC

Houston County Law Enforcement Service Area

N
W E
S



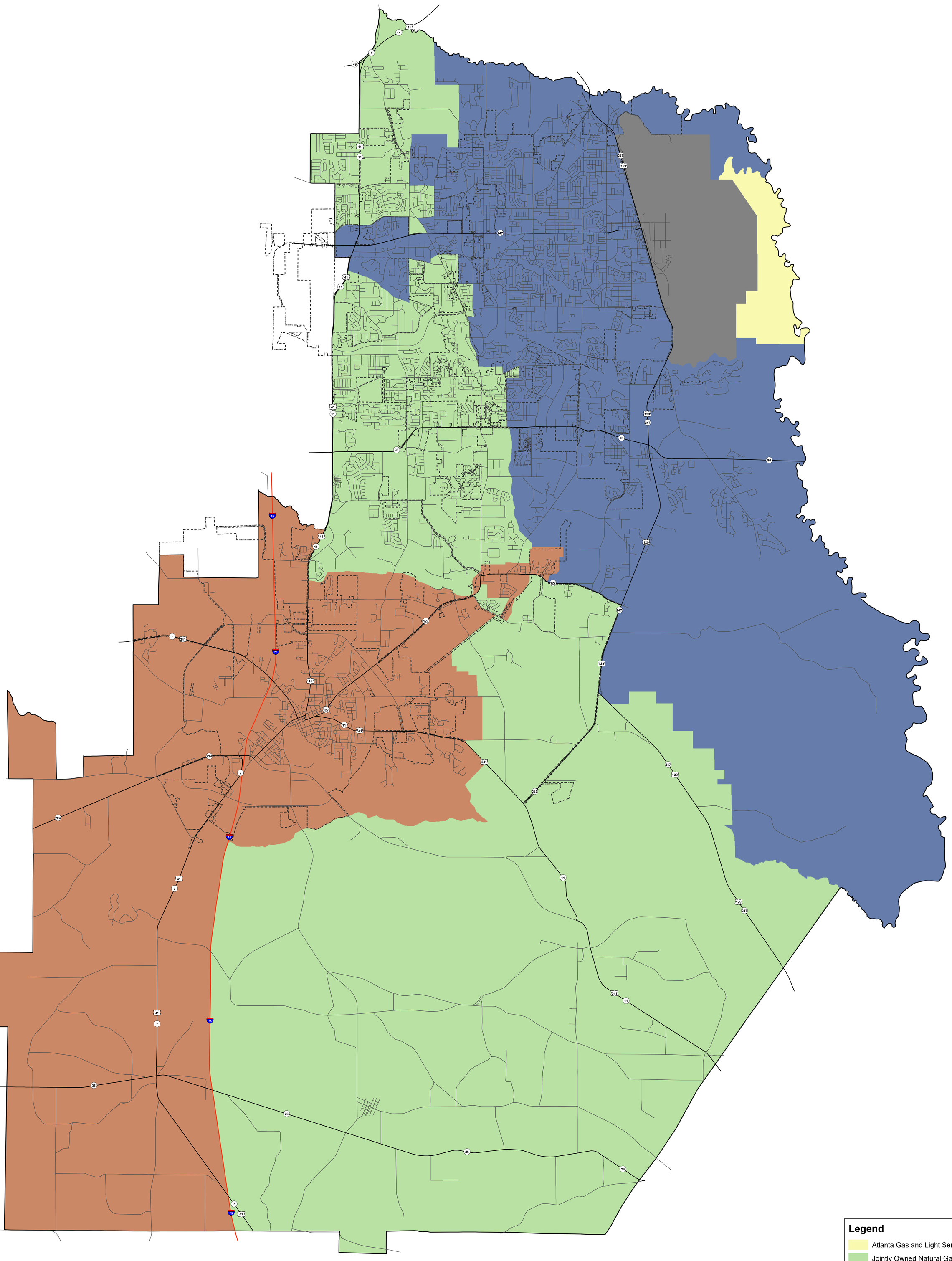
Legend

- City of Centerville Service Area
- City of Perry Service Area
- City of Warner Robins Service Area
- Robins Air Force Base
- Houston County (Sheriff's Office) Service Area

MGRC

Houston County Natural Gas Service Area

N
W E
S

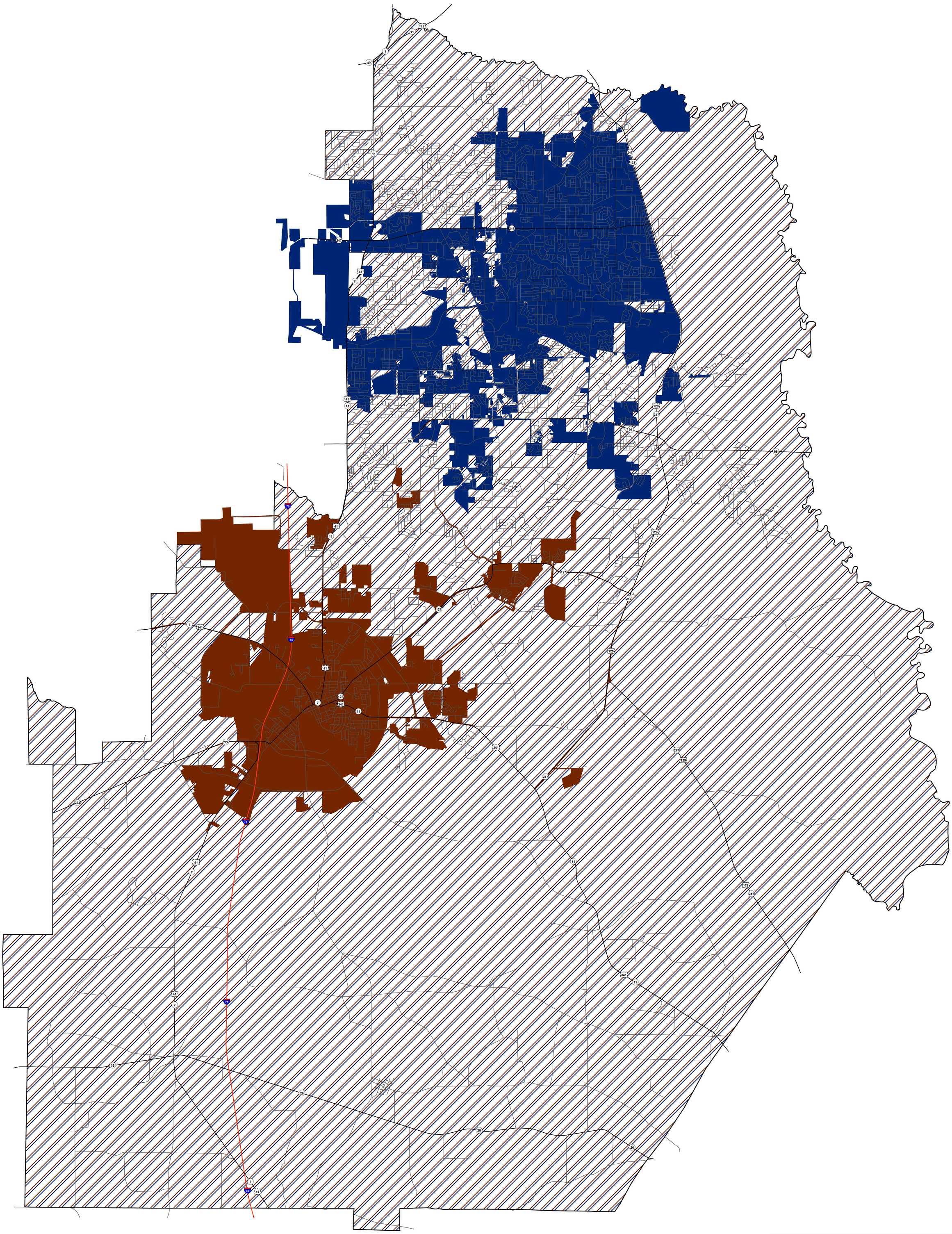


Legend

- Atlanta Gas and Light Service Area
- Jointly Owned Natural Gas
- City of Perry Service Area
- City of Warner Robins Service Area
- Robins Air Force Base
- Municipal Boundaries
- County Boundaries

MGRC

Houston County Recreation Service Area

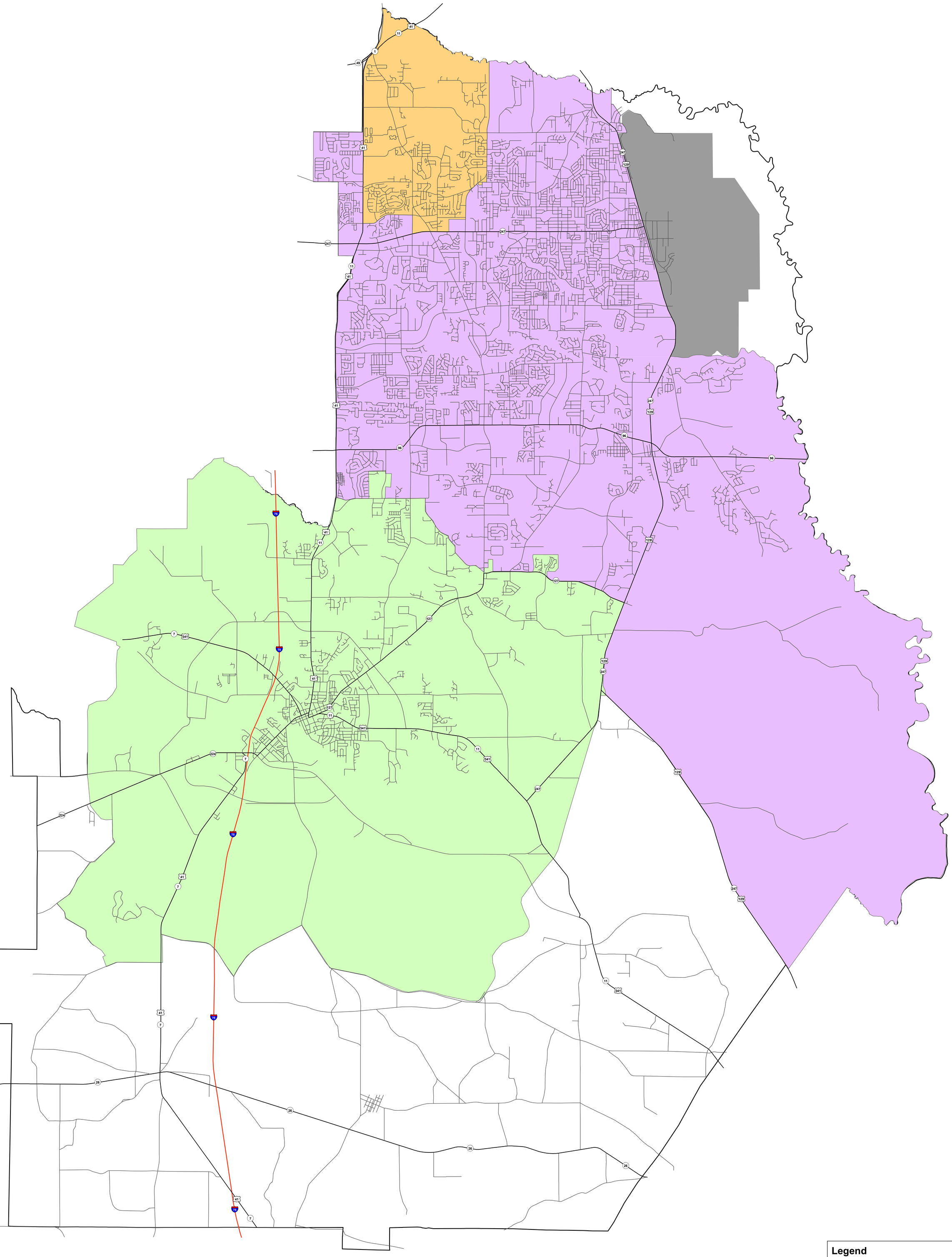


Legend

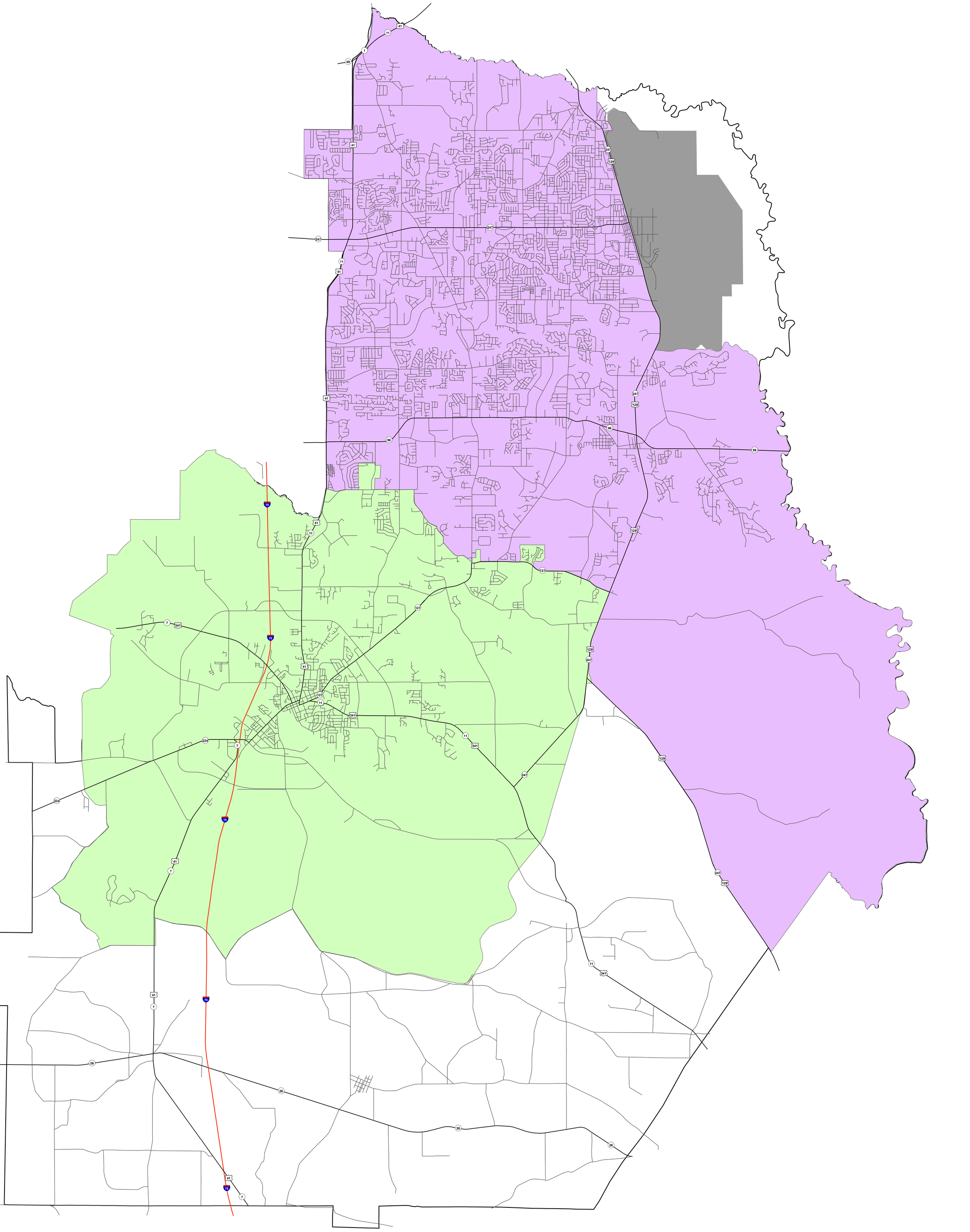
- City of Perry Recreation Service Area
- City of Warner Robins Recreation Service Area
- City of Perry Extraterritorial Recreation Service Area
- City of Warner Robins Extraterritorial Recreation Service Area

MGRC

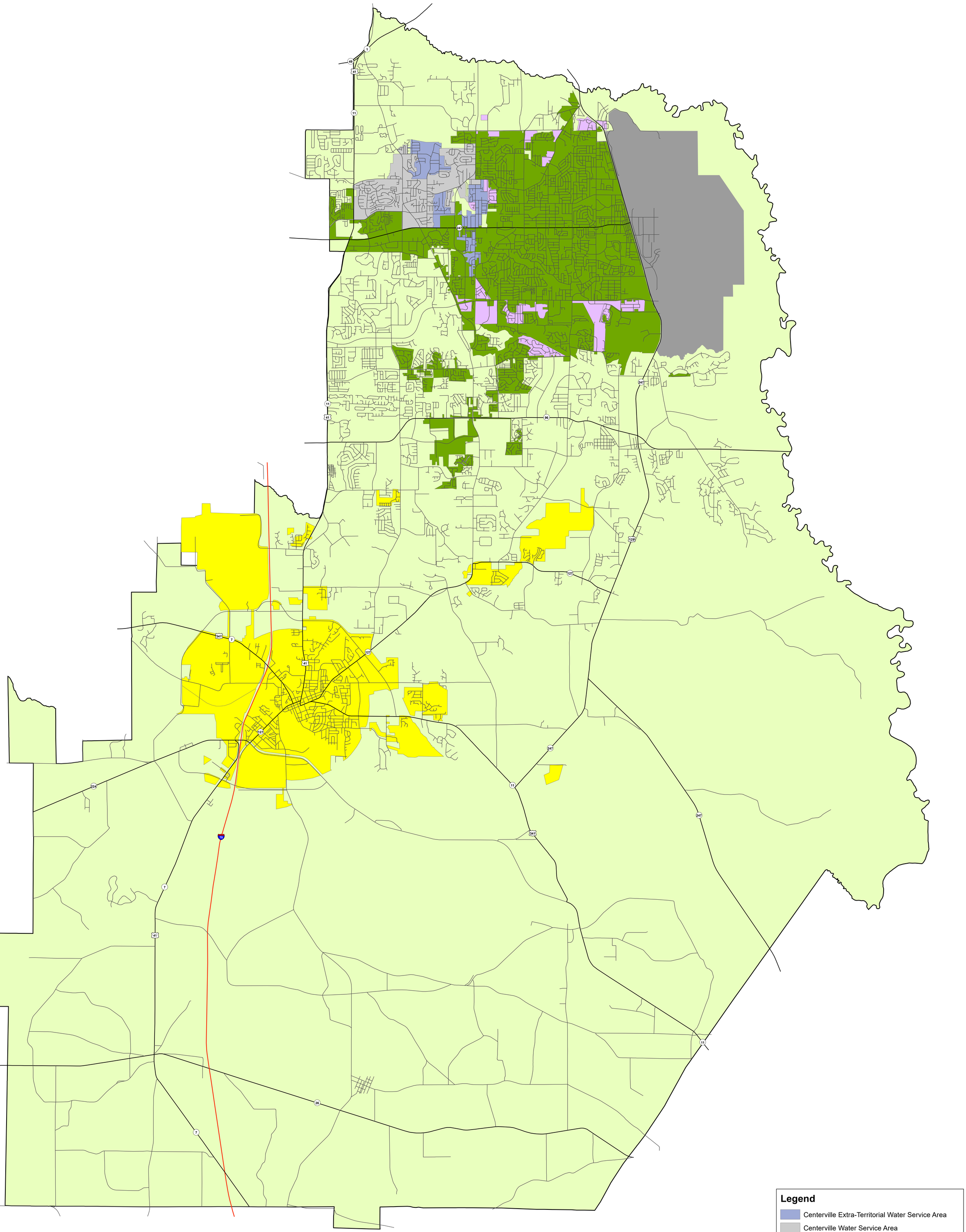
Houston County Sewerage Collection Service Area



Houston County Sewerage Treatment Service Area



Houston County Water Services Service Area



Legend

- Centerville Extra-Territorial Water Service Area
- Centerville Water Service Area
- Perry Water Service Area
- Warner Robins Extra Territorial Water Service Area
- Warner Robins Water Service Area
- Robins Air Force Base
- Houston County Water Service Area

MGRC