Stockbridge

Where Community Connects

Work Session Meeting Agenda
July 30, 2024 6:00 PM

STOCKBRIDGE CITY COUNCIL

Mayor At–Large
Anthony S. Ford

Mayor Pro Tem Kyle D. Berry, Sr.
Council District 3

Councilmember Elton Alexander
Council District 5

Councilmember Yolanda Barber
Council District 4

Councilmember LaKeisha Gantt
Council District 1

Councilmember Alphonso Thomas
Council District 2

CITY MANAGER
Frederick Gardiner

CITY CLERK
Vanessa Holiday

CITY TREASURER
Vacant

CITY ATTORNEY
Quinton G. Washington

Stockbridge City Hall

4640 N. Henry Blvd.

Stockbridge, GA 30281

Website: www.stockbridgega.org

Phone: 770-389-7900

Fax: 770-389-7912

Translation and Interpretation Services are available with (7) days prior notice. Please contact the City's HR Manager at 770-389-7908 for assistance.

AGENDA
WORK SESSION MEETING
CITY OF STOCKBRIDGE

TUESDAY, JULY 30, 2024 6:00 PM

CALL TO ORDER

INVOCATION

PLEDGE OF ALLEGIANCE

ROLL CALL

ADOPTION OF THE AGENDA

REVIEW OF THE MINUTES

1 Review of the July 08, 2024 Council Meeting Minutes

PUBLIC COMMENTS - All persons wishing to speak for public comment must sign in with the City Clerk prior to the beginning of the meeting. You must sign your name, address, and phone number. You will be able to address the Mayor and Council for three (3) minutes. Speakers must respect all members of the elected body, officials, and staff. Defamation, unruliness and/or swearing will not be tolerated while meetings are in session.

NEW BUSINESS

2 LOTTERY PROCESS TO DETERMINE AWARDING OF TWO ADDITIONAL ALCOHOLIC LICENSES AND POSSIBLY TWO ADDITIONAL LICENSES TO CERTAIN OTHER TYPES OF BUSINESSES IN THE CITY OF STOCKBRIDGE. Consideration of lottery applications which the City of Stockbridge received during the 45-day public notice period, which ended on June 7, 2024, for the purpose of awarding business licenses to two additional alcoholic beverage businesses, and possibly awarding licenses to additional businesses of certain types.
- Presented by: Ryan Anderson

3 Council Consideration of a Resolution to accept Tract Two of the property at 3986 Jodeco Road, near Candler Road, within the Stockbridge City Limits, to be dedicated to the City of Stockbridge by its owner, Candler Road Stockbridge Propco, LLC, as a follow-up to the executed Dedication Agreement between the parties, dated December 13, 2023, for use by the City of Stockbridge as a public park, and for other public purposes. The park is to be constructed by the

property owner according to a mutually-agreeable development plan. The property comprises Parcel #071B03046000, which is located in Land 63 of District 7 within Henry County. Tract Two contains 0.489 +/- acres, as is depicted by Exhibit "A". Tract One and Tract Three of the same property were previously approved for dedication to the City of Stockbridge by the same property owner at the February 12, 2024 City Council Meeting. - Presented by: Ryan Anderson

4 DE-ANNEXATION CASE #DX-2024-02 FOR THE MANDERLEY SUBDIVISION, PHASE 2. Consideration of an Ordinance to de-annex from the Corporate Limits of the City of Stockbridge nine parcels within the Manderley Subdivision, representing Phase 2, as are listed below. The request was made by the owners of the nine parcels, which are located in Land Lots 8 and 9 of District 12. The parcels would become part of unincorporated Henry County. The City Council previously approved (on April 30, 2024) De-Annexation Case #DX-2024-01 for the Manderley Subdivision, Phase 1, which concerned ten nearby parcels.
1. 160 Jasper Drive (Parcel #013A01023000).
2. 165 Jasper Drive (Parcel #013A01024000).
3. 195 Jasper Drive (Parcel #013A01050000).
4. 310 Kerrith Drive (Parcel #013A01039000).
5. 320 Kerrith Drive (Parcel #013A01038000).
6. 325 Kerrith Drive (Parcel #013A01025000).
7. 510 Portloe Court (Parcel #013A01049000).
8. 515 Portloe Court (Parcel #013A01047000).
9. 520 Portloe Court (Parcel #013A01048000). - Presented by: Ryan Anderson

5 **TEXT AMENDMENT CASE #TX-2024-05 FOR THE MFR (Multiple-Family Residential) ZONING DISTRICT.** Presentation of a proposed text amendment to the Unified Development Code (UDC) to revise and add new regulations to the MFR zoning district. The required front yard setbacks would be reduced from 50 feet to 30 feet, and new site and architectural design guidelines would be added. - Presented by: Ryan Anderson

6 Council consideration to approve the renewal of Request For Proposal RFP) Number 2022-0006, On Call General Engineering Services, for the City of Stockbridge with Falcon Design Consultants, LLC. - Presented by: Decius Aaron

7 Council consideration to renew Contract No. RFP No. 2018-0010Q – Non-Hazardous Special Waste Disposal Services with Republic Services in the amount of $55,000.00. Funding source is from Department Budgeted Funds. - Presented by: Decius Aaron

8 Council Consideration for approval of Contract No. 2024-0004, Financial Audit Services with Mauldin & Jenkins Certified Public Accountants. - Presented by: Frederick Gardiner

9 FY 2024 Mid-Year Review - Presented by: Lakeisha Gaines

10 Council Consideration to fill vacancies on the Public Facilities Authority Board and appoint members to a four-year term. - Presented by: Quinton Washington

ANNOUNCEMENTS OF UPCOMING MEETINGS & EVENTS - UPCOMING MEETINGS & ANNOUNCEMENTS: Council meetings will be held in the City Council Chamber. Meeting dates, locations and times are subject to change or contact City Hall offices at 770-389-7900 or visit the website www.stockbridgega.org for updates.

- **Stockbridge Citizens-Police Advisory Council meeting 1st Thursday of each month at 6:00 p.m. at the Stockbridge Police Community Room 4545 N. Henry Blvd. – (Aug 1)**
- **The Main Street Advisory Board Meeting on the 2nd Friday of each month at 9am – Location is the Downtown Connection Center 130 M L King Sr. Heritage Trail. (Aug 9)**
- **City Council Meeting, 2nd Monday of each month at 6:00 p.m. - City Hall Council Chamber (Aug 12)**
- **Youth Council Meeting 2nd Monday of each month at 6:30 p.m. - City Hall Levi Meeting Room (No August Meeting due to Summer Break)**
- **Citywide Development Authority Meeting, 2nd Tuesday of each month, 6:00 p.m.- City Hall Levi Meeting Room (Aug 13)**
- **Planning Commission Meeting, 3rd Thursday of each month, 6:30 p.m. - City Hall Council Chamber - (Aug 15)**
- **Downtown Development Authority Meeting, 3rd Tuesday of each month Stockbridge Downtown Center 130 M L King, Sr. Heritage Trail (Aug 20)**
- **Youth Council Advisory Committee Meeting, 6:30 p.m.- 3rd Tuesday of each month Levi Meeting Room - City Hall (Aug 20)**
- **City Council Work Session Meeting, Last Tuesday of each month: Tuesday, July 30th at 6:00 p.m. - City Hall Council Chamber (Aug 27)**
- **Community Zoning and Information Meeting: Thursday, August 7th from 6:00 p.m. – 7:00 p.m. at City Hall in the Council Chamber (Sep 4)**

UPCOMING CITY EVENTS/INITIATIVES

- **Join us at Clark Community Park at 111 Davis Rd. Stockbridge for Food Truck Tasty Tuesday from 5:30pm – 8:00 pm for live music, great food, and a host of free games and activities for the kids.**
- **Join Councilman Elton Alexander for a Community Cleanup event on Saturday, August 10th from 9am -11am. Parking at the Costco Parking Lot 2245 Jodeco Rd., McDonough, GA.**
- **The Stockbridge Police Department will host the Zone 2 Public Safety Forum on Monday, August 12th from 6:00pm – 7:30pm. Location Stockbridge United Methodist Church 4863 North Henry Blvd. Stockbridge, GA**
- **Join Councilman Alphonso Thomas for the monthly *Senior Bingo Bash* on *Wednesday, August 14th* from 10am - 12pm at the Merle Manders Conference Center, 111 Davis Rd. for raffles, prizes, games, snacks and fun!**
- **Join Councilwoman LaKeisha Gantt in partnership with Atlanta Food Truck Park for Night Market at the Stockbridge Amphitheater Parking Lot from 6pm – 9:30pm – August 15th. There will be vendors, Food Trucks, Activities, Games, Music, and Vibes. Contact Tan Bowers at tan@atlantafoodtruckpark.com for registration and additional information.**
- **Join Councilman Thomas for the 2nd District Curb, Gutter and Sidewalks Town Hall on Thursday, August 15th from 6:30pm – 8:00pm at Floyd Chapel Baptist Church Family Life Center located at 104 First Street Stockbridge, GA**
- **Join Mayor Anthony Ford for the monthly *Meet the Mayor* on Wednesday, August 26th from 10am – noon at Stockbridge City Hall.**

- **Join Councilman Thomas for the *Don't Trash Stockbridge* initiative centered around education highlighting the causes and effects of Littering and Illegal Dumping. More information to follow.**
- **Councilman Thomas is honoring Veterans with a Continuous Salute all year long. Please send your pictures of Veterans with their name, branch, rank, and years of service.**
  Please contact Rosalynd Rawls to schedule an appointment for *Meet the May*or and for more information on Council Initiatives and events at 678-833-3348 or via email: rrawls@stockbridgega.org

  2024 Stockbridge Amphitheater Summer Concert Series

1. **Saturday, August 3, 2024, Babyface and Special Guests Avery Sunshine and 4Cast**
2. **Saturday, August 17th – Monica, featuring Tamar, Sevyn Streeter, and Pretty Tammy the DJ.**
3. **Saturday, October 26, 2024, Boney James Slow Burn Tourn with Special Guest Damien Escobar.S**

   SAVE THE DATE! BridgeFest 2024 is coming! Are you ready! The City of Stockbridge Government is hosting this annual event for the COMMUNITY on Saturday, September 28, 2024! We will have a live concert, food trucks, vendors, and more! Get ready for fun at the Stockbridge Amphitheater! Questions? Please email bbradley@stockbridgega.org as soon as possible.

MAYOR'S COMMENTS (Mayor Anthony Ford)

EXECUTIVE SESSION (Exemptions to the Georgia Open Meetings Acts)

ADJOURNMENT

Stockbridge
Where Community Connects

CITY COUNCIL WORK SESSION MEETING SUMMARY MINUTES

MONDAY, JULY 8, 2024 6:00 P.M.

Mayor & City Council

Mayor Anthony S. Ford At-Large
Mayor Pro Tem Kyle Berry – Council District 3
Councilmember Elton Alexander – Council District 5
Councilmember Yolanda Barber – Council District 4
Councilmember LaKeisha Gantt – Council District 1
Councilmember Alphonso Thomas – Council District 2

Administration

Frederick Gardiner – City Manager
Vanessa Holiday – City Clerk
Lakeisha Gaines – Interim City Treasurer
Quinton Washington – City Attorney

Mission: To provide visionary leadership and superior municipal services that enhance the quality of life for citizens while creating a welcoming business atmosphere focused on sustainability and expansion of tourism and cultural events.

Invocation by Mayor Ford at 6:04 p.m.

Invocation by: Dr. Renee Gourdine

The Pledge of Allegiance was recited by all in attendance.

City Clerk, Vanessa Holiday was asked to proceed with a verbal roll call. All the members were present except Mayor Pro Tem Berry.

Motion to adopt the Agenda was made by Councilmember Alexander; seconded by Councilmember Gantt. The motion passed unanimously 4-0.

Motion to approve the Main Street Advisory Board, Downtown Development Authority and City Council Joint Retreat Meeting Minutes for April 13, 2024, Council Meeting Minutes for June 10, 2024, and Work Session Meeting Minutes for June 26, 2024 was made by Councilmember Alexander; seconded by Councilmember Barber. The motion passed unanimously 4-0.

PUBLIC COMMENTS

There were no public comments.

CEREMONIAL REVIEW

1. Mayor Ford reviewed the swearing in of Kenya Cook to the Downtown Development Authority, and Monica Jones, Kim Mays, and Ivy D. Sears to the Citywide Development Authority; and issued a proclamation and recognized Vanessa Holiday for being selected as the 2024 Georgia Municipal Clerk of the Year.

NEW BUSINESS

2. Council consideration to approve City of Stockbridge Citizens Police Advisory Council Zone 4 Replacement Member Application.
   Presented by: Police Chief, Frank Trammer
   Motion to approve Judy Neal to fill the unexpired term for Zone 4 was made by Councilmember Alexander; seconded by Yolanda Barber. The motion passed unanimously 4-0.

   Mayor Ford read the Public Hearing Rules and Procedures

PUBLIC HEARING

3. COMPREHENSIVE PLAN AMENDMENT CASE #CP-2024-02. (Council District 4) The City of Stockbridge Planning Commission held a public meeting on Thursday, June 20, 2024 at 6:30 p.m. This request of the Council to consider a Comprehensive Plan Amendment for property at 111 Old Conyers Road to change the property's future land use designation of "Low-Density Residential" to "Special Purpose" to allow for the construction of a mixed-use development, including commercial and residential uses. The applicant is Charlie Hightower, on behalf of First National Land Trust, LLC. The property is located in Land Lot 68 of District 12, with 6.71 +/- acres within the Stockbridge City Limits.
   Presented by: Ryan Anderson, Community Development Director
   Mr. Anderson gave an overview of the request for the Comprehensive Plan Amendment #CP-2024-02, noting staff recommends approval.

   Mayor Pro Tem Berry joined the meeting at 6:21 p.m.

   Councilwoman Barber made a request to vote on the Comprehensive Plan Amendment, noting the other items associated with the development would not factor in if the Comp Plan Amendment were not approved.

   The consensus of the Council was to hear all items associated with the development and vote on each item separately following the public hearing.

   Mr. Anderson noted Item #6 through Item #10 are associated with the same development and planned to present the proposed development as one overall presentation, noting Item #9 would not be considered as it is not in compliance with the city's Unified Development Code, and also noted the Site Plan was subject to change.

4. REZONING CASE #RZ-2024-02. (Council District 4)
   The City of Stockbridge Planning Commission held a public meeting on Thursday, June 20, 2024 at 6:30 p.m. This request of the Council to consider a request for the Rezoning of property at 111 Old Conyers Road, to rezone the property from 'SR' (Suburban Residential) to 'PUD' (Planned Unit Development) to allow for the construction of a mixed-use development, including commercial and residential uses. The applicant is Charlie Hightower, on behalf of First National Land Trust, LLC. The property is located in Land Lot 68 of District 12, with 6.71 +/- acres within the Stockbridge City Limits.
   Mr. Anderson continued with an overview of Rezoning Case #RZ-2024-02, noting staff recommends approval with staff conditions, and to reduce the number of units from 200 to 160.

5. VARIANCE CASE #VR-2024-01. (Council District 4) Variance to reduce the parking requirements according to the number of bedrooms per apartment unit, whereby studio and one-bedroom apartment units would have only 1.00 parking spaces instead of the required 1.25 parking spaces per unit, and two-bedroom units would have only 1.25 parking spaces per unit instead of the required 1.75 parking spaces per unit. The City of Stockbridge Planning Commission held a public meeting on Thursday, June 20, 2024 at 6:30 p.m. This request of the Council to consider a variance for property at 111 Old Conyers Road, to allow for the construction of a mixed-use development, including commercial and residential uses. The applicant is Charlie Hightower, on behalf of First National Land Trust, LLC. The property is located in Land Lot 68 of District 12, with 6.71 +/- acres within the Stockbridge City Limits.
   Mr. Anderson continued with an overview of Variance Case #VR-2024-01, noting approval would be contingent upon final approval of the site plan, and noted staff recommends approval with a reduction of 30 parking spaces.

6. VARIANCE CASE #VR-2024-02. (Council District 4) Variance Request VR-2024-02 - Variance to modify the ground-floor retail square footage requirement by changing the residential-to-retail space ratio from the required ratio of 75%/25% to a proposed ratio of 87.5%/12.5%. The City of Stockbridge Planning Commission held a public meeting on Thursday, June 20, 2024 at 6:30 p.m. This request of the Council is to consider a variance for property at 111 Old Conyers Road, to allow for the construction of a mixed-use development, including commercial and residential uses. The applicant is Charlie Hightower, on behalf of First National Land Trust, LLC. The property is located in Land Lot 68 of District 12, with 6.71 +/- acres within the Stockbridge City Limits.
   This item was not presented. Mr. Anderson noted VR-2024-02 is not in compliance with the city's UDC.

7. VARIANCE CASE #VR-2024-03. (Council District 4) Variance to increase the project density from twenty-four (24) units per acre to twenty-nine (29) units per acre. The City of Stockbridge Planning Commission held a public meeting on Thursday, June 20, 2024 at 6:30 p.m. This request of the

Council is to consider a variance for property at 111 Old Conyers Road, to allow for the construction of a mixed-use development, including commercial and residential uses. The applicant is Charlie Hightower, on behalf of First National Land Trust, LLC. The property is located in Land Lot 68 of District 12, with 6.71 +/- acres within the Stockbridge City Limits.
Mr. Anderson continued with an overview of Variance Case #VR-2024-03, noting staff recommends approval of not more than 24 units per acre.

Mr. Cassius Coleman, the project's developer, spoke in favor of the project noting density brings in better businesses, tax dollars, younger demographic, a younger workforce, and overall, the positives outweigh the negatives, and referenced developments he has completed in Union City, and McDonough.

Councilmember Gantt spoke in favor of building up the downtown area and providing housing for young adults, noting the development is near a park, grocery store, and retail and is in close proximity to the city's Amphitheater.

Councilmember Barber expressed concerns of the impact to the community and noted there has not been information or data included regarding infrastructure and road improvements in the area, considering the number of developments in the area over the last year; and also expressed a concern that there was only one entry/exit point.

Mr. Gardiner noted the city is responsible for addressing the infrastructure and water/sewer needs to sustain the development.

Mayor Pro Tem Berry expressed safety concerns of attempting to turn left onto Old Conyers and the increased traffic in the area. Councilmember Barber and Councilmember Thomas echoed the safety and increased traffic concerns that were raised.

Mr. Anderson noted a Traffic Study was completed.

Councilmember Barber noted the Traffic Study does not include the Diamante development still under construction and does not include the D. R. Horton development on Valley Hill Rd, or the Townhome Development on East Atlanta Rd., noting all are within one mile of this proposed development.

Councilmember Alexander recommended the conditions of a 10' path along the entire frontage along Old Conyers Rd. and East Atlanta Rd., the installation of an EV Charging Station and Decorative Streetlights.
Mr. Anderson stated that the HOA would be responsible for streetlight fees.

Councilmember Thomas referenced the commercial component of the development and asked if there were any commercial commitments.

Mr. Coleman stated the Applicant has requested a feasibility study to determine the best type of business for the location.

Councilmember Barber stated that she supports the revitalization of the city's downtown area, noting apartment developments have been placed along the city's major corridors, and this location is an interior corridor, and does not fit, and prefers to see single-family homes, noting that it will be a challenge to expand East Atlanta Rd. with the railroad there; further stating the Councilmembers need to consider the people that live in the area and will be the most impacted.

Mr. Coleman responded there is not enough room for single-family homes, and noted young adults use the parks and walk along the belt line in other areas of metro Atlanta.

Councilmember Gantt noted Public Hearings are advertised, and citizens usually come to the meeting when they oppose.

Councilmember Barber stated citizens are not there because the Council is not listening to the residents of District 4, who she represents, noting there have been five high density developments approved in spite of their opposition with no plans to expand East Atlanta Rd or infrastructure improvements.

Mayor Ford referenced the Quiet Zone for the railroad in the Valley Hill Rd. area.

Councilmember Alexander noted East Atlanta Rd. will be expanded in the future.

Mayor Pro Tem Berry restated concerns regarding the traffic flow along Old Conyers Road, noting the development is a great plan and wants to have the infrastructure and roads addressed in the area.

Councilmember Gantt asked Mr. Gardiner if the development ties into the plans for the downtown.

Mr. Gardiner noted the property is constrained because of the flood plain and there are limits to what can be developed on the site, and noted the development is a good concept and makes sense, and reminded the Council that you cannot deny a project because of infrastructure.
Mr. Coleman stated that if approved, the project would start immediately, with permits pulled over the next 10 – 11 months.

Public Hearing Opened
Speakers in Favor: Cassius Coleman (Project Developer) and Maria Clay
Speakers Opposed: Luke Williams
Speaker – Comment Only: Shavoka Harris
The Public Hearing was closed.

Item #6
Motion to deny Comprehensive Plan Amendment Case #CP-2024-02 was made by Councilmember Barber. The motion died for lack of a second.

Motion to approve Comprehensive Plan Amendment Case #CP-2024-02 was made by Councilmember Gantt; seconded by Councilmember Alexander. The motion passed 3-1-1 (Alexander, Berry and Gantt Approved) (Barber Opposed) (Thomas Abstained).

Item #7
Motion to deny Rezoning Case #RZ-2024-02 was made by Councilmember Barber. The motion died for lack of a second.

Motion to approve Rezoning Case #RZ-2024-02 to include Staff Recommended Conditions and the following Conditions: 10' path along the entire frontage along Old Conyers Rd. and East Atlanta Rd., the installation of an EV Charging Station and Decorative Streetlights and to reduce the number of units from 200 to 160 was made by Councilmember Alexander; seconded by Councilmember Gantt. The motion passed 3-1 (Alexander, Berry, Gantt Approved) (Barber Opposed) (Thomas was not present for the vote).

Item #8
Motion to approve Variance Case #VR-2024-01 with the reduction of 30 parking spaces was made by Councilmember Gantt; seconded by Councilmember Alexander. The motion passed 4-1 (Alexander, Berry, Gantt and Thomas Approved) (Barber Opposed).

Item #9
Motion to remove Item #9 from the Agenda made by Councilmember Gantt; seconded by Councilmember Alexander. The motion passed 4-1 (Alexander, Berry, Gantt, and Thomas approved) (Barber Opposed).

Item #10
Motion to approve Variance Case #VR-2024-03 with not more than (24) twenty-four units per acre was made by Mayor Pro Tem Berry; seconded by Councilmember Alexander. The motion passed 4-1 (Alexander, Berry, Gantt and Thomas Approved) (Barber Opposed).

UPCOMING MEETINGS & ANNOUNCEMENTS:
Council meetings will be held in the City Council Chamber. Meeting dates, locations and times are subject to change or contact City Hall offices at 770-389-7900 or visit the website www.stockbridgega.org for updates.

- Citywide Development Authority Meeting, 2nd Tuesday of each month, 6:00 p.m.- City Hall Levi Meeting Room (Jul 9)
- Stockbridge Citizens-Police Advisory Council meeting 1st Thursday of each month at 6:00 p.m. at the Stockbridge Police Community Room 4545 N. Henry Blvd. – July 11th meeting canceled.

- Youth Council Meeting 2nd Monday of each month at 6:30 p.m. - City Hall Levi Meeting Room (No July Meeting due to Summer Break)
- The Main Street Advisory Board Meeting 2nd Friday of each month at 9am – Location is the Downtown Connection Center 130 M L King Sr. Heritage Trail. (Jul 12)
- Millage Rate Public Hearing #1, Monday, July 15th at 6:30 p.m. - City Hall Council Chamber (Jul15)
- Downtown Development Authority Meeting, 3rd Tuesday of each month Stockbridge Downtown Center 130 M L King, Sr. Heritage Trail (Jul 16)
- Youth Council Advisory Committee Meeting, 6:30 p.m.-3rd Tuesday of each month Levi Meeting Room - City Hall (Jul 16) No meeting in July
- Planning Commission Meeting, 3rd Thursday of each month, 6:30 p.m. - City Hall Council Chamber - (Jul 18)
- Millage Rate Public Hearing #2, Friday, July 19th at 10:00 a.m. - City Hall Council Chamber (Jul 19)
- Millage Rate Public Hearing #3, Monday, July 22nd at 10:00 a.m. (Millage Set at 10:15 a.m.) - City Hall Council Chamber (Jul 22)
- City Council Work Session Meeting**,** Last Tuesday of each month: Tuesday, July 30th at 6:00 p.m. - City Hall Council Chamber (Jul 30)
- Community Zoning and Information Meeting: Thursday, August 7th from 6:00 p.m. – 7:00 p.m. at City Hall in the Council Chamber (Aug 7)
- City Council Meeting, 2nd Monday of each month at 6:00 p.m. - City Hall Council Chamber (Aug 12)

UPCOMING CITY EVENTS/INITIATIVES

- Food Truck Tast Tuesday is back! Join us at Clark Community Park at 111 Davis Rd. Stockbridge on Tuesdays from 5:30pm – 8:00 pm for live music, great food, and a host of free games and activities for the kids.
- Join Councilwoman Yolanda Barber as she partners for the 2nd year with Kicks4Kids to collect sneakers for kids on Saturday, July 13th at Stockbridge First United Methodist Church and will be distributed at the City's Back to School Kickoff on July 20th. Please plan to donate what you can to this life-changing initiative.
- Join the Stockbridge Youth Council in partnership with the City of Stockbridge at Clark Park to FILL THE BUS with school supplies during Tasty Tuesday on July 16th from 5:30pm. - 8:00 pm. Let's make sure our students have what they need to be successful this school year!
- Join Councilman Alphonso Thomas for the monthly *Senior Bingo Bash* on *Wednesday, July 17th f*rom 10am - 12pm at the Merle Manders Conference Center, 111 Davis Rd. for raffles, prizes, games, snacks and fun!
- Join Councilwoman LaKeisha Gantt in partnership with Atlanta Food Truck Park for Night Market at the Stockbridge Amphitheater Parking Lot from 6pm – 9:30pm – July 18th. There will be vendors, Food Trucks, Activities, Games, Music, and Vibes. Contact Tan Bowers at tan@atlantafoodtruckpark.com for registration and additional information.
- Join the City of Stockbridge for the Annual Back to School Kickoff Event on Saturday, July 20th at the Stockbridge Amphitheater for free school supplies from 11am – 1pm.

- Join Mayor Anthony Ford for the monthly *Meet the Mayor* on Wednesday, July 22nd from 10am – noon at Stockbridge City Hall.
- Join Councilman Elton Alexander for a Community Cleanup event on Saturday, August 10th from 9am -11am. Parking at the Costco Parking Lot 2245 Jodeco Rd., McDonough, GA.
- Join Councilman Thomas for the *Don't Trash Stockbridge* initiative centered around education highlighting the causes and effects of Littering and Illegal Dumping. More information to follow.
- Councilman Thomas is honoring Veterans with a Continuous Salute all year long. Please send your pictures of Veterans with their name, branch, rank, and years of service.

  Please contact Rosalynd Rawls to schedule an appointment for *Meet the May*or and for more information on Council Initiatives and events at 678-833-3348 or via email: rrawls@stockbridgega.org

2024 Stockbridge Amphitheater Summer Concert Series

1. Saturday, July 13th and Sunday, July 14th – A Night with Kem, and Special Guest Leela James
2. Saturday, July 20th – Ladies Night Out featuring Jodeci, Johnny Gill, and Silk
3. Saturday, July 27th – 70's Soul Jam featuring the Chi-Lites, the Manhattans, The Legendary Blue Notes, Bloodstone and Peaches & Herb
4. Saturday, August 3, 2024, Babyface and Special Guests Avery Sunshine and 4Cast

MAYOR'S COMMENTS

Mayor Ford referenced an amazing July 4th event and fireworks at the Amphitheater, and noted Robin Thicke had an impressive performance and that Charlie Wilson is being rescheduled for a later date, and prior ticket purchases will be honored.

EXECUTIVE SESSION

Motion to convene Executive Session for Real Estate and Personnel was made by Councilmember Gantt; seconded by Councilmember Alexander. The motion passed unanimously 5-0.

Motion to adjourn Executive Session and sign and Affidavit was made by Mayor Pro Tem Berry; seconded by Councilmember Gantt. The motion passed unanimously 5-0.

Motion to reconvene the meeting was made by Councilmember Gantt; seconded by Councilmember Alexander. The motion passed unanimously 5-0.

Motion to adjourn the meeting at 8:28 p.m. was made by Councilmember Alexander; seconded by Mayor Pro Tem Berry. The motion passed unanimously 5-0.

Respectfully submitted by:

_____ _____

Vanessa Holiday, City Clerk CMC Anthony S. Ford, Mayor

LOTTERY APPLICATION TRACKING SHEET

Date Received: 5/1/24 Application No.: 1

Applicant Name: Girishkumar Rambhai Patel

Proposed business and name: Package Store | Alcohol

CHECKLIST:

- ✓ Complete Application and Documents: 5/1 or Missing: _____
- ✓ $750 Non-Refundable Application Fee: yes Date Processed: 5/1
- ✓ Fieldprint Background Check Information Received: yes/good per Uneeda
- ✓ Notarized Financial Statement Received: yes
- ✓ Copy of Government Issued ID Received: yes
- ✓ Emailed applicant receipt/CC approval code/lottery process timeline: _____
- ○ Redacted Copy of Application Sent to City Clerk on: (date) _____

Any Notes:

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

APPLICATION
(Lottery Application ONLY)

NOTE: USE SEPARATE PAGES AND/OR ATTACHMENTS, AS NECESSARY

1. Type(s) of license applied for:
   - (✓) Alcohol License
   - ( ) Tire Shop
   - ( ) Used Car Dealership
   - ( ) Used Appliance Shop
   - ( ) Thrift store and Consignment Shop
   - ( ) Pawnshop
   - ( ) Vape Shop
   - ( ) Precious Metals

2. Proposed license is a (n):
   - ( ) Individual
   - ( ) Partnership
   - ( ) Corporation
   - (✓) LLC
   - ( ) other legal entity (explain)

   _____

3. Applicant information:

   Name: GRP LLC, GIRISHKUMAR RAMBHAI PATEL

   Title/Position: OWNER

   Are you a citizen of the United States: ✓ yes _____ no

   Where were you born? INDIA

   Present home address: _____

   _____

   County of HENRY Number of years at present address 4 YRS

   Contact information: Business phone #: 615 579 2596

   Home phone #: _____

   How long have you been a resident of Georgia? 4 YRS Henry Co? 4 YRS

   What has been your occupation for the past five (5) years? GAS STATION OWNER

4. Applicant's relationships with other persons with 1st degree of kinship.

Immediate living relatives:
(Please list all immediate living wife, children, parents, brothers, sisters, and parents)
(Attach separate sheet(s) if necessary)

Name: ARTIBEN PATEL Age: 47 YRS

Relationship: WIFE Live with or apart: WITH

Name: NIRAL PATEL Age: 24 YRS

Relationship: SON Live with or apart: WITH

Name: MAYAN PATEL Age: 19 YRS

Relationship: SON Live with or apart: WITH

Name: _____ Age: _____

Relationship: _____ Live with or apart: _____

5. Proposed business name and address:

Business name: GRP LLC, DBA: Not Deceided yet

Address: 106 Rock Quarry Rd

Stockbridge, GA 30281

6. Corporations: If operating as a corporation, please complete the following:

Corporation name: _____

Address: _____

_____

Date of Incorporation: _____ Where Incorporated: _____

Type of Corporation: _____

Corporate Officers: *Please list each (attach a separate sheet if necessary)*

Name: _____ SS#_____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

9. Limited Liability Company (LLC): If operating as a company, please complete the following:

Company name: GRP LLC

Address: _____

_____

Date of Formation: 02/05/2024 Where Formed (State): GA

Type of LLC (member managed or manager managed): MEMBER MANAGED

LLC members with an ownership interest: ***Please list each (attach a separate sheet if necessary)***

Name: GIRISHKUMAR RAMBHAI PATEL SS#_____

Member – ownership interest (_%): 100%

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%): _____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%): _____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

7. **Stockholder information – applies to any "closely held" stock, not publicly traded and to all stockholders who own more than 10% of the outstanding capital stock of the corporation. DO NOT FILL OUT THIS INFORMATION FOR PUBLICLY TRADED CORPORATIONS. In lieu thereof, please indicate by attached sheet as to whether any affiliate, related company, holding company, subsidiary or other organization holds any form of alcohol license in the City of Stockbridge, or any distilled spirits package sale license within the State of Georgia.**

8. If operating as a corporation, list stockholders with addresses and the amount of interest of each stockholder in the corporation. ***Please list each (attach a separate sheet if necessary)***

   Stockholder Name: _____ Interest: _____

   Address: _____

   Stockholder Name: _____ Interest: _____

10. Limited Liability Partnership (LLP), Partnerships, Sole Proprietorships, and any other forms of business entity: If operating as a partnership or other form of business entity, please complete the following:

Entity name: _____

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of Partnership: _____

Partnership members with an ownership interest. ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

If more than 4 members, partners, or stockholders, please provide the name, address, social security number and ownership interest of additional parties at interest, by separate sheet.

11. Registered Agent

If the proposed license is a legal entity, please provide name of its registered agent:

Agent(s) name: RAGO 2 LLC

Address: _____ _____ _____

Telephone Number: 615 579 2596

12. Store Manager, Managing Member, Managing Partner, or other person in charge:
What is the name of the person who, if the license is granted, will be the active manager of the business and on the job at the business?

Full name: GIRISHKUMAR RAMBHAI PATEL

(Please complete the site manager's personal statement, attached)

13. Convictions:
Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (15) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

NO

14. Location ownership
Do you own the land and building on which the business is to be operated?

_____ Yes ✓ No If Yes, when did you buy it? _____
(Attach proof of ownership)

If not the owner, please complete the following and attach a copy of the lease, option, and any other pertinent documents:

Owner/Agent of Property: NORTH EAGLE PAVILION LLC

Amount of rent: NA Frequency Paid: NA

Is the amount of rent a set amount? _____ Yes _____ No

If NO, please explain how it is determined: I HAVE A CONTRACT TO PURCHASE THIS PROPERTY

15. If you have an option, or other legal, binding document to buy, lease the building, please explain the general terms: PURCHASE AGREEMENT

16. Zoning
What is the current zoning on the proposed property location? COMMERCIAL (C-2)

17. Location Certification
If this is the first application for a license for this business, please attach a current certificate from a registered surveyor containing the following information:

(1) A scale drawing of the building or proposed building as situated on the proposed lot.
(2) Proposed parking available to the building.

NOTE: NOT Required for a retail package alcohol license until the applicant is chosen for a license.

18. Financial Interest – Does the applicant or interested parties to this Application:

A. Have any financial interest in any similar business?

_____Yes ✓ No

B. Received any financial aid or assistance from any similar business?

_____ Yes ✓ No

19. Other Interests:
Do you; any member of your family (children, spouse, parents, siblings) or any of the other owners, partners, or stockholders:

A. Have any interest, financial or otherwise, in other similar businesses or establishments?
_____ Yes ✓ No

If YES, please list:

_____

_____

B. Own, lease, sub-lease any real estate which is occupied by a similar business. If so, give the location information as to any lease or rental agreement including rents received and who it was rented to: _____ Yes ✓ No

If YES, please list:

_____

_____

C. Serve as the Executor or Administrator or Beneficiary of Heir of any estate having an interest in any similar business or establishment?

_____ Yes ✓ No

If YES, please list:

D. Serve as Beneficiary or Trustee of any Trust Fund having an interest in any similar business or establishment?

____ Yes ✓ No

If YES, please list:

20. Financial Gain
Please list all parties who will receive any financial gain or payment derived from any interest or income as a result of the operation that this application applies to. (Please include any owners, partners, members, officers, or principal stockholders)

OWNER OF THE LLC ONLY.

21. Other Jurisdictions
List other jurisdictions in which any applicant, partner, member, corporate officer, or stockholder holds a similar occupational tax certificate, regulatory license, or alcoholic beverage license:

I HAVE A LICENSE TO SELL BEER AND WINE IN DEKALB COUNTY AND CLAYTON COUNTY.

List all details of denial of any such licenses in any other jurisdiction:

NA

22. Are you familiar with the City of Stockbridge Ordinances, State laws and regulations, Federal laws and regulations governing the operations of this type of business?

✓ Yes ____ No

(City of Stockbridge Ordinance 9.04 Alcoholic Beverage)

23. Restrictions Alcohol ONLY

Ordinance 9.04.090

1. No retail license for the sale of distilled spirits shall be issued unless the location is located within five hundred (500) feet of the streets or roads designated in the following three (3) areas and has direct access onto such streets or roads:

   Area 1: Those portions of Mount Zion Boulevard and Highway 138 lying west of I-75;
   Area 2: Those portions of Highway 138 and North Henry Boulevard lying east of I-75;

   Area 3: Those portions of Eagles Landing Parkway/Hudson Bridge Road from their intersection with the west right-of-way line of Highway 42 to the west city limits line.

24. Do you agree to abide by such ordinances, laws, and regulations?

    ___✓___ Yes _____ No

25. Do you have any questions or comments regarding the ordinances, laws, regulations, or application?

    _____ Yes ___✓___ No

    If YES, please list:

    _____

    _____

Georgia, Henry County, City of Stockbridge

I, GIRISHKUMAR RAMBHAI PATEL, being duly sworn according to the law, do swear that the facts and things stated by me in the above and foregoing answers to questions are true, and no false, or fraudulent statement is made herein, and such answers were made in order to produce the granting of such license.

G. R. Patel
Signature of Applicant

GIRISHKUMAR RAMBHAI PATEL
Print Name

SOLE OWNER
Title of Applicant

Subscribed and Sworn before me on this the 30 day of APRIL, 2024

NOTARY PUBLIC signature

8/11/2025
Notary Commission Expires

Terell Cox
NOTARY PUBLIC printed name

TERELL N COX
MY COMMISSION EXPIRES
NOTARY PUBLIC
AUGUST 11, 2025
CLAYTON COUNTY, GEORGIA

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

SITE MANAGER'S PERSONAL INFORMATION
Alcohol License ONLY

(To be attached to Application)
(A photo of the manager must be attached to this form)

1. **Business Name**
   (Please complete for the business you are applying as a manager for)

   Business Name: GRP LLC, DBA: Not Deceided yet

   Address: 106 Rock Quarry Rd, Stockbridge, GA 30281

2. **Manager's name and address:**

   Name: GIRISHKUMAR RAMBHAI PATEL

   Home address: _____

   Phone number: 615 579 2596

3. **Personal identification information:**

   Race: ASIAN Sex: MALE Height: 5'8" Weight: 180 LBS Age: 49 YRS

   Color of hair: BLK Color of eyes: BROWN

4. **Manager's birth information:**

   Location of birth: INDIA

   Date of birth: _____

5. **Spousal information: (If married, please complete)**

   Spouse's full name: ARTIBEN GIRISHKUMAR PATEL

   Maiden name if applicable: _____

   Date of Birth: _____ Date married: _____

   Employer: RAGO 2 LLC

6. **Employment record:**
(Please list your previous employment information for the last past 10 years) (Attach separate sheet if necessary)

Employer: RAGO 2 LLC - OWNER

PAST 4 YRS

Location _____ Dates – From:____ To: ____

Employer: RAGO 1 LLC - OWNER

PAST 5 YRS

Location: _____ _____ Dates – From:____ To: ____

Employer: _____

Location: _____ Dates – From:____ To: ____

7. **Financial interest:**

Do you or your spouse, or any member of your family:

A. Have any interest, financial or otherwise, in other malt beverage, wine, or distilled spirits stores or establishments? _____ Yes _____ No

YES AND NO. SEE BELOW

If YES, please list:

I HAVE A LICENSE TO SELL BEER AND WINE IN DEKALB COUNTY AND CLAYTON COUNTY. (GAS STATION)

B. Ever been denied a license or had a license revoked? _____ Yes ✓ No

If YES, please list:

8. **Prior residences:**
(Please list all residences you have had in the past ten (10) years.) *(Include a separate sheet if necessary)*

Street Address	City	State	Years

9. **Tax return:**
Did you file a Georgia tax return last year?

✓ Yes _____ No Working on 2023 now.

10. Convictions:

Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (10) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

NA

Charge: _____

Place of arrest: _____ Date: _____

Disposition: _____

11. Personal References:

(Please list three personal references not related to you, whom you have known for at least five years)

Name: AYO TUNDE Phone #: 770 545 9233

Address: GEORGIA

Name: NILESH Phone #: 931 334 4014

Address: TENNESSEE

Name: JAMES Phone #: 470 878 9144

Address: GEORGIA

12. Emergency Contact:

Contact name: NIRAL PATEL Phone #: 615 579 2596

I, GIRISHKUMAR RAMBHAI PATEL, do solemnly swear, that the foregoing statements are true. I understand that any falsehoods are grounds for automatic dismissal of this application.

G. R. Patel
Signature of Manager

GIRISHKUMAR RAMBHAI PATEL
Print Name

SOLE OWNER
Title of Applicant

Subscribed and Sworn before me on this the 30 day of APRIL, 2024

NOTARY PUBLIC signature

8/11/2025
Notary Commission Expires

Terell Cox
NOTARY PUBLIC printed name

TERELL N COX
MY COMMISSION EXPIRES
NOTARY PUBLIC
AUGUST 11, 2025
CLAYTON COUNTY, GEORGIA

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

BACKGROUND AND SECURITY CLEARANCE FORM
OWNER, APPLICANT, MANAGER
Alcohol License ONLY

Authorization for Release of Personal Information
(Attach photocopy of Social Security Card and Photo ID)

I, GIRISHKUMAR RAMBHAI PATEL, do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the City of Stockbridge, whether said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure pertaining to the background investigation necessary to process my application as required under the Alcohol Beverage Ordinance (Chapter 9) governing licensing in the City.

I also certify that any person, firm, or other entity ("the providing entity") who may furnish such information concerning me, shall not be held liable or accountable for giving this information and I do hereby fully and completely release the providing entity from all liability, which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the photocopy does not contain the original writing of my signature.

Notary

8/11/2025
Notary Commission Expires

TERELL N COX
MY COMMISSION EXPIRES
NOTARY
PUBLIC
AUGUST 11, 2025
CLAYTON COUNTY, GEORGIA

G.R. Patel
Signature

04/30/2024
Date

Date of Birth

Social Security Number

Driver's License Number

5'8"
Height

180 LBS
Weight

City of Stockbridge

SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

Instructions: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

GIRISHKUMAR RAMBHAI PATEL
Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity.

Address of applicant named above

615 579 2596
Telephone Number

GRP LLC
Name of business, corporation for whom application is being made.

OCCUPATIONAL TAX CERTIFICATE
Category of Public Benefit

1. ✓ I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. _____ I am a legal permanent resident of the United States.
3. _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

_____.

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the back of this form.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this affidavit? : US PASSPORT, GA DRIVER LICENSE, SSN

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

MUST BE COMPLETED BY NOTARY

I, GIRISHKUMAR RAMBHAI PATEL {representative for} GRP LLC
(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

G. R. Patel
Signature of Applicant

04/30/2024
Date

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE
04 DAY OF 30, 2024

Executed in Atlanta (City), GA (State)

NOTARY PUBLIC Signature

8/11/2025
My Commission Expires

TERELL N COX
MY COMMISSION EXPIRES
NOTARY PUBLIC
AUGUST 11, 2025
CLAYTON COUNTY, GEORGIA

SECURE AND VERIFIABLE DOCUMENTS

The following list of secure and verifiable documents, published under the authority of O.C.G.A § 50-36-2 contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative or residency or immigration status.

- A United States passport or passport card
- A United States military identification card
- A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A tribal identification card of the federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer. A listing of the federally reorganized Native American tribes may be found at: http//www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm
- A United States Permanent Resident Card or Alien Registration Receipt Card
- An Employment Authorization Document that contains a photograph of the bearer
- A passport issued by a foreign government, must have I-94 attached
- A Merchant Mariner Document Mariner Credential issued by the United States Coast Guard
- A Free and Secure Trade (FAST) card
- A NEXUS card
- A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card
- A driver's license issued by a Canadian government
- A Certificate of Citizenship issued by the United States Department of Citizenship
- Immigration Services (USCIS) (Form N-560 or Form N-561)
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570)

COMMERCIAL OCCUPATIONAL PACKET
CITY OF STOCKBRIDGE
4640 North Henry Blvd
Stockbridge, GA 30281
(678) 833-3302, (678) 833-3310 or (678) 833-3318 office number (678) 302-9732 fax number
www.cityofstockbridge.com

Thank you for choosing the City of Stockbridge for your business!

Please see the information below to determine if it is needed to start a business.

Optional/Additional Information

- *Federal Tax ID - IRS (800) 829-4933*
- *GA Sales Tax ID- GA Dept. of Revenue (877) 423-6711*
- *Secretary of State- (404) 656-2881 or www.sos.ga.gov*
- *Small Business Administration http://www.sba.gov- (404) 331-0100*

Important Information

- *Department of Agriculture - (404) 656-3671*
- *Stockbridge Fire Department - (678) 833-3338*
- *Stockbridge Building Department - (678) 833-3338*
- *Stockbridge Planning and Zoning - (770) 692-8465*
- *Stockbridge Permits- (678) 833-3314*

Please verify your address. If you are operating a business within the city limits of Stockbridge, you are required to obtain an Occupational Tax Certificate.

Occupational Tax Certificates are based on annual gross receipts **with the exception** of Professional Services.

See O.C.G.A. 48-13-9(c) for definition listing.

Contact our Occupational Tax Office to verify your location prior to submitting your application at: 678-833-3302 or 678-833-3310

Occupational Tax Certificates are Renewed Annually
*Renewal notices are mailed in **July** and returned to the City of Stockbridge by **October 1.***

*Invoices are mailed in **November** and are due by **December 31st***

Alcohol licensed retailers are required to have their licenses renewed on or before November 30th in order to sell on January 1st).

PLEASE NOTE:
Failure to receive correspondence regarding renewal or bill does not relieve obligation to pay occupational tax, penalty and/or interest. A 15% penalty + 1% per month interest fee will apply if late.

RENEWAL FEES ARE DUE BY DECEMBER 31ST OF EACH YEAR

COMMERCIAL OCCUPATIONAL PACKET

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This checklist comprises of the documentation needed initiate the application process and provides a brief summary of the application process. Please keep this checklist for your records, as it contains important information needed during the application process.

COMMERCIAL BUSINESS APPLICATION CHECKLIST:

Please provide the following documents when submitting your application:

The following items are required for ALL commercial businesses:

- ☐ Occupational Tax Application
- ☐ SAVE Public Benefits and Private Employer Affidavit Verifying Status
- ☐ Current Government Issued Photo Identification (i.e.: Copy of Driver's License/ Passport)
- ☐ Signed copy of Lease or Ownership Documentation
- ☐ State/Federal Professional License, if applicable (i.e.: Medicinal, Massage Therapy, Cosmetology, etc.)
- ☐ Certificates & Articles of Incorporation (Documents from the Secretary of State for Corporations, Incorporations, Partnerships & Limited Liability Companies)
- ☐ Floor Plan
- ☐ Square Footage of Location
- ☐ If you are a non-profit organization please include a copy of your 501 (c) 3.

The following businesses are required to have a Food Service Permit, Grease Trap and/or Grit Trap (if applicable)

Food Service Businesses, Car Washes, Automotive Shops or Dealerships, and Daycare

Grease/Grit Trap—Stockbridge City Limits: **Contact Brad Holtsinger** (678)833-3301 or (404)862-3743

Grease/Grit Trap—Unincorporated Henry County: **Contact Timothy Gardner** Henry County Water Authority (678)583-5626

Grease/Grit Trap— Clayton County Limits: **Clayton County Water Authority** (770)961-2130

Food Service Permit—**Henry County Department of Environmental Health** (470)661-0044 (ext. 5 or 6175)

License Procedures:

1. The completed application will have a **$70** administrative fee and then the application will be sent to the Stockbridge Planning & Zoning Department for review cost is **$50**. The time is provided in 3 to 5 business days.
2. Once the Stockbridge Planning & Zoning Departments provides a response to the city of Stockbridge Business Services Division for a building and fire inspection.

All paperwork must be submitted to the City of Stockbridge Occupational Tax Department from Stockbridge Planning and Zoning before scheduling a fire and building inspection.

-If **approved**, the applicant will be contacted to schedule Stockbridge Building & Fire inspections the cost is $200.

-If **denied**, the applicant is informed of the denial and may contact Stockbridge Planning & Zoning Department directly to inquire whether the issue can be resolved. The application process is suspended until Stockbridge Planning & Zoning advises otherwise.

3. Provided the building and fire are satisfactory the application will be entered in the system and the applicant will be contacted of its approval and amount to remit.

COMMERCIAL OCCUPATIONAL PACKET
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www.cityofstockbridge.com

Section I- BUSINESS INFORMATION (Application must be completed in it's entirety for processing)

Business Name:	GRP LLC		
DBA:	NOT DECIDED YET		
Business Address:	Street Address 106 ROCK QUARRY RD, STOCKBRIDGE, GA 30281		Zip
Mailing Address:	Street Address 106 ROCK QUARRY RD, STOCKBRIDGE, GA 30281	City State	Zip
Business Tel #:	615 579 2596		
E-Mail:	RAGO2LLC@YAHOO.COM		
FEIN or SS#:		State License #:(If applicable)	
# of Employees-Company		# of Employees-City	
Point-of-Contact Name & Number	GIRHSKUMAR RAMBHAI PATEL		
E-Verify #: (Only businesses with more than 10 employees.)			
Date Business Opened:			

Please fully describe the type of business that will be conducted:

Section II- TYPE OF OWNERSHIP

- ☐ Sole Ownership
- ☐ Partnership
- ☐ Corporation
- ☑ Limited Liability Company

Section III- OWNER'S/OFFICER'S INFORMATION

Name/ Title:	GIRISHKUMAR RAMBHAI PATEL OWNER
Home Address:	
Tel # :	615 579 2596
E-Mail:	RAGO2LLC@YAHOO.COM
Name/Title:	
Home Address:	
Tel # :	
E-mail:	

Section IV- OCCUPATIONAL TAX SCHEDULE

Estimated/ Actual Gross Receipts for this calendar year:	$

ONLY FOR PROFESSIONAL PRACTITIONERS: Please contact the Business Services Department for fee schedule.

If applying for a non-profit/tax exempt organization, please include a copy of your 501(c) form or letter of approval. Your business will not be considered Non-Profit until we receive a copy of your 501(c)3 letter or a current letter of your exemption status from the Internal Revenue Service (IRS).

Signature/ Title: G. R. Patel	**Date:** 04/30/2024

FOR OFFICE USE ONLY PARCEL #: NAICS CODE: I.D. #:

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Building Modifications Application Checklist:

Please check the following items that will be completed in the commercial location:

- ☐ New Carpet
- ☐ New Plumbing
- ☐ Adding or modifying walls
- ✓ Painting
- ☐ Removing existing equipment
- ☐ Adding new equipment
- ☐ Any other modifications _____

I, GIRISHKUMAR RAMBHAI PATEL am a business owner/operator of GRP LLC.

I am completing the following in the new location:

By executing and notarizing this Building Modifications form, I agree, and accept responsibility for notifying the City of Stockbridge—Occupational Tax Department, of any modifications inside of the listed address on my application. I also acknowledge that I am aware that non-submittal of the purposed modifications can result in a denial for an Occupational Tax Certificate for the City of Stockbridge.

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on April, 30, 2024 **in** Atlanta **(city),** GA **(state).**

G. R. Patel

Signature of Authorized Officer or Agent (Owner or Manager)

GIRISHKUMAR RAMBHAI PATEL GRP LLC

Printed Name & Title of Authorized Officer or Agent (Owner or Manager)

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 30 DAY OF APR, 2024.

Notary Public

8/11/2025
My Commission Expires

TERELL N COX
MY COMMISSION EXPIRES
NOTARY
PUBLIC
AUGUST 11, 2025
CLAYTON COUNTY, GEORGIA

Office Use Only:

- ☐ Distance Requirements
- ☐ Assembly Requirements
- ☐ Numerical Limitation Requirements

Office Use Only:

OTC Number _____

COMMERCIAL OCCUPATIONAL PACKET
CITY OF STOCKBRIDGE
4640 North Henry Blvd
Stockbridge, GA 30281
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www.cityofstockbridge.com

Private Employer Affidavit Pursuant To O.C.G.A. § 36-60-6(d)

By executing this affidavit under oath, the undersigned private employer verifies one of the following with respect to its application for a business license, occupational tax certificate, or other document required to operate a business as referenced in O.C.G.A. §36-60-6(d):

*** If you select SECTION 1 (A), please fill out SECTION 2 and then execute with signature below.***

Section 1. **Please check ONLY ONE:**

(A) _____ On January 1st of the below signed year, the individual, firm, or corporation employed more than ten (10) employees.

If you select SECTION 1 (B), please skip SECTION 2 and execute with signature below.

(B) _____ On January 1st of the below signed year, the individual, firm, or corporation employed ten (10) or fewer employees.

Section 2.

The employer has registered with and utilizes the federal work authorization program in accordance with the applicable provisions and deadlines established in O.C.G.A. §36-60-6(d). The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as follows:

_____
Name of Private Employer

_____
Federal Work Authorization User I.D. #

_____
Date of Authorization

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on April, 30, 2024 **in** Atlanta **(city),** GA **(state).**

G. R. Patel
Signature of Authorized Officer or Agent (Owner or Manager)

GIRISHKUMAR RAMBHAI PATEL, OWNER
Printed Name & Title of Authorized Officer or Agent (Owner or Manager)

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 30 DAY OF April, 2024

Notary Public
My Commission Expires: 8/11/2025

TERELL N COX
MY COMMISSION EXPIRES
NOTARY
PUBLIC
AUGUST 11, 2025
CLAYTON COUNTY, GEORGIA

COMMERCIAL OCCUPATIONAL PACKET
CITY OF STOCKBRIDGE
4640 North Henry Blvd
Stockbridge, GA 30281
(678) 833-3302, (678) 833-3310 or (678) 833-3318 office number (678) 302-9732 fax number
www.cityofstockbridge.com

SECURE AND VERIFIABLE DOCUMENTS

The following list of secure and verifiable documents, published under the authority of O.C.G.A § 50-36-2 contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative or residency or immigration status.

A United States passport or passport card

A United States military identification card

A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.

A identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.

A tribal identification card of the federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer. A listing of the federally reorganized Native American tribes may be found at: http//www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm

A United States Permanent Resident Card or Alien Registration Receipt Card

An Employment Authorization Document that contains a photograph of the bearer

A passport issued by a foreign government, must have I-94 attached

A Merchant Mariner Document Mariner Credential issued by the United States Coast Guard

A Free and Secure Trade (FAST) card

A NEXUS card

A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card

A driver's license issued by a Canadian government

A Certificate of Citizenship issued by the United States Department of Citizenship

Immigration Services (USCIS) (Form N-560 or Form N-561)

A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570)

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SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

INSTRUCTIONS: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

GIRISHKUMAR RAMBHAI PATEL
Name of natural person applying on behalf of individual, business, corporation, partnership or other private entity.

Address of applicant named above

615 579 2596
Telephone Number

GRP LLC
Name of business, corporation for whom application is being made.

OCCUPATIONAL TAX CERTIFICATE
Category of Public Benefit

1. ✓ I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. _____ I am a legal permanent resident of the United States.
3. _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.
My alien number issued by the Department of Homeland Security or other federal immigration agency is:
_____.

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the following page.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this affidavit? : US PASSPORT, SSN, GA DRIVER LICENSE

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

MUST DISPLAY ORIGINAL NOTARY SEAL

I, GIRISHKUMAR RAMBHAI PATEL {representative for} GRP LLC
(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

G. R. Patel
Signature of Applicant

04/23/2024
Date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 30 **DAY OF** APRIL, 2024
Executed in Atlanta **(City),** GA **(State)**

NOTARY PUBLIC Signature

8/11/2025
My Commission Expires

TERELL N COX
MY COMMISSION EXPIRES
NOTARY
PUBLIC
AUGUST 11, 2025
CLAYTON COUNTY, GEORGIA

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Memorandum of Understanding

Occupational Tax Certificate

I GIRISHKUMAR RAMBHAI PATEL, am a business owner/operator of GRP LLC.
(Business Owner Name—Please Print) **(Business Name—Please print)**

By executing and notarizing this Memorandum of Understanding, I agree, and accept responsibility for notifying the City of Stockbridge - Occupational Tax Department of all changes of information regarding my business (closure/non-closure). I also acknowledge that I am aware that non-submittal of the annual renewal application **will not** close the business, and that additional fees will be incurred as a result of non-compliance to all laws and ordinances set forth to operate within the City of Stockbridge.

Furthermore, I agree **not to hold the City of Stockbridge responsible,** after due process of time, they determine that I am no longer in business at my location.

I hereby declare under penalty of perjury that the foregoing is true and correct.
Executed on APRIL, 30, 2024 **in** Atlanta **(city),** GA **(state).**

G. R. Patel
Signature of Business Owner or Manager

GIRISHKUMAR RAMBHAI PATEL
Printed Name of Business Owner or Manager

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 30 DAY OF APRIL, 2024

Notary Public My Commission Expires 8/11/2025

TERELL N COX
MY COMMISSION EXPIRES
NOTARY
PUBLIC
AUGUST 11, 2025
CLAYTON COUNTY, GEORGIA

Office Use Only:

OTC _____

COMMERCIAL OCCUPATIONAL PACKET

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A RIBBON CUTTING CEREMONY CANNOT BE SCHEDULED UNTIL THE REQUESTING BUSINESS OBTAINS AN OCCUPATIONAL TAX CERTIFICATE

Please check one of the following :	
✓ **Yes, my business wants a ribbon cutting ceremony.**	**No, my business does not want a ribbon cutting ceremony.**
Please note that the ribbon cutting ceremony will be approximately three weeks from the date of opening. Efforts will be made to have one or more Council Members available.	
Proposed Date:	
Business Name:	
Address:	
Telephone #:	
E-Mail Address:	
Owner's Name: GIRISHKUMAR RAMBHAI PATEL	
Owner's Email Address: RAGO2LLC@YAHOO.COM	
Name (Please print) :	
Title: OWNER	
Signature:	

FOR OFFICE USE ONLY:

Received by: _____ Date/Time: _____

Date submitted: _____ Submitted to: _____

Date received back from: _____

Approved Date of Ribbon Cutting: _____

Comments:

_____

_____

Endorsements / Mentions Spéciales / Anotaciones

If your passport expires within six months of your date of departure, you may be denied entry into some countries.

SIGNATURE OF BEARER / SIGNATURE DU TITULAIRE / FIRMA DEL TITULAR

PASSPORT
PASSEPORT / PASAPORTE

THE UNITED STATES OF AMERICA

Type/Type/Tipo: P

Code/Code/Código: USA

Passport No./No. de Passeport/No. de Pasaporte: [redacted]

USA

Surname/Nom/Apellidos
PATEL

Given names/Prénoms/Nombres
GIRISHKUMAR RAMBHAI

Nationality/Nationalité/Nacionalidad
UNITED STATES OF AMERICA

Date of birth/Date de naissance/Fecha de nacimiento
[redacted]

Sex/Sexe/Sexo
M

Place of birth/Lieu de naissance/Lugar de nacimiento
INDIA

Date of issue/Date de délivrance/Fecha de expedición
25 OCT 2022

Date of expiration/Date d'expiration/Fecha de caducidad
24 OCT 2032

Authority/Autorité/Autoridad
UNITED STATES DEPARTMENT OF STATE

P<USAPATEL<<GIRISHKUMAR<RAMBHAI<<<<<<<<<<<<<<

[redacted]USA75[redacted]3210248741949737<839432

Control Number : 24026260

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

GRP LLC
a **Domestic Limited Liability Company**

has been duly organized under the laws of the State of Georgia on **02/05/2024** by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on **02/07/2024**.

Brad Raffensperger

Brad Raffensperger
Secretary of State

ARTICLES OF ORGANIZATION

Electronically Filed
Secretary of State
Filing Date: 2/5/2024 12:09:32 PM

BUSINESS INFORMATION

CONTROL NUMBER	24026260
BUSINESS NAME	GRP LLC
BUSINESS TYPE	Domestic Limited Liability Company
EFFECTIVE DATE	02/05/2024

PRINCIPAL OFFICE ADDRESS

ADDRESS	138 HUDSON BRIDGE CT, STOCKBRIDGE, GA, 30281, USA

REGISTERED AGENT

NAME	ADDRESS	COUNTY
RAGO 2 LLC	2701 BOULDERCREST RD SE STE A, ATLANTA, GA, 30316, USA	Dekalb

ORGANIZER(S)

NAME	TITLE	ADDRESS
GIRISHKUMAR PATEL	ORGANIZER	138 HUDSON BRIDGE CT, STOCKBRIDGE, GA, 30281, USA

OPTIONAL PROVISIONS

N/A

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE	GIRISHKUMAR PATEL
AUTHORIZER TITLE	Organizer

April/25/2024

Cabcon, LLC

Pinellas County

1010 Central Ave. Unti 401

Saint Petersburg, FL 33705

To Whom It May Concern,

Re: Notarized Statement Regarding Financial Ability of GRP LLC, Girishkumar Rambhai Patel

I, Jake Cablish hereby provide this notarized statement in accordance with the requirements outlined in 9.04.170 of the City Code, confirming the financial ability of GRP LLC, Girishkumar Rambhai Patel, to purchase and maintain liquor store in city of Stockbridge, GA.

As a Accountant, I have reviewed the financial documents provided by Girishkumar Rambhai Patel. which demonstrate their sufficient financial capacity to undertake the aforementioned purchase and subsequent maintenance obligations.

Based on my professional assessment and analysis of the financial documents provided, I can confirm that Girishkumar Rambhai Patel possesses the necessary financial resources and stability to meet the financial requirements specified by the City Code.

State of Georgia County of Fulton
Subscribed and sworn before me on 4/30/24 (Date)
(Notary Signature)

Brettin Jacob Cablish

Accountant

Cabcon, LLC

941 348 5759

G. R. Patel

GRP LLC

Girishkumar Rambhai Patel

615 579 2596

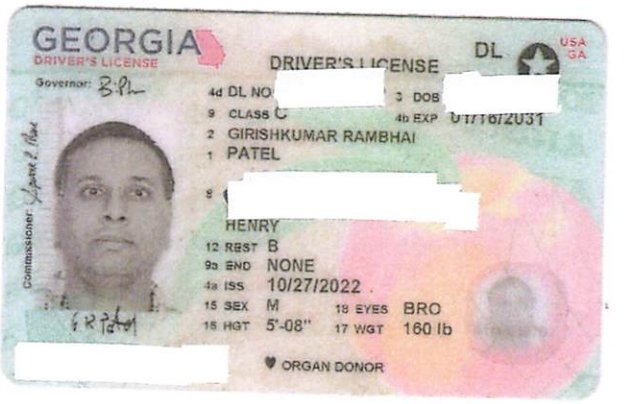
Texas
Denton County

Acknowledged before me on April 27, 2024 by Brettin Jacob Cablish.

Notary Public, State of Texas

Griffin Neubauer
ID NUMBER
134571890
COMMISSION EXPIRES
September 25, 2027

Electronically signed and notarized online using the Proof platform.



GEORGIA
DRIVER'S LICENSE

DRIVER'S LICENSE DL

USA GA

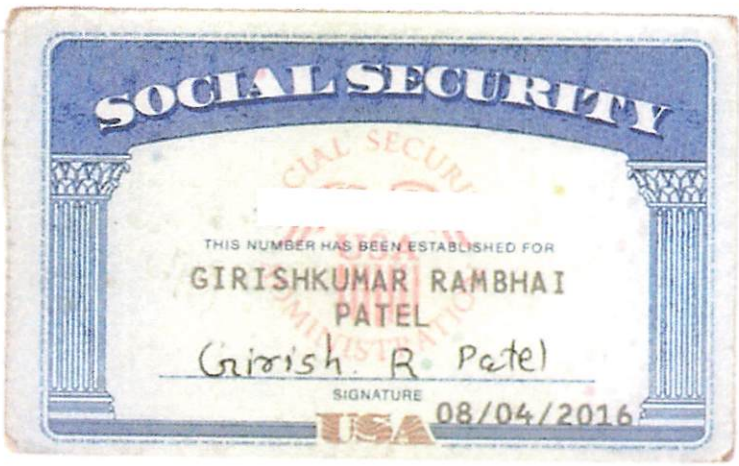
Governor:

Commissioner:

4d DL NO [redacted] 3 DOB [redacted]
9 CLASS C 4b EXP 01/16/2031
2 GIRISHKUMAR RAMBHAI
1 PATEL
8 [redacted]
HENRY
12 REST B
9a END NONE
4a ISS 10/27/2022
15 SEX M 18 EYES BRO
16 HGT 5'-08" 17 WGT 160 lb

[redacted]

ORGAN DONOR



SOCIAL SECURITY

THIS NUMBER HAS BEEN ESTABLISHED FOR

GIRISHKUMAR RAMBHAI
PATEL

Girish R Patel

SIGNATURE

08/04/2016

USA

Request Under Review

Your request is currently under review with CITY OF STOCKBRIDGE.

Registration Id: 185158

When the review is complete a notification will be sent to RAGO2LLC@YAHOO.COM. Once approved you will be given the ability to continue with scheduling an appointment at https://georgia.fieldprint.com.
If you have not received notice regarding this review status, please contact CITY OF STOCKBRIDGE.
For fingerprint registration assistance, contact the Applicant Services Help Desk at 404-244-2639 opt 2 Monday through Friday between 9:00 AM and 4:00 PM EST or email us at GAApplicant@gbi.ga.gov for further instructions..

LOTTERY APPLICATION TRACKING SHEET

Date Received: 5/13/24 Application No.: 2

Applicant Name: Bhavishaben Chirag Desai

Proposed business and name: Bottle Shop, Jodeco Rd

CHECKLIST:

- ✓ Complete Application and Documents: 5/15/2024 or Missing: background check (rec'd 5/15/2024)
- ✓ $750 Non-Refundable Application Fee: yes Date Processed: 5/14/2024
- ✓ Fieldprint Background Check Information Received: 5/15/2024
- ✓ Notarized Financial Statement Received: 5/13/2024
- ✓ Copy of Government Issued ID Received: 5/13/2024
- ✓ Emailed applicant receipt/CC approval code/lottery process timeline: gave in person on 5/13
- ○ Redacted Copy of Application Sent to City Clerk on: (date) _____

Any Notes:
Check with attorney regarding secondary backer.

Private lender

email address: chiragdesai1971@gmail.com

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

APPLICATION
(Lottery Application ONLY)

NOTE: USE SEPARATE PAGES AND/OR ATTACHMENTS, AS NECESSARY

1. Type(s) of license applied for:
   - (✓) Alcohol License
   - ( ) Tire Shop
   - ( ) Used Car Dealership
   - ( ) Used Appliance Shop
   - ( ) Thrift store and Consignment Shop
   - ( ) Pawnshop
   - ( ) Vape Shop
   - ( ) Precious Metals

2. Proposed license is a (n):
   - (✓) Individual
   - ( ) Partnership
   - ( ) Corporation
   - ( ) LLC
   - ( ) other legal entity (explain)

_____

3. Applicant information:

Name: Bhavishaben Chirag Desai

Title/Position: Owner

Are you a citizen of the United States: ✓ yes _____ no

Where were you born? India

Present home address: _____

County of Henry Number of years at present address 2 years

Contact information: Business phone #: _____

Home phone #: 551-247-7017

How long have you been a resident of Georgia? 6yrs Henry Co? 6yrs

What has been your occupation for the past five (5) years? Owner

4. Applicant's relationships with other persons with 1st degree of kinship.

Immediate living relatives:
(Please list all immediate living wife, children, parents, brothers, sisters, and parents)
(Attach separate sheet(s) if necessary)

Name: Chirag Kumar N Desai Age: 52

Relationship: Husband Live with or apart: Live with

Name: Kush Desai Age: 17

Relationship: Son Live with or apart: Live with

Name: _____ Age: _____

Relationship: _____ Live with or apart: _____

Name: _____ Age: _____

Relationship: _____ Live with or apart: _____

5. Proposed business name and address:

Business name: Bottle shop

Address: Jodeco Rd

6. Corporations: If operating as a corporation, please complete the following:

Corporation name: _____

Address: _____

Date of Incorporation: _____ Where Incorporated: _____

Type of Corporation: _____

Corporate Officers: *Please list each (attach a separate sheet if necessary)*

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

7. **Stockholder information – applies to any "closely held" stock, not publicly traded and to all stockholders who own more than 10% of the outstanding capital stock of the corporation. DO NOT FILL OUT THIS INFORMATION FOR PUBLICLY TRADED CORPORATIONS. In lieu thereof, please indicate by attached sheet as to whether any affiliate, related company, holding company, subsidiary or other organization holds any form of alcohol license in the City of Stockbridge, or any distilled spirits package sale license within the State of Georgia.**

8. If operating as a corporation, list stockholders with addresses and the amount of interest of each stockholder in the corporation. ***Please list each (attach a separate sheet if necessary)***

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

9. Limited Liability Company (LLC): If operating as a company, please complete the following:

Company name: _____

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of LLC (member managed or manager managed):_____

LLC members with an ownership interest: ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

10. Limited Liability Partnership (LLP), Partnerships, Sole Proprietorships, and any other forms of business entity: If operating as a partnership or other form of business entity, please complete the following:

Entity name: _____

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of Partnership: _____

Partnership members with an ownership interest. ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

If more than 4 members, partners, or stockholders, please provide the name, address, social security number and ownership interest of additional parties at interest, by separate sheet.

11. Registered Agent

If the proposed license is a legal entity, please provide name of its registered agent:

Agent(s) name: _____

Address: _____

Telephone Number: _____

12. Store Manager, Managing Member, Managing Partner, or other person in charge:
What is the name of the person who, if the license is granted, will be the active manager of the business and on the job at the business?

Full name:_____

(Please complete the site manager's personal statement, attached)

13. Convictions:
Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (15) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

No convictions.

14. Location ownership
Do you own the land and building on which the business is to be operated?

_____ Yes _____ No If Yes, when did you buy it? _____
(Attach proof of ownership)

If not the owner, please complete the following and attach a copy of the lease, option, and any other pertinent documents:

Owner/Agent of Property: _____

Amount of rent: _____ Frequency Paid: _____

Is the amount of rent a set amount? _____ Yes _____ No

If NO, please explain how it is determined: _____

15. If you have an option, or other legal, binding document to buy, lease the building, please explain the general terms: _____

16. Zoning
What is the current zoning on the proposed property location? _____

17. Location Certification
If this is the first application for a license for this business, please attach a current certificate from a registered surveyor containing the following information:

(1) A scale drawing of the building or proposed building as situated on the proposed lot.
(2) Proposed parking available to the building.

NOTE: NOT Required for a retail package alcohol license until the applicant is chosen for a license.

18. Financial Interest – Does the applicant or interested parties to this Application:

A. Have any financial interest in any similar business?

_____ Yes ✓ No

B. Received any financial aid or assistance from any similar business?

_____ Yes ✓ No

19. Other Interests:
Do you; any member of your family (children, spouse, parents, siblings) or any of the other owners, partners, or stockholders:

A. Have any interest, financial or otherwise, in other similar businesses or establishments?
✓ Yes _____ No

If YES, please list:

Tony's Bottle shop

B. Own, lease, sub-lease any real estate which is occupied by a similar business. If so, give the location information as to any lease or rental agreement including rents received and who it was rented to: _____ Yes ✓ No

If YES, please list:

C. Serve as the Executor or Administrator or Beneficiary of Heir of any estate having an interest in any similar business or establishment?

_____ Yes ✓ No

If YES, please list:

_____

_____

D. Serve as Beneficiary or Trustee of any Trust Fund having an interest in any similar business or establishment?

_____ Yes ✓ No

If YES, please list:

_____

_____

20. Financial Gain
Please list all parties who will receive any financial gain or payment derived from any interest or income as a result of the operation that this application applies to. (Please include any owners, partners, members, officers, or principal stockholders)

_____

_____

21. Other Jurisdictions
List other jurisdictions in which any applicant, partner, member, corporate officer, or stockholder holds a similar occupational tax certificate, regulatory license, or alcoholic beverage license:

_____

_____

_____

List all details of denial of any such licenses in any other jurisdiction:

None

_____

22. Are you familiar with the City of Stockbridge Ordinances, State laws and regulations, Federal laws and regulations governing the operations of this type of business?

✓ Yes _____ No

(City of Stockbridge Ordinance 9.04 Alcoholic Beverage)

23. Restrictions Alcohol ONLY

Ordinance 9.04.090

1. No retail license for the sale of distilled spirits shall be issued unless the location is located within five hundred (500) feet of the streets or roads designated in the following three (3) areas and has direct access onto such streets or roads:

   Area 1: Those portions of Mount Zion Boulevard and Highway 138 lying west of I-75;
   Area 2: Those portions of Highway 138 and North Henry Boulevard lying east of I-75;

   Area 3: Those portions of Eagles Landing Parkway/Hudson Bridge Road from their intersection with the west right-of-way line of Highway 42 to the west city limits line.

24. Do you agree to abide by such ordinances, laws, and regulations?

    ✓ Yes _____ No

25. Do you have any questions or comments regarding the ordinances, laws, regulations, or application?

    _____ Yes ✓ No

    If YES, please list:

    _____

    _____

Georgia, Henry County, City of Stockbridge

I, Bharisha chiraq Desai, being duly sworn according to the law, do swear that the facts and things stated by me in the above and foregoing answers to questions are true, and no false, or fraudulent statement is made herein, and such answers were made in order to produce the granting of such license.

B.C Desai
Signature of Applicant

Bharisha Chiraq Desai
Print Name

Owner
Title of Applicant

Subscribed and Sworn before me on this the 27 day of April, 2024

NOTARY PUBLIC signature

June 23, 2026
Notary Commission Expires

Shaunice Jones
NOTARY PUBLIC printed name

SHAUNICE JONES
MY COMMISSION EXPIRES
NOTARY
PUBLIC
JUNE 23, 2026
HENRY COUNTY, GEORGIA

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

SITE MANAGER'S PERSONAL INFORMATION
Alcohol License ONLY

(To be attached to Application)
(A photo of the manager must be attached to this form)

1. **Business Name**
   (Please complete for the business you are applying as a manager for)

   Business Name: Bottle shop

   Address: Jodeco Rd

2. **Manager's name and address:**

   Name: Bhavishabon Chirag Desai

   Home address: ___

   Phone number: 551-247-7017

3. **Personal identification information:**

   Race: Asian Sex: F Height: 4'11' Weight: 108lb Age: 46

   Color of hair: Black Color of eyes: Black

4. **Manager's birth information:**

   Location of birth: India

   Date of birth: _____ _____

5. **Spousal information: (If married, please complete)**

   Spouse's full name: Chiragkumar N Desai

   Maiden name if applicable: _____

   Date of Birth: _____ Date married: _____

   Employer: Arihant c S tores LLC

6. **Employment record:**
(*Please list your previous employment information for the last past 10 years) (Attach separate sheet if necessary)*

Employer: Arihant C Stores LLC

Location: _____ Dates – From: 07/1/2019 To: Current

Employer: Carter's Distributor Center

Location. Dates – From: 05/01/2019 To: Current

Employer: _____

Location: _____ Dates – From:____ To: ____

7. **Financial interest:**

Do you or your spouse, or any member of your family:

A. Have any interest, financial or otherwise, in other malt beverage, wine, or distilled spirits stores or establishments? ✓ Yes _____ No

If YES, please list:

Tony's One stop

B. Ever been denied a license or had a license revoked? _____ Yes ✓ No

If YES, please list:

8. **Prior residences:**
(Please list all residences you have had in the past ten (10) years.) *(Include a separate sheet if necessary)*

Street Address	City	State	Years
			09/01/2022 – Current
			09/01/2018 – 08/30/2022

9. **Tax return:**
Did you file a Georgia tax return last year?

[illegible]

[illegible]

[illegible]

[illegible]

✓ Yes _____ No

10. Convictions:

Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (10) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

No Convictions

Charge: _____

Place of arrest: _____ Date: _____

Disposition: _____

11. Personal References:

(Please list three personal references not related to you, whom you have known for at least five years)

Name: Ashita Patel Phone #: 404-541-0065

Address: _____

Name: Surekhaben Patel Phone #: 470-234-4686

Address: _____

Name: Malvikaben Desai Phone #: 470-812-1543

Address: _____

12. Emergency Contact:

Contact name: Chirag Desai Phone #: 201-960-6021

I, Bhavisha Chirag Desai, do solemnly swear, that the foregoing statements are true. I understand that any falsehoods are grounds for automatic dismissal of this application.

B. C. Desai
Signature of Manager

Bhavisha Chirag Desai
Print Name

Owner.
Title of Applicant

Subscribed and Sworn before me on this the 27th day of April, 2024

NOTARY PUBLIC signature

June 23, 2026
Notary Commission Expires

Shaunice Jones
NOTARY PUBLIC printed name

SHAUNICE JONES
MY COMMISSION EXPIRES
NOTARY
PUBLIC
JUNE 23, 2026
HENRY COUNTY, GEORGIA

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

BACKGROUND AND SECURITY CLEARANCE FORM
OWNER, APPLICANT, MANAGER
Alcohol License ONLY

Authorization for Release of Personal Information
(Attach photocopy of Social Security Card and Photo ID)

I, Bhavishaben Desai, do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the City of Stockbridge, whether said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure pertaining to the background investigation necessary to process my application as required under the Alcohol Beverage Ordinance (Chapter 9) governing licensing in the City.

I also certify that any person, firm, or other entity ("the providing entity") who may furnish such information concerning me, shall not be held liable or accountable for giving this information and I do hereby fully and completely release the providing entity from all liability, which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the photocopy does not contain the original writing of my signature.

Notary

SHAUNICE JONES
MY COMMISSION EXPIRES
NOTARY
PUBLIC
JUNE 23, 2026
HENRY COUNTY, GEORGIA

Notary Commission Expires

B. C. Desai
Signature

04/27/2024
Date

Date of Birth

Social Security Number

Driver's License Number

4' 11"
Height

108lb.
Weight

City of Stockbridge

SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

Instructions: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

Bhavishaben Desai

Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity.

Address of applicant named above

551-247-7017

Telephone Number

Name of business, corporation for whom application is being made.

OCCUPATIONAL TAX CERTIFICATE

Category of Public Benefit

1. ✓ I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. _____ I am a legal permanent resident of the United States.
3. _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

_____.

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the back of this form.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this affidavit? :_____

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

MUST BE COMPLETED BY NOTARY

I, Bhavisha Chirag Desai {representative for} Bhavisha Chirag Desai

(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

B. C Desai

Signature of Applicant

04/27/2024

Date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 24th DAY OF April, 2024

Executed in McDonough (City), GA (State)

SHAUNICE JONES
MY COMMISSION EXPIRES
NOTARY
PUBLIC
JUNE 23, 2026
HENRY COUNTY, GEORGIA

NOTARY PUBLIC Signature

June 23, 2026

My Commission Expires

SECURE AND VERIFIABLE DOCUMENTS

The following list of secure and verifiable documents, published under the authority of O.C.G.A § 50-36-2 contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative or residency or immigration status.

- A United States passport or passport card
- A United States military identification card
- A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A tribal identification card of the federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer. A listing of the federally reorganized Native American tribes may be found at: http//www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm
- A United States Permanent Resident Card or Alien Registration Receipt Card
- An Employment Authorization Document that contains a photograph of the bearer
- A passport issued by a foreign government, must have I-94 attached
- A Merchant Mariner Document Mariner Credential issued by the United States Coast Guard
- A Free and Secure Trade (FAST) card
- A NEXUS card
- A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card
- A driver's license issued by a Canadian government
- A Certificate of Citizenship issued by the United States Department of Citizenship
- Immigration Services (USCIS) (Form N-560 or Form N-561)
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570)

SHRI LLC.
Private Lender
5321 Davenport Manor
Cumming Ga 30041.
Phone: (770)-656-4662.

To whom it may concern:

I am writing this letter to confirm that my company will fund Bhavisha Desai residing at
.o open a liquor store in the city of
Stockbridge.

I have attached my bank letter.

Thank You,

Mac Patel.
Owner @ SHRI LLC.

CSB
COASTAL STATES BANK

5835 Bethelview Road
Cumming, GA 30040

February 7, 2024

To Whom It May Concern:

This letter is to certify that SHRI LLC, has an open and active account with Coastal States Bank that is associated with the information listed below. If you have any questions or concerns, please feel free to contact me at 678-845-313.

SHRI LLC
Address:

Balance as of 02/07/2024: $1,500,000

- These funds are not currently encumbered or hypothecated.
- Balances are subject to change at any time.

Sincerely,

Deniell Fitzgerald

Deniell Fitzgerald
AVP/Team Lead
Coastal States Bank

GEORGIA
DRIVER'S LICENSE

LIMITED-TERM
DRIVER'S LICENSE

DL

USA
GA

Governor:

Commissioner:

4d DL NO [redacted]
3 DOB [redacted]
9 CLASS C
4b EXP 05/18/2027
2 BHAVISHABEN CHIRAG
1 DESAI
8 [redacted]
HENRY
12 REST A
9a END NONE
4a ISS 04/28/2023
15 SEX F
18 EYES BLK
16 HGT 4'-11"
17 WGT 115 lb
[redacted]

COMMERCIAL OCCUPATIONAL PACKET
CITY OF STOCKBRIDGE
4640 North Henry Blvd
Stockbridge, GA 30281
(678) 833-3302, (678) 833-3310 or (678) 833-3318 office number (678) 302-9732 fax number
www.cityofstockbridge.com

Thank you for choosing the City of Stockbridge for your business!

Please see the information below to determine if it is needed to start a business.

Optional/Additional Information

- *Federal Tax ID - IRS (800) 829-4933*
- *GA Sales Tax ID- GA Dept. of Revenue (877) 423-6711*
- *Secretary of State- (404) 656-2881 or www.sos.ga.gov*
- *Small Business Administration http://www.sba.gov- (404) 331-0100*

Important Information

- *Department of Agriculture - (404) 656-3671*
- *Stockbridge Fire Department - (678) 833-3338*
- *Stockbridge Building Department - (678) 833-3338*
- *Stockbridge Planning and Zoning - (770) 692-8465*
- *Stockbridge Permits- (678) 833-3314*

Please verify your address. If you are operating a business within the city limits of Stockbridge, you are required to obtain an Occupational Tax Certificate.

Occupational Tax Certificates are based on annual gross receipts **with the exception** of Professional Services.

See O.C.G.A. 48-13-9(c) for definition listing.

****Contact our Occupational Tax Office to verify your location prior to submitting your application at: 678-833-3302 or 678-833-3310***

Occupational Tax Certificates are Renewed Annually
*Renewal notices are mailed in **July** and returned to the City of Stockbridge by **October 1.***

*Invoices are mailed in **November** and are due by **December 31st***

****Alcohol licensed retailers are required to have their licenses renewed on or before November 30th in order to sell on January 1st).****

PLEASE NOTE:
Failure to receive correspondence regarding renewal or bill does not relieve obligation to pay occupational tax, penalty and/or interest. A 15% penalty + 1% per month interest fee will apply if late.

RENEWAL FEES ARE DUE BY DECEMBER 31ST OF EACH YEAR

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This checklist comprises of the documentation needed initiate the application process and provides a brief summary of the application process. Please keep this checklist for your records, as it contains important information needed during the application process.

COMMERCIAL BUSINESS APPLICATION CHECKLIST:

Please provide the following documents when submitting your application:

The following items are required for ALL commercial businesses:

- ☐ Occupational Tax Application
- ☐ SAVE Public Benefits and Private Employer Affidavit Verifying Status
- ☐ Current Government Issued Photo Identification (i.e.: Copy of Driver's License/ Passport)
- ☐ Signed copy of Lease or Ownership Documentation
- ☐ State/Federal Professional License, if applicable (i.e.: Medicinal, Massage Therapy, Cosmetology, etc.)
- ☐ Certificates & Articles of Incorporation (Documents from the Secretary of State for Corporations, Incorporations, Partnerships & Limited Liability Companies)
- ☐ Floor Plan
- ☐ Square Footage of Location
- ☐ If you are a non-profit organization please include a copy of your 501 (c) 3.

The following businesses are required to have a Food Service Permit, Grease Trap and/or Grit Trap (if applicable)

Food Service Businesses, Car Washes, Automotive Shops or Dealerships, and Daycare

Grease/Grit Trap—Stockbridge City Limits: **Contact Brad Holtsinger** (678)833-3301 or (404)862-3743

Grease/Grit Trap—Unincorporated Henry County: **Contact Timothy Gardner** Henry County Water Authority (678)583-5626

Grease/Grit Trap— Clayton County Limits: **Clayton County Water Authority** (770)961-2130

Food Service Permit—**Henry County Department of Environmental Health** (470)661-0044 (ext. 5 or 6175)

License Procedures:

1. The completed application will have a **$70** administrative fee and then the application will be sent to the Stockbridge Planning & Zoning Department for review cost is **$50**. The time is provided in 3 to 5 business days.
2. Once the Stockbridge Planning & Zoning Departments provides a response to the city of Stockbridge Business Services Division for a building and fire inspection.

All paperwork must be submitted to the City of Stockbridge Occupational Tax Department from Stockbridge Planning and Zoning before scheduling a fire and building inspection.

-If **approved**, the applicant will be contacted to schedule Stockbridge Building & Fire inspections the cost is $200.

-If **denied**, the applicant is informed of the denial and may contact Stockbridge Planning & Zoning Department directly to inquire whether the issue can be resolved. The application process is suspended until Stockbridge Planning & Zoning advises otherwise.

3. Provided the building and fire are satisfactory the application will be entered in the system and the applicant will be contacted of its approval and amount to remit.

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Building Modifications Application Checklist:

Please check the following items that will be completed in the commercial location:

- ☐ New Carpet
- ☐ New Plumbing
- ☐ Adding or modifying walls
- ☐ Painting
- ☐ Removing existing equipment
- ☐ Adding new equipment
- ☐ Any other modifications _____

I, _____ am a business owner/operator of _____.

I am completing the following in the new location:

By executing and notarizing this Building Modifications form, I agree, and accept responsibility for notifying the City of Stockbridge—Occupational Tax Department, of any modifications inside of the listed address on my application. I also acknowledge that I am aware that non-submittal of the purposed modifications can result in a denial for an Occupational Tax Certificate for the City of Stockbridge.

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, _____, 20__ in _____(city), _____(state).

_____

Signature of Authorized Officer or Agent (Owner or Manager)

_____ _____

Printed Name & Title of Authorized Officer or Agent (Owner or Manager)

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE _____ DAY OF _____, 20__.

_____ _____

Notary Public My Commission Expires

Office Use Only:

- ☐ Distance Requirements
- ☐ Assembly Requirements
- ☐ Numerical Limitation Requirements

Office Use Only:

OTC Number _____

COMMERCIAL OCCUPATIONAL PACKET

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Section I- BUSINESS INFORMATION (Application must be completed in it's entirety for processing)			
Business Name:			
DBA:			
Business Address:	Street Address		Zip
Mailing Address:	Street Address	City	State Zip
Business Tel #:			
E-Mail:			
FEIN or SS#:		State License #:(If applicable)	
# of Employees-Company		# of Employees-City	
Point-of-Contact Name & Number			
E-Verify #: (Only businesses with more than 10 employees.)			
Date Business Opened:			

Please fully describe the type of business that will be conducted:

Section II- TYPE OF OWNERSHIP	
☐ Sole Ownership	☐ Corporation
☐ Partnership	☐ Limited Liability Company

Section III- OWNER'S/OFFICER'S INFORMATION	
Name/ Title:	
Home Address:	
Tel # :	
E-Mail:	
Name/Title:	
Home Address:	
Tel # :	
E-mail:	

Section IV- OCCUPATIONAL TAX SCHEDULE	
Estimated/ Actual Gross Receipts for this calendar year:	$

ONLY FOR PROFESSIONAL PRACTITIONERS: Please contact the Business Services Department for fee schedule.

If applying for a non-profit/tax exempt organization, please include a copy of your 501(c) form or letter of approval. Your business will not be considered Non-Profit until we receive a copy of your 501(c)3 letter or a current letter of your exemption status from the Internal Revenue Service (IRS).

Signature/ Title:	**Date:**

FOR OFFICE USE ONLY PARCEL #: NAICS CODE: I.D. #:

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Private Employer Affidavit Pursuant To O.C.G.A. § 36-60-6(d)

By executing this affidavit under oath, the undersigned private employer verifies one of the following with respect to its application for a business license, occupational tax certificate, or other document required to operate a business as referenced in O.C.G.A. §36-60-6(d):

***** If you select SECTION 1 (A), please fill out SECTION 2 and then execute with signature below.*****

Section 1. **Please check ONLY ONE:**

(A) _____ On January 1st of the below signed year, the individual, firm, or corporation employed more than ten (10) employees.

*****If you select SECTION 1 (B), please skip SECTION 2 and execute with signature below.*****

(B) _____ On January 1st of the below signed year, the individual, firm, or corporation employed ten (10) or fewer employees.

Section 2.

The employer has registered with and utilizes the federal work authorization program in accordance with the applicable provisions and deadlines established in O.C.G.A. §36-60-6(d). The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as follows:

_____
Name of Private Employer

_____
Federal Work Authorization User I.D. #

_____
Date of Authorization

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, _____, 20___ in _____(city), _____(state).

_____
Signature of Authorized Officer or Agent (Owner or Manager)

_____
Printed Name & Title of Authorized Officer or Agent (Owner or Manager)

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE _____ DAY OF _____, 20__.

_____
Notary Public

My Commission Expires: _____

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www.cityofstockbridge.com

SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

INSTRUCTIONS: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

_____

Name of natural person applying on behalf of individual, business, corporation, partnership or other private entity.

_____ _____

Address of applicant named above Telephone Number

_____ OCCUPATIONAL TAX CERTIFICATE

Name of business, corporation for whom application is being made. Category of Public Benefit

1. _____ I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. _____ I am a legal permanent resident of the United States.
3. _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.
   My alien number issued by the Department of Homeland Security or other federal immigration agency is:
   _____.

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the following page.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this

affidavit? :_____

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

_____

MUST DISPLAY ORIGINAL NOTARY SEAL

I, _____ {representative for} _____

(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

_____ _____

Signature of Applicant Date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE _____ DAY OF_____, 20__

Executed in_____ (City), _____ (State)

_____ _____

NOTARY PUBLIC Signature **My Commission Expires**

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SECURE AND VERIFIABLE DOCUMENTS

The following list of secure and verifiable documents, published under the authority of O.C.G.A § 50-36-2 contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative or residency or immigration status.

A United States passport or passport card

A United States military identification card

A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.

A identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.

A tribal identification card of the federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer. A listing of the federally reorganized Native American tribes may be found at: http//www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm

A United States Permanent Resident Card or Alien Registration Receipt Card

An Employment Authorization Document that contains a photograph of the bearer

A passport issued by a foreign government, must have I-94 attached

A Merchant Mariner Document Mariner Credential issued by the United States Coast Guard

A Free and Secure Trade (FAST) card

A NEXUS card

A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card

A driver's license issued by a Canadian government

A Certificate of Citizenship issued by the United States Department of Citizenship

Immigration Services (USCIS) (Form N-560 or Form N-561)

A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570)

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Memorandum of Understanding
Occupational Tax Certificate

I _____, am a business owner/operator of _____.
(Business Owner Name—Please Print) **(Business Name—Please print)**

By executing and notarizing this Memorandum of Understanding, I agree, and accept responsibility for notifying the City of Stockbridge - Occupational Tax Department of all changes of information regarding my business (closure/non-closure). I also acknowledge that I am aware that non-submittal of the annual renewal application **will not** close the business, and that additional fees will be incurred as a result of non-compliance to all laws and ordinances set forth to operate within the City of Stockbridge.

Furthermore, I agree **not to hold the City of Stockbridge responsible,** after due process of time, they determine that I am no longer in business at my location.

I hereby declare under penalty of perjury that the foregoing is true and correct.
Executed on _____, _____, 20__ in _____(city), _____(state).

_____ _____
Signature of Business Owner or Manager **Printed Name of Business Owner or Manager**

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE _____ DAY OF _____, 20__

_____

Notary Public My Commission Expires

Office Use Only:

OTC _____

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A RIBBON CUTTING CEREMONY CANNOT BE SCHEDULED UNTIL THE REQUESTING BUSINESS OBTAINS AN OCCUPATIONAL TAX CERTIFICATE

Please check one of the following :	
Yes, my business wants a ribbon cutting ceremony.	**No, my business does not want a ribbon cutting ceremony.**
Please note that the ribbon cutting ceremony will be approximately three weeks from the date of opening. Efforts will be made to have one or more Council Members available.	
Proposed Date:	
Business Name:	
Address:	
Telephone #:	
E-Mail Address:	
Owner's Name:	
Owner's Email Address:	
Name (Please print) :	
Title:	
Signature:	

FOR OFFICE USE ONLY:

Received by: _____ Date/Time: _____

Date submitted: _____ Submitted to: _____

Date received back from: _____

Approved Date of Ribbon Cutting: _____

Comments:

_____

_____

Uneeda Smith-Sellers

From: Billing Utility
Sent: Tuesday, May 14, 2024 1:29 PM
To: OT
Subject: Receipt #00341063

4640 N Henry Blvd
Stockbridge, GA 30281
(770) 389-7900

DATE : 5/14/2024 1:26 PM
OPER : us
TKBY : us
TERM : 20
REC# : 00341063
129 MISC BUSINESS TAX
Alcohol Lottery Application Fee - Bhavisha Desai 750.00

Paid By:Alcohol Lottery Application Fee - Bhavisha Desai CC 750.00AUTH:04863Z

LOTTERY APPLICATION TRACKING SHEET

Date Received: 5/20/2024 Application No.: 3

Applicant Name: Kinnariben Patel

Proposed business and name: Parcel # 051-01044000

CHECKLIST:

- ✓ Complete Application and Documents: _____ or Missing: background check 5/21/2024
- ✓ $750 Non-Refundable Application Fee: 5/20/2024 Date Processed: 5/20/2024
- ✓ Fieldprint Background Check Information Received: 5/21/2024
- ✓ Notarized Financial Statement Received: 5/20/2024
- ✓ Copy of Government Issued ID Received: 5/20/2024
- ✓ Emailed applicant receipt/CC approval code/lottery process timeline: 5/20/2024 via check
- ○ Redacted Copy of Application Sent to City Clerk on: (date) _____

Any Notes:
Need email address - mrtllc3276@gmail.com Need proposed location - Received 5/22/24

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

APPLICATION
(Lottery Application ONLY)

NOTE: USE SEPARATE PAGES AND/OR ATTACHMENTS, AS NECESSARY

1. Type(s) of license applied for:
   - (✓) Alcohol License
   - ( ) Pawnshop
   - ( ) Tire Shop
   - ( ) Vape Shop
   - ( ) Used Car Dealership
   - ( ) Precious Metals
   - ( ) Used Appliance Shop
   - ( ) Thrift store and Consignment Shop

2. Proposed license is a (n):
   - ( ) Individual
   - ( ) Partnership
   - ( ) Corporation
   - (✓) LLC
   - ( ) other legal entity (explain)

   _____

3. Applicant information:

   Name: KINNARIBEN PATEL

   Title/Position: CEO

   Are you a citizen of the United States: ___ yes ✓ no

   Where were you born? INDIA

   Present home address: _____

   _____

   County of Henry Number of years at present address 6

   Contact information: Business phone #: _____

   Home phone #: (229) 376-1940

   How long have you been a resident of Georgia? 12 Henry Co? 6

   What has been your occupation for the past five (5) years? Marut Nandan LLC

Worked as a munager in Liquor stove

4. Applicant's relationships with other persons with 1st degree of kinship.

Immediate living relatives:
(Please list all immediate living wife, children, parents, brothers, sisters, and parents)
(Attach separate sheet(s) if necessary)

Name: Hemalkumar Patel Age: 50

Relationship: Husband Live with or apart: Live With

Name: Katha Patel Age: 21

Relationship: Children (daughter) Live with or apart: Live With

Name: Bhakti Patel Age: 16

Relationship: Children (daughter) Live with or apart: Live With

Name: Age:

Relationship: Live with or apart:

5. Proposed business name and address:

Business name: Decided Later on

Address: Patrik Henry Pkwy between Jodeco Rd & Engle Lending Pkwy
OR
Rock quary Rd between Eagle Lending Pkwy & N. Henry blvd

6. Corporations: If operating as a corporation, please complete the following:

Corporation name: Katha Holdings LLC

Address:

Date of Incorporation: Oct-01-2020 Where Incorporated: GA

Type of Corporation: LLC

Corporate Officers: *Please list each (attach a separate sheet if necessary)*

Name: Kinnariben Patel SS# [redacted]

Office Held: Katha Holdings LLC

Address: ___

Name: - N/A - SS#

Office Held:

Address:

Name: - N/A - SS#

Office Held:

Address:

Name: - N/A - SS#

Office Held:

Address:

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

7. **Stockholder information – applies to any "closely held" stock, not publicly traded and to all stockholders who own more than 10% of the outstanding capital stock of the corporation. DO NOT FILL OUT THIS INFORMATION FOR PUBLICLY TRADED CORPORATIONS. In lieu thereof, please indicate by attached sheet as to whether any affiliate, related company, holding company, subsidiary or other organization holds any form of alcohol license in the City of Stockbridge, or any distilled spirits package sale license within the State of Georgia.**

8. If operating as a corporation, list stockholders with addresses and the amount of interest of each stockholder in the corporation. ***Please list each (attach a separate sheet if necessary)***

Stockholder Name: - N/A - Interest:

Address:

Stockholder Name: - N/A - Interest:

Address: _____

Stockholder Name: - N/A - Interest: _____

Address: _____

Stockholder Name: - N/A - Interest: _____

Address: _____

9. Limited Liability Company (LLC): If operating as a company, please complete the following:

Company name: Katha Holdings LLC

Address: _____

_____

Date of Formation: Oct-01-2020 Where Formed (State): GA

Type of LLC (member managed or manager managed): Member Managed

LLC members with an ownership interest: ***Please list each (attach a separate sheet if necessary)***

Name: Kinnariben Patel SS# 675-38-0815

Member – ownership interest (_%): 100 %

Address

Name: - N/A - SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: - N/A - SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: - N/A - SS#_____

Member – ownership interest (_%):_____

Address: _____

<u>Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"</u>

10. Limited Liability Partnership (LLP), Partnerships, Sole Proprietorships, and any other forms of business entity: If operating as a partnership or other form of business entity, please complete the following:

Entity name: - N/A -

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of Partnership: _____

Partnership members with an ownership interest. ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

If more than 4 members, partners, or stockholders, please provide the name, address, social security number and ownership interest of additional parties at interest, by separate sheet.

11. Registered Agent

If the proposed license is a legal entity, please provide name of its registered agent:

Agent(s) name: Kinnaviben Patel

Address: _

Telephone Number: (229) 376-1940

12. Store Manager, Managing Member, Managing Partner, or other person in charge:
What is the name of the person who, if the license is granted, will be the active manager of the business and on the job at the business?

Full name: Kinnaviben Patel

(Please complete the site manager's personal statement, attached)

13. Convictions:
Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (15) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

- None -

14. Location ownership
Do you own the land and building on which the business is to be operated?

_____ Yes ✓ No If Yes, when did you buy it? _____
(Attach proof of ownership)

If not the owner, please complete the following and attach a copy of the lease, option, and any other pertinent documents:

Owner/Agent of Property: _____

Amount of rent: _____ Frequency Paid: _____

Is the amount of rent a set amount? _____ Yes _____ No

If NO, please explain how it is determined: _____

15. If you have an option, or other legal, binding document to buy, lease the building, please explain the general terms: _____

- N/A -

16. Zoning
What is the current zoning on the proposed property location? - N/A -

17. Location Certification
If this is the first application for a license for this business, please attach a current certificate from a registered surveyor containing the following information:

(1) A scale drawing of the building or proposed building as situated on the proposed lot.
(2) Proposed parking available to the building.

NOTE: NOT Required for a retail package alcohol license until the applicant is chosen for a license.

18. Financial Interest – Does the applicant or interested parties to this Application:

A. Have any financial interest in any similar business?

✓ Yes _____ No

B. Received any financial aid or assistance from any similar business?

_____ Yes ✓ No

19. Other Interests:
Do you; any member of your family (children, spouse, parents, siblings) or any of the other owners, partners, or stockholders:

A. Have any interest, financial or otherwise, in other similar businesses or establishments?
✓ Yes _____ No

If YES, please list:

Marut Nandan LLC

B. Own, lease, sub-lease any real estate which is occupied by a similar business. If so, give the location information as to any lease or rental agreement including rents received and who it was rented to: _____ Yes ✓ No

If YES, please list:

C. Serve as the Executor or Administrator or Beneficiary of Heir of any estate having an interest in any similar business or establishment?

_____ Yes ✓ No

If YES, please list:

D. Serve as Beneficiary or Trustee of any Trust Fund having an interest in any similar business or establishment?

_____ Yes ✓ No

If YES, please list:

20. Financial Gain
Please list all parties who will receive any financial gain or payment derived from any interest or income as a result of the operation that this application applies to. (Please include any owners, partners, members, officers, or principal stockholders)

None.

21. Other Jurisdictions
List other jurisdictions in which any applicant, partner, member, corporate officer, or stockholder holds a similar occupational tax certificate, regulatory license, or alcoholic beverage license:

None

List all details of denial of any such licenses in any other jurisdiction:

22. Are you familiar with the City of Stockbridge Ordinances, State laws and regulations, Federal laws and regulations governing the operations of this type of business?

✓ Yes _____ No

(City of Stockbridge Ordinance 9.04 Alcoholic Beverage)

23. Restrictions Alcohol ONLY

Ordinance 9.04.090

1. No retail license for the sale of distilled spirits shall be issued unless the location is located within five hundred (500) feet of the streets or roads designated in the following three (3) areas and has direct access onto such streets or roads:

   Area 1: Those portions of Mount Zion Boulevard and Highway 138 lying west of I-75;
   Area 2: Those portions of Highway 138 and North Henry Boulevard lying east of I-75;

   Area 3: Those portions of Eagles Landing Parkway/Hudson Bridge Road from their intersection with the west right-of-way line of Highway 42 to the west city limits line.

24. Do you agree to abide by such ordinances, laws, and regulations?

    _____ Yes _____ No

25. Do you have any questions or comments regarding the ordinances, laws, regulations, or application?
    _____ Yes _____ No

    If YES, please list:

    _____

    _____

Georgia, Henry County, City of Stockbridge

I, Kinnariben H Patel, being duly sworn according to the law, do swear that the facts and things stated by me in the above and foregoing answers to questions are true, and no false, or fraudulent statement is made herein, and such answers were made in order to produce the granting of such license.

K.H.Patel
Signature of Applicant

KINNARIBEN PATEL
Print Name

CEO
Title of Applicant

Subscribed and Sworn before me on this the 20th day of May, 2024

Keshia Yvette Linsey
NOTARY PUBLIC signature

03/01/2027
Notary Commission Expires

Keshia Yvette Linsey
NOTARY PUBLIC printed name

KESHIA YVETTE LINSEY
MY COMMISSION EXPIRES
NOTARY
PUBLIC
03/01/2027
CLAYTON COUNTY
GEORGIA

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

SITE MANAGER'S PERSONAL INFORMATION
Alcohol License ONLY

(To be attached to Application)
(A photo of the manager must be attached to this form)

1. **Business Name**
   (Please complete for the business you are applying as a manager for)

   Business Name: Decide Later On

   Address: _____

2. **Manager's name and address:**

   Name: Kinnariben Patel

   Home address: _____

   Phone number: (229) 376-1940

3. **Personal identification information:**

   Race: ASIAN Sex: F Height: 5' 3" Weight: 130 Age: 48

   Color of hair: Black Color of eyes: Brown

4. **Manager's birth information:**

   Location of birth: INDIA

   Date of birth: _____

5. **Spousal information: (If married, please complete)**

   Spouse's full name: Hemalkumar Patel

   Maiden name if applicable: _____

   Date of Birth: _____ Date married: Dec-12-1997

   Employer: PCON LLC

6. **Employment record:**
(Please list your previous employment information for the last past 10 years) (Attach separate sheet if necessary)

Employer: Marut Nandan LLC

Location: ___ Dates – From: 2017 To: CONT.

Employer: RKT LLC

Location _____ Dates – From: 2014 To: 2017

Employer: _____

Location: _____ Dates – From: ____ To: ____

7. **Financial interest:**

Do you or your spouse, or any member of your family:

A. Have any interest, financial or otherwise, in other malt beverage, wine, or distilled spirits stores or establishments? ✓ Yes _____ No

If YES, please list:

Marut Nandan LLC

B. Ever been denied a license or had a license revoked? _____ Yes ✓ No

If YES, please list:

8. **Prior residences:**
(Please list all residences you have had in the past ten (10) years.) *(Include a separate sheet if necessary)*

Street Address	City	State	Years
			6
			6

9. **Tax return:**
Did you file a Georgia tax return last year?

✓ Yes _____ No

10. Convictions:

Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (10) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

N/A.

Charge: _____

Place of arrest: _____ Date: _____

Disposition: _____

11. Personal References:

(Please list three personal references not related to you, whom you have known for at least five years)

Name: James A. Henderson Phone #: 301-509-3009

Address:

Name: Vishnubhai Rusat Phone #: (229) 712-1260

Address:

Name: Vijay Bombaywla Phone #: 770-270-5597

Address:

12. Emergency Contact:

Contact name: Ashish Patel Phone #: (650) 996-8294

I, Kinnariben H Patel, do solemnly swear, that the foregoing statements are true. I understand that any falsehoods are grounds for automatic dismissal of this application.

K.H. Patel
Signature of Manager

KINNARIBEN PATEL
Print Name

CEO
Title of Applicant

Subscribed and Sworn before me on this the 20th day of May, 20 24

Keshia Yvette Linsey
NOTARY PUBLIC signature

03/01/2027
Notary Commission Expires

Keshia Yvette Linsey
NOTARY PUBLIC printed name

KESHIA YVETTE LINSEY
MY COMMISSION EXPIRES
NOTARY
PUBLIC
03/01/2027
CLAYTON COUNTY
GEORGIA

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

BACKGROUND AND SECURITY CLEARANCE FORM
OWNER, APPLICANT, MANAGER
Alcohol License ONLY

Authorization for Release of Personal Information
(Attach photocopy of Social Security Card and Photo ID)

I, Kinnariben H Patel, do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the City of Stockbridge, whether said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure pertaining to the background investigation necessary to process my application as required under the Alcohol Beverage Ordinance (Chapter 9) governing licensing in the City.

I also certify that any person, firm, or other entity ("the providing entity") who may furnish such information concerning me, shall not be held liable or accountable for giving this information and I do hereby fully and completely release the providing entity from all liability, which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the photocopy does not contain the original writing of my signature.

Keshia Yvette Linsey
Notary

03/01/2027
Notary Commission Expires

KESHIA YVETTE LINSEY
MY COMMISSION EXPIRES
NOTARY
PUBLIC
03/01/2027
CLAYTON COUNTY
GEORGIA

K.H. Patel
Signature

05-20-2024
Date

Date of Birth

Social Security Number

Driver's License Number

5' 3"
Height

130 Lb
Weight

City of Stockbridge

SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

Instructions: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

Kinnariben H Patel

Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity.

(229) 376-1940

Address of applicant named above

Telephone Number

Decide Later On

Name of business, corporation for whom application is being made.

OCCUPATIONAL TAX CERTIFICATE

Category of Public Benefit

1. _____ I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. ✓ I am a legal permanent resident of the United States.
3. _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

_____ _____

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the back of this form.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this affidavit? :_____

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

MUST BE COMPLETED BY NOTARY

I, Kinnariben H Patel {representative for} Decide Later On

(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

K.H. Patel

Signature of Applicant

05-20-2024

Date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 20 DAY OF May, 20 24

Executed in Stockbridge (City), GA (State)

KESHIA YVETTE LINSAY NOTARY PUBLIC CLAYTON COUNTY GEORGIA MY COMMISSION EXPIRES 03/01/2027

Keshia Yvette Linsay

NOTARY PUBLIC Signature

03/01/2027

My Commission Expires

ARTICLES OF ORGANIZATION

Electronically Filed
Secretary of State
Filing Date: 10/1/2020 2:34:32 PM

BUSINESS INFORMATION

CONTROL NUMBER	20195171
BUSINESS NAME	KATHA HOLDINGS LLC
BUSINESS TYPE	Domestic Limited Liability Company
EFFECTIVE DATE	10/01/2020

PRINCIPAL OFFICE ADDRESS

ADDRESS

REGISTERED AGENT

NAME	ADDRESS	COUNTY
Kinnariben Patel		Henry

ORGANIZER(S)

NAME	TITLE	ADDRESS
Kinnariben Patel	ORGANIZER	

OPTIONAL PROVISIONS

Management of the Company is vested in its members.

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE	Lisa M. Gable, Attorney at Law
AUTHORIZER TITLE	Attorney In Fact

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

ANNUAL REGISTRATION

Electronically Filed
Secretary of State
Filing Date: 3/27/2022 1:44:28 PM

BUSINESS INFORMATION

CONTROL NUMBER	20195171
BUSINESS NAME	KATHA HOLDINGS LLC
BUSINESS TYPE	Domestic Limited Liability Company
EFFECTIVE DATE	03/27/2022
ANNUAL REGISTRATION PERIOD	2022, 2023, 2024

PRINCIPAL OFFICE ADDRESS

ADDRESS

REGISTERED AGENT

NAME	ADDRESS	COUNTY
Kinnariben Patel		Henry

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE	Kinnariben Patel
AUTHORIZER TITLE	Organizer

UNITED STATES OF AMERICA

PERMANENT RESIDENT

PATEL KINNARIBEN H 05 AUG 19

Surname
PATEL

Given Name
KINNARIBEN H

USCIS#

Category
E39

Country of Birth
India

Date of Birth
05 AUG 1975

Sex
F

Card Expires:

Resident Since:

GEORGIA
DRIVER'S LICENSE

LIMITED-TERM
DRIVER'S LICENSE

DL

USA
GA

Governor:

Commissioner:

4d DL NC
3 DOB
9 CLASS C
4b EXP 09/24/2024
2 KINNARIBEN H
1 PATEL
8
12 REST B
9a END NONE
4a ISS 09/24/2019
15 SEX F
18 EYES BRO
16 HGT 5'-03"
17 WGT 130 lb

PERSONAL FINANCIAL STATEMENT

NAME: Kinnariben Patel / Hemalkumar Patel **DATE:** 05/01/2024

Please type or print in black or blue ink

ASSETS

Checking Accounts	350,000
Savings Accounts**	
Stocks, Bonds, Securities (List on Schedule I)**	80,000
Retirement Accts (401(k), IRAs) (List on Schedule I)**	6,000
Home (List on Schedule II)	575,000
Automobiles	83,000
Other Real Estate Owned (List on Schedule II)	
Business Assets (List on Schedule III)	3,430,000
Other Assets (List)	
Jewelry	60,000
Account Receivable	250,000
TOTAL ASSETS (A)	4,834,000

LIABILITIES

Credit Cards	
Automobile Loans	20,000
Secured Loans and/or Notes	
Unsecured Loans and/or Notes	
Taxes Payable	
Home Mortgage	216,191
Mortgages and/or Loans on other Real Estate Owned	
Other Debts (Itemize)	
Business Liabilities	
TOTAL LIABILITIES (B)	236,191
NET WORTH (C) (A-B=C)	4,597,809
TOTAL (D) (B + C)	4,834,000

SOURCE ON ANNUAL INCOME

Salary	60,000
Bonus and Commissions	
Dividends and/or Interest Income	
Real Estate and/or Rental Income	
Other Income (Itemize)	
K1 Income	134,858
TOTAL	194,858

ESTIMATE OF ANNUAL EXPENSES

Mortgage Payments	16,452
Rent	
Automobile Payments or Lease	10,776
Insurance Premiums	28,800
Taxes	7,500
Other Expenses	
TOTAL	63,528

GENERAL INFORMATION

Personal bank accounts carried at:

Are any assets pledged? ☐ Yes ☒ No If yes, explain:

Do you have any contingent liabilities? ☐ Yes ☒ No If yes, explain:

Are you a defendant in any legal actions? ☐ Yes ☒ No If yes, explain:

Have you ever filed for bankruptcy or had proceedings commenced against you? ☐ Yes ☒ No

If yes, explain:

Attach copies of current bank, investment, security, retirement and/or brokerage statements verifying the assets listed – PERSONAL TAX RETURNS DO NOT QUALIFY

SCHEDULE I - STOCKS, BONDS AND SECURITIES
ATTACH COPIES OF CURRENT ACCOUNT STATEMENTS

Description	Number of Shares	Bond-Face Value	Market Value
		80,000	80,000

SCHEDULE I – IRA'S, PENSION, RETIREMENT ACCOUNTS
ATTACH COPIES OF CURRENT ACCOUNT STATEMENTS

Description	In Name of	Market Value	Cash Value
		6,000	6,000

SCHEDULE II - REAL ESTATE OWNED INCLUDING HOME
ATTACH COPIES OF RECENT APPRAISALS, PROPERTY TAX STATEMENTS, IF ANY

Description	Market Value	Terms / Maturity/ Balance	Monthly Payment
	575,000	216,191	1,371

SCHEDULE III – LIST BUSINESS VENTURES AND/OR COMPANIES OWNED
ATTACH COPIES OF CURRENT BALANCE SHEETS AND FINANCIAL STATEMENTS

Name
Business Value of MARUT NANDAN LLC & MRT LLC : 3,430,000

LIST NAMES OF BANKS AND/OR COMPANIES WHERE CREDIT HAS BEEN OBTAINED

Lender	Amount

By signing below you are stating the above information is a true and accurate statement of your financial condition, and you agree to advise IDQ Companies, Inc. and/or its subsidiaries (Company) in writing of any material or adverse change that will reduce the means or ability of the undersigned to perform or pay any claims and/or obligations against you. Unless the Company is so notified, it may continue to rely upon this statement as a true and accurate statement of your financial condition.

Date 05-20-2024 Signature K H Patel

Date 5/20/2024 Signature

JORDAN DANIELS NOTARY PUBLIC EXP. May 12, 2025 HENRY COUNTY, GA

PROMISSORY NOTE

THE PARTIES. This Standard Promissory Note ("Note") made on February 15, 2024, is by and between:

Borrower: ("Borrower")
Borrower's Full Name: Ashishkumar Patel
with a mailing address of:

and

Lender: ("Lender")
Lender's Full Name: Kinnariben Patel
with a mailing address of:

LOAN TERMS. The Lender agrees to lend the Borrower under the following terms:

Principal Amount: $250,000
Interest Rate: 6 % interest per:

Please choose the best option:
☐ Month
☒ Annum
☐ Other:

The Borrower will receive the Borrowed Money on: February 15, 2024
Hereinafter known as the ("Borrowed Money").

PAYMENTS. The full balance of the Borrowed Money, including all accrued interest and any other fees or penalties, is due and payable in:

Please choose the best option:

☒ Option 1. **A LUMP SUM.** The Borrower shall repay the Borrowed Money as a lump sum, in full, in the amount of $250,000 (Principal and Interest) by July 15, 2024 ("Due Date").

☐ Option 2. **INSTALLMENTS.** Borrower shall pay principal and interest installment amounts equal to $[AMOUNT] with the first (1st) payment due on _____ (Date) and the remaining payments to be paid:

Please choose the best option:

☐ Weekly with any remaining balance payable on _____ (Date) ("Due Date)
☐ Monthly with any remaining balance payable on _____ (Date) ("Due Date)
☐ Quarterly with any remaining balance payable on _____ (Date) ("Due Date)

Hereinafter known as the ("Repayment Period")

PAYMENT IS DUE. Any payment made by the Borrower is considered late if made more than 15 days after any payment due date ("July 15, 2024").

This shall include, but not be limited to, any payment made related to the Repayment Period, the Due Date, or any other payment mentioned in this Note.

LATE FEE. If the Borrower makes a late payment for any Payment Due Date, there shall be:
Please choose the best option:
☒ Option 1. There shall be no late fee.
☐ Option 2. There shall be a late fee.

The Borrower shall pay a late fee of _____ (amount0 for each:

Please choose the best option:

☐ Option 1. Occurrence payment is late.
☐ Option 2. Day payment is late.

SECURITY. This Note shall be:

Please choose the best option:

☒ Option 1. UNSECURED. There shall be no security provided in this Note.
☐ Option 2. SECURED. There shall be property to secure this Note described as: ("Security"). (Description of Security)

The Security shall transfer to the possession and ownership of the Lender immediately pursuant to Section 11 of this Note. The Security may not be sold or transferred without the Lender's consent until the Due Date.

If the Borrower breaches this provision, the Lender may declare all sums due under this Note immediately due and payable, unless prohibited by applicable law. The Lender shall have the sole option to accept the Security as full payment for the Borrowed Money without further liabilities or obligations.

If the market value of the Security does not exceed the Borrowed Money, the Borrower shall remain liable for the balance due while accruing interest at the maximum rate allowed by law.

CO-SIGNER.

Please choose the best option:

☒ Option 1. NO CO-SIGNER. This Note shall not have a Co-Signer.

☐ Option 2. CO-SIGNER. This Note shall have a Co-Signer known as (Co-Signer's Full Name) _____ who agrees to the liabilities and obligations on behalf of the Borrower under the terms of this note.

If the Borrower does not make payment, the Co-Signer shall be personally responsible and is guaranteeing the payment of the principal, late fees, and all accrued interest under the terms of this Note.

PREPAYMENT PENALTY. The Borrower shall be charged:

Please choose the best option:

☒ Option 1. NO PRE-PAYMENT PENALTY. The Borrower is eligible to pre-pay the Borrowed Money, at any time, with no pre-payment fee.

☐ Option 2. A PRE-PAYMENT PENALTY. If the Borrower pays any Borrowed Money to the Lender with the specific purpose of paying less interest, there shall be a pre-payment fee of:

Please choose the best option:

☐ Amount

☐ Percent (%) of the pre-paid amount.

☐ Other.

INTEREST DUE IN THE EVENT OF DEFAULT. In the event the Borrower fails to pay the Note in full on the Due Date, the unpaid principal shall accrue interest at the maximum rate allowed by law until the Borrower is no longer in default.

ALLOCATION OF PAYMENTS. Payments shall be first (1st) credited to any late fees due, second (2nd) any to interest due, and any remainder will be credited to the principal.

ACCELERATION. If the Borrower is in default under this Note or is in default under another provision of this Note, and such default is not cured within the minimum allotted time by law after written notice of such default, then Lender may, at its option, declare all outstanding sums owed on this Note to be immediately due and payable. This includes any rights of possession in relation to the Security described in Section 6.

ATTORNEYS' FEES AND COSTS. The Borrower shall pay all costs incurred by Lender in collecting sums due under this Note after a default, including reasonable attorneys' fees.

If the Lender or Borrower sues to enforce this Note or to obtain a declaration of its rights hereunder, the prevailing party in any such proceeding shall be entitled to recover its reasonable attorneys' fees and costs incurred in the proceeding (including those incurred in any bankruptcy proceeding or appeal) from the non-prevailing party.

WAIVER OF PRESENTMENTS. Borrower waives presentment for payment, a notice of dishonor, protest, and notice of protest.

NON-WAIVER. No failure or delay by Lender in exercising Lender's rights under this Note shall be considered a waiver of such rights.

SEVERABILITY. In the event that any provision herein is determined to be void or unenforceable for any reason, such determination shall not affect the validity or enforceability of any other provision, all of which shall remain in full force and effect.

INTEGRATION. There are no agreements, verbal or otherwise that modify or affect the terms of this Note. This Note may not be modified or amended except by a written agreement signed by Borrower and Lender.

CONFLICTING TERMS. The terms of this Note shall control over any conflicting terms in any referenced agreement or document.

NOTICE. Any notices required or permitted to be given hereunder shall be given in writing and shall be delivered:

(a) in person,
(b) by certified mail, postage prepaid, return receipt requested,
(c) by facsimile, or
(d) by a commercial overnight courier that guarantees next day delivery and provides a receipt, and such notices shall be made to the parties at the addresses listed above.

EXECUTION. The Borrower executes this Note as a principal and not as a surety. If there is a Co-Signer, the Borrower and Co-Signer shall be jointly and severally liable under this Note.

GOVERNING LAW. This note shall be governed under the laws in **the State of Georgia** ("Governing Law").

ADDITIONAL TERMS & CONDITIONS. (State any additional terms and conditions)

ENTIRE AGREEMENT. This Note contains all the terms agreed to by the parties relating to its subject matter, including any attachments or addendums. This Note replaces all previous discussions, understandings, and oral agreements. The Borrower and Lender agree to the terms and conditions and shall be bound until the Borrower repays the Borrowed Money in full.

IN WITNESS WHEREOF, the Borrower and the Lender have executed this Agreement as of the day and year first above written.

Lender Signature: K. H. Patel Date: February 15, 2024

Full Name (Printed): Kinnariben Patel

Borrower Signature: Ashish Date: February 15, 2024

Full Name (Printed): Ashishkumar Patel

Co-Signer Signature (if any): _____ Date: _____

Full Name (Printed): _____

Wells Fargo Everyday Checking

WELLS FARGO

HEMALKUMAR J PATEL
KINNARIBEN H PATEL

Questions?

Available by phone 24 hours a day, 7 days a week:
We accept all relay calls, including 711
1-800-742-4932

En español: 1-877-727-2932

Online: wellsfargo.com

Write: Wells Fargo Bank, N.A. (297)
P.O. Box 6995
Portland, OR 97228-6995

You and Wells Fargo

Thank you for being a loyal Wells Fargo customer. We value your trust in our company and look forward to continuing to serve you with your financial needs.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com or call the number above if you have questions or if you would like to add new services.

Online Banking	☑	Direct Deposit	☐
Online Bill Pay	☐	Auto Transfer/Payment	☐
Online Statements	☑	Overdraft Protection	☐
Mobile Banking	☑	Debit Card	
My Spending Report	☑	Overdraft Service	☐

Statement period activity summary

Beginning balance on 4/16	$122,625.98
Deposits/Additions	0.00
Withdrawals/Subtractions	5,823.62
Ending balance on 5/15	$116,802.36

Account number:
HEMALKUMAR J PATEL
KINNARIBEN H PATEL

Georgia account terms and conditions apply

For Direct Deposit use
Routing Number (RTN):

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo branch.

WELLS FARGO

Transaction history

Date	Check Number	Description	Deposits/ Additions	Withdrawals/ Subtractions	Ending daily balance
4/16				4,925.83	117,700.15
4/24				897.79	116,802.36
Ending balance on 5/15					116,802.36
Totals			$0.00	$5,823.62	

The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.

Monthly service fee summary

For a complete list of fees and detailed account information, see the disclosures applicable to your account or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period 04/16/2024 - 05/15/2024	Standard monthly service fee $10.00	You paid $0.00
How to avoid the monthly service fee Have any ONE of the following each fee period	Minimum required	This fee period
• Minimum daily balance	$500.00	$116,802.36 √
• Total amount of qualifying electronic deposits	$500.00	$0.00
• Age of primary account owner	17 - 24	
• Account is linked to a Wells Fargo Campus ATM Card or Campus Debit Card	1	0

RC/RC

IMPORTANT ACCOUNT INFORMATION

NEW YORK CITY CUSTOMERS ONLY -- Pursuant to New York City regulations, we request that you contact us at 1-800-TO WELLS (1-800-869-3557) to share your language preference.

Other Wells Fargo Benefits

Help take control of your finances with a Wells Fargo personal loan.
Whether it's managing debt, making a large purchase, improving your home, or paying for unexpected expenses, a personal loan may be able to help. See personalized rates and payments in minutes with no impact to your credit score.
Get started at wellsfargo.com/personalloan.

Other Wells Fargo Benefits

June 15 is World Elder Abuse Awareness Day, and now is a great time to learn how to help protect yourself and your loved ones from the rising risks of scams. Download a guide at wellsfargo.com/protectelders.

WELLS FARGO

Worksheet to balance your account

Follow the steps below to reconcile your statement balance with your account register balance. Be sure that your register shows any interest paid into your account and any service charges, automatic payments or ATM transactions withdrawn from your account during this statement period.

A Enter the ending balance on this statement. $ _____

B List outstanding deposits and other credits to your account that do not appear on this statement. Enter the total in the column to the right.

Description	Amount
Total	$

+ $ _____

C Add A and B to calculate the subtotal. = $ _____

D List outstanding checks, withdrawals, other debits to your account that do not appear on this statement. Enter the total in the column to the right.

Number/Description	Amount
Total	$

- $ _____

E Subtract D from C to calculate the adjusted ending balance. This amount should be the same as the current balance shown in your register. = $ _____

Important Information You Should Know

- To dispute or report inaccuracies in information we have furnished to a Consumer Reporting Agency about your accounts.
  Wells Fargo Bank, N.A. may furnish information about deposit accounts to Early Warning Services. You have the right to dispute the accuracy of information that we have furnished to a consumer reporting agency by writing to us at Overdraft Collection and Recovery, P.O. Box 5058, Portland, OR 97208-5058. Include with the dispute the following information as available: Full name (First, Middle, Last), Complete address, The account number or other information to identify the account being disputed, Last four digits of your social security number, Date of Birth. Please describe the specific information that is inaccurate or in dispute and the basis for the dispute along with supporting documentation. If you believe the information furnished is the result of identity theft, please provide us with an identity theft report.
- If your account has a negative balance: Please note that an account overdraft that is not resolved 60 days from the date the account first became overdrawn will result in closure and charge off of your account. In this event, it is important that you make arrangements to redirect recurring deposits and payments to another account. The closure will be reported to Early Warning Services. We reserve the right to close and/or charge-off your account at an earlier date, as permitted by law. The laws of some states require us to inform you that this communication is an attempt to collect a debt and that any information obtained will be used for that purpose.
- In case of errors or questions about your electronic transfers:
  Telephone us at the number printed on the front of this statement or write us at Wells Fargo Bank, P.O. Box 6995, Portland, OR 97228-6995 as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.
  1. Tell us your name and account number (if any).
  2. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
  3. Tell us the dollar amount of the suspected error.

  We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.
- In case of errors or questions about other transactions (that are not electronic transfers):

  Promptly review your account statement within 30 days after we made it available to you, and notify us of any errors.
- To download and print an Account Balance Calculation Worksheet (PDF) to help you balance your checking or savings account, enter www.wellsfargo.com/balancemyaccount in your browser on either your computer or mobile device.

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EQUAL HOUSING LENDER

Money Market

Available **$215,733.93**

Current **$215,733.93**

YTD interest **$138.62**

Apr 20, 2024 - May 19, 2024 30 days

Date	Description	Amount	Balance
05/17/2024	Check Deposit	$26,000.00	$215,733.93
04/30/2024	Dividend Deposit / Annual Percentage Yield Earned 0.85% from 04/01/24 through 04/30/24	$82.84	$189,733.93
	Based on Average Daily Balance of 118,981.68		
04/22/2024	Check Deposit	$75,000.00	$189,651.09
04/22/2024	Online Payment / To Loan	-$1,370.90	$114,651.09

First National Bank of Griffin

Total Deposits (3)	Total Loans (0)
$171,913.44	$0.00

Account		Account Information
Regular A/C	Current Balance	Available Balance
	$134,450.23	$134,450.23
AIM	Current Balance	Available Balance
	$4,807.88	$4,807.88
ng	Current Balance	Available Balance
	$32,655.33	$32,655.33

Account Listing

Printed: May 19, 2024 6:41PM

April 26, 2024

Creative Lending Solutions Corp.

Hemal Kumar Patel

RE: Pre-approval Letter

Dear Mr. Hemal Patel

Based on the Business Financial information You have provided us (P&L & Balance Sheet), I am pleased to inform you that you have been pre-approved for a commercial mortgage loan of up to $1,200,000 We will need updated YTD Financials along with a Business Plan for the new proposed location.

If you have any questions or need additional information, please feel free to contact me at 847-917-7457.
Thank You.

Sincerely,

Bandish Thakkar
Loan Operations Manager

bandish@clsolutionscorp.com

Henry County, GA

Summary

Parcel ID	051-01044000
Location Address	
Millage Group	0003 (City/Stockbridge)
Property Usage	COMMERCIAL (1000)
Total Acres	4.02
Landlot / District	20 / 6
Subdivision	
Lot/Block	
Plat Book	50
Plat Page	115

Exemptions:

Owners

MAJESTIC HOSPITALITY LLC
116-B TOMMY STAINAKER DR #120
WARNER ROBINS, GA 31088

Valuation

		2023	2022	2021
+	Building Value	$0	$0	$0
+	OB/Misc	$0	$0	$0
+	Land Value	$603,000	$603,000	$603,000
=	Total Assessment	**$603,000**	**$603,000**	**$603,000**

Exemptions:

Assessment Notices 2024

Land Information

Land Use	Number of Units	Unit Type
COMMERCIAL (001000)	4.02	ACRES

Sales Information

Sale Date	Deed Book/Page	Sale Price	Instrument	Reason	Grantor	Grantee
8/24/2009	11461-187	$1,260,000	WARRANTY DEED		KILLEARN PROPERTIES INC	MAJESTIC HOSPITALITY LLC
11/24/2003	6849-130	$90,000	WARRANTY DEED		RJR HOMES & PROPERTIES INC	KILLEARN PROPERTIES INC
11/14/1997	2760-215	$0	WARRANTY DEED	PROP EXCNG	KILLEARN PROPERTIES	RJR HOMES & PROPERTIES INC

Map

- For Passport Rules, Regulations, Fees, and Requirements visit the Department of States website at http://travel.state.gov/passport.
- For the nearest Passport Acceptance Facility visit http://iafdb.travel.state.gov.
- Present these photos with your application forms and all other necessary documents.

The surface of this folder is specially coated to protect the pictures while they are drying. If the pictures stick to the folder peel them off slowly and they will separate without damage.

Chin to top of hair is 1" (dotted line) to 1 3/8" (solid line) on passport photo

LOTTERY APPLICATION TRACKING SHEET

Date Received: 5/ /24 Application No.: 5

Applicant Name: Niral Patel

Proposed business and name: NP 99 LLC - parcel # 071-0102502 2

CHECKLIST:

- ✓ Complete Application and Documents: _____ or Missing: _____
- ✓ $750 Non-Refundable Application Fee: _____ Date Processed: 5/24
- ✓ Fieldprint Background Check Information Received: 5/29
- ✓ Notarized Financial Statement Received: _____
- ✓ Copy of Government Issued ID Received: _____
- ✓ Emailed applicant receipt/CC approval code/lottery process timeline: In Person
- ✓ Redacted Copy of Application Sent to ~~City Clerk~~ Ryan on: (date) 5/31

Any Notes:

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

APPLICATION
(Lottery Application ONLY)

NOTE: USE SEPARATE PAGES AND/OR ATTACHMENTS, AS NECESSARY

1. Type(s) of license applied for:
   - (✓) Alcohol License
   - ( ) Tire Shop
   - ( ) Used Car Dealership
   - ( ) Used Appliance Shop
   - ( ) Thrift store and Consignment Shop
   - ( ) Pawnshop
   - ( ) Vape Shop
   - ( ) Precious Metals

2. Proposed license is a (n):
   - ( ) Individual
   - ( ) Partnership
   - ( ) Corporation
   - (✓) LLC
   - ( ) other legal entity (explain)

   _____

3. Applicant information:

   Name: NP 99 LLC - Niral Patel

   Title/Position: Owner

   Are you a citizen of the United States: ✓ yes _____ no

   Where were you born? Ahmedabad, Gujarat, India

   Present home address: _____

   _____

   County of Henry Number of years at present address 1 Month

   Contact information: Business phone #: 615 579 2596

   Home phone #: _____

   How long have you been a resident of Georgia? 4 yrs Henry Co? 4 yrs

   What has been your occupation for the past five (5) years? Job

4. Applicant's relationships with other persons with 1st degree of kinship.

Immediate living relatives:
(Please list all immediate living wife, children, parents, brothers, sisters, and parents)
(Attach separate sheet(s) if necessary)

Name: Abhi Patel Age: 25 yrs

Relationship: wife Live with or apart: with

Name: Girishkumar Patel Age: 49 yrs

Relationship: Dad Live with or apart: with

Name: Artiben Patel Age: 47 yrs

Relationship: Mom Live with or apart: with

Name: Mayan Patel Age: 19 yrs

Relationship: Brother Live with or apart: with

5. Proposed business name and address:

Business name: NP 99 LLC DBA not deceided

Address: Parcel ID: 071-01025022

6. Corporations: If operating as a corporation, please complete the following:

Corporation name: _____

Address: _____

Date of Incorporation: _____ Where Incorporated: _____

Type of Corporation: _____

Corporate Officers: *Please list each (attach a separate sheet if necessary)*

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

7. **Stockholder information – applies to any "closely held" stock, not publicly traded and to all stockholders who own more than 10% of the outstanding capital stock of the corporation. DO NOT FILL OUT THIS INFORMATION FOR PUBLICLY TRADED CORPORATIONS. In lieu thereof, please indicate by attached sheet as to whether any affiliate, related company, holding company, subsidiary or other organization holds any form of alcohol license in the City of Stockbridge, or any distilled spirits package sale license within the State of Georgia.**

8. If operating as a corporation, list stockholders with addresses and the amount of interest of each stockholder in the corporation. ***Please list each (attach a separate sheet if necessary)***

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

9. Limited Liability Company (LLC): If operating as a company, please complete the following:

Company name: NP 99 LLC

Address: _____

_____

Date of Formation: 12/14/2023 Where Formed (State): GA

Type of LLC (member managed or manager managed): Member Managed

LLC members with an ownership interest: ***Please list each (attach a separate sheet if necessary)***

Name: Niral Patel SS#_____

Member – ownership interest (_%): 100

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

10. Limited Liability Partnership (LLP), Partnerships, Sole Proprietorships, and any other forms of business entity: If operating as a partnership or other form of business entity, please complete the following:

Entity name: _____

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of Partnership: _____

Partnership members with an ownership interest. ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

If more than 4 members, partners, or stockholders, please provide the name, address, social security number and ownership interest of additional parties at interest, by separate sheet.

11. Registered Agent

If the proposed license is a legal entity, please provide name of its registered agent:

Agent(s) name: Niral Patel

Address: 950 Eagles Landing Pkwy STE 309, Stockbridge, GA, 30281, USA

Telephone Number: 615 579 2596

12. Store Manager, Managing Member, Managing Partner, or other person in charge:
What is the name of the person who, if the license is granted, will be the active manager of the business and on the job at the business?

Full name: Niral Patel

(Please complete the site manager's personal statement, attached)

13. Convictions:
Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (15) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

NO

14. Location ownership
Do you own the land and building on which the business is to be operated?

_____ Yes ✓ No If Yes, when did you buy it? _____
(Attach proof of ownership)

If not the owner, please complete the following and attach a copy of the lease, option, and any other pertinent documents:

Owner/Agent of Property: PACIFIC CREST MANAGEMENT, LLC

Amount of rent: NA Frequency Paid: NA

Is the amount of rent a set amount? _____ Yes _____ No

If NO, please explain how it is determined: I have a contract to purchase this land.

15. If you have an option, or other legal, binding document to buy, lease the building, please explain the general terms:

I have a contract to purchase this land.

16. Zoning
What is the current zoning on the proposed property location? PUD zoning with a C-2

17. Location Certification
If this is the first application for a license for this business, please attach a current certificate from a registered surveyor containing the following information:

(1) A scale drawing of the building or proposed building as situated on the proposed lot.
(2) Proposed parking available to the building.

NOTE: NOT Required for a retail package alcohol license until the applicant is chosen for a license.

18. Financial Interest – Does the applicant or interested parties to this Application:

A. Have any financial interest in any similar business?

_____Yes ✓ No

B. Received any financial aid or assistance from any similar business?

_____ Yes ✓ No

19. Other Interests:
Do you; any member of your family (children, spouse, parents, siblings) or any of the other owners, partners, or stockholders:

A. Have any interest, financial or otherwise, in other similar businesses or establishments?
✓ Yes ✓ No

If YES, please list:

Girishkumar Patel, Owd, has a license to sell beer wine in Georgia. (Gas station)

B. Own, lease, sub-lease any real estate which is occupied by a similar business. If so, give the location information as to any lease or rental agreement including rents received and who it was rented to: _____ Yes ✓ No

If YES, please list:

_____

_____

C. Serve as the Executor or Administrator or Beneficiary of Heir of any estate having an interest in any similar business or establishment?

_____ Yes ✓ No

If YES, please list:

D. Serve as Beneficiary or Trustee of any Trust Fund having an interest in any similar business or establishment?

____ Yes ✓ No

If YES, please list:

20. Financial Gain
Please list all parties who will receive any financial gain or payment derived from any interest or income as a result of the operation that this application applies to. (Please include any owners, partners, members, officers, or principal stockholders)

Only the owner of the LLC.

21. Other Jurisdictions
List other jurisdictions in which any applicant, partner, member, corporate officer, or stockholder holds a similar occupational tax certificate, regulatory license, or alcoholic beverage license:

NA

List all details of denial of any such licenses in any other jurisdiction:

NA

22. Are you familiar with the City of Stockbridge Ordinances, State laws and regulations, Federal laws and regulations governing the operations of this type of business?

✓ Yes _____ No

(City of Stockbridge Ordinance 9.04 Alcoholic Beverage)

23. Restrictions Alcohol ONLY

Ordinance 9.04.090

1. No retail license for the sale of distilled spirits shall be issued unless the location is located within five hundred (500) feet of the streets or roads designated in the following three (3) areas and has direct access onto such streets or roads:

   Area 1: Those portions of Mount Zion Boulevard and Highway 138 lying west of I-75;
   Area 2: Those portions of Highway 138 and North Henry Boulevard lying east of I-75;

   Area 3: Those portions of Eagles Landing Parkway/Hudson Bridge Road from their intersection with the west right-of-way line of Highway 42 to the west city limits line.

24. Do you agree to abide by such ordinances, laws, and regulations?

    ___✓___ Yes _____ No

25. Do you have any questions or comments regarding the ordinances, laws, regulations, or application?

    _____ Yes ___✓___ No

    If YES, please list:

    _____

    _____

Georgia, Henry County, City of Stockbridge

I, Niral Patel, being duly sworn according to the law, do swear that the facts and things stated by me in the above and foregoing answers to questions are true, and no false, or fraudulent statement is made herein, and such answers were made in order to produce the granting of such license.

Niral Patel
Signature of Applicant

Niral Patel
Print Name

Owner
Title of Applicant

Subscribed and Sworn before me on this the 28th day of MAY, 2024

NOTARY PUBLIC signature

WELLS FARGO BANK, N.A.
Locust Grove Branch
2754 Highway 155
Locust Grove, GA 30248-2401

08/01/2026
Notary Commission Expires

JOHN OBIAGELI
NOTARY PUBLIC printed name

JOHN OBIAGELI
MY COMMISSION EXPIRES
NOTARY PUBLIC
AUGUST 01, 2026
CLAYTON COUNTY, GEORGIA

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

SITE MANAGER'S PERSONAL INFORMATION
Alcohol License ONLY

(To be attached to Application)
(A photo of the manager must be attached to this form)

1. **Business Name**
   (Please complete for the business you are applying as a manager for)

   Business Name: NP 99 LLC

   Address: _____ _____

2. **Manager's name and address:**

   Name: Niral Patel

   Home address: _____ _____ _____

   Phone number: 615 579 2596

3. **Personal identification information:**

   Race: Asian Sex: Male Height: 5'11" Weight: 250 lbs Age: 24 yrs

   Color of hair: blk Color of eyes: blk

4. **Manager's birth information:**

   Location of birth: Ahmedabad, Gujarat, India

   Date of birth: _____

5. **Spousal information: (If married, please complete)**

   Spouse's full name: Abhi Patel

   Maiden name if applicable: _____

   Date of Birth: _____ Date married: _____

   Employer: Rago 2 LLC

6. **Employment record:**
(Please list your previous employment information for the last past 10 years) (Attach separate sheet if necessary)

Employer: Rago 2 LLC

Location _____ _____ _____ ates – From:____ To: 2020 to today ____

Employer: _____

Location: _____ Dates – From:____ To: ____

Employer: _____

Location: _____ Dates – From:____ To: ____

7. **Financial interest:**

Do you or your spouse, or any member of your family:

A. Have any interest, financial or otherwise, in other malt beverage, wine, or distilled spirits stores or establishments? _____ Yes ✓ No

If YES, please list:

_____

_____

B. Ever been denied a license or had a license revoked? _____ Yes ✓ No

If YES, please list:

_____

_____

8. **Prior residences:**
(Please list all residences you have had in the past ten (10) years.) *(Include a separate sheet if necessary)*

Street Address	City	State	Years

9. **Tax return:**
Did you file a Georgia tax return last year?

✓ Yes _____ No

10. Convictions:

Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (10) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

NA

Charge: _____

Place of arrest: _____ Date: _____

Disposition: _____

11. Personal References:

(Please list three personal references not related to you, whom you have known for at least five years)

Name: ~~Mayan~~ Phone #: ~~470 471 5546~~

Address: _____

Name: James Phone #: 470 878 9144

Address: _____

Name: Bharat Phone #: 931 334 4014

Address: _____

→ Suvimo - 470 - 780 - 8922 - Georgia

12. Emergency Contact:

Contact name: Abhi Patel Phone #: 781 502 6005

I, Niral Patel, do solemnly swear, that the foregoing statements are true. I understand that any falsehoods are grounds for automatic dismissal of this application.

Niral Patel
Signature of Manager

Niral Patel
Print Name

Owner
Title of Applicant

Subscribed and Sworn before me on this the 28th day of MAY, 2024

NOTARY PUBLIC signature

WELLS FARGO BANK, N.A.
Locust Grove Branch
2754 Highway 155
Locust Grove, GA 30248-2401

08/01/2024
Notary Commission Expires

JOHN OBIAGELI
NOTARY PUBLIC
MY COMMISSION EXPIRES AUGUST 01, 2028
CLAYTON COUNTY, GEORGIA

JOHN OBIAGELI
NOTARY PUBLIC printed name

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

BACKGROUND AND SECURITY CLEARANCE FORM
OWNER, APPLICANT, MANAGER
Alcohol License ONLY

Authorization for Release of Personal Information
(Attach photocopy of Social Security Card and Photo ID)

I, Niral Patel, do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the City of Stockbridge, whether said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure pertaining to the background investigation necessary to process my application as required under the Alcohol Beverage Ordinance (Chapter 9) governing licensing in the City.

I also certify that any person, firm, or other entity ("the providing entity") who may furnish such information concerning me, shall not be held liable or accountable for giving this information and I do hereby fully and completely release the providing entity from all liability, which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the photocopy does not contain the original writing of my signature.

Notary

WELLS FARGO BANK, N.A.
Locust Grove Branch
2754 Highway 155
Locust Grove, GA 30248-2401

08/01/2026
Notary Commission Expires

JOHN OBIAGELI
MY COMMISSION EXPIRES
NOTARY PUBLIC
AUGUST 01, 2026
CLAYTON COUNTY, GEORGIA

Signature

02/08/2024
Date

Date of Birth

Social Security Number

Driver's License Number

5'11"
Height

250 lbs
Weight

City of Stockbridge

SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

Instructions: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

Niral Patel

Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity.

Address of applicant named above

615 579 2596

Telephone Number

NP 99 LLC

Name of business, corporation for whom application is being made.

OCCUPATIONAL TAX CERTIFICATE

Category of Public Benefit

1. ✓ I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. _____ I am a legal permanent resident of the United States.
3. _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

_____.

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the back of this form.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this affidavit? : Driver License, SSN, Passport

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

MUST BE COMPLETED BY NOTARY

I, Niral Patel {representative for} NP 99 LLC

(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

Niral Patel

Signature of Applicant

05/28/2024

Date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 28th DAY OF MAY, 2024

WELLS FARGO BANK, N.A.
Locust Grove Branch
2754 Highway 155
Locust Grove, GA 30248-2401

Executed in LOCUST GROVE (City), GEORGIA (State)

NOTARY PUBLIC Signature

08/01/2026

My Commission Expires

JOHN OBIAGELI
NOTARY PUBLIC
MY COMMISSION EXPIRES AUGUST 01, 2026
CLAYTON COUNTY, GEORGIA

SECURE AND VERIFIABLE DOCUMENTS

The following list of secure and verifiable documents, published under the authority of O.C.G.A § 50-36-2 contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative or residency or immigration status.

- A United States passport or passport card
- A United States military identification card
- A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A tribal identification card of the federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer. A listing of the federally reorganized Native American tribes may be found at: http//www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm
- A United States Permanent Resident Card or Alien Registration Receipt Card
- An Employment Authorization Document that contains a photograph of the bearer
- A passport issued by a foreign government, must have I-94 attached
- A Merchant Mariner Document Mariner Credential issued by the United States Coast Guard
- A Free and Secure Trade (FAST) card
- A NEXUS card
- A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card
- A driver's license issued by a Canadian government
- A Certificate of Citizenship issued by the United States Department of Citizenship
- Immigration Services (USCIS) (Form N-560 or Form N-561)
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570)

Control Number : 24002155

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF AMENDMENT

NAME CHANGE

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

RMB Global LLC
a Domestic Limited Liability Company

has filed articles/certificate of amendment in the Office of the Secretary of State on 02/05/2024 changing its name to

NP 99 LLC
a Domestic Limited Liability Company

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles/ certificate of amendment.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on 02/13/2024.

Brad Raffensperger

Brad Raffensperger
Secretary of State

ARTICLES OF AMENDMENT

Electronically Filed
Secretary of State
Filing Date: 2/5/2024 12:18:47 PM

Article 1

Business Name : RMB Global LLC

Control Number : 24002155

Article 2

The date the original articles of organization were filed was: 12/14/2023

Article 3

The entity hereby adopts an amendment to change its name to the following new business name:

New Business Name : NP 99 LLC

Effective Date : 02/05/2024

Authorizer Information

Authorizer Signature : Niral Patel **Authorizer Title :** Organizer

Control Number : 24002155

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

RMB Global LLC
a **Domestic Limited Liability Company**

has been duly organized under the laws of the State of Georgia on **12/14/2023** by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on **01/04/2024**.

Brad Raffensperger
Secretary of State

ARTICLES OF ORGANIZATION

Electronically Filed
Secretary of State
Filing Date: 12/14/2023 2:54:11 PM

BUSINESS INFORMATION

CONTROL NUMBER	24002155
BUSINESS NAME	RMB Global LLC
BUSINESS TYPE	Domestic Limited Liability Company
EFFECTIVE DATE	12/14/2023

PRINCIPAL OFFICE ADDRESS

ADDRESS	950 Eagles Landing Pkwy STE 309, Stockbridge, GA, 30281, USA

REGISTERED AGENT

NAME	ADDRESS	COUNTY
Nir Patel	950 Eagles Landing Pkwy STE 309, Stockbridge, GA, 30281, USA	Henry

ORGANIZER(S)

NAME	TITLE	ADDRESS
Niral Patel	ORGANIZER	950 Eagles Landing Pkwy STE 309, Stockbridge, GA, 30281, USA

OPTIONAL PROVISIONS

N/A

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE	Niral Patel
AUTHORIZER TITLE	Organizer

May/26/2024

Cabcon, LLC

Pinellas County

1010 Central Ave. Unit 401

Saint Petersburg, FL 33705

To Whom It May Concern,

Re: Notarized Statement Regarding Financial Ability of NP 99 LLC, Niral Patel

I, Jake Cablish, hereby provide this notarized statement in accordance with the requirements outlined in 9.04.170 of the City Code, confirming the financial ability of NP 99 LLC, Niral Patel, to purchase and maintain liquor store in the city of Stockbridge, GA.

As an accountant, I have reviewed the financial documents provided by Niral Patel. which demonstrates their sufficient financial capacity to undertake the purchase and subsequent maintenance obligations.

Based on my professional assessment and analysis of the financial documents provided, I can confirm that Niral Patel possesses the necessary financial resources and stability to meet the financial requirements specified by the City Code.

Jake Cablish

Accountant

Cabcon, LLC

941 348 5759

NP 99 LLC

Niral Patel

615 579 2596

WELLS FARGO BANK, N.A.
Locust Grove Branch
2754 Highway 155
Locust Grove, GA 30248-2401

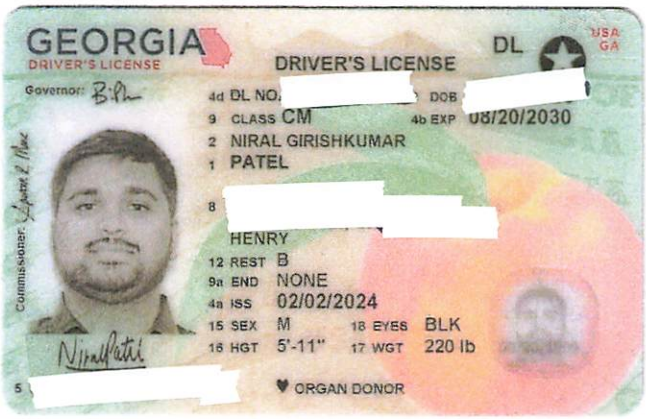
JOHN OBIAGELI
MY COMMISSION EXPIRES
NOTARY PUBLIC
AUGUST 01, 2028
CLAYTON COUNTY, GEORGIA

State of Florida
County of Miami-Dade
This foregoing instrument was acknowledged before me by means of online notarization, this 05/27/2024 by Brettin Jacob Cablish as Accountant of Cabcon,LLC.

Carola Villamizar

CAROLA VILLAMIZAR
Notary Public - State of Florida
Commission # HH 427934
Expires on: July 31, 2027

___ Personally Known OR ✓ Produced Identification
Type of Identification Produced DRIVER LICENSE
Notarized remotely online using communication technology via Proof.



GEORGIA
DRIVER'S LICENSE

DRIVER'S LICENSE

DL

USA GA

Governor:

Commissioner:

4d DL NO. [redacted]

DOB [redacted]

9 CLASS CM

4b EXP 08/20/2030

2 NIRAL GIRISHKUMAR

1 PATEL

8 [redacted]

HENRY

12 REST B

9a END NONE

4a ISS 02/02/2024

15 SEX M

18 EYES BLK

16 HGT 5'-11"

17 WGT 220 lb

5 [redacted]

♥ ORGAN DONOR

Endorsements / Mentions Spéciales / Anotaciones

If your passport expires within six months of your date of departure, you may be denied entry into some countries.

A03617957

SIGNATURE OF BEARER / SIGNATURE DU TITULAIRE / FIRMA DEL TITULAR

PASSPORT
PASSEPORT / PASAPORTE

THE UNITED STATES OF AMERICA

USA

Type/Type/Tipo: P
Code/Code/Código: USA
Passport No./No. du Passeport/No. de Pasaporte: [redacted]

Surname/Nom/Apellidos
PATEL

Given names/Prénoms/Nombres
NIRAL GIRISHKUMAR

Nationality/Nationalité/Nacionalidad
UNITED STATES OF AMERICA

Date of birth/Date de naissance/Fecha de nacimiento
[redacted]

M

Place of birth/Lieu de naissance/Lugar de nacimiento
INDIA

Date of issue/Date de délivrance/Fecha de expedición
02 SEP 2022

Date of expiration/Date d'expiration/Fecha de caducidad
01 SEP 2032

Authority/Autorité/Autoridad
UNITED STATES DEPARTMENT OF STATE

E3218788

P<USAPATEL<<NIRAL<GIRISHKUMAR<<<<<<<<<<<<<<<<

[redacted]

Amended Application 6/5/2024

LOTTERY APPLICATION TRACKING SHEET

Date Received: 5/24/2024 Application No.: 4

Applicant Name: Navin Kumar Patel

Proposed business and name: S Package Store

CHECKLIST:

- ✓ Complete Application and Documents: 5/24/2024 or Missing: _____
- ✓ $750 Non-Refundable Application Fee: 5/23/2024 Date Processed: 5/24/2024
- ✓ Fieldprint Background Check Information Received: 5/24/2024
- ✓ Notarized Financial Statement Received: 5/24/2024
- ✓ Copy of Government Issued ID Received: 5/24/2024
- ✓ Emailed applicant receipt/CC approval code/lottery process timeline: 5/23/2024
- ✓ Redacted Copy of Application Sent to City Clerk on: (date) _____

Any Notes:
Need notarized letter from bank ✓ Need to correct first page of application — 3 5/24/2024 Need proposed location —

executiveinn1@gmail.com

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

APPLICATION
(Lottery Application ONLY)

NOTE: USE SEPARATE PAGES AND/OR ATTACHMENTS, AS NECESSARY

1. Type(s) of license applied for:

   (X) Alcohol License
   ( ) Tire Shop
   ( ) Used Car Dealership
   ( ) Used Appliance Shop
   ( ) Thrift store and Consignment Shop
   ( ) Pawnshop
   ( ) Vape Shop
   ( ) Precious Metals

2. Proposed license is a (n):

   (X) Individual
   ( ) Partnership
   ( ) Corporation
   ( ) LLC
   ( ) other legal entity (explain)

   _____

3. Applicant information:

   Name: Navinkumar S. PATEL NP

   Title/Position: Owner

   Are you a citizen of the United States: X yes ____ no

   Where were you born? INDIA

   Present home address: _____

   County of Henry Number of years at present address 6 Year

   Contact information: Business phone #: 678-521-6731

   Home phone #: 770-957-2671

   How long have you been a resident of Georgia? 26 Henry Co? 26

   What has been your occupation for the past five (5) years? Motel & Restaurant own

4. Applicant's relationships with other persons with 1st degree of kinship.

Immediate living relatives:
(Please list all immediate living wife, children, parents, brothers, sisters, and parents)
(Attach separate sheet(s) if necessary)

Name: Nita N PATEL Age: 56

Relationship: wife Live with or apart: with

Name: Suprina PATEL Age: 32

Relationship: Daughter Live with or apart: apart

Name: Salina PATEL Age: 26

Relationship: Daughter Live with or apart: apart

Name: Shivam PATEL Age: 25

Relationship: Son Live with or apart: apart

5. Proposed business name and address:

Business name: 050-01003021

Address:

6. Corporations: If operating as a corporation, please complete the following:

Corporation name:

Address:

Date of Incorporation: Where Incorporated:

Type of Corporation:

Corporate Officers: *Please list each (attach a separate sheet if necessary)*

Name: SS#

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

APPLICATION
(Lottery Application ONLY)

NOTE: USE SEPARATE PAGES AND/OR ATTACHMENTS, AS NECESSARY

1. Type(s) of license applied for:
   ( ) Alcohol License
   ( ) Tire Shop
   ( ) Used Car Dealership
   ( ) Used Appliance Shop
   ( ) Thrift store and Consignment Shop
   ( ) Pawnshop
   ( ) Vape Shop
   ( ) Precious Metals

2. Proposed license is a (n):
   ( ) Individual
   ( ) Partnership
   ( ) Corporation
   ( ) LLC
   ( ) other legal entity (explain)

   _____

3. Applicant information:

   Name: _____

   Title/Position: _____

   Are you a citizen of the United States: ___ yes _____ no

   Where were you born? _____

   Present home address: _____

   _____

   County of _____ Number of years at present address _____

   Contact information: Business phone #: _____

   Home phone #: _____

   How long have you been a resident of Georgia? _____ Henry Co? _____

   What has been your occupation for the past five (5) years? _____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

7. **Stockholder information – applies to any "closely held" stock, not publicly traded and to all stockholders who own more than 10% of the outstanding capital stock of the corporation. DO NOT FILL OUT TIIIS INFORMATION FOR PUBLICLY TRADED CORPORATIONS. In lieu thereof, please indicate by attached sheet as to whether any affiliate, related company, holding company, subsidiary or other organization holds any form of alcohol license in the City of Stockbridge, or any distilled spirits package sale license within the State of Georgia.**

8. If operating as a corporation, list stockholders with addresses and the amount of interest of each stockholder in the corporation. ***Please list each (attach a separate sheet if necessary)***

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

9. Limited Liability Company (LLC): If operating as a company, please complete the following:

Company name: _____

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of LLC (member managed or manager managed):_____

LLC members with an ownership interest: ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

10. Limited Liability Partnership (LLP), Partnerships, Sole Proprietorships, and any other forms of business entity: If operating as a partnership or other form of business entity, please complete the following:

Entity name: _____

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of Partnership: _____

Partnership members with an ownership interest. ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

If more than 4 members, partners, or stockholders, please provide the name, address, social security number and ownership interest of additional parties at interest, by separate sheet.

11. Registered Agent

If the proposed license is a legal entity, please provide name of its registered agent:

Agent(s) name: Navinkumar S. Patel

Address: _ ___

Telephone Number: 678-521-6731

12. Store Manager, Managing Member, Managing Partner, or other person in charge:
What is the name of the person who, if the license is granted, will be the active manager of the business and on the job at the business?

Full name: Navinkumar S. Patel

(Please complete the site manager's personal statement, attached)

13. Convictions:
Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (15) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

None/ N/A

14. Location ownership
Do you own the land and building on which the business is to be operated?

_____ Yes ___X___ No If Yes, when did you buy it? _____
(Attach proof of ownership)

If not the owner, please complete the following and attach a copy of the lease, option, and any other pertinent documents:

Owner/Agent of Property: _____

Amount of rent: _____ Frequency Paid: _____

Is the amount of rent a set amount? _____ Yes _____ No

If NO, please explain how it is determined: _____

15. If you have an option, or other legal, binding document to buy, lease the building, please explain the general terms: _____

16. Zoning
What is the current zoning on the proposed property location? _____

17. Location Certification
If this is the first application for a license for this business, please attach a current certificate from a registered surveyor containing the following information:

(1) A scale drawing of the building or proposed building as situated on the proposed lot.
(2) Proposed parking available to the building.

NOTE: NOT Required for a retail package alcohol license until the applicant is chosen for a license.

18. Financial Interest – Does the applicant or interested parties to this Application:

A. Have any financial interest in any similar business?

_____ Yes _X_ No

B. Received any financial aid or assistance from any similar business?

_____ Yes _X_ No

19. Other Interests:
Do you; any member of your family (children, spouse, parents, siblings) or any of the other owners, partners, or stockholders:

A. Have any interest, financial or otherwise, in other similar businesses or establishments?
_____ Yes _X_ No

If YES, please list:

_____

_____

B. Own, lease, sub-lease any real estate which is occupied by a similar business. If so, give the location information as to any lease or rental agreement including rents received and who it was rented to: _____ Yes _X_ No

If YES, please list:

_____

_____

C. Serve as the Executor or Administrator or Beneficiary of Heir of any estate having an interest in any similar business or establishment?

_____ Yes _X_ No

If YES, please list:

_____

_____

D. Serve as Beneficiary or Trustee of any Trust Fund having an interest in any similar business or establishment?

_____ Yes __X__ No

If YES, please list:

_____

_____

20. Financial Gain
Please list all parties who will receive any financial gain or payment derived from any interest or income as a result of the operation that this application applies to. (Please include any owners, partners, members, officers, or principal stockholders)

_____

_____

21. Other Jurisdictions
List other jurisdictions in which any applicant, partner, member, corporate officer, or stockholder holds a similar occupational tax certificate, regulatory license, or alcoholic beverage license:

_____

_____

_____

List all details of denial of any such licenses in any other jurisdiction:

_____

_____

22. Are you familiar with the City of Stockbridge Ordinances, State laws and regulations, Federal laws and regulations governing the operations of this type of business?

__X__ Yes _____ No

(City of Stockbridge Ordinance 9.04 Alcoholic Beverage)

23. Restrictions Alcohol ONLY

Ordinance 9.04.090

1. No retail license for the sale of distilled spirits shall be issued unless the location is located within five hundred (500) feet of the streets or roads designated in the following three (3) areas and has direct access onto such streets or roads:

   Area 1: Those portions of Mount Zion Boulevard and Highway 138 lying west of I-75;
   Area 2: Those portions of Highway 138 and North Henry Boulevard lying east of I-75;

   Area 3: Those portions of Eagles Landing Parkway/Hudson Bridge Road from their intersection with the west right-of-way line of Highway 42 to the west city limits line.

24. Do you agree to abide by such ordinances, laws, and regulations?

    __X__ Yes _____ No

25. Do you have any questions or comments regarding the ordinances, laws, regulations, or application?

    _____ Yes _X_ No

    If YES, please list:

    _____

    _____

Georgia, Henry County, City of Stockbridge

I, Navinkumar S. Patel, being duly sworn according to the law, do swear that the facts and things stated by me in the above and foregoing answers to questions are true, and no false, or fraudulent statement is made herein, and such answers were made in order to produce the granting of such license.

Navin S Patel
Signature of Applicant

Navinkumar S. Patel
Print Name

Owner
Title of Applicant

Subscribed and Sworn before me on this the 23 day of May, 2024

NOTARY PUBLIC signature

8-29-26
Notary Commission Expires

Katresea Bailey
NOTARY PUBLIC printed name

KATRESEA B BAILEY NOTARY EXPIRES GEORGIA August 29, 2026 PUBLIC HENRY COUNTY, GA

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

SITE MANAGER'S PERSONAL INFORMATION
Alcohol License ONLY

(To be attached to Application)
(A photo of the manager must be attached to this form)

1. **Business Name**
   (Please complete for the business you are applying as a manager for)

   Business Name: S3 ~~Pat~~ Package store

   Address: 050-01003021

2. **Manager's name and address:**

   Name: Navinkumar S. Patel

   Home address: _

   Phone number: 678-521-6731

3. **Personal identification information:**

   Race: _____ Sex: M Height: 5 Weight: 10 Age: 62

   Color of hair: Black Color of eyes: Black

4. **Manager's birth information:**

   Location of birth: India

   Date of birth: _

5. **Spousal information: (If married, please complete)**

   Spouse's full name: Nita N. Patel

   Maiden name if applicable: _____

   Date of Birth: _ Date married: _

   Employer: Sushila 1 Enterprise LLC

[illegible]

[illegible]

[illegible]

[illegible]

6. **Employment record:**
(Please list your previous employment information for the last past 10 years) (Attach separate sheet if necessary)

Employer: Sushila Inc.

Location: _____ Dates – From: 4/96 To: Today

Employer: _____

Location: _____ Dates – From: ____ To: ____

Employer: _____

Location: _____ Dates – From: ____ To: ____

7. **Financial interest:**

Do you or your spouse, or any member of your family:

A. Have any interest, financial or otherwise, in other malt beverage, wine, or distilled spirits stores or establishments? X Yes _____ No

If YES, please list:

Sushila 1 Enterprise LLC.

B. Ever been denied a license or had a license revoked? _____ Yes X No

If YES, please list:

8. **Prior residences:**
(Please list all residences you have had in the past ten (10) years.) *(Include a separate sheet if necessary)*

Street Address	City	State	Years

9. **Tax return:**
Did you file a Georgia tax return last year?

[illegible]

[illegible]

[illegible]

X Yes _____ No

10. Convictions:

Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (10) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

None

Charge: N/A

Place of arrest: _____ Date: _____

Disposition: _____

11. Personal References:

(Please list three personal references not related to you, whom you have known for at least five years)

Name: ~~Nimisha Trivedi~~ Mukesh Patel Phone #: ~~678-907-2199~~ 470-222-1661

Address: _____

Name: Mukesh Dave Phone #: 404-452-8098

Address: _____

Name: Jayana S. Patel Phone #: 404-550-7293 770-209-0905

Address: _____

12. Emergency Contact:

Contact name: Suprima Patel Phone #: 678-923-9977

I, Navinkumar S. Patel, do solemnly swear, that the foregoing statements are true. I understand that any falsehoods are grounds for automatic dismissal of this application.

Navin S Patel
Signature of Manager

Navinkumar S. Patel
Print Name

Owner
Title of Applicant

Subscribed and Sworn before me on this the 23 day of May, 2024

NOTARY PUBLIC signature

8-29-26
Notary Commission Expires

KATRESEA B BAILEY
NOTARY PUBLIC
EXPIRES
GEORGIA
August 29, 2026
HENRY COUNTY, GA

Katresea Bailey
NOTARY PUBLIC printed name

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

BACKGROUND AND SECURITY CLEARANCE FORM
OWNER, APPLICANT, MANAGER
Alcohol License ONLY

Authorization for Release of Personal Information
(Attach photocopy of Social Security Card and Photo ID)

I, Navinkumar S. Patel, do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the City of Stockbridge, whether said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure pertaining to the background investigation necessary to process my application as required under the Alcohol Beverage Ordinance (Chapter 9) governing licensing in the City.

I also certify that any person, firm, or other entity ("the providing entity") who may furnish such information concerning me, shall not be held liable or accountable for giving this information and I do hereby fully and completely release the providing entity from all liability, which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the photocopy does not contain the original writing of my signature.

Notary

8-29-26
Notary Commission Expires

KATRESEA BAILEY
NOTARY
EXPIRES
GEORGIA
August 29, 2026
PUBLIC
HENRY COUNTY, GA

Navin S Patel
Signature

5-23-24
Date

Date of Birth

Social Security Number

Driver's License Number

5' 10"
Height

~~10~~ 168 lb
Weight

City of Stockbridge

SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

Instructions: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

Navinkumar S. Patel

Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity.

Address of applicant named above

678-521-6731

Telephone Number

Name of business, corporation for whom application is being made.

OCCUPATIONAL TAX CERTIFICATE

Category of Public Benefit

1. X I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. _____ I am a legal permanent resident of the United States.
3. _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

_____.

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the back of this form.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this affidavit? :_____

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

MUST BE COMPLETED BY NOTARY

I, Navinkumar S. Patel {representative for} _____

(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

Navin S Patel

Signature of Applicant

Date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 23 DAY OF MAY, 20 24

Executed in Locust Grove (City), GA (State)

KATRESEA B BAILEY NOTARY EXPIRES GEORGIA August 29, 2026 PUBLIC HENRY COUNTY, GA

NOTARY PUBLIC Signature

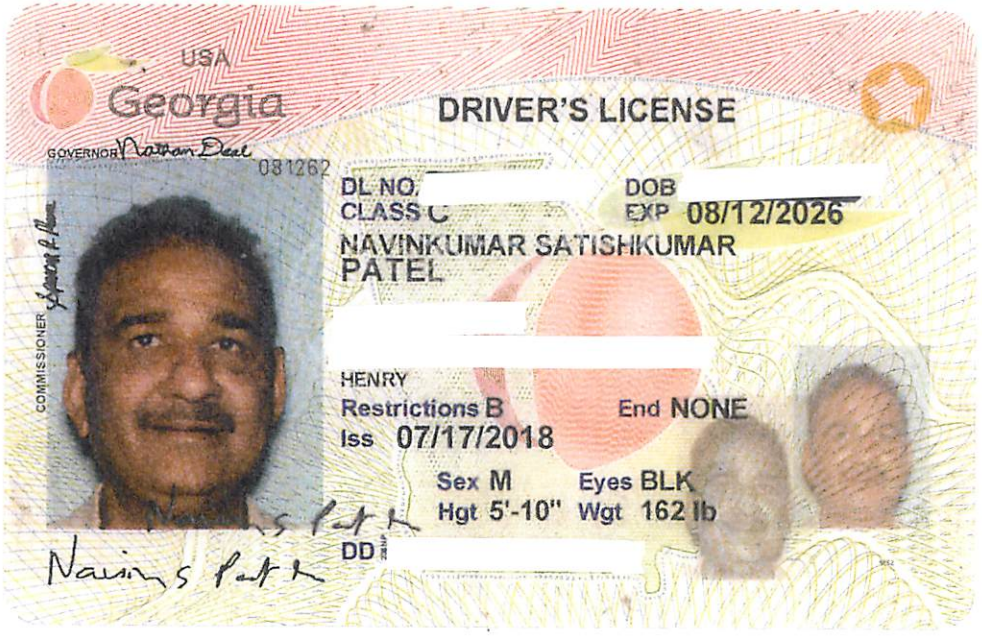
8-29-26

My Commission Expires

SECURE AND VERIFIABLE DOCUMENTS

The following list of secure and verifiable documents, published under the authority of O.C.G.A § 50-36-2 contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative or residency or immigration status.

- A United States passport or passport card
- A United States military identification card
- A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A tribal identification card of the federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer. A listing of the federally reorganized Native American tribes may be found at: http//www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm
- A United States Permanent Resident Card or Alien Registration Receipt Card
- An Employment Authorization Document that contains a photograph of the bearer
- A passport issued by a foreign government, must have I-94 attached
- A Merchant Mariner Document Mariner Credential issued by the United States Coast Guard
- A Free and Secure Trade (FAST) card
- A NEXUS card
- A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card
- A driver's license issued by a Canadian government
- A Certificate of Citizenship issued by the United States Department of Citizenship
- Immigration Services (USCIS) (Form N-560 or Form N-561)
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570)



USA

Georgia

DRIVER'S LICENSE

GOVERNOR Nathan Deal

081262

DL NO.

DOB

CLASS C

EXP 08/12/2026

NAVINKUMAR SATISHKUMAR
PATEL

COMMISSIONER

HENRY

Restrictions B

End NONE

Iss 07/17/2018

Sex M

Eyes BLK

Hgt 5'-10"

Wgt 162 lb

DD

AMERIS BANK

05/23/2024

To: Whom it may concern,

This letter is to verify that Navinkumar S Patel has been a customer of Ameris Bank since 2004 and he has the financial ability to purchase a liquor store. All of his accounts are currently in good standing.

Thank you,

Chris Parkerson

Personal Banker II

Ameris Bank Locust Grove

770-626-4901

Chris.parkerson@amerisbank.com

KATRESEA B BAILEY
NOTARY
EXPIRES
GEORGIA
August 29, 2026
PUBLIC
HENRY COUNTY, GA

AMERIS BANK

05/23/2024

To: Whom it may concern,

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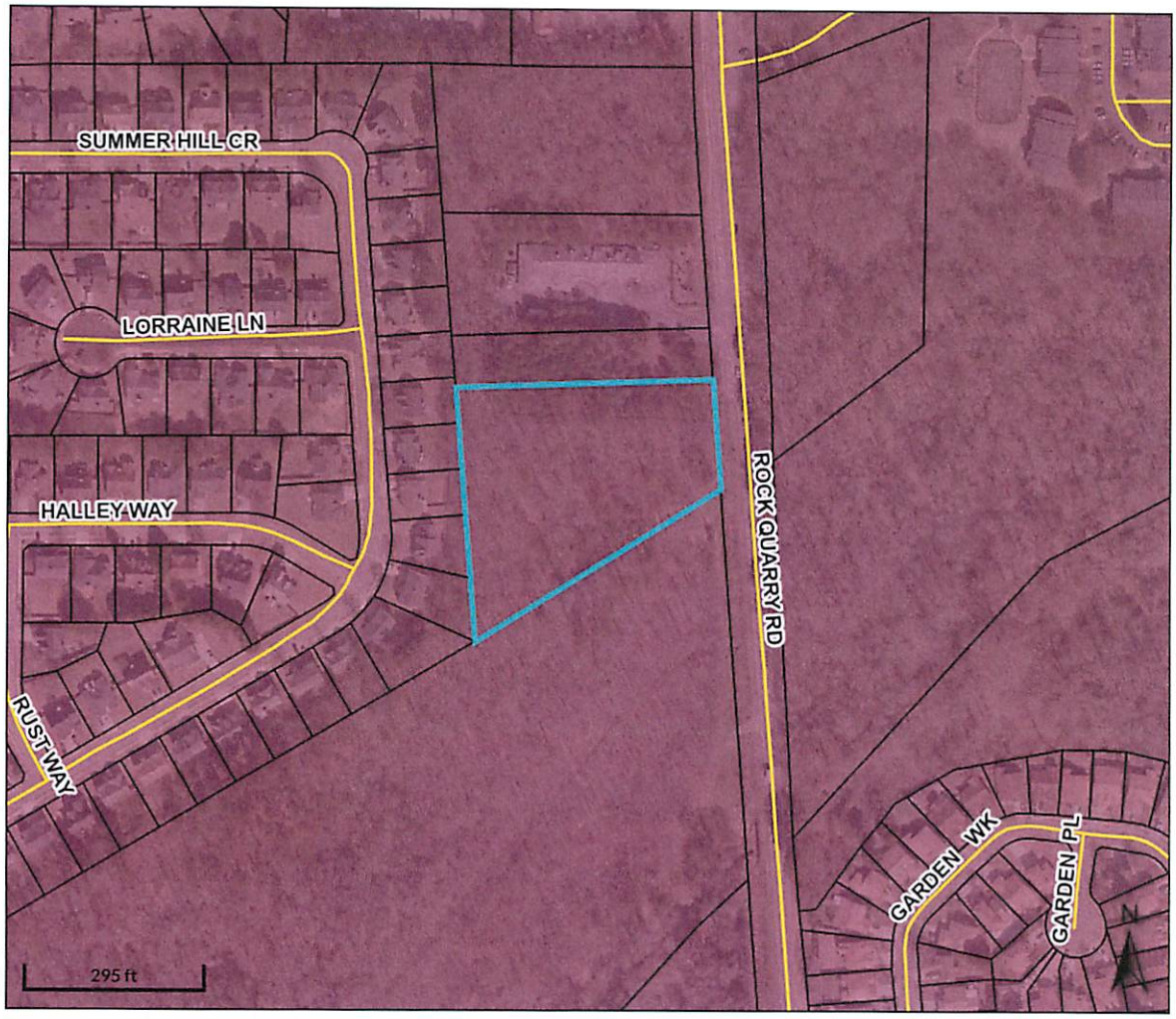
Ameris Bank Locust Grove

770-626-4901

Chris.parkerson@amerisbank.com

Henry County, GA



Overview

Legend

- Parcels
- Roads
- Cities

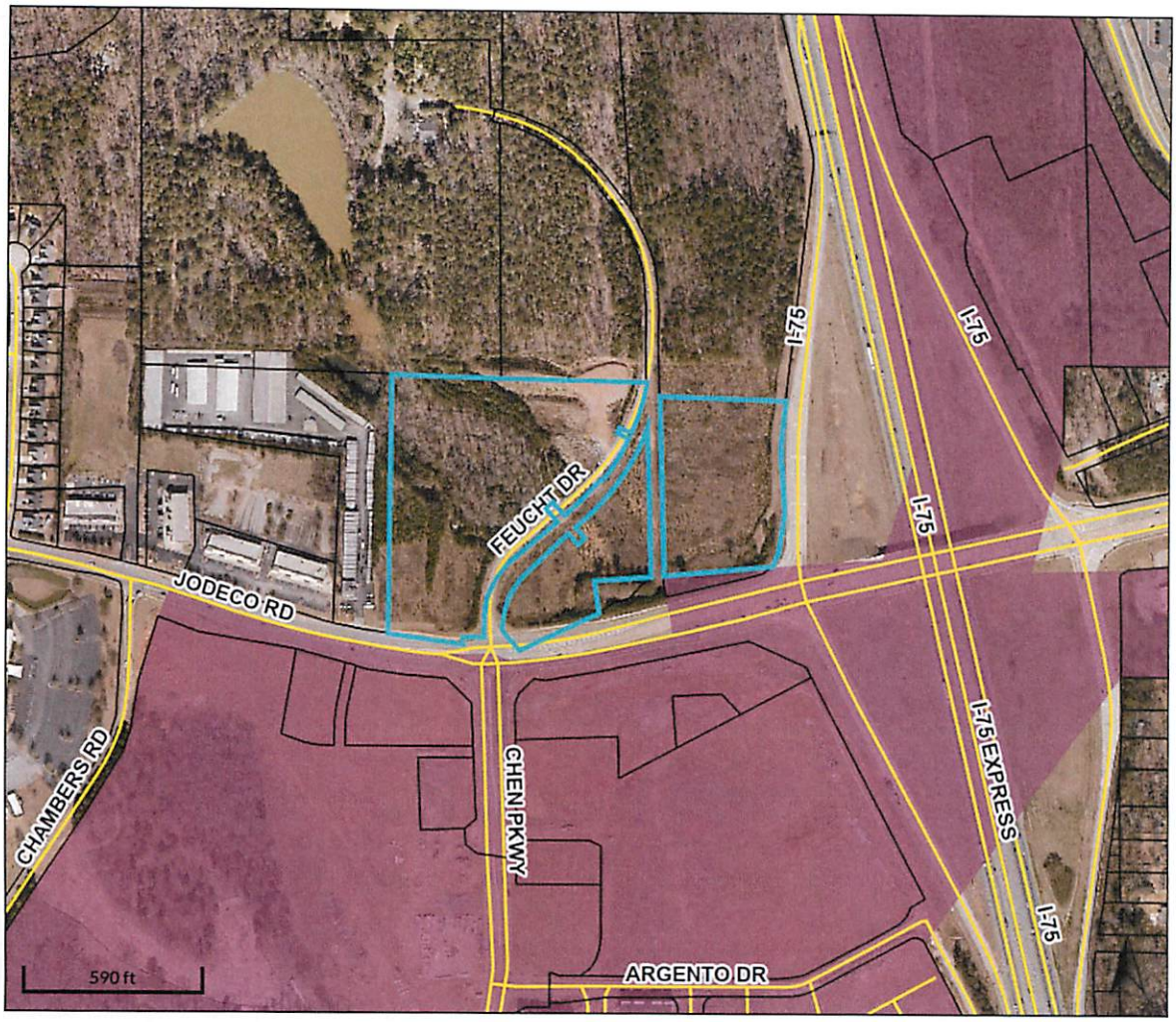
Parcel ID	050-01003021	**Class**	C	**Owner**	MANISH INC	**Land Value:**	$312,000				
Property Address	Plan A	**Acreage**	3.12	**Address**	112 CONGRESSIONAL COURT MCDONOUGH GA 30253	**Building Value:**	$0	**Last 2 Sales**			
District	City/Stockbridge							**Date**	**Price**	**Reason**	**Qual**
						Misc Value:	$0	5/18/2000	$475,000	n/a	Q
								7/11/1997	$325,000	n/a	Q
						Total Value:	$312,000				

Parcel lines depicted on the maps do not reflect a true and exact representation of property boundaries and should not be relied upon for said purpose. Property boundary lines are depicted on recorded plats available at the Henry County Courthouse or can be determined by employing the services of a licensed surveyor.

Date created: 6/5/2024
Last Data Uploaded: 6/5/2024 9:24:06 AM

Developed by Schneider GEOSPATIAL

Henry County, GA



Overview

Legend

- Parcels
- Roads
- Cities

Parcel ID	053-01017005	Class	C	Owner	MARKETPLACE	Land	$2,891,200				
Property	2250 JODECO	Acreage	18.07	Address	STOREFRONTS LLC	Value:					
Address	RD Plan B				1418 DRESDEN DRIVE	Building	$0	Last 2 Sales			
District	City/Stockbridge				SUITE 200	Value:		Date	Price	Reason	Qual
	Backup location				ATLANTA GA 30319	Misc	$0	4/22/2008	$5,400,000	n/a	Q
						Value:		7/29/2005	$3,300,000	n/a	Q
						Total	$2,891,200				
						Value:					

Parcel lines depicted on the maps do not reflect a true and exact representation of property boundaries and should not be relied upon for said purpose. Property boundary lines are depicted on recorded plats available at the Henry County Courthouse or can be determined by employing the services of a licensed surveyor.

Date created: 6/5/2024
Last Data Uploaded: 6/5/2024 9:24:06 AM

Developed by Schneider GEOSPATIAL

LOTTERY APPLICATION TRACKING SHEET

Date Received: 5/28/24 Application No.: 6

Applicant Name: Reynell Hay

Proposed business and name: oLogo Wine and Spirit
110 Rock Quarry

CHECKLIST:

- ✓ Complete Application and Documents: _____ or Missing: _____
- ✓ $750 Non-Refundable Application Fee: _____ Date Processed: 5/28
- ✓ Fieldprint Background Check Information Received: _____
- ✓ Notarized Financial Statement Received: _____
- ✓ Copy of Government Issued ID Received: _____
- ✓ Emailed applicant receipt/CC approval code/lottery process timeline: 5/31
- ✓ Redacted Copy of Application Sent to ~~City Clerk~~ Ryan on: (date) 5/31

Any Notes:

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

APPLICATION
(Lottery Application ONLY)

NOTE: USE SEPARATE PAGES AND/OR ATTACHMENTS, AS NECESSARY

1. Type(s) of license applied for:
   - (✓) Alcohol License
   - ( ) Tire Shop
   - ( ) Used Car Dealership
   - ( ) Used Appliance Shop
   - ( ) Thrift store and Consignment Shop
   - ( ) Pawnshop
   - ( ) Vape Shop
   - ( ) Precious Metals

2. Proposed license is a (n):
   - ( ) Individual
   - ( ) Partnership
   - (✓) Corporation
   - (✓) LLC
   - ( ) other legal entity (explain)

_____

3. Applicant information:

Name: Reynell Hay

Title/Position: CO-OWNER / Manager

Are you a citizen of the United States: ✓ yes _____ no

Where were you born? BROOKLYN N.Y.

Present home address:

County of HENRY Number of years at present address 4

Contact information: Business phone #: 646 · 897 · 0019

Home phone #: _____

How long have you been a resident of Georgia? 18 Henry Co? 18

What has been your occupation for the past five (5) years? CEO / OWNER

4. Applicant's relationships with other persons with 1st degree of kinship.

Immediate living relatives:
(Please list all immediate living wife, children, parents, brothers, sisters, and parents)
(Attach separate sheet(s) if necessary)

Name: Lannetta Hay Age: 50
Relationship: Spouse Live with or apart: With
Name: Madison Hay Age: 16
Relationship: Child / Daughter Live with or apart: With
Name: Calvin Hay Age: 35
Relationship: Son / child Live with or apart: Apart
Name: Clarington Hay Age: 23
Relationship: Child / Daughter Live with or apart: Apart

5. Proposed business name and address:

Business name: OLogo Wine and Spirit
Address: 110 Rock Quarry Rd
Stockbridge GA 30281

6. Corporations: If operating as a corporation, please complete the following:

Corporation name: N/A
Address:

Date of Incorporation: Where Incorporated:
Type of Corporation:
Corporate Officers: *Please list each (attach a separate sheet if necessary)*

Name: SS#

Office Held: _____

Address: _____

_____

Name: _____ SS# _____

Office Held: _____

Address: _____

_____

Name: _____ SS# _____

Office Held: _____

Address: _____

_____

Name: _____ SS# _____

Office Held: _____

Address: _____

_____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

7. **Stockholder information – applies to any "closely held" stock, not publicly traded and to all stockholders who own more than 10% of the outstanding capital stock of the corporation. DO NOT FILL OUT THIS INFORMATION FOR PUBLICLY TRADED CORPORATIONS. In lieu thereof, please indicate by attached sheet as to whether any affiliate, related company, holding company, subsidiary or other organization holds any form of alcohol license in the City of Stockbridge, or any distilled spirits package sale license within the State of Georgia.**

8. If operating as a corporation, list stockholders with addresses and the amount of interest of each stockholder in the corporation. ***Please list each (attach a separate sheet if necessary)***

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

N/A

9. Limited Liability Company (LLC): If operating as a company, please complete the following:

Company name: 6Logo Wines and Spirit

Address: 950 Eagles Landing Pkwy. Stockbridge GA 30281

Date of Formation: 5/17/2024 Where Formed (State): GA

Type of LLC (member managed or manager managed): Member Manager

LLC members with an ownership interest: ***Please list each (attach a separate sheet if necessary)***

Name: Beyrell Hay SS# 069-66-6433

Member – ownership interest (%): 50 %

Address: _____

Name: Shaffer Smith SS# 530-90-0473

Member – ownership interest (_%): 50 %

Address: _____

Name: _____ SS# _____

Member – ownership interest (_%): _____

Address: _____

Name: _____ SS# _____

Member – ownership interest (_%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

Control Number : 24100589

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

Ologo Wine and Spirits LLC
a Domestic Limited Liability Company

has been duly organized under the laws of the State of Georgia on **05/17/2024** by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on **05/21/2024**.

Brad Raffensperger
Secretary of State

10. Limited Liability Partnership (LLP), Partnerships, Sole Proprietorships, and any other forms of business entity: If operating as a partnership or other form of business entity, please complete the following:

Entity name: _____

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of Partnership: _____

Partnership members with an ownership interest. ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

<u>Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"</u>

If more than 4 members, partners, or stockholders, please provide the name, address, social security number and ownership interest of additional parties at interest, by separate sheet.

11. Registered Agent

If the proposed license is a legal entity, please provide name of its registered agent:

Agent(s) name: CSC Global

Address: 251 Little Falls Drive. Wilmington DE 1980

Telephone Number: 1-800-927-9801

12. Store Manager, Managing Member, Managing Partner, or other person in charge:
What is the name of the person who, if the license is granted, will be the active manager of the business and on the job at the business?

Full name: Reyne II Hay.

(Please complete the site manager's personal statement, attached)

13. Convictions:
Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (15) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

NO

14. Location ownership
Do you own the land and building on which the business is to be operated?

_____ Yes ✓ No If Yes, when did you buy it? _____
(Attach proof of ownership)

If not the owner, please complete the following and attach a copy of the lease, option, and any other pertinent documents:

Owner/Agent of Property: _____

Amount of rent: _____ Frequency Paid: _____

Is the amount of rent a set amount? _____ Yes _____ No

If NO, please explain how it is determined: Location has not been finalized.

15. If you have an option, or other legal, binding document to buy, lease the building, please explain the general terms:

– N/A –

16. Zoning
What is the current zoning on the proposed property location? _____

17. Location Certification
If this is the first application for a license for this business, please attach a current certificate from a registered surveyor containing the following information:

(1) A scale drawing of the building or proposed building as situated on the proposed lot.
(2) Proposed parking available to the building.

NOTE: NOT Required for a retail package alcohol license until the applicant is chosen for a license.

18. Financial Interest – Does the applicant or interested parties to this Application:

A. Have any financial interest in any similar business?

_____ Yes ✓ No

B. Received any financial aid or assistance from any similar business?

_____ Yes ✓ No

19. Other Interests:
Do you: any member of your family (children, spouse, parents, siblings) or any of the other owners, partners, or stockholders:

A. Have any interest, financial or otherwise, in other similar businesses or establishments?
_____ Yes ✓ No

If YES, please list:

N/A

B. Own, lease, sub-lease any real estate which is occupied by a similar business. If so, give the location information as to any lease or rental agreement including rents received and who it was rented to: _____ Yes _____ No

If YES, please list:

N/A

C. Serve as the Executor or Administrator or Beneficiary of Heir of any estate having an interest in any similar business or establishment?

_____ Yes ✓ No

If YES, please list:

N/A

D. Serve as Beneficiary or Trustee of any Trust Fund having an interest in any similar business or establishment?

____ Yes ✓ No

If YES, please list:

N/A

20. Financial Gain
Please list all parties who will receive any financial gain or payment derived from any interest or income as a result of the operation that this application applies to. (Please include any owners, partners, members, officers, or principal stockholders)

Reynell Hay
Shaffer Smith

21. Other Jurisdictions
List other jurisdictions in which any applicant, partner, member, corporate officer, or stockholder holds a similar occupational tax certificate, regulatory license, or alcoholic beverage license:

N/A

List all details of denial of any such licenses in any other jurisdiction:

N/A

22. Are you familiar with the City of Stockbridge Ordinances, State laws and regulations, Federal laws and regulations governing the operations of this type of business?

✓ Yes _____ No

(City of Stockbridge Ordinance 9.04 Alcoholic Beverage)

23. Restrictions Alcohol ONLY

Ordinance 9.04.090

1. No retail license for the sale of distilled spirits shall be issued unless the location is located within five hundred (500) feet of the streets or roads designated in the following three (3) areas and has direct access onto such streets or roads:

   Area 1: Those portions of Mount Zion Boulevard and Highway 138 lying west of I-75;
   Area 2: Those portions of Highway 138 and North Henry Boulevard lying east of I-75;

   Area 3: Those portions of Eagles Landing Parkway/Hudson Bridge Road from their intersection with the west right-of-way line of Highway 42 to the west city limits line.

24. Do you agree to abide by such ordinances, laws, and regulations?

    ✓ Yes _____ No

25. Do you have any questions or comments regarding the ordinances, laws, regulations, or application?

    _____ Yes ✓ No

    If YES, please list:

    N/A

Georgia, Henry County, City of Stockbridge

I, Reynell Hay, being duly sworn according to the law, do swear that the facts and things stated by me in the above and foregoing answers to questions are true, and no false, or fraudulent statement is made herein, and such answers were made in order to produce the granting of such license.

Signature of Applicant

Reynell Hay

Print Name

CEO

Title of Applicant

Subscribed ~~and Sworn before~~ me on this the 21 day of May, 2024

NOTARY PUBLIC signature

3-21-27

Notary Commission Expires

Karl Czaykowsky

NOTARY PUBLIC printed name

KARL CZAYKOWSKY NOTARY PUBLIC Exp. March 21, 2027 HENRY COUNTY, GA

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

SITE MANAGER'S PERSONAL INFORMATION
Alcohol License ONLY

(To be attached to Application)
(A photo of the manager must be attached to this form)

1. **Business Name**
(Please complete for the business you are applying as a manager for)

Business Name: Olugo Wine and Spirit

Address: 950 Eagles Landing Pkwy Stockbridge Ga 30281
- OR - 110 Rock Quarry Rd

2. **Manager's name and address:**

Name: Beynell Hay

Home address:

Phone number: 646. 897. 6019

3. **Personal identification information:**

Race: B/K Sex: M Height: 5'9 Weight: 300 Age: 56

Color of hair: Bald Color of eyes: Dark Brown.

4. **Manager's birth information:**

Location of birth: Brooklyn NY.

Date of birth: [redacted]

5. **Spousal information: (If married, please complete)**

Spouse's full name: Lannetta Hay

Maiden name if applicable:

Date of Birth: Date married.

Employer: Self Employed.

6. **Employment record:**
(Please list your previous employment information for the last past 10 years) (Attach separate sheet if necessary)

Employer: Compound Entertainment _____

Location: ___ Dates – From: 2004 To: present

Employer: _____

Location: _____ Dates – From: ____ To: ____

Employer: _____

Location: _____ Dates – From: ____ To: ____

7. **Financial interest:**

Do you or your spouse, or any member of your family:

A. Have any interest, financial or otherwise, in other malt beverage, wine, or distilled spirits stores or establishments? _____ Yes _____ No

If YES, please list:

N/A

B. Ever been denied a license or had a license revoked? _____ Yes ✓ No

If YES, please list:

N/A

8. **Prior residences:**
(Please list all residences you have had in the past ten (10) years.) *(Include a separate sheet if necessary)*

Street Address	City	State	Years

9. **Tax return:**
Did you file a Georgia tax return last year?

✓ Yes _____ No

10. Convictions:

Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (10) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States: or any violation of municipal ordinances except traffic violations? If yes, please explain below:

NO

Charge: N/A

Place of arrest: N/A Date: N/A

Disposition: N/A

11. Personal References:

(Please list three personal references not related to you, whom you have known for at least five years)

Name: Tishawn Gayle Phone #: 917.214.4801

Address:

Name: John Black Phone #: 770.315.8157

Address:

Name: Philip Ambrosino Phone #: 310.310.9068

Address

12. Emergency Contact:

Contact name: LAnnette Hay Phone #: 818.445.3832

I, T. Elwell Hay, do solemnly swear, that the foregoing statements are true. I understand that any falsehoods are grounds for automatic dismissal of this application.

Signature of Manager

T. Elwell Hay

Print Name

CEO

Title of Applicant

Subscribed and Sworn before me on this the 21 day of May, 2024

NOTARY PUBLIC signature

3-21-27

Notary Commission Expires

Karl Czaykowsky

NOTARY PUBLIC printed name

KARL CZAYKOWSKY
NOTARY PUBLIC
Exp March 21, 2027
HENRY COUNTY, GA

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

BACKGROUND AND SECURITY CLEARANCE FORM
OWNER, APPLICANT, MANAGER
Alcohol License ONLY

Authorization for Release of Personal Information
(Attach photocopy of Social Security Card and Photo ID)

I, Reynell Hay, do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the City of Stockbridge, whether said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure pertaining to the background investigation necessary to process my application as required under the Alcohol Beverage Ordinance (Chapter 9) governing licensing in the City.

I also certify that any person, firm, or other entity ("the providing entity") who may furnish such information concerning me, shall not be held liable or accountable for giving this information and I do hereby fully and completely release the providing entity from all liability, which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the photocopy does not contain the original writing of my signature.

Notary

3-21-27
Notary Commission Expires

KARL CZAYKOWSKY NOTARY PUBLIC Exp. March 21, 2027 HENRY COUNTY, GA

Signature

5/21/24
Date

Date of Birth

Social Security Number

Driver's License Number

5'-9"
Height

280 lbs
Weight

City of Stockbridge

SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

Instructions: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

Reynell Hay

Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity.

(646) 8970019

Address of applicant named above

Telephone Number

Ologo Wine and Spirit

Name of business, corporation for whom application is being made.

OCCUPATIONAL TAX CERTIFICATE

Category of Public Benefit

1. ✓ I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. ____ I am a legal permanent resident of the United States.
3. ____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

_____.

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the back of this form.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this affidavit? : Driver's License

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

MUST BE COMPLETED BY NOTARY

I, Reynell Hay {representative for} Ologo Wine and Spirit.

(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

Signature of Applicant

5/21/24

Date

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE
21 DAY OF May, 20 24

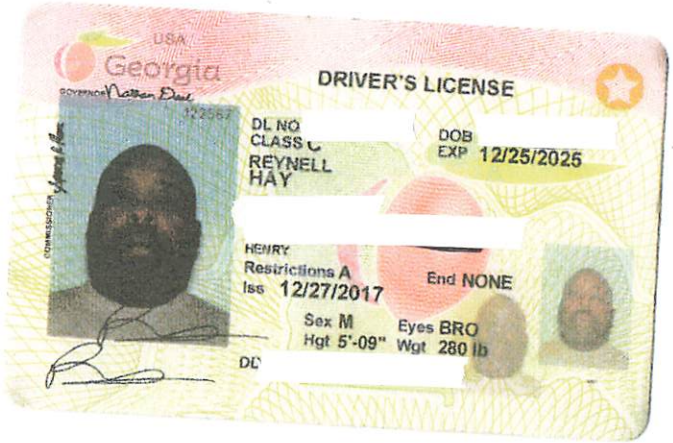
Executed in Stockbridge (City), GA (State)

NOTARY PUBLIC Signature

3-21-27

My Commission Expires

KARL CZAYKOWSKY NOTARY PUBLIC Exp. March 21, 2027 HENRY COUNTY, GA


USA
Georgia
DRIVER'S LICENSE
DL NO
CLASS C
DOB
EXP 12/25/2025
REYNELL
HAY
HENRY
Restrictions A
End NONE
Iss 12/27/2017
Sex M
Eyes BRO
Hgt 5'-09"
Wgt 280 lb

We The People

Of the United States,

in Order to form a more perfect Union,
establish Justice, insure domestic Tranquility,
provide for the common defence,
promote the general Welfare, and secure
the Blessings of Liberty to ourselves and
our Posterity, do ordain and establish this
Constitution for the United States of America.

SIGNATURE OF BEARER / SIGNATURE DU TITULAIRE / FIRMA DEL TITULAR

PASSPORT
PASSEPORT
PASAPORTE

USA

UNITED STATES OF AMERICA

Type / Type / Tipo: P
Code / Code / Código: USA
Passport No. / No. du Passeport / No. de Pasaporte: [redacted]

Surname / Nom / Apellidos
HAY

Given Names / Prénoms / Nombres
REYNELL D

Nationality / Nationalité / Nacionalidad
UNITED STATES OF AMERICA

Date of birth / Date de naissance / Fecha de nacimiento
[redacted]

Place of birth / Lieu de naissance / Lugar de nacimiento
NEW YORK, U.S.A.

Sex / Sexe / Sexo
M

Date of issue / Date de délivrance / Fecha de expedición
24 Jun 2021

Authority / Autorité / Autoridad
United States
Department of State

Date of expiration / Date d'expiration / Fecha de caducidad
23 Jun 2031

Endorsements / Mentions Spéciales / Anotaciones
SEE PAGE 27

USA

P<USAHAY<<REYNELL<D<<<<<<<<<<<<<<<<<<<<<<<<<<

Wealth Management
9665 Wilshire Blvd
Suite 600
Beverly Hills, CA 90212

direct 310 285 2600
toll free 800 669 4866

Morgan Stanley

May 23, 2024

CITY OF STOCKBRIDGE
4640 N. HENRY BLVD
STOCKBRIDGE, GA 30281

Re: REYNELL HAY

To Whom It May Concern:

Please be advised that REYNELL HAY (the "Client") maintains the following brokerage accounts (the "Accounts") at Morgan Stanley Smith Barney LLC ("Morgan Stanley") which contains assets, including cash and marketable securities, valued, as of the close of business on May 22, 2024, in excess of $2,400,000.

A/C Number	A/C Title
	MSL FBO REYNELL HAY
	MSL FBO REYNELL HAY

We are presenting the information contained herein pursuant to our Client's request. It is valid as of the date of issuance. Morgan Stanley does not warrant or guarantee that such identified securities, assets or monies will remain in the Client's Accounts. The Client has the ability to withdraw assets from the Account(s) at any time.

Accounts nd are currently being used to collateralize a Liquidity Access Line ("LAL") line of credit issued by Morgan Stanley Bank, N.A. and/or Morgan Stanley Private Bank, National Association. Notwithstanding any other representations in this letter, assets required to maintain the LAL cannot be withdrawn unless Morgan Stanley Bank, N.A. and/or Morgan Stanley Private Bank, National Association agrees to release excess collateral or the LAL is paid off. This letter does not create a security interest or convey collateral rights to any party.

Thank you for your time and consideration in this matter.

Sincerely,

Marie Goldschmidt

Marie Goldschmidt
Risk Officer

cc: REYNELL HAY

Wealth Management
9665 Wilshire Blvd.
Suite 600
Beverly Hills, CA 90212

direct 310 285 2600
toll free 800 669 4866

Morgan Stanley

May 23, 2024

CITY OF STOCKBRIDGE
4640 N. HENRY BLVD
STOCKBRIDGE, GA 30281

Re: Shafer Smith

To Whom It May Concern:

Please be advised that Shafer Smith (the "Client") maintains the following brokerage accounts (the "Accounts") at Morgan Stanley Smith Barney LLC ("Morgan Stanley") which contains assets, including cash and marketable securities, valued, as of the close of business on May 22, 2024, in excess of $2,500,000.

A/C Number	A/C Title
	MSL FBO SHAFER SMITH
	MSL FBO SHAFER SMITH

We are presenting the information contained herein pursuant to our Client's request. It is valid as of the date of issuance. Morgan Stanley does not warrant or guarantee that such identified securities, assets or monies will remain in the Client's Accounts. The Client has the ability to withdraw assets from the Account(s) at any time.

ınd currently being used to collateralize a Liquidity Access Line ("LAL") line of credit issued by Morgan Stanley Bank, N.A. and/or Morgan Stanley Private Bank, National Association. Notwithstanding any other representations in this letter, assets required to maintain the LAL cannot be withdrawn unless Morgan Stanley Bank, N.A. and/or Morgan Stanley Private Bank, National Association agrees to release excess collateral or the LAL is paid off. This letter does not create a security interest or convey collateral rights to any party.

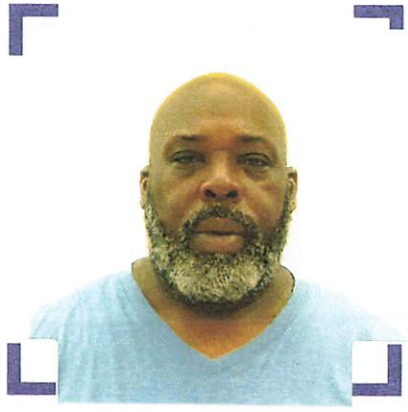
Thank you for your time and consideration in this matter.

Sincerely,

Marie Goldschmidt

Marie Goldschmidt
Risk Officer

cc: SHAFER SMITH



Ready to go?

Get up to date with all your vaccines*

Talk to your pharmacist or learn more at **Walgreens.com/Immunizations**

Walgreens

*Vaccines subject to availability. State-, age- and health-related restrictions may apply.

LOTTERY APPLICATION TRACKING SHEET

Date Received: 5/31/24 Application No.: 7

Applicant Name: Rujuta Patel

Proposed business and name: Jodeco Bottle Shop

CHECKLIST:

- ✓ Complete Application and Documents: _____ or Missing: fingerprints 6/3/2024
- ✓ $750 Non-Refundable Application Fee: yes Date Processed: 5/31/24
- ✓ Fieldprint Background Check Information Received: yes
- ✓ Notarized Financial Statement Received: _____
- ✓ Copy of Government Issued ID Received: _____
- ✓ Emailed ~~applicant~~ Given in person 5/31 receipt/CC approval code/lottery process timeline: _____
- ✓ Redacted Copy of Application Sent to ~~City Clerk~~ Ryan on: (date) 6/3/24

Any Notes:
amit_patel81@hotmail.com

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

APPLICATION
(Lottery Application ONLY)

NOTE: USE SEPARATE PAGES AND/OR ATTACHMENTS, AS NECESSARY

1. Type(s) of license applied for:
   - (X) Alcohol License
   - ( ) Tire Shop
   - ( ) Used Car Dealership
   - ( ) Used Appliance Shop
   - ( ) Thrift store and Consignment Shop
   - ( ) Pawnshop
   - ( ) Vape Shop
   - ( ) Precious Metals

2. Proposed license is a (n):
   - (X) Individual
   - ( ) Partnership
   - ( ) Corporation
   - ( ) LLC
   - ( ) other legal entity (explain)

_____

3. Applicant information:

Name: Rujuta Patel

Title/Position: Owner

Are you a citizen of the United States: ✓ yes _____ no

Where were you born? India

Present home address: _____

County of Forsyth Number of years at present address 4

Contact information: Business phone #: 404-723-1734

Home phone #: 404-723-2671

How long have you been a resident of Georgia? 17yrs Henry Co? _____

What has been your occupation for the past five (5) years? Business Owner

4. Applicant's relationships with other persons with 1st degree of kinship.

Immediate living relatives:
(Please list all immediate living wife, children, parents, brothers, sisters, and parents)
(Attach separate sheet(s) if necessary)

Name: Amit. Patel Age: 42 yrs

Relationship: Husband Live with or apart: with

Name: Aarin. Patel Age: 12 yrs

Relationship: Son Live with or apart: with

Name: Niva. Patel Age: 6 yrs

Relationship: Daughter Live with or apart: with

Name: _____ Age: _____

Relationship: _____ Live with or apart: _____

5. Proposed business name and address:

Business name: _____

Address: Parcel ID - 071A01048000
Jodeco Road

6. Corporations: If operating as a corporation, please complete the following:

Corporation name: _____

Address: _____

_____

Date of Incorporation: _____ Where Incorporated: _____

Type of Corporation: _____

Corporate Officers: *Please list each (attach a separate sheet if necessary)*

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

7. **Stockholder information – applies to any "closely held" stock, not publicly traded and to all stockholders who own more than 10% of the outstanding capital stock of the corporation. DO NOT FILL OUT THIS INFORMATION FOR PUBLICLY TRADED CORPORATIONS. In lieu thereof, please indicate by attached sheet as to whether any affiliate, related company, holding company, subsidiary or other organization holds any form of alcohol license in the City of Stockbridge, or any distilled spirits package sale license within the State of Georgia.**

8. If operating as a corporation, list stockholders with addresses and the amount of interest of each stockholder in the corporation. ***Please list each (attach a separate sheet if necessary)***

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

9. Limited Liability Company (LLC): If operating as a company, please complete the following:

Company name: _____

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of LLC (member managed or manager managed):_____

LLC members with an ownership interest: ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

10. Limited Liability Partnership (LLP), Partnerships, Sole Proprietorships, and any other forms of business entity: If operating as a partnership or other form of business entity, please complete the following:

Entity name: _____

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of Partnership: _____

Partnership members with an ownership interest. ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

If more than 4 members, partners, or stockholders, please provide the name, address, social security number and ownership interest of additional parties at interest, by separate sheet.

11. Registered Agent

If the proposed license is a legal entity, please provide name of its registered agent:

Agent(s) name: _____

Address: _____

Telephone Number: _____

12. Store Manager, Managing Member, Managing Partner, or other person in charge:
What is the name of the person who, if the license is granted, will be the active manager of the business and on the job at the business?

Full name: Rujuta Patel

(Please complete the site manager's personal statement, attached)

13. Convictions:
Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (15) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

No

14. Location ownership
Do you own the land and building on which the business is to be operated?

_____ Yes ✓ No If Yes, when did you buy it? _____
(Attach proof of ownership)

If not the owner, please complete the following and attach a copy of the lease, option, and any other pertinent documents:

Owner/Agent of Property: _____

Amount of rent: _____ Frequency Paid: _____

Is the amount of rent a set amount? _____ Yes _____ No

If NO, please explain how it is determined: _____

15. If you have an option, or other legal, binding document to buy, lease the building, please explain the general terms: _____

16. Zoning
What is the current zoning on the proposed property location? Commercial

17. Location Certification
If this is the first application for a license for this business, please attach a current certificate from a registered surveyor containing the following information:

(1) A scale drawing of the building or proposed building as situated on the proposed lot.
(2) Proposed parking available to the building.

NOTE: NOT Required for a retail package alcohol license until the applicant is chosen for a license.

18. Financial Interest – Does the applicant or interested parties to this Application:

A. Have any financial interest in any similar business?

_____ Yes ✓ No

B. Received any financial aid or assistance from any similar business?

_____ Yes ✓ No

19. Other Interests:
Do you; any member of your family (children, spouse, parents, siblings) or any of the other owners, partners, or stockholders:

A. Have any interest, financial or otherwise, in other similar businesses or establishments?
✓ Yes _____ No

If YES, please list:
T. J. Marathon, Barnesville, GA (Gas Station)

B. Own, lease, sub-lease any real estate which is occupied by a similar business. If so, give the location information as to any lease or rental agreement including rents received and who it was rented to: _____ Yes ✓ No

If YES, please list:

C. Serve as the Executor or Administrator or Beneficiary of Heir of any estate having an interest in any similar business or establishment?

_____ Yes ✓ No

If YES, please list:

D. Serve as Beneficiary or Trustee of any Trust Fund having an interest in any similar business or establishment?

_____ Yes ✓ No

If YES, please list:

20. Financial Gain
Please list all parties who will receive any financial gain or payment derived from any interest or income as a result of the operation that this application applies to. (Please include any owners, partners, members, officers, or principal stockholders)

Rujuta Patel

21. Other Jurisdictions
List other jurisdictions in which any applicant, partner, member, corporate officer, or stockholder holds a similar occupational tax certificate, regulatory license, or alcoholic beverage license:

None

List all details of denial of any such licenses in any other jurisdiction:

None

22. Are you familiar with the City of Stockbridge Ordinances, State laws and regulations, Federal laws and regulations governing the operations of this type of business?

✓ Yes _____ No

(City of Stockbridge Ordinance 9.04 Alcoholic Beverage)

23. Restrictions Alcohol ONLY

Ordinance 9.04.090

1. No retail license for the sale of distilled spirits shall be issued unless the location is located within five hundred (500) feet of the streets or roads designated in the following three (3) areas and has direct access onto such streets or roads:

   Area 1: Those portions of Mount Zion Boulevard and Highway 138 lying west of I-75;
   Area 2: Those portions of Highway 138 and North Henry Boulevard lying east of I-75;

   Area 3: Those portions of Eagles Landing Parkway/Hudson Bridge Road from their intersection with the west right-of-way line of Highway 42 to the west city limits line.

24. Do you agree to abide by such ordinances, laws, and regulations?

    ✓ Yes _____ No

25. Do you have any questions or comments regarding the ordinances, laws, regulations, or application?

    _____ Yes ✓ No

    If YES, please list:

    _____

    _____

Georgia, Henry County, City of Stockbridge

I, Rujuta. Patel, being duly sworn according to the law, do swear that the facts and things stated by me in the above and foregoing answers to questions are true, and no false, or fraudulent statement is made herein, and such answers were made in order to produce the granting of such license.

Patel

Signature of Applicant

Rujuta. Patel

Print Name

Owner

Title of Applicant

Subscribed and Sworn before me on this the 31ST day of MAY, 2024

Bushra Khan

NOTARY PUBLIC signature

MARCH 29 2027

Notary Commission Expires

BUSHRA KHAN

NOTARY PUBLIC printed name

BUSHRA KHAN
NOTARY PUBLIC
Forsyth County
State of Georgia
My Comm. Expires Mar. 29, 2027

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

SITE MANAGER'S PERSONAL INFORMATION
Alcohol License ONLY

(To be attached to Application)
(A photo of the manager must be attached to this form)

1. **Business Name**
   (Please complete for the business you are applying as a manager for)

   Business Name: _____

   Address: Parcel ID - 071A01048000. Jodeco Road

2. **Manager's name and address:**

   Name: Rujuta Patel

   Home address:

   Phone number: 404-723-2671

3. **Personal identification information:**

   Race: Asian Sex: F Height: 5'5 Weight: 155lbs Age: 39yrs

   Color of hair: Black Color of eyes: Brown

4. **Manager's birth information:**

   Location of birth: India

   Date of birth: _____

5. **Spousal information: (If married, please complete)**

   Spouse's full name: Amit Patel

   Maiden name if applicable: _____

   Date of Birth _____ Date married _____

   Employer: Niva Real Estate LLC

6. **Employment record:**
(*Please list your previous employment information for the last past 10 years) (Attach separate sheet if necessary)*

Employer: T. J. Marathon
Location: Barnesville, GA Dates – From:____ To: ____ June'21 to Current

Employer: Niva Real Estate LLC
Location: Villa Rica, GA Dates – From:____ To: ____ April'18 to Current

Employer: Johns Creek Christian Church School
Location: Johns Creek, GA Dates – From:____ To: ____ Nov'14 to March'20

7. **Financial interest:**

Do you or your spouse, or any member of your family:

A. Have any interest, financial or otherwise, in other malt beverage, wine, or distilled spirits stores or establishments? ✓ Yes _____ No

If YES, please list:

T. J. Marathon, Barnesville GA

B. Ever been denied a license or had a license revoked? _____ Yes ✓ No

If YES, please list:

8. **Prior residences:**
(Please list all residences you have had in the past ten (10) years.) *(Include a separate sheet if necessary)*

Street Address	City	State	Years
			4yrs (Aug'20 - curre
			Aug 2018 - July 2020)
			Aug 2013 - July 2018

9. **Tax return:**
Did you file a Georgia tax return last year?

_____ Yes _____ No

10. Convictions:

Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (10) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

No

Charge: _____

Place of arrest: _____ Date: _____

Disposition: _____

11. Personal References:

(Please list three personal references not related to you, whom you have known for at least five years)

Name: Priya. Patel Phone #: 862-222-5384

Address:

Name: Naiya. Patel Phone #: 251-607-8253

Address:

Name: Shahista. Jinnah Phone #: 404-769-8759

Address:

12. Emergency Contact:

Contact name: Amit. Patel Phone #: 404-723-1734

I, Rujuta Patel, do solemnly swear, that the foregoing statements are true. I understand that any falsehoods are grounds for automatic dismissal of this application.

Patel
Signature of Manager

Rujuta Patel
Print Name

Owner / Manager
Title of Applicant

Subscribed and Sworn before me on this the 31ST day of MAY, 2024

NOTARY PUBLIC signature

MARCH 29th 2027
Notary Commission Expires

BUSHRA KHAN
NOTARY PUBLIC printed name

BUSHRA KHAN
NOTARY PUBLIC
Forsyth County
State of Georgia
My Comm. Expires Mar. 29, 2027

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

BACKGROUND AND SECURITY CLEARANCE FORM
OWNER, APPLICANT, MANAGER
Alcohol License ONLY

Authorization for Release of Personal Information
(Attach photocopy of Social Security Card and Photo ID)

I, Rujuta Patel, do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the City of Stockbridge, whether said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure pertaining to the background investigation necessary to process my application as required under the Alcohol Beverage Ordinance (Chapter 9) governing licensing in the City.

I also certify that any person, firm, or other entity ("the providing entity") who may furnish such information concerning me, shall not be held liable or accountable for giving this information and I do hereby fully and completely release the providing entity from all liability, which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the photocopy does not contain the original writing of my signature.

Bushra Khan
Notary

March 29th 2027
Notary Commission Expires

BUSHRA KHAN
NOTARY PUBLIC
Forsyth County
State of Georgia
My Comm. Expires Mar. 29, 2027

Patel
Signature

05/31/2024
Date

Date of Birth

Social Security Number

Driver's License Number

5'5
Height

155 lbs
Weight

City of Stockbridge

SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

Instructions: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

Rujuta Patel

Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity.

Address of applicant named above

404-723-2671

Telephone Number

Name of business, corporation for whom application is being made.

OCCUPATIONAL TAX CERTIFICATE

Category of Public Benefit

1. ✓ I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. _____ I am a legal permanent resident of the United States.
3. _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

_____.

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the back of this form.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this affidavit? : Passport

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

MUST BE COMPLETED BY NOTARY

I, _____ {representative for} _____

(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

Patel

Signature of Applicant

05/31/2024

Date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 31st DAY OF MAY, 2024

Executed in Cumming (City), GA (State)

BUSHRA KHAN
NOTARY PUBLIC
Forsyth County
State of Georgia
My Comm. Expires Mar. 29, 2027

Bushra Khan

NOTARY PUBLIC Signature

March 29th 2027

My Commission Expires

SECURE AND VERIFIABLE DOCUMENTS

The following list of secure and verifiable documents, published under the authority of O.C.G.A § 50-36-2 contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative or residency or immigration status.

- A United States passport or passport card
- A United States military identification card
- A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A tribal identification card of the federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer. A listing of the federally reorganized Native American tribes may be found at: http//www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm
- A United States Permanent Resident Card or Alien Registration Receipt Card
- An Employment Authorization Document that contains a photograph of the bearer
- A passport issued by a foreign government, must have I-94 attached
- A Merchant Mariner Document Mariner Credential issued by the United States Coast Guard
- A Free and Secure Trade (FAST) card
- A NEXUS card
- A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card
- A driver's license issued by a Canadian government
- A Certificate of Citizenship issued by the United States Department of Citizenship
- Immigration Services (USCIS) (Form N-560 or Form N-561)
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570)

SOCIAL SECURITY

THIS NUMBER HAS BEEN ESTABLISHED FOR

RUJUTABEN VATSALBHAI PATEL

SIGNATURE

08/20/2007

GEORGIA IDENTIFICATION CARD

IDENTIFICATION CARD ID USA GA

Governor:

4d ID NO

IOB

4b EXP 05/05/2032

2 RUJUTA

1 PATEL

FORSYTH

Commissioner:

4a ISS 01/11/2024

15 SEX F 18 EYES BRO

16 HGT 5'-05" 17 WGT 155 lb 5/05/1981

5 DD

ORGAN DONOR

We the People

Of the United States,

in Order to form a more perfect Union, establish Justice, insure domestic Tranquility, provide for the common defense, promote the general Welfare, and secure the Blessings of Liberty to ourselves and our Posterity, do ordain and establish this Constitution for the United States of America.

SIGNATURE OF BEARER / SIGNATURE DU TITULAIRE / FIRMA DEL TITULAR

PASSPORT
PASSEPORT
PASAPORTE

USA

UNITED STATES OF AMERICA

Type / Type / Tipo: P

Code / Code / Codigo: USA

Passport No. / No. du Passeport / No. de Pasaporte

Surname / Nom / Apellidos

PATEL

Given Names / Prénoms / Nombres

RUJUTA

Nationality / Nationalité / Nacionalidad

UNITED STATES OF AMERICA

Date of birth / Date de naissance / Fecha de nacimiento

Place of birth / Lieu de naissance / Lugar de nacimiento

INDIA

Sex / Sexe / Sexo

F

Date of issue / Date de délivrance / Fecha de expedición

05 Apr 2019

Authority / Autorité / Autoridad

United States Department of State

Date of expiration / Date d'expiration / Fecha de caducidad

04 Apr 2029

Endorsements / Mentions Spéciales / Anotaciones

SEE PAGE 27

USA

AJ ACCOUNTING SERVICES LLC

1145 Peachtree Industrial Boulevard, Suite B06, Suwanee, GA 30024 Tel: 678 743 7285
info@ajaccountingservices.com
www.ajaccountingservices.com

May 31, 2024

Sub: Rujuta Patel - Net Worth Estimate
SSN

To whom it may concern

Dear Sir/ Madam,

This letter is to inform you that Rujuta Patel, SSN# as net worth of $512,100.
Please find below calculations.

Rujuta Patel 50% of Primary Home	196,100.00
Arihant C Stores LLC 19% Owner	76,000.00
Arihant C Stores I LLC 25% Owner	62,500.00
Niva Real Estate LLC 30%	127,500.00
Bank	50,000.00
Total	**512,100.00**

If you have any questions, please contact me at C:470-406-1428

Thanks and kind regards,

Archana Jitendra, ERA
AJ Accounting Services LLC

R. Patel
Applicant

R. Patel
Signature

05/31/24
Date

Tammy M. Reilly
5/31/24

TAMMY M. REILLY
NOTARY
EXPIRES
GEORGIA
01-31-2026
PUBLIC
NEWTON COUNTY

LOTTERY APPLICATION TRACKING SHEET

Date Received: 6/6/2024 Application No.: 8

Applicant Name: Hemal Kumar Patel

Proposed business and name: 050-0100302 or 053-01017005 OR 053-01018000

053-01017005 is not in the City but the parcel touches our boundaries and could go through the annexation process

CHECKLIST:

- ✓ Complete Application and Documents: _____ or Missing: _____
- ✓ $750 Non-Refundable Application Fee: yes Date Processed: 6/4/2024
- ✓ Fieldprint Background Check Information Received: Yes - approved
- ✓ Notarized Financial Statement Received: yes
- ✓ Copy of Government Issued ID Received: yes
- ✓ ~~Emailed~~ Emailed applicant receipt/CC approval code/lottery process timeline: yes
- ✓ Redacted Copy of Application Sent to ~~City Clerk~~ Ryan on: (date) 6/6/24

Any Notes:

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

APPLICATION
(Lottery Application ONLY)

NOTE: USE SEPARATE PAGES AND/OR ATTACHMENTS, AS NECESSARY

1. Type(s) of license applied for:
   - (✓) Alcohol License
   - ( ) Tire Shop
   - ( ) Used Car Dealership
   - ( ) Used Appliance Shop
   - ( ) Thrift store and Consignment Shop
   - ( ) Pawnshop
   - ( ) Vape Shop
   - ( ) Precious Metals

2. Proposed license is a (n):
   - (✓) Individual
   - ( ) Partnership
   - ( ) Corporation
   - ( ) LLC
   - ( ) other legal entity (explain)

_____

3. Applicant information:

Name: PATEL HEMALKUMAR

Title/Position: OWNER

Are you a citizen of the United States: ___ yes ✓ no

Where were you born? INDIA

Present home address: _____

County of HENRY Number of years at present address 6

Contact information: Business phone #: _____

Home phone #: (229) 886-0921

How long have you been a resident of Georgia? 12 Henry Co? 6

What has been your occupation for the past five (5) years? PCON LLC

MRT LLC

4. Applicant's relationships with other persons with 1st degree of kinship.

Immediate living relatives:
(Please list all immediate living wife, children, parents, brothers, sisters, and parents)
(Attach separate sheet(s) if necessary)

Name: KINNARIBEN PATEL Age: 48

Relationship: WIFE Live with or apart: Live With

Name: KATHA PATEL Age: 21

Relationship: DAUGHTER Live with or apart: Live with

Name: BHAKTI PATEL Age: 16

Relationship: DAUGHTER Live with or apart: Live with

Name: _____ Age: _____

Relationship: _____ Live with or apart: _____

5. Proposed business name and address:

Business name: Decided Later on

Address: Rock quary Road 050-01003021
Jodeco Road 053-01017005 / 053-01018000

6. Corporations: If operating as a corporation, please complete the following:

Corporation name: -N/A

Address: _____

_____

Date of Incorporation: _____ Where Incorporated: _____

Type of Corporation: _____

Corporate Officers: *Please list each (attach a separate sheet if necessary)*

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

7. **Stockholder information – applies to any "closely held" stock, not publicly traded and to all stockholders who own more than 10% of the outstanding capital stock of the corporation. DO NOT FILL OUT THIS INFORMATION FOR PUBLICLY TRADED CORPORATIONS. In lieu thereof, please indicate by attached sheet as to whether any affiliate, related company, holding company, subsidiary or other organization holds any form of alcohol license in the City of Stockbridge, or any distilled spirits package sale license within the State of Georgia.**

8. If operating as a corporation, list stockholders with addresses and the amount of interest of each stockholder in the corporation. ***Please list each (attach a separate sheet if necessary)***

Stockholder Name: - N/A - Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

9. Limited Liability Company (LLC): If operating as a company, please complete the following:

Company name: _____

Address: - N/A -

_____

Date of Formation: _____ Where Formed (State): _____

Type of LLC (member managed or manager managed):_____

LLC members with an ownership interest: ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

10. Limited Liability Partnership (LLP), Partnerships, Sole Proprietorships, and any other forms of business entity: If operating as a partnership or other form of business entity, please complete the following:

Entity name: — N/A.

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of Partnership: _____

Partnership members with an ownership interest. ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

If more than 4 members, partners, or stockholders, please provide the name, address, social security number and ownership interest of additional parties at interest, by separate sheet.

11. Registered Agent

If the proposed license is a legal entity, please provide name of its registered agent:

Agent(s) name: — N/A.

Address: _____

Telephone Number: _____

12. Store Manager, Managing Member, Managing Partner, or other person in charge:
What is the name of the person who, if the license is granted, will be the active manager of the business and on the job at the business?

Full name: Self

(Please complete the site manager's personal statement, attached)

13. Convictions:
Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (15) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

-N/A-.

14. Location ownership
Do you own the land and building on which the business is to be operated?

_____ Yes ✓ No If Yes, when did you buy it? _____
(Attach proof of ownership)

If not the owner, please complete the following and attach a copy of the lease, option, and any other pertinent documents:

Owner/Agent of Property: _____

Amount of rent: _____ Frequency Paid: _____

Is the amount of rent a set amount? _____ Yes _____ No

If NO, please explain how it is determined: _____

15. If you have an option, or other legal, binding document to buy, lease the building, please explain the general terms: _____

-N/A.

16. Zoning
What is the current zoning on the proposed property location? -N/A.

17. Location Certification
If this is the first application for a license for this business, please attach a current certificate from a registered surveyor containing the following information:

(1) A scale drawing of the building or proposed building as situated on the proposed lot.
(2) Proposed parking available to the building.

NOTE: NOT Required for a retail package alcohol license until the applicant is chosen for a license.

18. Financial Interest – Does the applicant or interested parties to this Application:

A. Have any financial interest in any similar business?

✓ Yes _____ No

B. Received any financial aid or assistance from any similar business?

_____ Yes ✓ No

19. Other Interests:
Do you; any member of your family (children, spouse, parents, siblings) or any of the other owners, partners, or stockholders:

A. Have any interest, financial or otherwise, in other similar businesses or establishments?
✓ Yes _____ No

If YES, please list:

Marut Nandan LLC (TIN: 81-3046903)
d/b/a Spalding Liquor,

B. Own, ~~lease~~, sub-~~lease~~ any real estate which is occupied by a similar business. If so, give the location information as to any ~~lease~~ or ~~rental~~ agreement including ~~rents~~ received and who it was rented to: _____ Yes ✓ No

If YES, please list:

Own

C. Serve as the Executor or Administrator or Beneficiary of Heir of any estate having an interest in any similar business or establishment?

✓ Yes _____ No

If YES, please list:

Executive

D. Serve as Beneficiary or Trustee of any Trust Fund having an interest in any similar business or establishment?

_____ Yes ✓ No

If YES, please list:

20. Financial Gain
Please list all parties who will receive any financial gain or payment derived from any interest or income as a result of the operation that this application applies to. (Please include any owners, partners, members, officers, or principal stockholders)

None

21. Other Jurisdictions
List other jurisdictions in which any applicant, partner, member, corporate officer, or stockholder holds a similar occupational tax certificate, regulatory license, or alcoholic beverage license:

Spalding County

List all details of denial of any such licenses in any other jurisdiction:

N/A.

22. Are you familiar with the City of Stockbridge Ordinances, State laws and regulations, Federal laws and regulations governing the operations of this type of business?

✓ Yes _____ No

(City of Stockbridge Ordinance 9.04 Alcoholic Beverage)

23. Restrictions Alcohol ONLY

Ordinance 9.04.090

1. No retail license for the sale of distilled spirits shall be issued unless the location is located within five hundred (500) feet of the streets or roads designated in the following three (3) areas and has direct access onto such streets or roads:

   Area 1: Those portions of Mount Zion Boulevard and Highway 138 lying west of I-75;
   Area 2: Those portions of Highway 138 and North Henry Boulevard lying east of I-75;

   Area 3: Those portions of Eagles Landing Parkway/Hudson Bridge Road from their intersection with the west right-of-way line of Highway 42 to the west city limits line.

24. Do you agree to abide by such ordinances, laws, and regulations?

    ✓ Yes _____ No

25. Do you have any questions or comments regarding the ordinances, laws, regulations, or application?

    ✓ Yes _____ No

    If YES, please list:

    _____

    _____

Georgia, Henry County, City of Stockbridge

I, Hemalkumar Patel, being duly sworn according to the law, do swear that the facts and things stated by me in the above and foregoing answers to questions are true, and no false, or fraudulent statement is made herein, and such answers were made in order to produce the granting of such license.

Signature of Applicant

Hemalkumar Patel
Print Name

Owner
Title of Applicant

Subscribed and Sworn before me on this the 29th day of May, 2024

NOTARY PUBLIC signature

July 26, 2027
Notary Commission Expires

Brooke N. Smith
NOTARY PUBLIC printed name

BROOKE NICOLE SMITH
NOTARY PUBLIC
EXPIRES
GEORGIA
JULY 26, 2027
SPALDING COUNTY GA

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

SITE MANAGER'S PERSONAL INFORMATION
Alcohol License ONLY

(To be attached to Application)
(A photo of the manager must be attached to this form)

1. **Business Name**
   (Please complete for the business you are applying as a manager for)

   Business Name: TBD

   Address: ~~N/A~~ - See pg 2

2. **Manager's name and address:**

   Name: - N/A -

   Home address: _____

   Phone number: _____

3. **Personal identification information:**

   Race: _____ Sex: _____ Height: _____ Weight: _____ Age: _____

   Color of hair: _____ Color of eyes: _____

4. **Manager's birth information:**

   Location of birth: _____

   Date of birth: _____

5. **Spousal information: (If married, please complete)**

   Spouse's full name: _____

   Maiden name if applicable: _____

   Date of Birth: _____ Date married: _____

   Employer: _____

6. **Employment record:**
(Please list your previous employment information for the last past 10 years) (Attach separate sheet if necessary)

Employer: _____

Location: _____ Dates – From:____ To: ____

Employer: _____

Location: _____ Dates – From:____ To: ____

Employer: _____

Location: _____ Dates – From:____ To: ____

7. **Financial interest:**

Do you or your spouse, or any member of your family:

A. Have any interest, financial or otherwise, in other malt beverage, wine, or distilled spirits stores or establishments? _____ Yes _____ No

If YES, please list:

_____

_____

B. Ever been denied a license or had a license revoked? _____ Yes ____ No

If YES, please list:

_____

_____

8. **Prior residences:**
(Please list all residences you have had in the past ten (10) years.) *(Include a separate sheet if necessary)*

Street Address	City	State	Years

9. **Tax return:**
Did you file a Georgia tax return last year?

✓ _____ Yes _____ No

10. Convictions:

Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (10) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

_____

_____

N/A

Charge: _____

Place of arrest: _____ Date: _____

Disposition: _____

11. Personal References:

(Please list three personal references not related to you, whom you have known for at least five years)

Name: _____ Phone #: _____

Address: _____

Name: _____ Phone #: _____

Address: N/A

Name: _____ Phone #: _____

Address: _____

12. Emergency Contact:

Contact name: _____ Phone #: _____

I, Hemalkumar Patel, do solemnly swear, that the foregoing statements are true. I understand that any falsehoods are grounds for automatic dismissal of this application.

Signature of Manager

Hemalkumar Patel
Print Name

Owner
Title of Applicant

Subscribed and Sworn before me on this the 29th day of May, 2024

NOTARY PUBLIC signature

July 26, 2027
Notary Commission Expires

Brooke N. Smith
NOTARY PUBLIC printed name

BROOKE NICOLE SMITH
NOTARY
EXPIRES
GEORGIA
JULY 26, 2027
PUBLIC
SPALDING COUNTY, GA

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

BACKGROUND AND SECURITY CLEARANCE FORM
OWNER, APPLICANT, MANAGER
Alcohol License ONLY

Authorization for Release of Personal Information
(Attach photocopy of Social Security Card and Photo ID)

I, Hemalkumar Patel, do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the City of Stockbridge, whether said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure pertaining to the background investigation necessary to process my application as required under the Alcohol Beverage Ordinance (Chapter 9) governing licensing in the City.

I also certify that any person, firm, or other entity ("the providing entity") who may furnish such information concerning me, shall not be held liable or accountable for giving this information and I do hereby fully and completely release the providing entity from all liability, which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the photocopy does not contain the original writing of my signature.

Notary

July 26, 2027
Notary Commission Expires

BROOKE NICOLE SMITH
NOTARY
EXPIRES
GEORGIA
JULY 26, 2027
PUBLIC
SPALDING COUNTY, GA

Signature

Date

Date of Birth

Social Security Number

Driver's License Number

5' 08"
Height

130
Weight

City of Stockbridge

SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

Instructions: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

Hemalkumar Patel

Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity.

Address of applicant named above

(229) 886-0921

Telephone Number

Name of business, corporation for whom application is being made.

OCCUPATIONAL TAX CERTIFICATE

Category of Public Benefit

1. _____ I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. ✓ I am a legal permanent resident of the United States.
3. _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

_____.

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the back of this form.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this affidavit? :_____

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

MUST BE COMPLETED BY NOTARY

I, Hemalkumar Patel {representative for} _____
(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

Signature of Applicant

05/29/2024

Date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 29th DAY OF May, 2024

Executed in Griffin (City), GA (State)

July 26, 2027

NOTARY PUBLIC Signature

My Commission Expires

BROOKE NICOLE SMITH NOTARY PUBLIC SPALDING COUNTY, GA EXPIRES GEORGIA JULY 26, 2027

SECURE AND VERIFIABLE DOCUMENTS

The following list of secure and verifiable documents, published under the authority of O.C.G.A § 50-36-2 contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative or residency or immigration status.

- A United States passport or passport card
- A United States military identification card
- A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A tribal identification card of the federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer. A listing of the federally reorganized Native American tribes may be found at: http//www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm
- A United States Permanent Resident Card or Alien Registration Receipt Card
- An Employment Authorization Document that contains a photograph of the bearer
- A passport issued by a foreign government, must have I-94 attached
- A Merchant Mariner Document Mariner Credential issued by the United States Coast Guard
- A Free and Secure Trade (FAST) card
- A NEXUS card
- A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card
- A driver's license issued by a Canadian government
- A Certificate of Citizenship issued by the United States Department of Citizenship
- Immigration Services (USCIS) (Form N-560 or Form N-561)
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570)

(photocopy for each applicant)

PERSONAL FINANCIAL STATEMENT

As of 04/18/2024

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any person or entity providing a guaranty on the loan.

Name(s)		Business Phone
HEMALKUMAR PATEL		(229) 886-0921
Residence Address		Residence Phone
City	State	ZIP
Business Name of Applicant/Borrower		

ASSETS (Omit Cents)		LIABILITIES (Omit Cents)	
Cash on hands & in Banks	$ 300,000	Accounts Payable	$
Savings Accounts	$	Notes Payable to Banks and Others (Describe in Section 2)	$
IRA or Other Retirement Account	$	Installment Account (Auto) Mo. Payments	$ 20,000
Accounts & Notes Receivable	$ 250,000	Installment Account (Other) Mo. Payments	$
Life Insurance--Cash Surrender Value Only (Complete Section 8)	$ 40,000	Loan on Life Insurance	$
Stocks & Bonds (Describe in Section 3)	$ 70,000	Mortgages on Real Estate (Describe in Section 4)	$ 216,191
Real Estate Describe in Section 4)	$ 575,000	Unpaid Taxes (Describe in Section 6)	$
Automobile--Present Value	$ 83,000	Other Liabilities (Describe in Section 7)	$
Other Personal Property (Describe in Section 5)	$	Total Liabilities	$ 236,191
Other Assets (Describe in Section 5)	$ 3,470,000	Net Worth	$ 4,551,809
	$	Total	$ 4,788,000
Total	$ 4,788,000		

Section 1. Source of Income		Contingent Liabilities	
Salary	$ 24,000	As Endorser or Co-Maker	$
Net Investment Income	$	Legal Claims & Judgments	$
Real Estate Income	$	Provision for Federal Income Tax	$
Other Income (Describe below)*	$ 134,858	Other Special Debt	$

Description of Other Income in Section 1.

k1 INCOME OF MARUT NANDAN LLC : 131,710
K1 INCOME OF MRT LLC : 3,148

* Alimony or child support need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance or Credit Limit	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

PERSONAL FINANCIAL STATEMENT (Page 2)

Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).

Number of Shares	Names of Securities	Cost($)	Market Value($) Quotation/Exchange	Date of Quotation/Exchange	Total Value($)
	VARIOUS	80,000			70,000

Section 4. Real Estate Owned. (List each parcel separately. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C	Property D
Type of Property	RENSIDENT HOUSE			
Address				
Percent Interest in property				
Date Purchased	09/2018			
Original Cost (x % interest)	399,000			
Present Mkt Value (x % interest)	575,000			
Name & Address of Mortgage Holder				
Mortgage Account Number				
Mortgage Balance (x % interest)	216,191			
Amt of Pmt./Mo. (x % interest)	1,371			
Rental Income/Mo. (if applicable)				
Status of Mortgage	ACTIVE			

Section 5. Other Personal Property and Other Assets. (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment, and if delinquent, describe delinquency)

JEWELRY $40,000
Business value of MARUT NANDAN LLC & MRT LLC : $3,430,000

Section 6. Unpaid Taxes. (Describe in detail as to type, to whom payable, when due, amount and to what property, if any, a tax lien attaches).

Section 7. Other Liabilities. (Describe in detail).

Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries).

Company	Face Amount	Cash Value	Beneficiary

I authorize Lender/Broker and/or any of its agents, employees and lending partners in connection to making the commercial loan to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001.

Signature: Date: 05/29/2024 Social Security No.: [illegible] 02-6356

Signature: Date: Social Security No.:

BROOKE NICOLE SMITH NOTARY PUBLIC EXPIRES GEORGIA JULY 26, 2027 SPALDING COUNTY, GA

Wells Fargo Everyday Checking

WELLS FARGO

HEMALKUMAR J PATEL
KINNARIBEN H PATEL

Questions?

Available by phone 24 hours a day, 7 days a week:
We accept all relay calls, including 711
1-800-742-4932

En español: 1-877-727-2932

Online: wellsfargo.com

Write: Wells Fargo Bank, N.A. (297)
P.O. Box 6995
Portland, OR 97228-6995

You and Wells Fargo

Thank you for being a loyal Wells Fargo customer. We value your trust in our company and look forward to continuing to serve you with your financial needs.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com or call the number above if you have questions or if you would like to add new services.

Online Banking	☑	Direct Deposit	☐
Online Bill Pay	☐	Auto Transfer/Payment	☐
Online Statements	☑	Overdraft Protection	☐
Mobile Banking	☑	Debit Card	
My Spending Report	☑	Overdraft Service	☐

Statement period activity summary

Beginning balance on 4/16	$122,625.98
Deposits/Additions	0.00
Withdrawals/Subtractions	- 5,823.62
Ending balance on 5/15	$116,802.36

Account number:
HEMALKUMAR J PATEL
KINNARIBEN H PATEL

Georgia account terms and conditions apply

For Direct Deposit use
Routing Number (RTN):

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo branch.

WELLS FARGO

Transaction history

Date	Check Number	Description	Deposits/ Additions	Withdrawals/ Subtractions	Ending daily balance
4/16		U.S. Bank N.A. Payment 240415 000000558201836 Usbankmbwpmt Loan		4,925.83	117,700.15
4/24		Usbank Loan Payment 240423 000000558201836 NTE*Sph*Acct 00558201836 Effective 04/2		897.79	116,802.36
Ending balance on 5/15					116,802.36
Totals			$0.00	$5,823.62	

The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.

Monthly service fee summary

For a complete list of fees and detailed account information, see the disclosures applicable to your account or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period 04/16/2024 - 05/15/2024	Standard monthly service fee $10.00	You paid $0.00	
How to avoid the monthly service fee Have any ONE of the following each fee period	Minimum required	This fee period	
• Minimum daily balance	$500.00	$116,802.36	√
• Total amount of qualifying electronic deposits	$500.00	$0.00	
• Age of primary account owner	17 - 24		
• Account is linked to a Wells Fargo Campus ATM Card or Campus Debit Card	1	0	

RC/RC

IMPORTANT ACCOUNT INFORMATION

NEW YORK CITY CUSTOMERS ONLY -- Pursuant to New York City regulations, we request that you contact us at 1-800-TO WELLS (1-800-869-3557) to share your language preference.

Other Wells Fargo Benefits

Help take control of your finances with a Wells Fargo personal loan.
Whether it's managing debt, making a large purchase, improving your home, or paying for unexpected expenses, a personal loan may be able to help. See personalized rates and payments in minutes with no impact to your credit score.
Get started at wellsfargo.com/personalloan.

Other Wells Fargo Benefits

June 15 is World Elder Abuse Awareness Day, and now is a great time to learn how to help protect yourself and your loved ones from the rising risks of scams. Download a guide at wellsfargo.com/protectelders.

WELLS FARGO

Worksheet to balance your account

Follow the steps below to reconcile your statement balance with your account register balance. Be sure that your register shows any interest paid into your account and any service charges, automatic payments or ATM transactions withdrawn from your account during this statement period.

A Enter the ending balance on this statement. $ _____

B List outstanding deposits and other credits to your account that do not appear on this statement. Enter the total in the column to the right.

Description	Amount
Total	$

+ $ _____

C Add A and B to calculate the subtotal. = $ _____

D List outstanding checks, withdrawals, other debits to your account that do not appear on this statement. Enter the total in the column to the right.

Number/Description	Amount
Total	$

- $ _____

E Subtract D from C to calculate the adjusted ending balance. This amount should be the same as the current balance shown in your register. = $ _____

Important Information You Should Know

- To dispute or report inaccuracies in information we have furnished to a Consumer Reporting Agency about your accounts.
  Wells Fargo Bank, N.A. may furnish information about deposit accounts to Early Warning Services. You have the right to dispute the accuracy of information that we have furnished to a consumer reporting agency by writing to us at Overdraft Collection and Recovery, P.O. Box 5058, Portland, OR 97208-5058. Include with the dispute the following information as available: Full name (First, Middle, Last), Complete address, The account number or other information to identify the account being disputed, Last four digits of your social security number, Date of Birth. Please describe the specific information that is inaccurate or in dispute and the basis for the dispute along with supporting documentation. If you believe the information furnished is the result of identity theft, please provide us with an identity theft report.
- If your account has a negative balance: Please note that an account overdraft that is not resolved 60 days from the date the account first became overdrawn will result in closure and charge off of your account. In this event, it is important that you make arrangements to redirect recurring deposits and payments to another account. The closure will be reported to Early Warning Services. We reserve the right to close and/or charge-off your account at an earlier date, as permitted by law. The laws of some states require us to inform you that this communication is an attempt to collect a debt and that any information obtained will be used for that purpose.
- In case of errors or questions about your electronic transfers:
  Telephone us at the number printed on the front of this statement or write us at Wells Fargo Bank, P.O. Box 6995, Portland, OR 97228-6995 as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.
  1. Tell us your name and account number (if any).
  2. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
  3. Tell us the dollar amount of the suspected error.

  We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.
- In case of errors or questions about other transactions (that are not electronic transfers):

  Promptly review your account statement within 30 days after we made it available to you, and notify us of any errors.
- To download and print an Account Balance Calculation Worksheet (PDF) to help you balance your checking or savings account, enter www.wellsfargo.com/balancemyaccount in your browser on either your computer or mobile device.

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EQUAL HOUSING LENDER

SEND INQUIRIES TO:

Delta Community CREDIT UNION

P.O. BOX 20541 ATLANTA, GA 30320-2541
DeltaCommunityCU.com

ACCOUNTS ARE **NON-TRANSFERABLE** EXCEPT ON THE BOOKS OF THIS CREDIT UNION.

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION REGARDING YOUR RIGHTS TO DISPUTE BILLING ERRORS AND ELECTRONIC TRANSFER ERRORS.

HEMALKUMAR J PATEL

ACCOUNT NUMBER		
STATEMENT PERIOD	FROM 05/01/24	THRU 05/31/24
DIRECT INQUIRIES TO:	404-715-4725 OR 1-800-544-3328	
PAGE	1	

THE FINANCE CHARGE for an open-end loan is computed by applying the periodic rate to each unpaid balance for the exact number of days each balance was outstanding. The balance used to compute the FINANCE CHARGE is that balance each day after credits are subtracted and new advances or other charges are added.

**DEBITS: New Loans, Refinanced Loans, Add-Ons or Principal Reversal.

Posting Date	Effective Date	Transaction Description	Payment, Credits or Debits**	FINANCE CHARGE	Fees or Charges	Transaction Amount	NEW BALANCE
05/01		ID 0000 SAVINGS Balance Forward					1399.07
		Joint Owner:					
05/31		Deposit Dividend 0.250%				0.30	1399.37
		Annual Percentage Yield Earned 0.25% from 05/01/24 through 05/31/24					
		Based on Average Daily Balance of 1,399.07					
05/31		Ending Balance					1399.37
		Dividends Paid Year to Date				1.03	
05/01		ID 0035 MONEY MARKET 7621824 Balance Forward					189733.93
		Joint Owner:					
05/17		Deposit by Check				26000.00	215733.93
05/19		Withdrawal Home Banking Transfer				1370.90-	214363.03
		To Loan 2019009803					
05/31		Deposit Dividend 0.847%				145.13	214508.16
		Annual Percentage Yield Earned 0.85% from 05/01/24 through 05/31/24					
		Based on Average Daily Balance of 201,739.68					
05/31		Ending Balance					214508.16
		Dividends Paid Year to Date				283.75	

	Total For This Period	Total Year-to-Date
Total Returned Item Fees	0.00	0.00
Total Overdraft Fees	0.00	0.00

Total Dividends Paid Year to Date 284.78

Do you want to earn some extra cash this summer? Just share your love of Delta Community!

Our Refer-A-Friend Program makes it easy for our primary accountholders to refer eligible friends and family to join Delta Community using your personal referral link. Your friend can get all of the benefits of Delta Community membership and you both earn a cash reward!

To get your personal referral link and get started, please visit DeltaCommunityCU.com/Refer.

NCUA
This credit union is federally insured by the National Credit Union Administration.

EQUAL HOUSING LENDER

CHECK RECONCILEMENT THIS FORM IS PROVIDED TO ASSIST YOU IN BALANCING YOUR CHECKING ACCOUNT

LIST DRAFTS OUTSTANDING NOT CHARGED TO YOUR CHECKING ACCOUNT			
DRAFT NUMBER	AMOUNT	DRAFT NUMBER	AMOUNT
		TOTAL	

PERIOD ENDING

1. SUBTRACT FROM YOUR CHECK REGISTER ANY CHARGES LISTED ON THIS STATEMENT WHICH YOU HAVE NOT PREVIOUSLY DEDUCTED FROM YOUR BALANCE. ALSO ADD ANY DIVIDEND

2. ENTER DRAFT BALANCE SHOWN ON THIS STATEMENT HERE		$
3. ENTER DEPOSITS MADE LATER THAN THE ENDING DATE ON THIS STATEMENT	+	$
	+	$
	+	$
	TOTAL (2 PLUS 3)	$
4. IN YOUR DRAFT REGISTER, CHECK OFF ALL PAID AND, IN AREA PROVIDED AT LEFT, LIST NUMBERS AND AMOUNTS OF ALL UNPAID DRAFTS.		
5. SUBTRACT TOTAL CHECKS OUTSTANDING	-	$
6. THIS AMOUNT SHOULD EQUAL YOUR DRAFT REGISTER BALANCE		$

IF YOU DO NOT BALANCE

VERIFY ADDITIONS AND SUBTRACTIONS ABOVE AND IN YOUR CHECK REGISTER. COMPARE THE DOLLAR AMOUNTS OF CHECKS LISTED ON THIS STATEMENT WITH THE CHECK AMOUNTS LISTED IN YOUR CHECK REGISTER COMPARE THE DOLLAR AMOUNTS OF DEPOSITS LISTED ON THIS STATEMENT WITH THE DEPOSIT AMOUNTS RECORDED IN YOUR CHECK REGISTER

CONVENIENT ONLINE TOOLS AVAILABLE AT DeltaCommunityCU.com

You can sign-up to receive Online Statements, delivered directly to your account, under the Additional Services tab in Online Banking. If you need to change your address, telephone number or email at any time, simply log into your Online Banking account, select the Account Management tab and choose Update Personal Information. Also, be sure to take advantage of the many convenient tools and services available to you for free with Delta Community's Online and Mobile Banking services. You can keep track of your account balances, make mobile check deposits, pay bills, transfer funds, make loan payments, apply for a loan or credit card, manage reward programs and much more. Get started by visiting us at DeltaCommunityCU.com or downloading the Delta Community Mobile Banking app today.

THE STATEMENT BELOW PERTAINS TO OPEN-END LOAN ACCOUNTS ONLY

BILLING RIGHTS SUMMARY

In Case of Errors or Questions About Your Bill

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us on a separate sheet at the address shown on your bill as soon as possible. We must hear from you no later than 60 days after we sent you the first bill on which the error or problem appeared.

- Your name and account number.
- The dollar amount of the suspected error.
- Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are unsure about.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

Special Rule for Credit Card Purchases

If you have a problem with the quality of goods or services that you purchased with a credit card, and you have tried in good faith to correct the problem with the merchant, you may not have to pay the remaining amount due on the goods or services. You have this protection only when the purchase price was more than $50 and the purchase was made in your home state or within 100 miles of your mailing address.

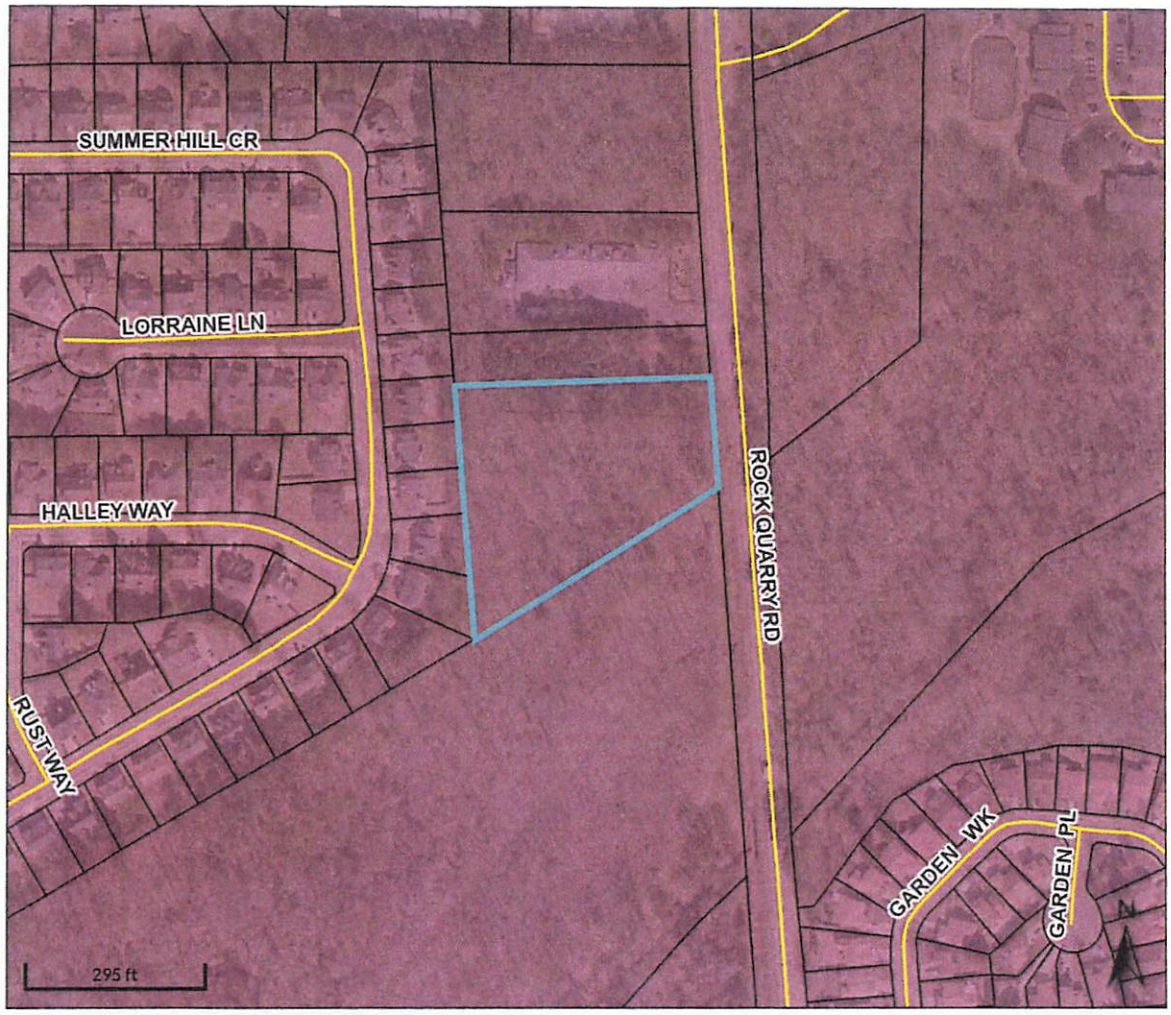
IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS

Write us at the address shown on the front of this statement which is listed after the words "send inquiries to", or telephone us at the telephone number shown in the "direct inquiries to" area as soon as you can if you think your statement or receipt is wrong, or if you need more information about a transfer on the statement or receipt. For consumer accounts, we must hear from you no later than 60 days after we send you the FIRST statement on which the error or problem appeared. For business accounts, refer to your Electronic Fund Transfers disclosure for additional information.

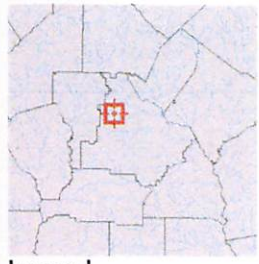
(1) Tell us your name and account number.
(2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
(3) Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will recredit your account within for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

Henry County, GA



Overview



Legend

- Parcels
- Roads
- Cities

Parcel ID	050-01003021	Class	C	Owner	MANISH INC	Land Value:	$312,000			
Property Address	1st choice	Acreage	3.12	Address	112 CONGRESSIONAL COURT MCDONOUGH GA 30253	Building Value:	$0	Last 2 Sales		
District	City/Stockbridge							Date	Price	Reason	Qual
						Misc Value:	$0	5/18/2000	$475,000	n/a	Q
								7/11/1997	$325,000	n/a	Q
						Total Value:	$312,000				

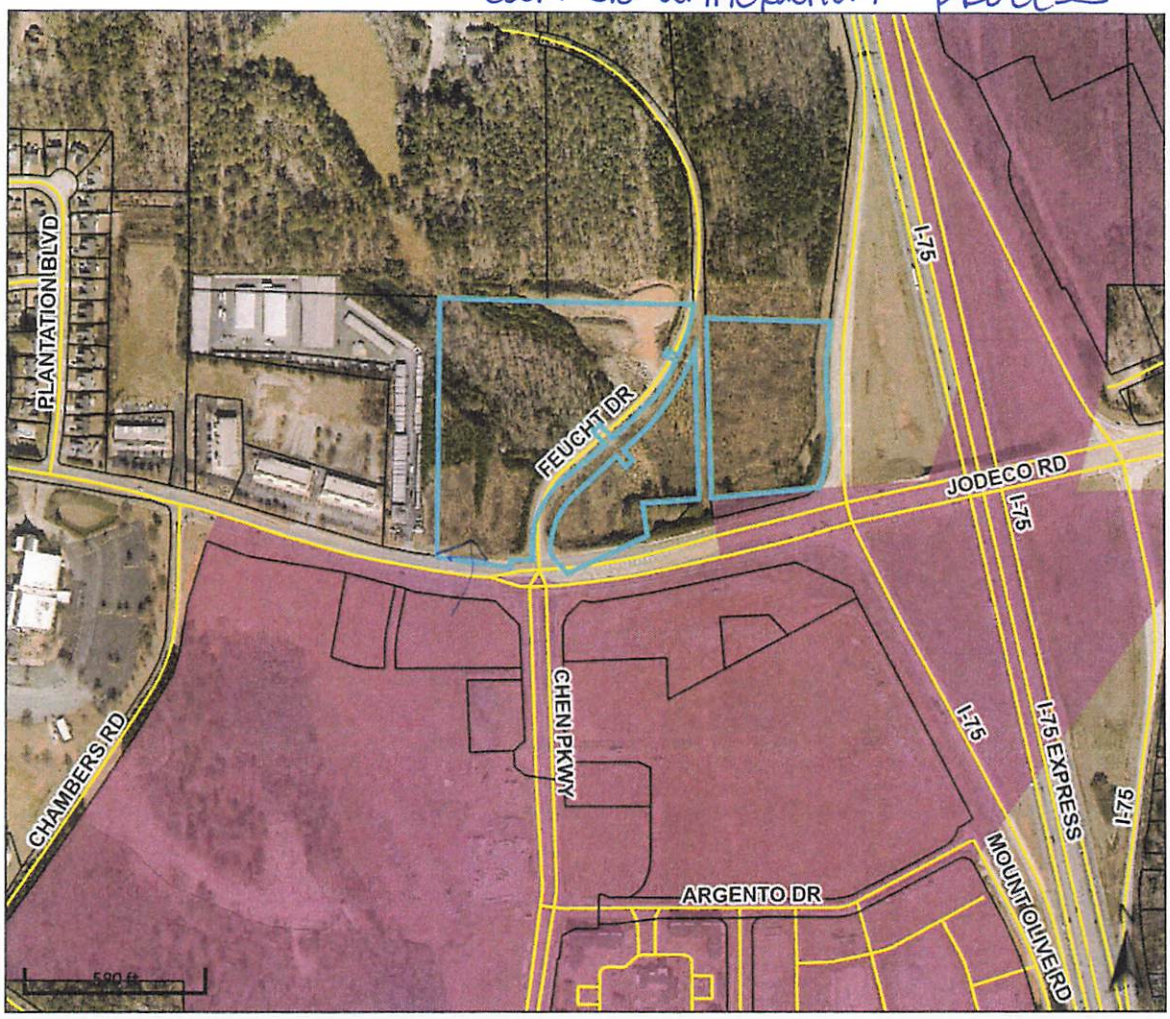
Parcel lines depicted on the maps do not reflect a true and exact representation of property boundaries and should not be relied upon for said purpose. Property boundary lines are depicted on recorded plats available at the Henry County Courthouse or can be determined by employing the services of a licensed surveyor.

Date created: 6/6/2024
Last Data Uploaded: 6/6/2024 10:06:15 AM

Developed by Schneider GEOSPATIAL

Henry County, GA

can do annexation process



Overview

Legend

- Parcels
- Roads
- Cities

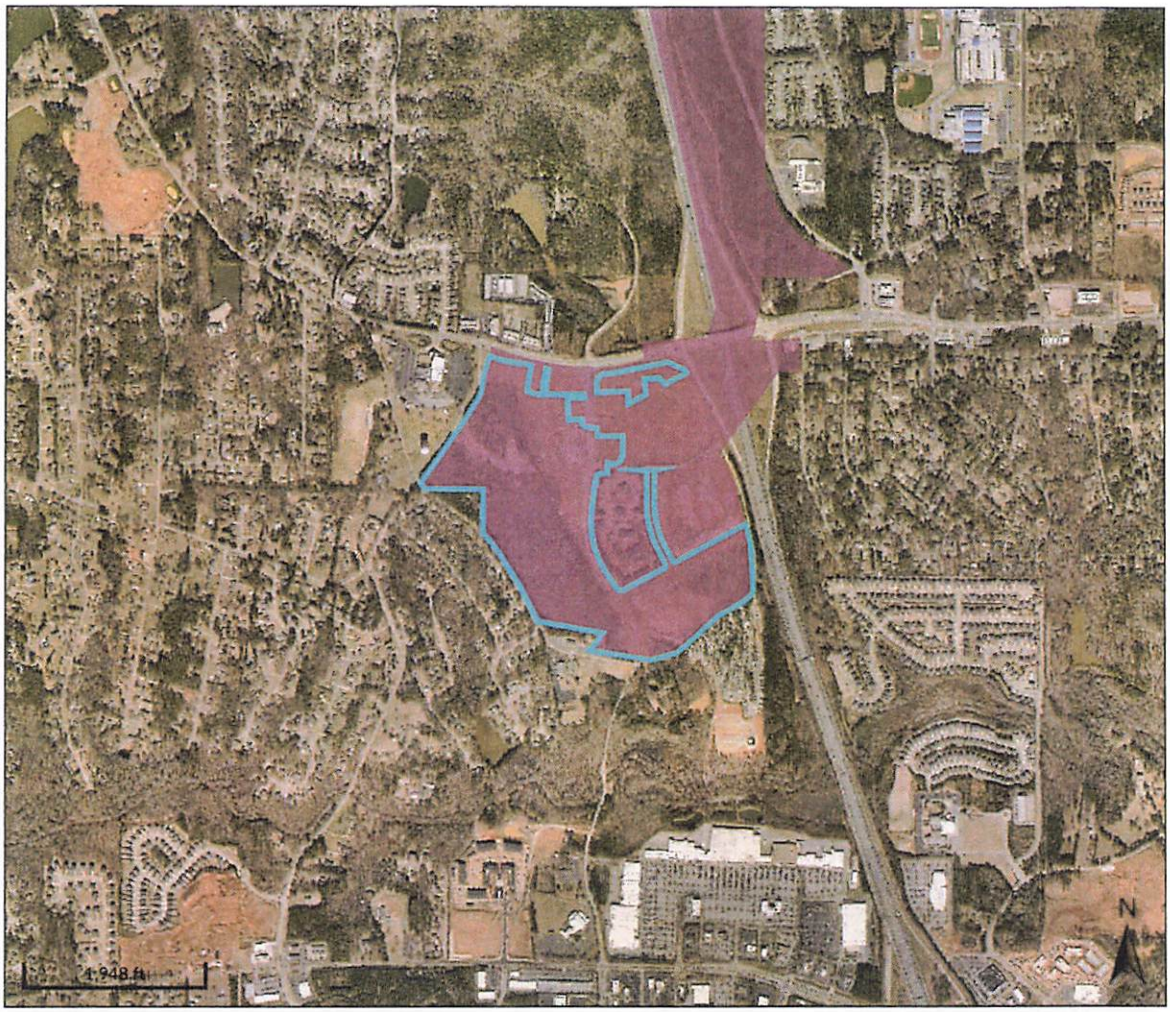
Parcel ID	053-01017005	**Class**	C	**Owner**	MARKETPLACE	**Land**	$2,891,200				
Property	2250 JODECO	**Acreage**	18.07	**Address**	STOREFRONTS LLC	**Value:**					
Address	RD				1418 DRESDEN DRIVE	**Building**	$0	**Last 2 Sales**			
District	City/Stockbridge				SUITE 200	**Value:**		**Date**	**Price**	**Reason**	**Qual**
	2nd choice				ATLANTA GA 30319	**Misc**	$0	4/22/2008	$5,400,000	n/a	Q
						Value:		7/29/2005	$3,300,000	n/a	Q
						Total	$2,891,200				
						Value:					

Parcel lines depicted on the maps do not reflect a true and exact representation of property boundaries and should not be relied upon for said purpose. Property boundary lines are depicted on recorded plats available at the Henry County Courthouse or can be determined by employing the services of a licensed surveyor.

Date created: 6/6/2024
Last Data Uploaded: 6/6/2024 10:06:15 AM

Developed by Schneider GEOSPATIAL

Henry County, GA



Overview

Legend

- Parcels
- Roads
- Cities

Parcel ID	053-01018000	**Class**	C	**Owner**	JODECO 158 LLC	**Land Value:**	$14,128,200
Property Address	3rd choice	**Acreage**	107.82	**Address**	120 S ZACK HINTON PARKWAY MCDONOUGH GA 30253	**Building Value:**	$0
District	City/Stockbridge					**Misc Value:**	$0
						Total Value:	$14,128,200

Last 2 Sales

Date	Price	Reason	Qual
8/6/2021	$15,000,000	n/a	Q
3/1/2011	$8,000,000	D UND POWR	U

Parcel lines depicted on the maps do not reflect a true and exact representation of property boundaries and should not be relied upon for said purpose. Property boundary lines are depicted on recorded plats available at the Henry County Courthouse or can be determined by employing the services of a licensed surveyor.

Date created: 6/6/2024
Last Data Uploaded: 6/6/2024 10:06:15 AM

Developed by Schneider GEOSPATIAL

Case Result | Case Status: Status Returned

SENSITIVE BUT UNCLASSIFIED

SAVE Response

Applicant Status: Lawful Permanent Resident - Employment Authorized

The applicant is a non-national of the U.S. who has been granted authorization to live and work in the United States permanently as an immigrant. See the Guide to Understanding SAVE Verification Responses for additional information. Follow your agency's policy when determining whether this applicant is eligible for benefits.

SAVE Response Details

Case Verification Number:	
Class of Admission (COA) Code:	E36
Country of Birth:	IND - INDIA
Date Admitted To:	INDEFINITE

Agency Submitted Details

Full Name:	Hemalkumar J Patel
Date of Birth:	
Alien Number:	
Initiated On:	
Initiated By:	
Point of Contact Name:	Uneeda Smith-Sellers
Point of Contact Phone Number:	(678) 833-3302
Requested Benefits:	Occup. Tax Cert.
Attached Document:	No

U.S. Department of Homeland Security

U.S. Citizenship and Immigration Services

Accessibility

Browser Support

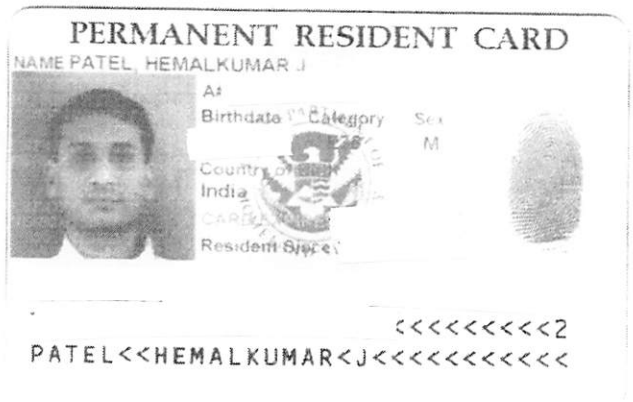
Plug-ins

Site Map

V37.1 ICA

V38 ICA - Draft

Provide Feedback



PERMANENT RESIDENT CARD

NAME PATEL, HEMALKUMAR J

Birthdate Category Sex

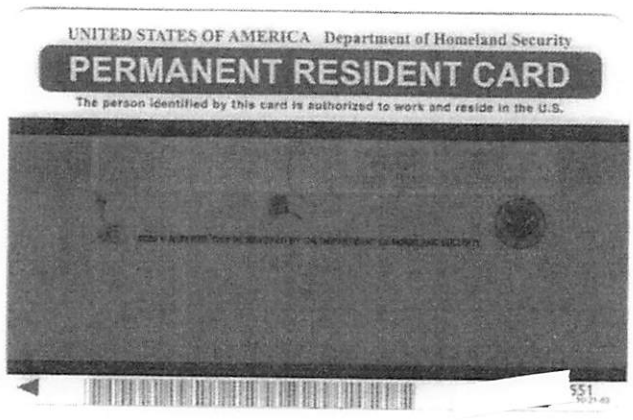
M

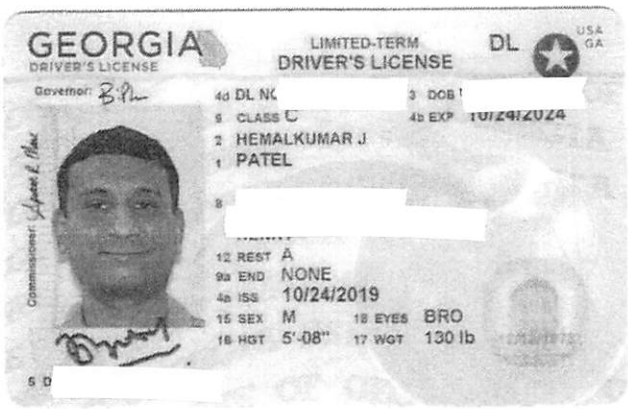
India

Resident Since

<<<<<<<<<2

PATEL<<HEMALKUMAR<J<<<<<<<<<<<


UNITED STATES OF AMERICA Department of Homeland Security
PERMANENT RESIDENT CARD
The person identified by this card is authorized to work and reside in the U.S.



GEORGIA
DRIVER'S LICENSE

LIMITED-TERM
DRIVER'S LICENSE

DL

USA
GA

Governor:

Commissioner:

4d DL NO
3 DOB
5 CLASS C
4b EXP 10/24/2024
2 HEMALKUMAR J
1 PATEL
8
12 REST A
9a END NONE
4a ISS 10/24/2019
15 SEX M
18 EYES BRO
16 HGT 5'-08"
17 WGT 130 lb
5 D

LOTTERY APPLICATION TRACKING SHEET

Date Received: 6/6/24 Application No.: 9

Applicant Name: Krunal Patel

Proposed business and name: 790 Rock Quarry Rd Express Liquor
parcel 050-01002002

CHECKLIST:

- ○ Complete Application and Documents: _____ or Missing: _____
- ✓ $750 Non-Refundable Application Fee: yes Date Processed: 6/6
- ✓ Fieldprint Background Check Information Received: 6/4
- ○ Notarized Financial Statement Received: _____
- ✓ Copy of Government Issued ID Received: _____
- ✓ ~~Emailed~~ Gave applicant receipt/CC approval code/lottery process timeline: 6/6
- ✓ Redacted Copy of Application Sent to City Clerk on: (date) 6/7

Any Notes:
AKPatelgroup@gmail.com

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

APPLICATION
(Lottery Application ONLY)

NOTE: USE SEPARATE PAGES AND/OR ATTACHMENTS, AS NECESSARY

1. Type(s) of license applied for:
   - (X) Alcohol License
   - ( ) Tire Shop
   - ( ) Used Car Dealership
   - ( ) Used Appliance Shop
   - ( ) Thrift store and Consignment Shop
   - ( ) Pawnshop
   - ( ) Vape Shop
   - ( ) Precious Metals

2. Proposed license is a (n):
   - ( ) Individual
   - ( ) Partnership
   - ( ) Corporation
   - (X) LLC
   - ( ) other legal entity (explain)

   _____

3. Applicant information:

   Name: Krunal. K. Patel

   Title/Position: Owner

   Are you a citizen of the United States: ✓ yes _____ no

   Where were you born? India

   Present home address: _____

   County of Bibb Number of years at present address 12yrs

   Contact information: Business phone #: _____

   Home phone #: 478-832-5549

   How long have you been a resident of Georgia? 20yrs Henry Co? _____

   What has been your occupation for the past five (5) years? Self-Employed

4. Applicant's relationships with other persons with 1st degree of kinship.

Immediate living relatives:
(Please list all immediate living wife, children, parents, brothers, sisters, and parents)
(Attach separate sheet(s) if necessary)

Name: Navpreet Kaur Age: 48yrs
Relationship: Wife Live with or apart: me
Name: Ravi Kaura Age: 26yrs
Relationship: Son Live with or apart: me
Name: Sanket. K. Patel Age: 25yrs
Relationship: Son Live with or apart: me
Name: Perin .K. Patel Age: 16yrs
Relationship: Son Live with or apart: me

5. Proposed business name and address:

Business name: ~~Express Liquor~~ ~~Express Liquor~~

Address: ~~Jeders rd.~~ 790 Rockquarry Rd Stockbridge GA 30281

6. Corporations: If operating as a corporation, please complete the following:

Corporation name: /

Address:

Date of Incorporation: _____ Where Incorporated: _____

Type of Corporation:

Corporate Officers: *Please list each (attach a separate sheet if necessary)*

Name: SS#

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

7. **Stockholder information – applies to any "closely held" stock, not publicly traded and to all stockholders who own more than 10% of the outstanding capital stock of the corporation. DO NOT FILL OUT THIS INFORMATION FOR PUBLICLY TRADED CORPORATIONS. In lieu thereof, please indicate by attached sheet as to whether any affiliate, related company, holding company, subsidiary or other organization holds any form of alcohol license in the City of Stockbridge, or any distilled spirits package sale license within the State of Georgia.**

8. If operating as a corporation, list stockholders with addresses and the amount of interest of each stockholder in the corporation. ***Please list each (attach a separate sheet if necessary)***

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

9. Limited Liability Company (LLC): If operating as a company, please complete the following:

Company name: GoGa 4 LLC

Address: _

_____ _____

Date of Formation: 08-09-2013 Where Formed (State): GA

Type of LLC (member managed or manager managed): _____

LLC members with an ownership interest: ***Please list each (attach a separate sheet if necessary)***

Name: Krunal. K. Patel SS#_____

Member – ownership interest (_%): 100%

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%): _____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%): _____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

10. Limited Liability Partnership (LLP), Partnerships, Sole Proprietorships, and any other forms of business entity: If operating as a partnership or other form of business entity, please complete the following:

Entity name: _____ / _____

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of Partnership: _____

Partnership members with an ownership interest. ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

If more than 4 members, partners, or stockholders, please provide the name, address, social security number and ownership interest of additional parties at interest, by separate sheet.

11. Registered Agent

If the proposed license is a legal entity, please provide name of its registered agent:

Agent(s) name: Krunal K. Patel

Address: _____

Telephone Number: _____

12. Store Manager, Managing Member, Managing Partner, or other person in charge:
What is the name of the person who, if the license is granted, will be the active manager of the business and on the job at the business?

Full name: Krunal. K. Patel

(Please complete the site manager's personal statement, attached)

13. Convictions:
Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (15) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

_____

_____

_____

14. Location ownership
Do you own the land and building on which the business is to be operated?

_____ Yes ___X___ No If Yes, when did you buy it? _____
(Attach proof of ownership)

If not the owner, please complete the following and attach a copy of the lease, option, and any other pertinent documents:

Owner/Agent of Property: _____

Amount of rent: _____ Frequency Paid: _____

Is the amount of rent a set amount? _____ Yes _____ No

If NO, please explain how it is determined: _____

_____

15. If you have an option, or other legal, binding document to buy, lease the building, please explain the general terms: _____

_____

16. Zoning
What is the current zoning on the proposed property location? _____

17. Location Certification
If this is the first application for a license for this business, please attach a current certificate from a registered surveyor containing the following information:

(1) A scale drawing of the building or proposed building as situated on the proposed lot.
(2) Proposed parking available to the building.

NOTE: NOT Required for a retail package alcohol license until the applicant is chosen for a license.

18. Financial Interest – Does the applicant or interested parties to this Application:

A. Have any financial interest in any similar business?

_____ Yes _X_ No

B. Received any financial aid or assistance from any similar business?

_____ Yes _X_ No

19. Other Interests:
Do you; any member of your family (children, spouse, parents, siblings) or any of the other owners, partners, or stockholders:

A. Have any interest, financial or otherwise, in other similar businesses or establishments?
_____ Yes _X_ No

If YES, please list:

_____

_____

B. Own, lease, sub-lease any real estate which is occupied by a similar business. If so, give the location information as to any lease or rental agreement including rents received and who it was rented to: _____ Yes _X_ No

If YES, please list:

_____

_____

C. Serve as the Executor or Administrator or Beneficiary of Heir of any estate having an interest in any similar business or establishment?

_____ Yes _X_ No

If YES, please list:

_____

_____

D. Serve as Beneficiary or Trustee of any Trust Fund having an interest in any similar business or establishment?

_____ Yes X No

If YES, please list:

_____

_____

20. Financial Gain
Please list all parties who will receive any financial gain or payment derived from any interest or income as a result of the operation that this application applies to. (Please include any owners, partners, members, officers, or principal stockholders)

_____

_____

21. Other Jurisdictions
List other jurisdictions in which any applicant, partner, member, corporate officer, or stockholder holds a similar occupational tax certificate, regulatory license, or alcoholic beverage license:

_____

_____

_____

List all details of denial of any such licenses in any other jurisdiction:

_____

_____

22. Are you familiar with the City of Stockbridge Ordinances, State laws and regulations, Federal laws and regulations governing the operations of this type of business?

X Yes _____ No

(City of Stockbridge Ordinance 9.04 Alcoholic Beverage)

23. Restrictions Alcohol ONLY

Ordinance 9.04.090

1. No retail license for the sale of distilled spirits shall be issued unless the location is located within five hundred (500) feet of the streets or roads designated in the following three (3) areas and has direct access onto such streets or roads:

   Area 1: Those portions of Mount Zion Boulevard and Highway 138 lying west of I-75;
   Area 2: Those portions of Highway 138 and North Henry Boulevard lying east of I-75;

   Area 3: Those portions of Eagles Landing Parkway/Hudson Bridge Road from their intersection with the west right-of-way line of Highway 42 to the west city limits line.

24. Do you agree to abide by such ordinances, laws, and regulations?

    ✓ Yes _____ No

25. Do you have any questions or comments regarding the ordinances, laws, regulations, or application?

    _____ Yes ✓ No

    If YES, please list:

    _____

    _____

Georgia, Henry County, City of Stockbridge

I, Krunal. K. Patel, being duly sworn according to the law, do swear that the facts and things stated by me in the above and foregoing answers to questions are true, and no false, or fraudulent statement is made herein, and such answers were made in order to produce the granting of such license.

J SPECK
NOTARY PUBLIC
MY COMMISSION EXPIRES
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

Krunal Patel
Signature of Applicant

Krunal. K. Patel
Print Name

Owner
Title of Applicant

Subscribed and Sworn before me on this the 6 day of June, 20 24

gSpeck
NOTARY PUBLIC signature

4.11.25
Notary Commission Expires

J. Speck
NOTARY PUBLIC printed name

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

SITE MANAGER'S PERSONAL INFORMATION
Alcohol License ONLY

(To be attached to Application)
(A photo of the manager must be attached to this form)

1. **Business Name**
(Please complete for the business you are applying as a manager for)

Business Name: ~~Express Liquor~~ Express Liquor

Address: ~~Jodeco rd.~~ 790 ~~Stock bridge~~ G Rock Quarry Rd. Stockbridge GA 30281

2. **Manager's name and address:**

Name: Krunal. K. Patel

Home address: ___

Phone number: 478 832 5549

3. **Personal identification information:**

Race: Asian Sex: M Height: 5 Weight: 7 Age: 47 yrs

Color of hair: black Color of eyes: black

4. **Manager's birth information:**

Location of birth: India

Date of birth: ___

5. **Spousal information: (If married, please complete)**

Spouse's full name: Navpreet Kaur

Maiden name if applicable: ___

Date of Birth: ___ Date married: ___

Employer: Self Employed

6. **Employment record:**
(Please list your previous employment information for the last past 10 years) (Attach separate sheet if necessary)

Employer: _____

Location: _____ Dates – From:____ To: ____

Employer: _____

Location: _____ Dates – From:____ To: ____

Employer: _____

Location: _____ Dates – From:____ To: ____

7. **Financial interest:**

Do you or your spouse, or any member of your family:

A. Have any interest, financial or otherwise, in other malt beverage, wine, or distilled spirits stores or establishments? _____ Yes X No

If YES, please list:

_____

_____

B. Ever been denied a license or had a license revoked? _____ Yes X No

If YES, please list:

_____

_____

8. **Prior residences:**
(Please list all residences you have had in the past ten (10) years.) *(Include a separate sheet if necessary)*

Street Address - GA Years 2 yrs

_____

_____

9. **Tax return:**
Did you file a Georgia tax return last year?

✓ Yes _____ No

10. Convictions:

Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (10) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

No

Charge: _____

Place of arrest: _____ Date: _____

Disposition: _____

11. Personal References:

(Please list three personal references not related to you, whom you have known for at least five years)

Name: Parth Y. Patel Phone #: 417 619 5275

Address: _____

Name: Urmila ben Patel Phone #: 478-294-9183

Address: _____

Name: Kirit Kumar B Patel Phone #: _____

Address: _____

12. Emergency Contact:

Contact name: Krunal. K. Patel Phone #: 478 832-5549

I, Krunal K. Patel, do solemnly swear, that the foregoing statements are true. I understand that any falsehoods are grounds for automatic dismissal of this application.

Krunal Patel
Signature of Manager

Krunal K. Patel.
Print Name

Owner
Title of Applicant

J SPECK
MY COMMISSION EXPIRES
NOTARY
PUBLIC
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

Subscribed and Sworn before me on this the 6 day of June, 20 24

JSpeck
NOTARY PUBLIC signature

4.11.25
Notary Commission Expires

J Speck
NOTARY PUBLIC printed name

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

BACKGROUND AND SECURITY CLEARANCE FORM
OWNER, APPLICANT, MANAGER
Alcohol License ONLY

Authorization for Release of Personal Information
(Attach photocopy of Social Security Card and Photo ID)

I, Krunal K. Patel, do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the City of Stockbridge, whether said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure pertaining to the background investigation necessary to process my application as required under the Alcohol Beverage Ordinance (Chapter 9) governing licensing in the City.

I also certify that any person, firm, or other entity ("the providing entity") who may furnish such information concerning me, shall not be held liable or accountable for giving this information and I do hereby fully and completely release the providing entity from all liability, which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the photocopy does not contain the original writing of my signature.

J Speck
Notary

4.11.25
Notary Commission Expires

J SPECK
NOTARY PUBLIC
MY COMMISSION EXPIRES
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

Krunal Patel
Signature

06-05-24
Date

Date of Birth

Social Security Number

Driver's License Number

5-7
Height

150
Weight

City of Stockbridge

SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

Instructions: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

Krunal K. Patel

Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity.

Address of applicant named above

478-832 5549

Telephone Number

Name of business, corporation for whom application is being made.

OCCUPATIONAL TAX CERTIFICATE

Category of Public Benefit

1. ✓ I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. _____ I am a legal permanent resident of the United States.
3. _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

_____.

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the back of this form.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this affidavit? :_____

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

MUST BE COMPLETED BY NOTARY

I, KRUNAL K PATEL {representative for} GEORGIA 4 LLC

(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

Krunal Patel

Signature of Applicant

06-06-24

Date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 6 DAY OF June, 20 24

Executed in Warner Robins (City), Ga (State)

J Speck

NOTARY PUBLIC Signature

4.11.25

My Commission Expires

HOUSTON COUNTY, GEORGIA
J SPECK
NOTARY PUBLIC
MY COMMISSION EXPIRES APRIL 11, 2025

SECURE AND VERIFIABLE DOCUMENTS

The following list of secure and verifiable documents, published under the authority of O.C.G.A § 50-36-2 contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative or residency or immigration status.

- A United States passport or passport card
- A United States military identification card
- A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A tribal identification card of the federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer. A listing of the federally reorganized Native American tribes may be found at: http//www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm
- A United States Permanent Resident Card or Alien Registration Receipt Card
- An Employment Authorization Document that contains a photograph of the bearer
- A passport issued by a foreign government, must have I-94 attached
- A Merchant Mariner Document Mariner Credential issued by the United States Coast Guard
- A Free and Secure Trade (FAST) card
- A NEXUS card
- A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card
- A driver's license issued by a Canadian government
- A Certificate of Citizenship issued by the United States Department of Citizenship
- Immigration Services (USCIS) (Form N-560 or Form N-561)
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570)

No.

CERTIFICATE OF NATURALIZATION

Personal description of holder as of date of naturalization:

Date of birth:

Sex: **MALE**

Height: **5** *feet* **5** *inches*

Marital status: **MARRIED**

Country of former nationality: **INDIA**

USCIS Registration No.

I certify that the description given is true, and that the photograph affixed hereto is a liheness of me.

Krunal Patel
(Complete and true signature of holder)

Be it known that, pursuant to an application filed with the Secretary of Homeland Security

at: **ATLANTA, GEORGIA**

The Secretary having found that:

KRUNAL PATEL

residing at:

having complied in all respects with all of the applicable provisions of the naturalization laws of the United States, being entitled to be admitted as a citizen of the United States, and having taken the oath of allegiance at a ceremony conducted by

U.S. CITIZENSHIP AND IMMIGRATION SERVICES

at: **ATLANTA, GEORGIA** *on:*

such person is admitted as a citizen of the United States of America.

Alejandro N Mayorkas, **Director**

U. S. Citizenship and Immigration Services

DEPARTMENT OF HOMELAND SECURITY

GEORGIA
DRIVER'S LICENSE

Governor: B. Ph

Commissioner

Krunal Patel

DRIVER'S LICENSE

DL

USA
GA

4d DL NO.

3 DOB

9 CLASS C

4b EXP 08/06/2028

2 KRUNAL KANAIYALAL

1 PATEL

8

BIBB

12 REST A

9a END NONE

4a ISS 01/16/2024

15 SEX M

18 EYES BRO

16 HGT 5'-07"

17 WGT 165 lb

5 DD

www.dds.georgia.gov

MEDICAL INFORMATION: NONE

CLASS: C-≤ 26,000 lbs. GVWR and Trailer ≤ 10,000 lbs. All recreational vehicles included

ENDORSEMENTS: NONE

RESTRICTIONS: A-None

DOB:

PASSPORT
PASSEPORT
PASAPORTE

UNITED STATES OF AMERICA

USA

Type / Type / Tipo — Code / Code / Código — Passport No. / No. du Passeport / No. de Pasaporte

P USA [redacted]

Surname / Nom / Apellidos

PATEL

Given Names / Prénoms / Nombres

KRUNAL

Nationality / Nationalité / Nacionalidad

UNITED STATES OF AMERICA

Date of birth / Date de naissance / Fecha de nacimiento

[redacted]

Place of birth / Lieu de naissance / Lugar de nacimiento

INDIA

Date of issue / Date de délivrance / Fecha de expedición

20 Jan 2022

Date of expiration / Date d'expiration / Fecha de caducidad

19 Jan 2032

Endorsements / Mentions Spéciales / Anotaciones

SEE PAGE 27

Sex / Sexe / Sexo

M

Authority / Autorité / Autoridad

United States
Department of State

USA

P<USAPATEL<<KRUNAL<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<

[redacted]

We The People

Of the United States,
in Order to form a more perfect Union, establish Justice, insure domestic Tranquility, provide for the common defence, promote the general Welfare, and secure the Blessings of Liberty to ourselves and our Posterity, do ordain and establish this Constitution for the United States of America.

SIGNATURE OF BEARER / SIGNATURE DU TITULAIRE / FIRMA DEL TITULAR

3

PASSPORT

MORRIS
BANK

June 6, 2024

Re: A K Development Group LLC and Krunal Patel

To Whom It May Concern,

Mr Krunal Patel has been a valued customer of Morris Bank. Mr. Patel has performed on all credit obligations with us. Mr Patel has maintained a signifcant deposit relationship with us as well. His assets, credit, and liquidity would warrant him access to extend his banking relationship with us.

Respectfully yours,

Steve Williams

Steve Williams
Commercial Banker
swilliams@morris.bank

478-333-7049

form for
9 and 12
Husband | wife
applicants

301 Bellevue
Avenue P.O. Box 520
Dublin, Georgia
31040 478.272.5202
main 478.275.3094
fax
www.morris.bank

Member
FDIC

Applicant's Name & Address	Creditor's Name and Address	TYPE OF CREDIT
Krunal Patel & Navpreet Kaur	**Exchange Bank**	
	6081 Lake Oconee Parkway	Individual - Provide your financial information only
	Greensboro, GA 30642	X Joint, with Navpreet Kaur
		Information on separate financial statement
		Relationship: Spouse

Individual Information				Joint Party Information			
Business or Occupation				Business or Occupation			
Employer's Name & Address				Employer's Name & Address			
Length of Employment				Length of Employment			
Home Phone		Bus. Phone	478-731-4926	Home Phone		Bus. Phone	478-731-6613
Date of Birth		SS #		Date of Birth		SS #	

PLEASE COMPLETE SCHEDULES FIRST

ASSETS - Summary from Schedules				LIABILITIES - Summary from Schedule			
Cash on Hand and In Bank	Sched. A	$	3,017,921.00	Notes Due to Banks	Sched. A	$	-
Cash Value of Life Insurance	Sched. B	$	425,000.00	0 Notes Due to Relatives and Friends	Sched. H	$	-
U.S. Gov. Securities	Sched. C	$	-	Notes Due to Others	Sched. H	$	-
Other Marketable Securities	Sched. C	$	-	Accounts and Bills Payable	Sched. H	$	-
		$	-	Loans on Life Ins Policy	Sched. B	$	-
		$	-	Contract Accounts Payable	Sched. H	$	-
		$	-	Cash Rent Payable		$	-
TOTAL LIQUID ASSETS		$	3,442,921.00	Other Liabilities Due within 1 year - Itemize		$	-
Real Estate Owned	Sched. E	$	45,045,000.00				
Mortgages & Contracts Owned	Sched. F	$	-				
Notes & Accounts Receivable - current	Sched. D	$	-				
Notes & Accounts Receivable - over 90 days	Sched. D	$	-	TOTAL SHORT TERM LIABILITIES		$	-
Notes Due From Relatives and Friends	Sched. D	$	-	Real Estate Mortgages Payable	Sched. E	$	7,167,550.00
Other Securities - Not Readily Marketable	Sched. C	$	-	Personal Property Debts Payable	Sched. G	$	-
Personal Properties	Sched. G	$	2,980,000.00	Other Debts - Itemize		$	-
IRA and Tax Deferred Accounts		$	-	TOTAL LONG TERM LIABILITIES		$	7,167,550.00
Other Assets - Itemized on attachment		$	-	Total Liabilities		$	7,167,550.00
TOTAL PRODUCTIVE ASSETS		$	48,025,000.00	Net Worth (Total Assets Minus Total Liabilities)		$	44,300,371.00
TOTAL ASSETS		$	**51,467,921.00**	**TOTAL LIABILITIES AND NET WORTH**		$	**51,467,921.00**

ANNUAL INCOME		ESTIMATE OF ANNUAL EXPENSES	
Salary, Bonuses and Commissions	$ 275,000	Income Taxes	$ -
Dividends and Interest	$ -	Other Taxes	$ -
Rental and Lease Income (Net)	$ 135,000	Insurance Premiums	$ -
Alimony, child support, or separate maintenance income need not be revealed if		Mortgage Payments	$ -
you do not wish to have it considered as a basis for repaying		Rent Payable	$ -
this obligation. Other Income - Itemized	$ -	Other Expenses	$ -
Provide the following information only if Joint Credit is checked above			
Other Person's Salary, Bonuses and Commissions	$ -		
Alimony, child support, or separate maintenance income need not be revealed if			
you do not wish to have it considered as a basis for repaying			
this obligation. Other Income of Other Person - Itemized	$ -		
TOTAL	**$ 410,000**	**TOTAL**	**$ -**

GENERAL INFORMATION		CONTINGENT LIABILITIES	
Are any Assets Pledged Other Than Those listed on Schedules?		As Endorser, Co-Maker or Guarantor	
YES	NO	YES	NO
Are you a Defendant in Any Suits or Legal Actions?		On Leases or Contracts	
YES	NO	YES	NO
Date Income Taxes were last filed?		Legal Claims	
		YES	NO
Have you ever been declared Bankrupt in the last 10 years?		Federal - State Income Taxes	
YES	NO	YES	NO
Are you a Partner or Officer in any other Venture?		Other	
YES	NO		

SCHEDULES

A. CASH IN BANKS AND NOTES DUE TO BANKS (List all Real Estate Loans in Sched E)

NAME OF BANK	Type of Acct	Type of Ownership	On Deposit	Notes Due to Bank	Collateral (if Any) and Type of Ownership
MORRIS JAY SURJ SADHI	3517		$ 36,756.00	$ -	
TRUIST BANK	3415		$ 85,000.00	$ -	
MORRIS PERSONAL	570		$ 2,606,288.00	$ -	
MORRIS A K DEVLOPMENT	7519		$ 77,222.00	$ -	
MORRIS GOGA 4	7634		$ 62,362.00	$ -	
		Cash On Hand	$ -	$ -	
		TOTALS	$ 2,867,628.00	$ -	

B LIFE INSURANCE (List only those Policies that you own)

COMPANY	FACE OF POLICY	Cash Surrender Value	Policy Loan From Insurance Co	Other Loans Policy as Collateral	BENEFICIARY
New York Life Insurance	$ 1,000,000.00	$ 375,000.00			
	$	$ -	$ -		
	$ -	$ -	$ -		
	$ -	$ -	$ -		
TOTALS		$ 375,000.00	$ -		

C SECURITIES OWNED (including U.S. Government Bonds and all other Stocks and Bonds)

Face Value Bonds, # Shares of Stock	DESCRIPTION	Type of Ownership	COST	Market Value - US Gov Sec	Market Value Marketable Sec	Market Value Non Mkt Sec	Amount Pledged To Secured Loan
			TOTALS	$ -	$ -	$ -	

D NOTES AND ACCOUNTS RECEIVABLE (Money Payable or Owed to You Individually - indicate % of your Ownership Interest)

MAKER/DEBTOR	%	When Due	Original Amt	Balance Due Current Accounts	Balance Due Over 90 Days	Balance Due Notes Rel & Friends	Security (If Any)
				$ -	$ -	$ -	
				$ -	$ -	$ -	
				$ -	$ -	$ -	
				$ -	$ -	$ -	
				$ -	$ -	$ -	

E REAL ESTATE OWNED (indicate % of your Ownership Interest)

TITLE IN NAME OF	%	Date Acquired	Description & Location	Original Cost	Present Value of Real Estate	MORTGAGE OR CONTRACT PAYABLE Balance Due	Mo. Payment	Maturity
Krunal Patel				$ 740,000.00	$ 790,000.00	$ -	$ -	
AK Family Development llc				$ 13,000,000.00	$ 19,500,000.00			
Gaga 4 LLC				880,000.00	$ 1,750,000.00	$ 662,589.00	$ 6,294.00	
Gaga 4 LLC				$ 935,000.00	$ 1,970,000.00			
Gaga 4 LLC				$ 150,000.00	$ 580,000.00			
Gaga 4 LLC				$ 1,250,000.00	$ 6,700,000.00	$ 2,562,183.00	$ 24,050.00	
Gaga 4 LLC				$ 411,000.00	$ 970,000.00			
Gaga 2 LLC				1,080,000.00	$ 2,470,000.00	$ 750,840.00	$ 8,291.00	
Krunal Patel				$ 1,670,000.00	$ 1,865,000.00	$ 692,000.00	$ 4,430.95	
A k Developments Group llc				$ 475,000.00	$ 860,000.00	$ 275,000.00	$ 4,000.00	
A k Developments Group llc				475,000.00	$ 870,000.00			
A k Developments Group llc				$ 3,250,000.00	$ 4,470,000.00	$ 2,235,138.00	$ 22,400.00	
R & K Shopping Center llc				$ 700,000.00	$ 1,460,000.00	$ -	$ -	
R & K Shopping Center llc				$ 475,000.00	$ 580,000.00	$ -	$ -	
				TOTALS	$ 45,046,000.00	$ 7,157,550.00		

F MORTGAGES AND CONTRACTS OWNED (indicate % of your Ownership Interest)

Mortgage or Contract	%	MAKER Name & Address	Property Covered	Starting Date	Payments	Maturity	Balance Due
							$ -
							$ -
							$ -
							$ -
						TOTALS	$ -

G PERSONAL PROPERTY (indicate % of your Ownership Interest)

DESCRIPTION	Date When New	%	Cost When New	Value Today	LOAN ON PROPERTY Balance Due	To Whom Payable
			$ 2,470,000.00	$ 2,850,000.00		
			$ 87,000.00	$ 72,000.00		
			$ 46,000.00	$ 32,000.00		
			$ 16,000.00	$ 12,000.00		
			$ 8,900.00	$ 7,000.00		
			$ 18,000.00	$ 13,000.00		
			$ -	$ -	$ -	
			TOTALS	$ 2,780,000.00	$ -	

H NOTES

PAYABLE TO	Other Obligors (If Any)	Notes Due To Rel. and Friends	Notes Due "Others" (Not Banks)	Accounts and Bills	Contracts Payable	COLLATERAL	When Due
		$ -	$ -	$ -	$ -		
		$ -	$ -	$ -	$ -		
		$ -	$ -	$ -	$ -		
	TOTALS	$ -	$ -	$ -	$ -		

I have read, understand and agree to make these representations and warranties

If an individual statement

Signature Krunal Patel Date 05-20-24

If a joint statement

Spouse Signature Date 5/20/24

Control No.: 13438383

STATE OF GEORGIA

Secretary of State
Corporations Division
313 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, **Brian P. Kemp,** The Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

GOGA 4, LLC
a Domestic Limited Liability Company

is hereby issued a CERTIFICATE OF ORGANIZATION under the laws of the State of Georgia on **August 09, 2013** by the filing of all documents in the Office of the Secretary of State and by the paying of all fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on August 09, 2013

Brian P. Kemp
Secretary of State

Tracking #: Gx6Jy66r

Articles of Organization

The Name of the Limited Liability Company:
GOGA 4, LLC

The Principal Place of Business:

Registered Agent's Name and Address:
Krunal Patel

Effective Date: August 09, 2013

Organizer(s):

David S Hollingsworth
P.O. Box 6495
Macon, Georgia 31208-6495

Optional Provisions:

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on the date set forth below:
Signed by:
David S Hollingsworth Attorney-in-Fact

Date: 09 August, 2013

IRS DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

Date of this notice: 08-09-2013

Employer Identification Number:
46-3381205

Form: SS-4

Number of this notice: CP 575 B

GOGA 4 LLC
KRUNAL PATEL MBR

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 46-3381205. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065 04/15/2014

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, *Entity Classification Election*, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, *Election by a Small Business Corporation*. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

* Keep a copy of this notice in your permanent records. **This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.** You may give a copy of this document to anyone asking for proof of your EIN.

* Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.

* Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is GOGA. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.

Keep this part for your records. CP 575 B (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 B

9999999999

Your Telephone Number
( ) -

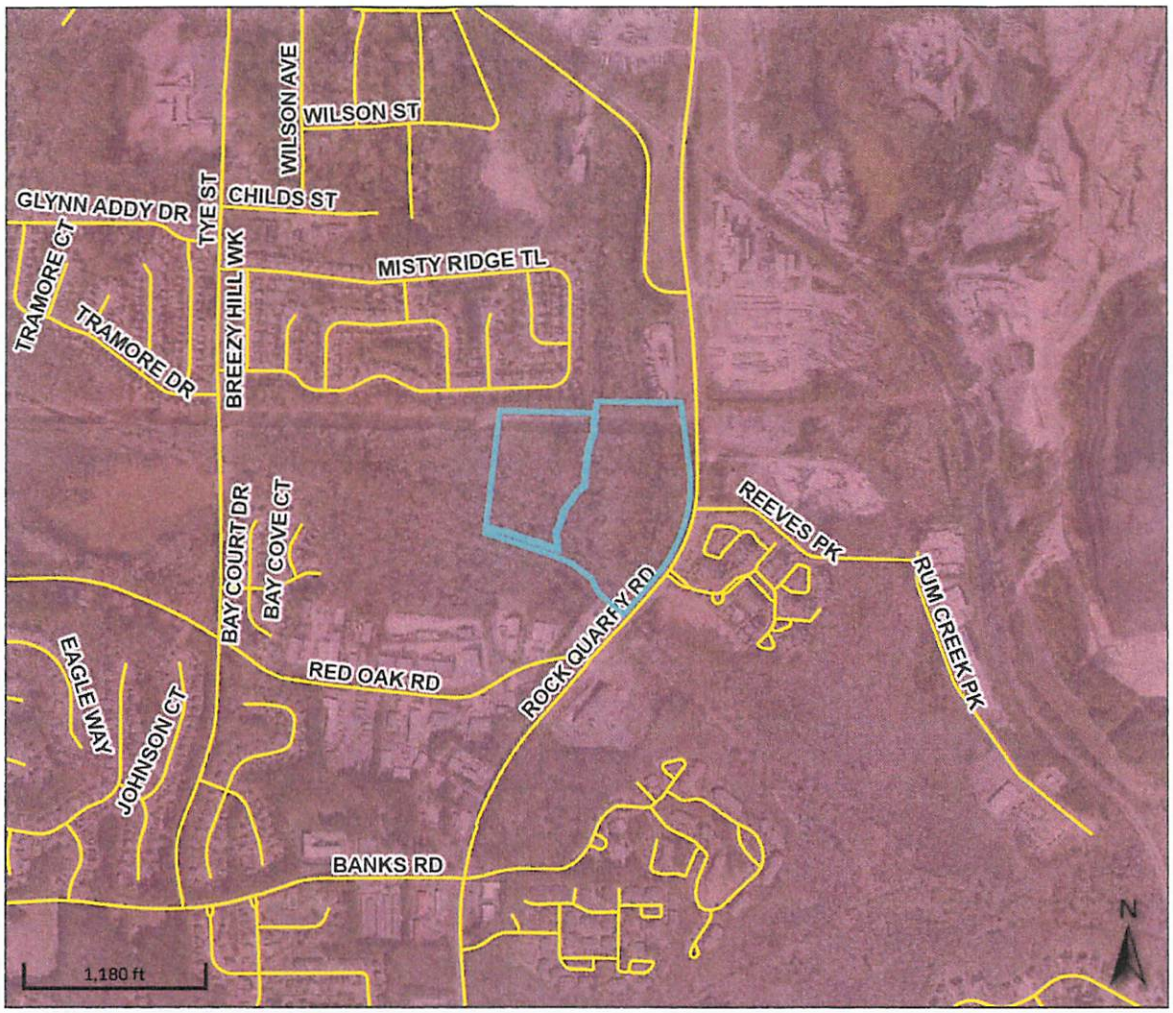
Best Time to Call

DATE OF THIS NOTICE: 08-09-2013
EMPLOYER IDENTIFICATION NUMBER: 46-3381205
FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

GOGA 4 LLC
KRUNAL PATEL MBR

Henry County, GA



Overview

Legend

- Parcels
- Roads
- Cities

Parcel ID	050-01002002	**Class**	I	**Owner**	STUTTS JAMES J	**Land Value:**	$423,100	**Last 2 Sales**			
Property Address		**Acreage**	27.41	**Address**	PO BOX 184 KILLEN AL 35645	**Building Value:**	$0	**Date**	**Price**	**Reason**	**Qual**
District	City/Stockbridge					**Misc Value:**	$0	12/20/2013	$0	D OF ASSNT	U
						Total Value:	$423,100	4/3/1989	$194,300	n/a	Q

Parcel lines depicted on the maps do not reflect a true and exact representation of property boundaries and should not be relied upon for said purpose. Property boundary lines are depicted on recorded plats available at the Henry County Courthouse or can be determined by employing the services of a licensed surveyor.

Date created: 6/6/2024
Last Data Uploaded: 6/6/2024 10:06:15 AM

Developed by Schneider GEOSPATIAL

790 Rock Quarry Rd

LOTTERY APPLICATION TRACKING SHEET

Date Received: 6/6/24 Application No.: 10

Applicant Name: Ravi Kaura

Proposed business and name: Express Package 790 Rock Quarry
parcel 050-01002002

CHECKLIST:

- ○ Complete Application and Documents: _____ or Missing: _____
- ✓ $750 Non-Refundable Application Fee: Yes Date Processed: 6/6
- ✓ Fieldprint Background Check Information Received: _____
- ○ Notarized Financial Statement Received: _____
- ✓ Copy of Government Issued ID Received: _____
- ✓ ~~Emailed~~ Gave applicant receipt/CC approval code/lottery process timeline: 6/6
- ○ Redacted Copy of Application Sent to City Clerk on: (date) _____

Any Notes:
Rspamusement@gmail.com.

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

APPLICATION
(Lottery Application ONLY)

NOTE: USE SEPARATE PAGES AND/OR ATTACHMENTS, AS NECESSARY

1. Type(s) of license applied for:
   - (X) Alcohol License
   - ( ) Tire Shop
   - ( ) Used Car Dealership
   - ( ) Used Appliance Shop
   - ( ) Thrift store and Consignment Shop
   - ( ) Pawnshop
   - ( ) Vape Shop
   - ( ) Precious Metals

2. Proposed license is a (n):
   - ( ) Individual
   - ( ) Partnership
   - ( ) Corporation
   - (X) LLC
   - ( ) other legal entity (explain)

   _____

3. Applicant information:

   Name: Ravi Kaura

   Title/Position: Owner

   Are you a citizen of the United States: ✓ yes _____ no

   Where were you born? Aurora, Illinois

   Present home address:

   County of Bibb Number of years at present address 12yrs

   Contact information: Business phone #: _____

   Home phone #: 404-973-4461

   How long have you been a resident of Georgia? 23yrs Henry Co? _____

   What has been your occupation for the past five (5) years? Self Employed

4. Applicant's relationships with other persons with 1st degree of kinship.

Immediate living relatives:
(Please list all immediate living wife, children, parents, brothers, sisters, and parents)
(Attach separate sheet(s) if necessary)

Name: Krunal K. Patel Age: 47yrs

Relationship: Father Live with or apart: me

Name: Navpreet Kaur Age: 48yrs

Relationship: Mother Live with or apart: me

Name: Sanket K Patel Age: 25yrs

Relationship: Brother Live with or apart: me

Name: Perin. K. Patel Age: 16yrs

Relationship: Brother Live with or apart: me

5. Proposed business name and address:

Business name: ~~Express Package~~

Address: ~~Jodeco rd~~ 790 Rock quarry Rd stockbridge GA 3028

6. Corporations: If operating as a corporation, please complete the following:

Corporation name: —

Address:

Date of Incorporation: Where Incorporated:

Type of Corporation:

Corporate Officers: *Please list each (attach a separate sheet if necessary)*

Name: SS#

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

7. **Stockholder information – applies to any "closely held" stock, not publicly traded and to all stockholders who own more than 10% of the outstanding capital stock of the corporation. DO NOT FILL OUT THIS INFORMATION FOR PUBLICLY TRADED CORPORATIONS. In lieu thereof, please indicate by attached sheet as to whether any affiliate, related company, holding company, subsidiary or other organization holds any form of alcohol license in the City of Stockbridge, or any distilled spirits package sale license within the State of Georgia.**

8. If operating as a corporation, list stockholders with addresses and the amount of interest of each stockholder in the corporation. ***Please list each (attach a separate sheet if necessary)***

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

9. Limited Liability Company (LLC): If operating as a company, please complete the following:

Company name: A.K Investment 2020 LLC

Address: _____

_____

Date of Formation: 11-09-2020 Where Formed (State): GA

Type of LLC (member managed or manager managed): _____

LLC members with an ownership interest: ***Please list each (attach a separate sheet if necessary)***

Name: Ravi Kaura SS#_____

Member – ownership interest (_%): 100 %

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%): _____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%): _____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%): _____

Address: _____

<u>Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"</u>

10. Limited Liability Partnership (LLP), Partnerships, Sole Proprietorships, and any other forms of business entity: If operating as a partnership or other form of business entity, please complete the following:

Entity name: _____ / _____

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of Partnership: _____

Partnership members with an ownership interest. ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

If more than 4 members, partners, or stockholders, please provide the name, address, social security number and ownership interest of additional parties at interest, by separate sheet.

11. Registered Agent

If the proposed license is a legal entity, please provide name of its registered agent:

Agent(s) name: Ravi Kaura

Address: _____

Telephone Number: _____

12. Store Manager, Managing Member, Managing Partner, or other person in charge:
What is the name of the person who, if the license is granted, will be the active manager of the business and on the job at the business?

Full name: Ravi Kaura

(Please complete the site manager's personal statement, attached)

13. Convictions:
Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (15) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

No

14. Location ownership
Do you own the land and building on which the business is to be operated?

_____ Yes _____ No If Yes, when did you buy it? _____
(Attach proof of ownership)

If not the owner, please complete the following and attach a copy of the lease, option, and any other pertinent documents:

Owner/Agent of Property: _____

Amount of rent: _____ Frequency Paid: _____

Is the amount of rent a set amount? _____ Yes _____ No

If NO, please explain how it is determined: _____

15. If you have an option, or other legal, binding document to buy, lease the building, please explain the general terms: _____

16. Zoning
What is the current zoning on the proposed property location? _____

17. Location Certification
If this is the first application for a license for this business, please attach a current certificate from a registered surveyor containing the following information:

(1) A scale drawing of the building or proposed building as situated on the proposed lot.
(2) Proposed parking available to the building.

NOTE: NOT Required for a retail package alcohol license until the applicant is chosen for a license.

18. Financial Interest – Does the applicant or interested parties to this Application:

A. Have any financial interest in any similar business?

_____ Yes ___X___ No

B. Received any financial aid or assistance from any similar business?

_____ Yes ___✓___ No

19. Other Interests:
Do you; any member of your family (children, spouse, parents, siblings) or any of the other owners, partners, or stockholders:

A. Have any interest, financial or otherwise, in other similar businesses or establishments?
_____ Yes ___✓___ No

If YES, please list:

_____

_____

B. Own, lease, sub-lease any real estate which is occupied by a similar business. If so, give the location information as to any lease or rental agreement including rents received and who it was rented to: _____ Yes ___✓___ No

If YES, please list:

_____

_____

C. Serve as the Executor or Administrator or Beneficiary of Heir of any estate having an interest in any similar business or establishment?

_____ Yes ___✓___ No

If YES, please list:

_____

_____

D. Serve as Beneficiary or Trustee of any Trust Fund having an interest in any similar business or establishment?

_____ Yes ✓ No

If YES, please list:

_____

_____

20. Financial Gain
Please list all parties who will receive any financial gain or payment derived from any interest or income as a result of the operation that this application applies to. (Please include any owners, partners, members, officers, or principal stockholders)

_____

_____

21. Other Jurisdictions
List other jurisdictions in which any applicant, partner, member, corporate officer, or stockholder holds a similar occupational tax certificate, regulatory license, or alcoholic beverage license:

_____

_____

_____

List all details of denial of any such licenses in any other jurisdiction:

_____

_____

22. Are you familiar with the City of Stockbridge Ordinances, State laws and regulations, Federal laws and regulations governing the operations of this type of business?

X Yes _____ No

(City of Stockbridge Ordinance 9.04 Alcoholic Beverage)

23. Restrictions Alcohol ONLY

Ordinance 9.04.090

1. No retail license for the sale of distilled spirits shall be issued unless the location is located within five hundred (500) feet of the streets or roads designated in the following three (3) areas and has direct access onto such streets or roads:

   Area 1: Those portions of Mount Zion Boulevard and Highway 138 lying west of I-75;
   Area 2: Those portions of Highway 138 and North Henry Boulevard lying east of I-75;

   Area 3: Those portions of Eagles Landing Parkway/Hudson Bridge Road from their intersection with the west right-of-way line of Highway 42 to the west city limits line.

24. Do you agree to abide by such ordinances, laws, and regulations?

    ✓ Yes _____ No

25. Do you have any questions or comments regarding the ordinances, laws, regulations, or application?

    _____ Yes ✓ No

    If YES, please list:

    _____

    _____

Georgia, Henry County, City of Stockbridge

I, Ravi Kaura, being duly sworn according to the law, do swear that the facts and things stated by me in the above and foregoing answers to questions are true, and no false, or fraudulent statement is made herein, and such answers were made in order to produce the granting of such license.

J SPECK
MY COMMISSION EXPIRES
NOTARY
PUBLIC
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

Signature of Applicant

Ravi Kaura
Print Name

Owner
Title of Applicant

Subscribed and Sworn before me on this the 12 day of June, 2024

gSpeck
NOTARY PUBLIC signature

4.11.25
Notary Commission Expires

J. Speck
NOTARY PUBLIC printed name

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

SITE MANAGER'S PERSONAL INFORMATION
Alcohol License ONLY

(To be attached to Application)
(A photo of the manager must be attached to this form)

1. **Business Name**
(Please complete for the business you are applying as a manager for)

Business Name: ~~Express Package~~ 790 Rock Quarry Rd Stockbridge GA 30281

Address: ✓

2. **Manager's name and address:**

Name: Ravi Kaura

Home address: _____

Phone number: 404-973-4461

3. **Personal identification information:**

Race: Asian Sex: M Height: 6 Weight: 150 Age: 26yrs

Color of hair: BLK Color of eyes: BLK

4. **Manager's birth information:**

Location of birth: Aurora, ILL

Date of birth: _____

5. **Spousal information: (If married, please complete)**

Spouse's full name: _____

Maiden name if applicable: _____

Date of Birth: _____ Date married: _____

Employer: _____

6. **Employment record:**
(Please list your previous employment information for the last past 10 years) (Attach separate sheet if necessary)

Employer: _____

Location: _____ Dates – From:____ To: ____

Employer: _____

Location: _____ Dates – From:____ To: ____

Employer: _____

Location: _____ Dates – From:____ To: ____

7. **Financial interest:**

Do you or your spouse, or any member of your family:

A. Have any interest, financial or otherwise, in other malt beverage, wine, or distilled spirits stores or establishments? _____ Yes ___X___ No

If YES, please list:

_____

_____

B. Ever been denied a license or had a license revoked? _____ Yes ___X___ No

If YES, please list:

_____

_____

8. **Prior residences:**
(Please list all residences you have had in the past ten (10) years.) *(Include a separate sheet if necessary)*

Street Address _____ City _____ State GA Years 12yrs

_____

_____

9. **Tax return:**
Did you file a Georgia tax return last year?

✓ Yes _____ No

10. Convictions:

Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (10) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

No

Charge: _____

Place of arrest: _____ Date: _____

Disposition: _____

11. Personal References:

(Please list three personal references not related to you, whom you have known for at least five years)

Name: _____ Phone #: _____

Address: _____

Name: _____ Phone #: _____

Address: _____

Name: _____ Phone #: _____

Address: _____

12. Emergency Contact:

Contact name: Navpreet Kaur Phone #: 478 832 5551

I, _____, do solemnly swear, that the foregoing statements are true. I understand that any falsehoods are grounds for automatic dismissal of this application.

Signature of Manager

Ravi Kaura

Print Name

Owner

Title of Applicant

J SPECK
MY COMMISSION EXPIRES
NOTARY
PUBLIC
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

Subscribed and Sworn before me on this the 6 day of June, 2024

gspeck

NOTARY PUBLIC signature

4.11.25

Notary Commission Expires

J Speck

NOTARY PUBLIC printed name

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

BACKGROUND AND SECURITY CLEARANCE FORM
OWNER, APPLICANT, MANAGER
Alcohol License ONLY

Authorization for Release of Personal Information
(Attach photocopy of Social Security Card and Photo ID)

I, Ravi Kaura, do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the City of Stockbridge, whether said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure pertaining to the background investigation necessary to process my application as required under the Alcohol Beverage Ordinance (Chapter 9) governing licensing in the City.

I also certify that any person, firm, or other entity ("the providing entity") who may furnish such information concerning me, shall not be held liable or accountable for giving this information and I do hereby fully and completely release the providing entity from all liability, which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the photocopy does not contain the original writing of my signature.

JSpeck
Notary

4.11.25
Notary Commission Expires

J SPECK
MY COMMISSION EXPIRES
NOTARY
PUBLIC
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

Signature

6/6/24
Date

Date of Birth

Social Security Number

Driver's License Number

6
Height

150LB
Weight

City of Stockbridge

SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

Instructions: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

Ravi Kaura

Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity.

Address of applicant named above

404-973-4461

Telephone Number

Name of business, corporation for whom application is being made.

OCCUPATIONAL TAX CERTIFICATE

Category of Public Benefit

1. ✓ I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. _____ I am a legal permanent resident of the United States.
3. _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

_____.

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the back of this form.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this affidavit? : DL -

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

MUST BE COMPLETED BY NOTARY

I, Ravi Kaura {representative for} AK Investment 2020LLC

(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

Ravi K

Signature of Applicant

Date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 6 DAY OF June, 20 24

Executed in Warner Robins (City), Ga (State)

J Speck

NOTARY PUBLIC Signature

4.11.25

My Commission Expires

J SPECK
MY COMMISSION EXPIRES
NOTARY
PUBLIC
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

SECURE AND VERIFIABLE DOCUMENTS

The following list of secure and verifiable documents, published under the authority of O.C.G.A § 50-36-2 contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative or residency or immigration status.

- A United States passport or passport card
- A United States military identification card
- A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A tribal identification card of the federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer. A listing of the federally reorganized Native American tribes may be found at: http//www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm
- A United States Permanent Resident Card or Alien Registration Receipt Card
- An Employment Authorization Document that contains a photograph of the bearer
- A passport issued by a foreign government, must have I-94 attached
- A Merchant Mariner Document Mariner Credential issued by the United States Coast Guard
- A Free and Secure Trade (FAST) card
- A NEXUS card
- A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card
- A driver's license issued by a Canadian government
- A Certificate of Citizenship issued by the United States Department of Citizenship
- Immigration Services (USCIS) (Form N-560 or Form N-561)
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570)

Control Number : 20219527

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

AK INVESTMENT 2020 LLC
a **Domestic Limited Liability Company**

has been duly organized under the laws of the State of Georgia on **11/09/2020** by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on **11/10/2020**.

Brad Raffensperger

Brad Raffensperger
Secretary of State

ARTICLES OF ORGANIZATION

Electronically Filed
Secretary of State
Filing Date: 11/9/2020 3:07:48 PM

BUSINESS INFORMATION

CONTROL NUMBER	20219527
BUSINESS NAME	AK INVESTMENT 2020 LLC
BUSINESS TYPE	Domestic Limited Liability Company
EFFECTIVE DATE	11/09/2020

PRINCIPAL OFFICE ADDRESS

ADDRESS

REGISTERED AGENT

NAME	ADDRESS	COUNTY
RAVI KAURA		Bibb

ORGANIZER(S)

NAME	TITLE	ADDRESS
RAVI KAURA	ORGANIZER	

OPTIONAL PROVISIONS

N/A

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE	RAVI KAURA
AUTHORIZER TITLE	Organizer

IRS DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

Date of this notice: 11-10-2020

Employer Identification Number:
85-3829668

Form: SS-4

Number of this notice: CP 575 G

AK INVESTMENT 2020 LLC
RAVI KAURA SOLE MBR

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 85-3829668. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

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* Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.

* Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is AKIN. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.

(IRS USE ONLY) 575G 11-10-2020 AKIN O 9999999999 SS-4

Keep this part for your records. CP 575 G (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 G

9999999999

Your Telephone Number
( ) -

Best Time to Call

DATE OF THIS NOTICE: 11-10-2020
EMPLOYER IDENTIFICATION NUMBER: 85-3829668
FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

AK INVESTMENT 2020 LLC
RAVI KAURA SOLE MBR

GEORGIA
DRIVER'S LICENSE

DL

USA
GA

DRIVER'S LICENSE

Governor:

Commissioner:

4d DL NO. [redacted]

3 DOB [redacted]

9 CLASS C

4b EXP 03/28/2027

2 RAVI

1 KAURA

8 [redacted]

BIBB

12 REST B

9a END NONE

4a ISS 07/24/2020

15 SEX M

18 EYES BLK

16 HGT 6'-00"

17 WGT 150 lb

5 DD [redacted]

♥ ORGAN DONOR

www.dds.georgia.gov

MEDICAL INFORMATION: BLOOD TYPE B+;

CLASS: C-≤ 26,000 lbs. GVWR and Trailer ≤ 10,000 lbs. All recreational vehicles included

ENDORSEMENTS: NONE

RESTRICTIONS: B-Corrective lenses required

DOB:

PASSPORT
PASSEPORT
PASAPORTE

UNITED STATES OF AMERICA

USA

Type / Type / Tipo: P

Code / Code / Codigo: USA

Passport No. / No. du Passeport / No. de Pasaporte: [redacted]

Surname / Nom / Apellidos
KAURA

Given Names / Prénoms / Nombres
RAVI

Nationality / Nationalité / Nacionalidad
UNITED STATES OF AMERICA

Date of birth / Date de naissance / Fecha de nacimiento
[redacted]

Place of birth / Lieu de naissance / Lugar de nacimiento
ILLINOIS, U.S.A.

Sex / Sexe / Sexo
M

Date of issue / Date de délivrance / Fecha de expedición
26 Jan 2017

Authority / Autorité / Autoridad
United States
Department of State

Date of expiration / Date d'expiration / Fecha de caducidad
25 Jan 2027

Endorsements / Mentions Spéciales / Anotaciones
SEE PAGE 27

USA

P<USAKAURA<<RAVI<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<

[redacted]

Ravi kaura	Exchange Bank	TYPE OF CREDIT	
	6081 Lake Oconee Parkway	*	Individual - Provide your financial information only
	Greensboro, GA 30642		Joint, with
			Information on separate financial statement
Applicant's Name & Address	**Creditor's Name and Address**	Relationship	

Individual Information				**Joint Party Information**			
Business or Occupation				Business or Occupation			
Employer's Name & Address				Employer's Name & Address			
Length of Employment				Length of Employment			
Home Phone		Bus. Phone	404-973-4461	Home Phone		Bus. Phone	
Date of Birth		SS #		Date of Birth		SS #	

PLEASE COMPLETE SCHEDULES FIRST

ASSETS - Summary from Schedules				**LIABILITIES - Summary from Schedule**			
Cash on Hand and In Bank		Sched. A	$ 5,465,631.00	Notes Due to Banks		Sched. A	$ -
Cash Value of Life Insurance		Sched. B	$ 215,000.00	Notes Due to Relatives and Friends		Sched. H	$ -
U.S. Gov. Securities		Sched. C	$ -	Notes Due to Others		Sched. H	$ -
Other Marketable Securities		Sched. C	$ -	Accounts and Bills Payable		Sched. H	$ -
			$ -	Loans on Life Ins Policy		Sched. B	$ -
			$ -	Contract Accounts Payable		Sched. H	$ -
			$ -	Cash Rent Payable			$ -
	TOTAL LIQUID ASSETS		$ 5,680,631.00	Other Liabilities Due within 1 year - Itemize			$ -
Real Estate Owned		Sched. E	$ 5,580,000.00				
Mortgages & Contracts Owned		Sched. F	$ -				
Notes & Accounts Receivable - current		Sched. D	$ -				
Notes & Accounts Receivable - over 90 days		Sched. D	$ -		TOTAL SHORT TERM LIABILITIES		$ -
Notes Due From Relatives and Friends		Sched. D	$ -	Real Estate Mortgages Payable		Sched. E	$ -
Other Securities - Not Readily Marketable		Sched. C	$ -	Personal Property Debts Payable		Sched. G	$ 28,000.00
Personal Properties		Sched. G	$ 391,000.00	Other Debts - Itemize			$ -
IRA and Tax Deferred Accounts			$ -		TOTAL LONG TERM LIABILITIES		$ 28,000.00
Other Assets - Itemized on attachment			$ -	Total Liabilities			$ 28,000.00
	TOTAL PRODUCTIVE ASSETS		$ 5,971,000.00	Net Worth (Total Assets Minus Total Liabilities)			$ 11,623,631.00
TOTAL ASSETS			**$ 11,651,631.00**	**TOTAL LIABILITIES AND NET WORTH**			**$ 11,651,631.00**

ANNUAL INCOME		**ESTIMATE OF ANNUAL EXPENSES**	
Salary, Bonuses and Commissions		Income Taxes	$ -
Dividends and Interest	$ -	Other Taxes	$ -
Rental and Lease Income (Net)	$ -	Insurance Premiums	$ -
Alimony, child support, or separate maintenance income need not be revealed if		Mortgage Payments	$ -
you do not wish to have it considered as a basis for repaying		Rent Payable	$ -
this obligation. Other Income - Itemized	$ -	Other Expenses	$ -
Provide the following information only if Joint Credit is checked above.			
Other Person's Salary, Bonuses and Commissions	$ -		
Alimony, child support, or separate maintenance income need not be revealed if			
you do not wish to have it considered as a basis for repaying			
this obligation. Other Income of Other Person - Itemized	$ -		
TOTAL	**$ -**	**TOTAL**	**$ -**

GENERAL INFORMATION			**CONTINGENT LIABILITIES**		
Are any Assets Pledged Other Than Those listed on Schedules?			As Endorser, Co-Maker or Guarantor		
YES	NO			YES	NO
Are you a Defendant in Any Suits or Legal Actions?			On Leases or Contracts		
YES	NO			YES	NO
Date Income Taxes were last filed?			Legal Claims		
				YES	NO
Have you ever been declared Bankrupt in the last 10 years?			Federal - State Income Taxes		
YES	NO			YES	NO
Are you a Partner or Officer in any other Venture?			Other		
YES	NO				

SCHEDULES

A. CASH IN BANKS AND NOTES DUE TO BANKS (List all Real Estate Loans in Sched E)

NAME OF BANK	Type of Acct	Type of Ownership	On Deposit	Notes Due to Bank	Collateral (if Any) and Type of Ownership
Capital city bank	Checking		$ 921,781.00	$ -	
Bank of America	Checking		$ 4,543,850.00	$ -	
			$ -	$ -	
			$ -	$ -	
			$ -	$ -	
		Cash On Hand	$ -	$ -	
		TOTALS	$ 5,465,631.00	$ -	

B LIFE INSURANCE (List only those Policies that you own)

COMPANY	FACE OF POLICY	Cash Surrender Value	Policy Loan From Insurance Co.	Other Loans Policy as Collateral	BENEFICIARY
New York Life Insurance	$ 1,000,000.00	$ 215,000.00			
	$ -	$ -	$ -		
	$ -	$ -	$ -		
	$ -	$ -	$ -		
	TOTALS	$ 215,000.00	$ -		

C SECURITIES OWNED (Including U.S. Government Bonds and all other Stocks and Bonds)

Face Value Bonds, # Shares of Stock	DESCRIPTION	Type of Ownership	COST	Market Value - US Gov Sec	Market Value - Marketable Sec	Market Value - Non Mkt Sec	Amount Pledged To Secured Loan
			$ -	$ -		$ -	
			$ -	$ -	$ -	$ -	
			$ -	$ -	$ -	$ -	
			$ -	$ -	$ -	$ -	
			TOTALS	$ -	$ -	$ -	

D NOTES AND ACCOUNTS RECEIVABLE (Money Payable or Owed to You Individually - Indicate % of your Ownership Interest)

MAKER/DEBTOR	%	When Due	Original Amt	Balance Due Current Accounts	Balance Due Over 90 Days	Balance Due Notes Rel. & Friends	Security (If Any)
				$ -	$ -	$ -	
				$ -	$ -	$ -	
				$ -	$ -	$ -	
				$ -	$ -	$ -	
				$ -	$ -	$ -	

E REAL ESTATE OWNED (Indicate % of your Ownership Interest)

TITLE IN NAME OF	%	Date Acquired	Description & Location	Original Cost	Present Value of Real Estate	MORTGAGE OR CONTRACT PAYABLE Balance Due	Mo. Payment	Maturity
AK INVESTMENT 2020 LLC				$ -	$ 450,000.00	$ -	$ -	
AK INVESTMENT 2020 LLC					$ 650,000.00			
THREE BROTHER LLC					$ 2,700,000.00			
THREE BROTHER LLC					$ 1,780,000.00			
					$ -	$ -		
				TOTALS	$ 5,580,000.00	$ -		

F MORTGAGES AND CONTRACTS OWNED (Indicate % of your Ownership Interest)

Mortgage or Contract	%	MAKER Name & Address	Property Covered	Starting Date	Payments	Maturity	Balance Due
							$ -
							$ -
							$ -
							$ -
						TOTALS	$ -

G PERSONAL PROPERTY (Indicate % of your Ownership Interest)

DESCRIPTION	Date When New	%	Cost When New	Value Today	LOAN ON PROPERTY Balance Due	To Whom Payable
Jewerly, Furniture			$ 160,000.00	$ 160,000.00	$ -	
Ford 150 2019			$ 71,000.00	$ 38,000.00	$ 28,000.00	
Ford 150 2021			$ 76,000.00	$ 67,000.00		
Ford 150 2021 Raptor			$ 109,000.00	$ 109,000.00		
Nissan Rogue 2019			$ 27,000.00	$ 17,000.00		
			$ -	$ -		
			$ -	$ -		
			$ -	$ -		
			$ -	$ -	$ -	
			$ -	$ -	$ -	
			TOTALS	$ 391,000.00	$ 28,000.00	

H NOTES

PAYABLE TO	Other Obligors (If any)	Notes Due To Rel. and Friends	Notes Due "Others" (Not Banks)	Accounts and Bills	Contracts Payable	COLLATERAL	When Due
		$ -	$ -	$ -	$ -		
		$ -	$ -	$ -	$ -		
		$ -	$ -	$ -	$ -		
	TOTALS	$ -	$ -	$ -	$ -		

I have read, understand and agree to make these representations and warranties

If an individual statement

Signature

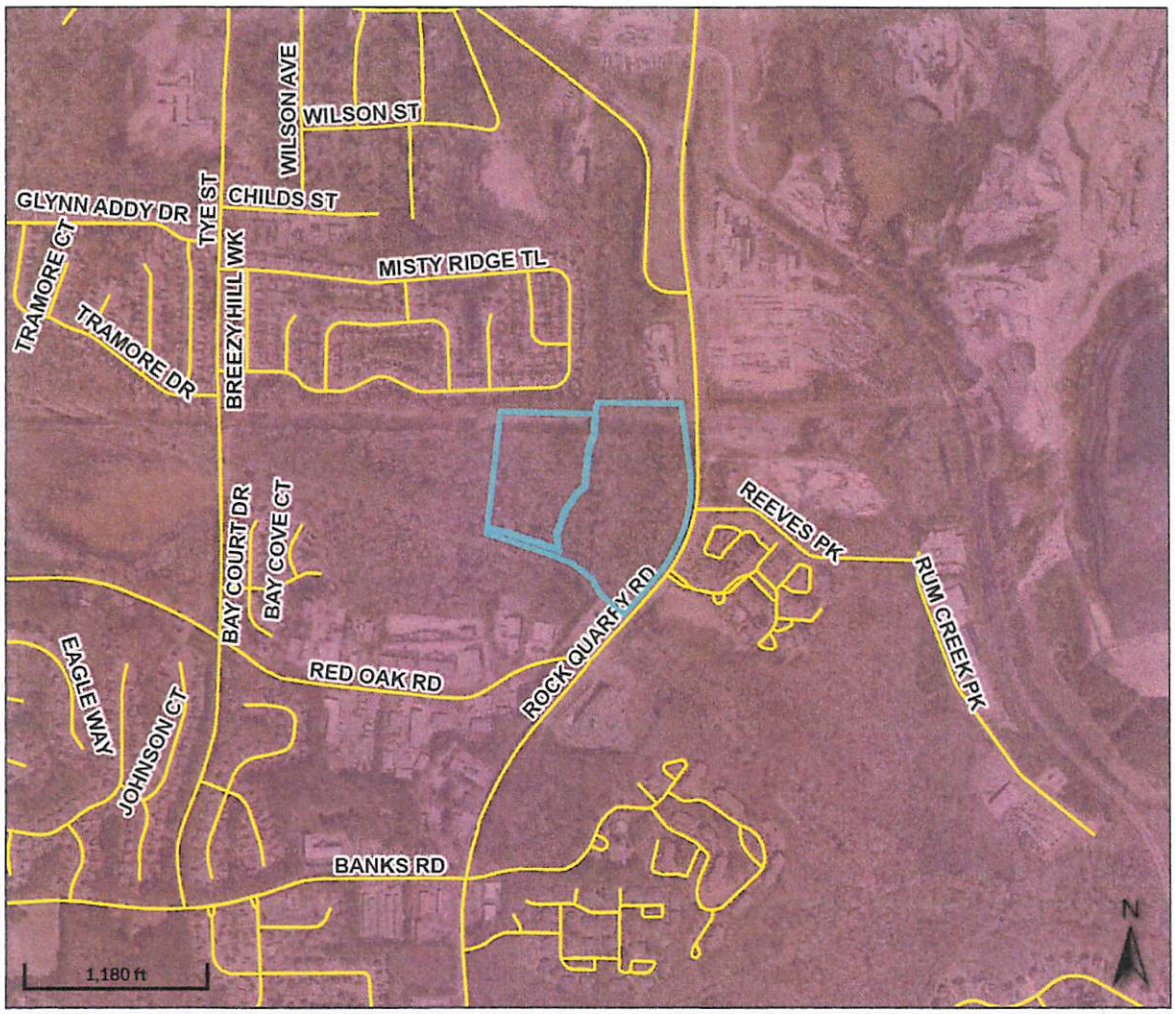
Date:

If a joint statement

Spouse Signature

Date:

Henry County, GA



Overview

Legend

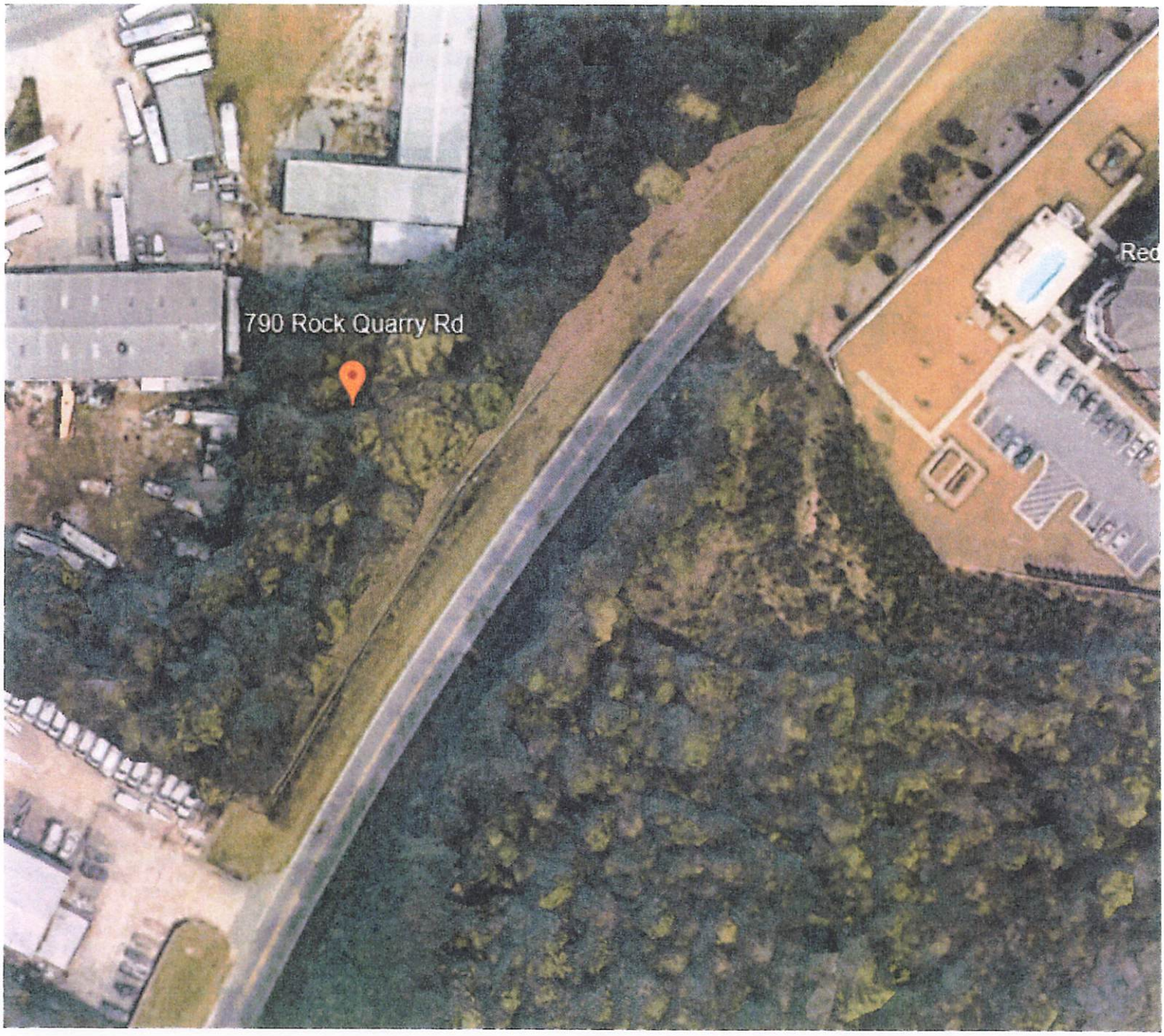
- Parcels
- Roads
- Cities

Parcel ID	050-01002002	**Class**	I	**Owner**	STUTTS JAMES	**Land Value:**	$423,100	**Last 2 Sales**			
Property		**Acreage**	27.41	**Address**	J	**Building**	$0	**Date**	**Price**	**Reason**	**Qual**
Address					PO BOX 184	**Value:**		12/20/2013	$0	D OF ASSNT	U
District	City/Stockbridge				KILLEN AL	**Misc Value:**	$0				
					35645	**Total Value:**	$423,100	4/3/1989	$194,300	n/a	Q

Parcel lines depicted on the maps do not reflect a true and exact representation of property boundaries and should not be relied upon for said purpose. Property boundary lines are depicted on recorded plats available at the Henry County Courthouse or can be determined by employing the services of a licensed surveyor.

Date created: 6/6/2024
Last Data Uploaded: 6/6/2024 10:06:15 AM

Developed by Schneider GEOSPATIAL


790 Rock Quarry Rd
Red

LOTTERY APPLICATION TRACKING SHEET

Date Received: 6/6/24 Application No.: 11

Applicant Name: Sanket Patel

Proposed business and name: AK 5 Star Family 790 Rock Quarry Rd
parcel 050-01002002

CHECKLIST:

- ○ Complete Application and Documents: _____ or Missing: _____
- ✓ $750 Non-Refundable Application Fee: yes Date Processed: 6/6
- ✓ Fieldprint Background Check Information Received: 6/4
- ○ Notarized Financial Statement Received: _____
- ✓ Copy of Government Issued ID Received: _____
- ✓ ~~Emailed~~ Gave applicant receipt/CC approval code/lottery process timeline: 6/6
- ○ Redacted Copy of Application Sent to City Clerk on: (date) _____

Any Notes:
Sunny2999p@gmail.com.

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

APPLICATION
(Lottery Application ONLY)

NOTE: USE SEPARATE PAGES AND/OR ATTACHMENTS, AS NECESSARY

1. Type(s) of license applied for:
   - (✓) Alcohol License
   - ( ) Tire Shop
   - ( ) Used Car Dealership
   - ( ) Used Appliance Shop
   - ( ) Thrift store and Consignment Shop
   - ( ) Pawnshop
   - ( ) Vape Shop
   - ( ) Precious Metals

2. Proposed license is a (n):
   - ( ) Individual
   - ( ) Partnership
   - ( ) Corporation
   - (✓) LLC
   - ( ) other legal entity (explain)

   _____

3. Applicant information:

   Name: Sanket Patel

   Title/Position: _____

   Are you a citizen of the United States: ✓ yes ____ no

   Where were you born? Gujarat, India

   Present home address: _____

   County of Bibb Number of years at present address 12

   Contact information: Business phone #: 478-337-1380

   Home phone #: _____

   How long have you been a resident of Georgia? 16 Henry Co? 0

   What has been your occupation for the past five (5) years? Self-employed

4. Applicant's relationships with other persons with 1st degree of kinship.

Immediate living relatives:
(Please list all immediate living wife, children, parents, brothers, sisters, and parents)
(Attach separate sheet(s) if necessary)

Name: Krunal Patel Age: 47 years

Relationship: Father Live with or apart: live with

Name: Navpreet Kaur Age: 48 year

Relationship: Mother Live with or apart: live with

Name: Ravi Kaura Age: 26 years

Relationship: Brother Live with or apart: live with

Name: Perin Patel Age: 16 years

Relationship: Brother Live with or apart: live with

5. Proposed business name and address:

Business name:

Address: 790 Rock Quarry Stockbridge GA 30281

6. Corporations: If operating as a corporation, please complete the following:

Corporation name: AK 5 star family LLC

Address:

Date of Incorporation: 07-02-2021 Where Incorporated: Georgia

Type of Corporation: LLC

Corporate Officers: *Please list each (attach a separate sheet if necessary)*

Name: Sanket Patel SS#

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

7. **Stockholder information – applies to any "closely held" stock, not publicly traded and to all stockholders who own more than 10% of the outstanding capital stock of the corporation. DO NOT FILL OUT THIS INFORMATION FOR PUBLICLY TRADED CORPORATIONS. In lieu thereof, please indicate by attached sheet as to whether any affiliate, related company, holding company, subsidiary or other organization holds any form of alcohol license in the City of Stockbridge, or any distilled spirits package sale license within the State of Georgia.**

8. If operating as a corporation, list stockholders with addresses and the amount of interest of each stockholder in the corporation. ***Please list each (attach a separate sheet if necessary)***

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

9. Limited Liability Company (LLC): If operating as a company, please complete the following:

Company name: AK 5 Star family LLC

Address: _____

_____

Date of Formation: 07-02-2021 Where Formed (State): Georgia

Type of LLC (member managed or manager managed): member managed

LLC members with an ownership interest: ***Please list each (attach a separate sheet if necessary)***

Name: Sanket Patel SS#_____

Member – ownership interest (100%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

10. Limited Liability Partnership (LLP), Partnerships, Sole Proprietorships, and any other forms of business entity: If operating as a partnership or other form of business entity, please complete the following:

Entity name: _____

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of Partnership: _____

Partnership members with an ownership interest. ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

If more than 4 members, partners, or stockholders, please provide the name, address, social security number and ownership interest of additional parties at interest, by separate sheet.

11. Registered Agent

If the proposed license is a legal entity, please provide name of its registered agent:

Agent(s) name: Sanket Patel

Address: _____

Telephone Number: 478-337-1380

12. Store Manager, Managing Member, Managing Partner, or other person in charge:
What is the name of the person who, if the license is granted, will be the active manager of the business and on the job at the business?

Full name: Sanket Patel

(Please complete the site manager's personal statement, attached)

13. Convictions:
Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (15) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

_____

_____

_____

14. Location ownership
Do you own the land and building on which the business is to be operated?

_____ Yes _____ No If Yes, when did you buy it? _____
(Attach proof of ownership)

If not the owner, please complete the following and attach a copy of the lease, option, and any other pertinent documents:

Owner/Agent of Property: _____

Amount of rent: _____ Frequency Paid: _____

Is the amount of rent a set amount? _____ Yes _____ No

If NO, please explain how it is determined: _____

_____

15. If you have an option, or other legal, binding document to buy, lease the building, please explain the general terms: _____

_____

16. Zoning
What is the current zoning on the proposed property location? _____

17. Location Certification
If this is the first application for a license for this business, please attach a current certificate from a registered surveyor containing the following information:

(1) A scale drawing of the building or proposed building as situated on the proposed lot.
(2) Proposed parking available to the building.

NOTE: NOT Required for a retail package alcohol license until the applicant is chosen for a license.

18. Financial Interest – Does the applicant or interested parties to this Application:

A. Have any financial interest in any similar business?

_____Yes _____ No

B. Received any financial aid or assistance from any similar business?

_____ Yes _____ No

19. Other Interests:
Do you; any member of your family (children, spouse, parents, siblings) or any of the other owners, partners, or stockholders:

A. Have any interest, financial or otherwise, in other similar businesses or establishments?
_____ Yes _____ No

If YES, please list:

_____

_____

B. Own, lease, sub-lease any real estate which is occupied by a similar business. If so, give the location information as to any lease or rental agreement including rents received and who it was rented to: _____ Yes _____ No

If YES, please list:

_____

_____

C. Serve as the Executor or Administrator or Beneficiary of Heir of any estate having an interest in any similar business or establishment?

_____ Yes _____ No

If YES, please list:

_____

_____

D. Serve as Beneficiary or Trustee of any Trust Fund having an interest in any similar business or establishment?

_____ Yes _____ No

If YES, please list:

_____

_____

20. Financial Gain
Please list all parties who will receive any financial gain or payment derived from any interest or income as a result of the operation that this application applies to. (Please include any owners, partners, members, officers, or principal stockholders)

_____

_____

21. Other Jurisdictions
List other jurisdictions in which any applicant, partner, member, corporate officer, or stockholder holds a similar occupational tax certificate, regulatory license, or alcoholic beverage license:

_____

_____

_____

List all details of denial of any such licenses in any other jurisdiction:

_____

_____

22. Are you familiar with the City of Stockbridge Ordinances, State laws and regulations, Federal laws and regulations governing the operations of this type of business?

_____ Yes _____ No

(City of Stockbridge Ordinance 9.04 Alcoholic Beverage)

23. Restrictions Alcohol ONLY

Ordinance 9.04.090

1. No retail license for the sale of distilled spirits shall be issued unless the location is located within five hundred (500) feet of the streets or roads designated in the following three (3) areas and has direct access onto such streets or roads:

   Area 1: Those portions of Mount Zion Boulevard and Highway 138 lying west of I-75;
   Area 2: Those portions of Highway 138 and North Henry Boulevard lying east of I-75;

   Area 3: Those portions of Eagles Landing Parkway/Hudson Bridge Road from their intersection with the west right-of-way line of Highway 42 to the west city limits line.

24. Do you agree to abide by such ordinances, laws, and regulations?

    ___✓___ Yes _____ No

25. Do you have any questions or comments regarding the ordinances, laws, regulations, or application?

    _____ Yes ___✓___ No

    If YES, please list:

    _____

    _____

Georgia, Henry County, City of Stockbridge

I, Sanket Patel, being duly sworn according to the law, do swear that the facts and things stated by me in the above and foregoing answers to questions are true, and no false, or fraudulent statement is made herein, and such answers were made in order to produce the granting of such license.

J SPECK
MY COMMISSION EXPIRES
NOTARY
PUBLIC
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

Signature of Applicant

Sanket Patel
Print Name

Owner
Title of Applicant

Subscribed and Sworn before me on this the 26 day of June, 20 24

J Speck
NOTARY PUBLIC signature

4.11.25
Notary Commission Expires

J. Speck
NOTARY PUBLIC printed name

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

SITE MANAGER'S PERSONAL INFORMATION
Alcohol License ONLY

(To be attached to Application)
(A photo of the manager must be attached to this form)

1. **Business Name**
   (Please complete for the business you are applying as a manager for)

   Business Name: Ak 5 star family

   Address: 790 Rock Quarry Rd Stockbridge

2. **Manager's name and address:**

   Name: Sanket Patel

   Home address: _

   Phone number _____

3. **Personal identification information:**

   Race: Asian Sex: Male Height: 5'11" Weight: 138 Age: 25

   Color of hair: black Color of eyes: brown

4. **Manager's birth information:**

   Location of birth: India

   Date of birth: _ _____

5. **Spousal information: (If married, please complete)**

   Spouse's full name: _____

   Maiden name if applicable: _____

   Date of Birth: _____ Date married: _____

   Employer: _____

6. **Employment record:**
(Please list your previous employment information for the last past 10 years) (Attach separate sheet if necessary)

Employer: _____

Location: _____ Dates – From:____ To: ____

Employer: _____

Location: _____ Dates – From:____ To: ____

Employer: _____

Location: _____ Dates – From:____ To: ____

7. **Financial interest:**

Do you or your spouse, or any member of your family:

A. Have any interest, financial or otherwise, in other malt beverage, wine, or distilled spirits stores or establishments? _____ Yes ✓ No

If YES, please list:

_____

_____

B. Ever been denied a license or had a license revoked? _____ Yes ✓ No

If YES, please list:

_____

_____

8. **Prior residences:**
(Please list all residences you have had in the past ten (10) years.) *(Include a separate sheet if necessary)*

Street Address	City	State	Years

9. **Tax return:**
Did you file a Georgia tax return last year?

✓ Yes _____ No

10. Convictions:

Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (10) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

_____

_____

_____

Charge: _____

Place of arrest: _____ Date: _____

Disposition: _____

11. Personal References:

(Please list three personal references not related to you, whom you have known for at least five years)

Name: _____ Phone #: _____

Address: _____

Name: _____ Phone #: _____

Address: _____

Name: _____ Phone #: _____

Address: _____

12. Emergency Contact:

Contact name: Navpreet Kaur Phone #: 478-832-5551

I, Sanket Patel, do solemnly swear, that the foregoing statements are true. I understand that any falsehoods are grounds for automatic dismissal of this application.

Signature of Manager

AK 5 Star
Print Name

Owner
Title of Applicant

J SPECK
MY COMMISSION EXPIRES
NOTARY
PUBLIC
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

Subscribed and Sworn before me on this the 6 day of June, 20 24

JSpeck
NOTARY PUBLIC signature

4.11.25
Notary Commission Expires

J. Speck
NOTARY PUBLIC printed name

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

BACKGROUND AND SECURITY CLEARANCE FORM
OWNER, APPLICANT, MANAGER
Alcohol License ONLY

Authorization for Release of Personal Information
(Attach photocopy of Social Security Card and Photo ID)

I, _____, do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the City of Stockbridge, whether said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure pertaining to the background investigation necessary to process my application as required under the Alcohol Beverage Ordinance (Chapter 9) governing licensing in the City.

I also certify that any person, firm, or other entity ("the providing entity") who may furnish such information concerning me, shall not be held liable or accountable for giving this information and I do hereby fully and completely release the providing entity from all liability, which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the photocopy does not contain the original writing of my signature.

jspeck
Notary

4.11.25
Notary Commission Expires

J SPECK
MY COMMISSION EXPIRES
NOTARY
PUBLIC
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

_____
Signature

6-6-24
Date

_____
Date of Birth

_____
Social Security Number

_____
Driver's License Number

5' 11"
Height

135
Weight

City of Stockbridge

SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

Instructions: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

Sanket Patel
Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity.

Address of applicant named above

478-337-1380
Telephone Number

Name of business, corporation for whom application is being made.

OCCUPATIONAL TAX CERTIFICATE
Category of Public Benefit

1. ✓ I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. _____ I am a legal permanent resident of the United States.
3. _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: _____ _____.

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the back of this form.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this affidavit? : Driver License

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

MUST BE COMPLETED BY NOTARY

I, Sanket Patel {representative for} AK 5 Star family
(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

Signature of Applicant

6-6-24
Date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 6 DAY OF June, 2024

Executed in Warner Robins (City), GA (State)

J SPECK
NOTARY PUBLIC
MY COMMISSION EXPIRES APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

JSpeck
NOTARY PUBLIC Signature

4.11.25
My Commission Expires

SECURE AND VERIFIABLE DOCUMENTS

The following list of secure and verifiable documents, published under the authority of O.C.G.A § 50-36-2 contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative or residency or immigration status.

- A United States passport or passport card
- A United States military identification card
- A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A tribal identification card of the federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer. A listing of the federally reorganized Native American tribes may be found at: http//www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm
- A United States Permanent Resident Card or Alien Registration Receipt Card
- An Employment Authorization Document that contains a photograph of the bearer
- A passport issued by a foreign government, must have I-94 attached
- A Merchant Mariner Document Mariner Credential issued by the United States Coast Guard
- A Free and Secure Trade (FAST) card
- A NEXUS card
- A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card
- A driver's license issued by a Canadian government
- A Certificate of Citizenship issued by the United States Department of Citizenship
- Immigration Services (USCIS) (Form N-560 or Form N-561)
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570)

Control Number : 21183567

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

A K 5 STAR FAMILY LLC
a Domestic Limited Liability Company

has been duly organized under the laws of the State of Georgia on **07/02/2021** by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on **07/07/2021**.

Brad Raffensperger

Brad Raffensperger
Secretary of State

ARTICLES OF ORGANIZATION

Electronically Filed
Secretary of State
Filing Date: 7/2/2021 12:43:31 PM

BUSINESS INFORMATION

CONTROL NUMBER	21183567
BUSINESS NAME	A K 5 STAR FAMILY LLC
BUSINESS TYPE	Domestic Limited Liability Company
EFFECTIVE DATE	07/02/2021

PRINCIPAL OFFICE ADDRESS

ADDRESS

REGISTERED AGENT

NAME	ADDRESS	COUNTY
Chugh LLP		Fulton

ORGANIZER(S)

NAME	TITLE	ADDRESS
Sanket Patel	ORGANIZER	

OPTIONAL PROVISIONS

N/A

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE	Jaymen Chavda
AUTHORIZER TITLE	Attorney In Fact

IRS.gov

EIN Assistant

Your Progress: 1. Identity 2. Authenticate 3. Addresses 4. Details **5. EIN Confirmati**

Congratulations! The EIN has been successfully assigned.

EIN Assigned: **87-1557410**

Legal Name: **A K 5 STAR FAMILY LLC**

The confirmation letter will be mailed to the applicant. This letter will be the applicant's official IRS notice and will contain important information regarding the EIN. Allow up to 4 weeks for the letter to arrive by mail.

We strongly recommend you print this page for your records.

Click "Continue" to get additional information about using the new EIN. Continue >>

Help Topics

Can the EIN be used b the confirmation letter received?

PASSPORT
PASSEPORT
PASAPORTE

USA

UNITED STATES OF AMERICA

Type / Type / Tipo: P

Code / Code / Código: USA

Passport No. / No. du Passeport / No. de Pasaporte: [redacted]

Surname / Nom / Apellidos
PATEL

Given Names / Prénoms / Nombres
SANKET K

Nationality / Nationalité / Nacionalidad
UNITED STATES OF AMERICA

Date of birth / Date de naissance / Fecha de nacimiento
[redacted]

Place of birth / Lieu de naissance / Lugar de nacimiento
INDIA

Date of issue / Date de délivrance / Fecha de expedición
11 May 2015

Date of expiration / Date d'expiration / Fecha de caducidad
10 May 2025

Endorsements / Mentions Spéciales / Anotaciones
SEE PAGE 51

Sex / Sexe / Sexo
M

Authority / Autorité / Autoridad
United States
Department of State

USA

P<USAPATEL<<SANKET<K<<<<<<<<<<<<<<<<<<<<<<<<<<<<

[redacted]

THE UNITED STATES OF AMERICA

No.

CERTIFICATE OF CITIZENSHIP

USCIS Registration No.

Personal description of holder as of date of issuance of this certificate: Sex **MALE** ; Date of birth
Height **5** feet **8** inches; Marital status **SINGLE** ; Country of birth **INDIA**

I certify that the description above given is true, and that the photograph affixed hereto is a likeness of me

(Complete and true signature of holder)

Be it known that:
SANKET KRUNAL PATEL

now residing at **MACON, GEORGIA**

having applied to the Director of U.S. Citizenship and Immigration Services for a certificate of citizenship pursuant to Section 341 of the Immigration and Nationality Act, having proved to the satisfaction of the Director, that (s)he is now a citizen of the United States of America, became a citizen thereof on
and is now in the United States.

Now Therefore, in pursuance of the authority contained in Section 341 of the Immigration and Nationality Act, this certificate of citizenship is issued this **31st** day of **OCTOBER**
TWO THOUSAND FOURTEEN and the seal of the Department of Homeland Security affixed pursuant to statute.

U.S. Citizenship and Immigration Services

DEPARTMENT OF HOMELAND SECURITY

GEORGIA
DRIVER'S LICENSE

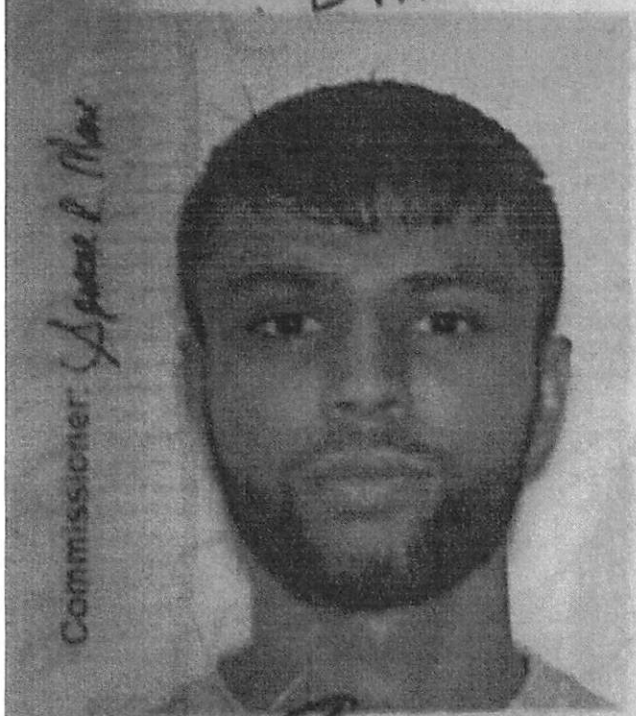
DRIVER'S LICENSE

DL

USA
GA

Governor:

Commissioner:



4d DL NO. [redacted]

3 DOB [redacted]

9 CLASS C

4b EXP 02/28/2028

2 SANKET K

1 PATEL

8 [redacted]

BIBB

12 REST A

9a END NONE

4a ISS 09/10/2021

15 SEX M

18 EYES BRO

16 HGT 6'-00"

17 WGT 135 lb

02/28/1999

5 DD [redacted]

ORGAN DONOR

www.dds.georgia.gov

MEDICAL INFORMATION: NONE

CLASS: C-≤ 26,000 lbs. GVWR and Trailer ≤ 10,000 lbs. All recreational vehicles included

ENDORSEMENTS: NONE

RESTRICTIONS: A-None

DOB:

Sanket Patel	Exchange Bank	TYPE OF CREDIT	
	6081 Lake Oconee Parkway	X	Individual - Provide your financial information only
	Greensboro, GA 30642		Joint, with
			Information on separate financial statement
Applicant's Name & Address	**Creditor's Name and Address**	Relationship	

Individual Information				Joint Party Information			
Business or Occupation				Business or Occupation			
Employer's Name & Address				Employer's Name & Address			
Length of Employment				Length of Employment			
Home Phone		Bus. Phone	478-832-5549	Home Phone		Bus. Phone	
Date of Birth		SS #		Date of Birth		SS #	

PLEASE COMPLETE SCHEDULES FIRST

ASSETS - Summary from Schedules				LIABILITIES - Summary from Schedule		
Cash on Hand and In Bank	Sched. A	$ 50,999.00		Notes Due to Banks	Sched. A	$ -
Cash Value of Life Insurance	Sched. B	$ 120,000.00	0	Notes Due to Relatives and Friends	Sched. H	$ -
U.S. Gov. Securities	Sched. C	$ -		Notes Due to Others	Sched. H	$ -
Other Marketable Securities	Sched. C	$ -		Accounts and Bills Payable	Sched. H	$ -
		$ -		Loans on Life Ins Policy	Sched. B	$ -
		$ -		Contract Accounts Payable	Sched. H	$ -
		$ -		Cash Rent Payable		$ -
	TOTAL LIQUID ASSETS	$ 170,999.00		Other Liabilities Due within 1 year - Itemize		$ -
Real Estate Owned	Sched. E	$ 11,770,000.00				
Mortgages & Contracts Owned	Sched. F	$ -				
Notes & Accounts Receivable - current	Sched. D	$ -				
Notes & Accounts Receivable - over 90 days	Sched. D	$ -			TOTAL SHORT TERM LIABILITIES	$ -
Notes Due From Relatives and Friends	Sched. D	$ -		Real Estate Mortgages Payable	Sched. E	$ 2,349,606.00
Other Securities - Not Readily Marketable	Sched. C	$ -		Personal Property Debts Payable	Sched. G	$ -
Personal Properties	Sched. G	$ 680,000.00		Other Debts - Itemize		$ -
IRA and Tax Deferred Accounts		$ -			TOTAL LONG TERM LIABILITIES	$ 2,349,606.00
Other Assets - Itemized on attachment		$ -		Total Liabilities		$ 2,349,606.00
	TOTAL PRODUCTIVE ASSETS	$ 12,450,000.00		Net Worth (Total Assets Minus Total Liabilities)		$ 10,271,393.00
TOTAL ASSETS		$ 12,620,999.00		TOTAL LIABILITIES AND NET WORTH		$ 12,620,999.00

ANNUAL INCOME		ESTIMATE OF ANNUAL EXPENSES	
Salary, Bonuses and Commissions	$ 245,000	Income Taxes	$ -
Dividends and Interest	$ -	Other Taxes	$ -
Rental and Lease Income (Net)	$ 401,520	Insurance Premiums	$ -
Alimony, child support, or separate maintenance income need not be revealed if		Mortgage Payments	$ -
you do not wish to have it considered as a basis for repaying		Rent Payable	$ -
this obligation. Other Income - Itemized	$ -	Other Expenses	$ -
Provide the following information only if Joint Credit is checked above.			
Other Person's Salary, Bonuses and Commissions	$ -		
Alimony, child support, or separate maintenance income need not be revealed if			
you do not wish to have it considered as a basis for repaying			
this obligation. Other Income of Other Person - Itemized	$ -		
TOTAL	$ 646,520	TOTAL	$ -

GENERAL INFORMATION		CONTINGENT LIABILITIES	
Are any Assets Pledged Other Than Those listed on Schedules?		As Endorser, Co-Maker or Guarantor	
YES	NO	YES	NO
Are you a Defendant in Any Suits or Legal Actions?		On Leases or Contracts	
YES	NO	YES	NO
Date Income Taxes were last filed?		Legal Claims	
		YES	NO
Have you ever been declared Bankrupt in the last 10 years?		Federal - State Income Taxes	
YES	NO	YES	NO
Are you a Partner or Officer in any other Venture?		Other	
YES	NO		

SCHEDULES

A. CASH IN BANKS AND NOTES DUE TO BANKS (List all Real Estate Loans in Sched E)

NAME OF BANK	Type of Acct	Type of Ownership	On Deposit	Notes Due to Bank	Collateral (if Any) and Type of Ownership
Bank of America	Checking		$ 50,999.00	$ -	
			$ -	$ -	
			$ -	$ -	
			$ -	$ -	
			$ -	$ -	
		Cash On Hand	$ -	$ -	
		TOTALS	$ 50,999.00	$ -	

B. LIFE INSURANCE (List only those Policies that you own)

COMPANY	FACE OF POLICY	Cash Surrender Value	Policy Loan From Insurance Co.	Other Loans Policy as Collateral	BENEFICIARY	
New York Life Insurance	$ 1,000,000.00	$ 360,000.00				
	$ -	$ -	$ -			
	$ -	$ -	$ -			
	$ -	$ -	$ -			
	TOTALS	$ 360,000.00	$ -			

C. SECURITIES OWNED (Including U.S. Government Bonds and all other Stocks and Bonds)

Face Value Bonds, # Shares of Stock	DESCRIPTION	Type of Ownership	COST	Market Value - US Gov Sec	Market Value - Marketable Sec	Market Value - Non Mkt Sec	Amount Pledged To Secured Loan
			TOTALS	$ -	$ -	$ -	

D. NOTES AND ACCOUNTS RECEIVABLE (Money Payable or Owed to You Individually - Indicate % of your Ownership Interest)

MAKER/DEBTOR	%	When Due	Original Amt	Balance Due Current Accounts	Balance Due Over 90 Days	Balance Due Notes Rel. & Friends	Security (If Any)
				$ -	$ -	$ -	
				$ -	$ -	$ -	
				$ -	$ -	$ -	
				$ -	$ -	$ -	
				$ -	$ -	$ -	

E. REAL ESTATE OWNED (Indicate % of your Ownership Interest)

TITLE IN NAME OF	%	Date Acquired	Description & Location	Original Cost	Present Value of Real Estate	MORTGAGE OR CONTRACT PAYABLE Balance Due	Mo. Payment	Maturity
PropertyInvestment Group 1 GA LLC				1,601,367.00	$ 2,000,000.00			
PropertyInvestment Group 2 GA LLC				$ 800,000.00	$ 1,200,000.00			
AK 5 Star Family LLC				$ 950,000.00	$ 2,300,000.00	$ 1,500,000.00	$ 12,500.00	
AK 5 Star Family LLC				$ 502,893.00	$ 1,250,000.00	$ 441,534.00	$ 5,999.00	
AK 5 Star Family LLC				$ 502,803.00	$ 1,400,000.00	$ 408,072.00	$ 5,545.00	
AK 5 Star Family LLC				$ 600,000.00	$ 1,750,000.00			
AK 5 Star Family LLC				$ 100,000.00	$ 890,000.00			
AK 5 Star Family LLC				$ 525,000.00	$ 980,000.00			
				$ -	$ -	$ -	$ -	
				TOTALS	$ 11,770,000.00	$ 2,349,606.00		

F. MORTGAGES AND CONTRACTS OWNED (Indicate % of your Ownership Interest)

Mortgage or Contract	%	MAKER Name & Address	Property Covered	Starting Date	Payments	Maturity	Balance Due
							$ -
							$ -
							$ -
							$ -
						TOTALS	$ -

G. PERSONAL PROPERTY (Indicate % of your Ownership Interest)

DESCRIPTION	Date When New	%	Cost When New	Value Today	LOAN ON PROPERTY Balance Due	To Whom Payable
Jewerly, Furniture			$ 595,000.00	$ 680,000.00		
			$ -	$ -	$ -	
			TOTALS	$ 680,000.00	$ -	

H. NOTES

PAYABLE TO	Other Obligors (If any)	Notes Due To Rel. and Friends	Notes Due "Others" (Not Banks)	Accounts and Bills	Contracts Payable	COLLATERAL	When Due
		$ -	$ -	$ -	$ -		
		$ -	$ -	$ -	$ -		
		$ -	$ -	$ -	$ -		
	TOTALS	$ -	$ -	$ -	$ -		

I have read, understand and agree to make these representations and warranties

If an individual statement

If a joint statement

Signature

Spouse Signature

Date:

Date:

Henry County, GA

Overview

Legend

- Parcels
- Roads
- Cities

Parcel ID	050-01002002	**Class**	I	**Owner**	STUTTS JAMES	**Land Value:**	$423,100	**Last 2 Sales**			
Property		**Acreage**	27.41	**Address**	J	**Building**	$0	**Date**	**Price**	**Reason**	**Qual**
Address					PO BOX 184	**Value:**		12/20/2013	$0	D OF ASSNT	U
District	City/Stockbridge				KILLEN AL	**Misc Value:**	$0				
					35645	**Total Value:**	$423,100	4/3/1989	$194,300	n/a	Q

Parcel lines depicted on the maps do not reflect a true and exact representation of property boundaries and should not be relied upon for said purpose. Property boundary lines are depicted on recorded plats available at the Henry County Courthouse or can be determined by employing the services of a licensed surveyor.

Date created: 6/6/2024
Last Data Uploaded: 6/6/2024 10:06:15 AM

Developed by Schneider GEOSPATIAL

790 Rock Quarry Rd

LOTTERY APPLICATION TRACKING SHEET

Date Received: 6/6/24 Application No.: 12

Applicant Name: Navpreet Kaur

Proposed business and name: Package + Store 790 Rock Quarry Rd
Stockbridge, GA 30281
Parcel 050-01002002

CHECKLIST:

- ○ Complete Application and Documents: _____ or Missing: _____
- ✓ $750 Non-Refundable Application Fee: Yes Date Processed: 6/6
- ✓ Fieldprint Background Check Information Received: 6/4
- ○ Notarized Financial Statement Received: _____
- ✓ Copy of Government Issued ID Received: 6/6
- ✓ ~~Emailed~~ Gave applicant receipt/CC approval code/lottery process timeline: _____
- ○ Redacted Copy of Application Sent to City Clerk on: (date) _____

Any Notes:
Kaurnavpreet@yahoo.com

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

APPLICATION
(Lottery Application ONLY)

NOTE: USE SEPARATE PAGES AND/OR ATTACHMENTS, AS NECESSARY

1. Type(s) of license applied for:
   - (X) Alcohol License
   - ( ) Tire Shop
   - ( ) Used Car Dealership
   - ( ) Used Appliance Shop
   - ( ) Thrift store and Consignment Shop
   - ( ) Pawnshop
   - ( ) Vape Shop
   - ( ) Precious Metals

2. Proposed license is a (n):
   - (X) Individual
   - ( ) Partnership
   - ( ) Corporation
   - ( ) LLC
   - ( ) other legal entity (explain)

   _____

3. Applicant information:

   Name: Navpreet Kaur

   Title/Position: Owner

   Are you a citizen of the United States: ✓ yes ____ no

   Where were you born? India

   Present home address: ____

   ____

   County of Bibb Number of years at present address 12yrs

   Contact information: Business phone #: _____

   Home phone #: 478 832 5551

   How long have you been a resident of Georgia? ~~[illegible]~~ 23yrs Henry Co? _____

   What has been your occupation for the past five (5) years? Self employed

4. Applicant's relationships with other persons with 1st degree of kinship.

Immediate living relatives:
(Please list all immediate living wife, children, parents, brothers, sisters, and parents)
(Attach separate sheet(s) if necessary)

Name: Krunal K. Patel Age: 47yrs

Relationship: husband Live with or apart: me

Name: Ravi Kaura Age: 26yrs

Relationship: Son Live with or apart: me

Name: Sanket. K. Patel Age: 25yrs

Relationship: Son Live with or apart: me

Name: Perin. K. Patel Age: 16yrs

Relationship: Son Live with or apart: me

5. Proposed business name and address:

Business name: ~~Package Store~~ 790 Rock Quarry Rd. Stockton CA 3028

Address:

6. Corporations: If operating as a corporation, please complete the following:

Corporation name: _____

Address: _____

Date of Incorporation: _____ Where Incorporated: _____

Type of Corporation: _____

Corporate Officers: *Please list each (attach a separate sheet if necessary)*

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Name: _____ SS#_____

Office Held: _____

Address: _____

_____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

7. **Stockholder information – applies to any "closely held" stock, not publicly traded and to all stockholders who own more than 10% of the outstanding capital stock of the corporation. DO NOT FILL OUT THIS INFORMATION FOR PUBLICLY TRADED CORPORATIONS. In lieu thereof, please indicate by attached sheet as to whether any affiliate, related company, holding company, subsidiary or other organization holds any form of alcohol license in the City of Stockbridge, or any distilled spirits package sale license within the State of Georgia.**

8. If operating as a corporation, list stockholders with addresses and the amount of interest of each stockholder in the corporation. ***Please list each (attach a separate sheet if necessary)***

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

Stockholder Name: _____ Interest: _____

Address: _____

9. Limited Liability Company (LLC): If operating as a company, please complete the following:

Company name: NIL

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of LLC (member managed or manager managed):_____

LLC members with an ownership interest: ***Please list each (attach a separate sheet if necessary)***

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Name: _____ SS#_____

Member – ownership interest (_%):_____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

10. Limited Liability Partnership (LLP), Partnerships, Sole Proprietorships, and any other forms of business entity: If operating as a partnership or other form of business entity, please complete the following:

Entity name: NIL

Address: _____

_____

Date of Formation: _____ Where Formed (State): _____

Type of Partnership: _____

Partnership members with an ownership interest. ***Please list each (attach a separate sheet if necessary)***

Name: NIL SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Name: _____ SS# _____

Partnership – ownership interest (_____%): _____

Address: _____

Please provide a copy of your "Articles of Incorporation" and the current "Annual Registration with the Secretary of State"

If more than 4 members, partners, or stockholders, please provide the name, address, social security number and ownership interest of additional parties at interest, by separate sheet.

11. Registered Agent

If the proposed license is a legal entity, please provide name of its registered agent:

Agent(s) name: _____

Address: _____

Telephone Number: _____

12. Store Manager, Managing Member, Managing Partner, or other person in charge:
What is the name of the person who, if the license is granted, will be the active manager of the business and on the job at the business?

Full name: Navpreet Kaur

(Please complete the site manager's personal statement, attached)

13. Convictions:
Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (15) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

_____

_____

_____

14. Location ownership
Do you own the land and building on which the business is to be operated?

_____ Yes ___X___ No If Yes, when did you buy it? _____
(Attach proof of ownership)

If not the owner, please complete the following and attach a copy of the lease, option, and any other pertinent documents:

Owner/Agent of Property: _____

Amount of rent: _____ Frequency Paid: _____

Is the amount of rent a set amount? _____ Yes _____ No

If NO, please explain how it is determined: _____

_____

15. If you have an option, or other legal, binding document to buy, lease the building, please explain the general terms: _____

_____

16. Zoning
What is the current zoning on the proposed property location? _____

17. Location Certification
If this is the first application for a license for this business, please attach a current certificate from a registered surveyor containing the following information:

(1) A scale drawing of the building or proposed building as situated on the proposed lot.
(2) Proposed parking available to the building.

NOTE: NOT Required for a retail package alcohol license until the applicant is chosen for a license.

18. Financial Interest – Does the applicant or interested parties to this Application:

A. Have any financial interest in any similar business?

_____ Yes ___✓___ No

B. Received any financial aid or assistance from any similar business?

_____ Yes ___✓___ No

19. Other Interests:
Do you; any member of your family (children, spouse, parents, siblings) or any of the other owners, partners, or stockholders:

A. Have any interest, financial or otherwise, in other similar businesses or establishments?
_____ Yes ___✓___ No

If YES, please list:

_____

_____

B. Own, lease, sub-lease any real estate which is occupied by a similar business. If so, give the location information as to any lease or rental agreement including rents received and who it was rented to: _____ Yes ___✓___ No

If YES, please list:

_____

_____

C. Serve as the Executor or Administrator or Beneficiary of Heir of any estate having an interest in any similar business or establishment?

_____ Yes ___✓___ No

If YES, please list:

_____

_____

D. Serve as Beneficiary or Trustee of any Trust Fund having an interest in any similar business or establishment?

_____ Yes ✓ No

If YES, please list:

_____

_____

20. Financial Gain
Please list all parties who will receive any financial gain or payment derived from any interest or income as a result of the operation that this application applies to. (Please include any owners, partners, members, officers, or principal stockholders)

_____

_____

21. Other Jurisdictions
List other jurisdictions in which any applicant, partner, member, corporate officer, or stockholder holds a similar occupational tax certificate, regulatory license, or alcoholic beverage license:

_____

_____

_____

List all details of denial of any such licenses in any other jurisdiction:

_____

_____

22. Are you familiar with the City of Stockbridge Ordinances, State laws and regulations, Federal laws and regulations governing the operations of this type of business?

X Yes _____ No

(City of Stockbridge Ordinance 9.04 Alcoholic Beverage)

23. Restrictions Alcohol ONLY

Ordinance 9.04.090

1. No retail license for the sale of distilled spirits shall be issued unless the location is located within five hundred (500) feet of the streets or roads designated in the following three (3) areas and has direct access onto such streets or roads:

   Area 1: Those portions of Mount Zion Boulevard and Highway 138 lying west of I-75;
   Area 2: Those portions of Highway 138 and North Henry Boulevard lying east of I-75;

   Area 3: Those portions of Eagles Landing Parkway/Hudson Bridge Road from their intersection with the west right-of-way line of Highway 42 to the west city limits line.

24. Do you agree to abide by such ordinances, laws, and regulations?

    ✓ Yes _____ No

25. Do you have any questions or comments regarding the ordinances, laws, regulations, or application?

    _____ Yes ✓ No

    If YES, please list:

    _____

    _____

Georgia, Henry County, City of Stockbridge

I, Navpreet Kaur, being duly sworn according to the law, do swear that the facts and things stated by me in the above and foregoing answers to questions are true, and no false, or fraudulent statement is made herein, and such answers were made in order to produce the granting of such license.

J SPECK
MY COMMISSION EXPIRES
NOTARY
PUBLIC
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

Signature of Applicant

Navpreet Kaur
Print Name

Owner
Title of Applicant

Subscribed and Sworn before me on this the 6 day of June, 20 24

gSpeck
NOTARY PUBLIC signature

4.11.25
Notary Commission Expires

J.Speck
NOTARY PUBLIC printed name

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

SITE MANAGER'S PERSONAL INFORMATION
Alcohol License ONLY

(To be attached to Application)
(A photo of the manager must be attached to this form)

1. **Business Name**
(Please complete for the business you are applying as a manager for)

Business Name: ~~Package & Store~~ 790 Rock Quarry Rd Stockbridge GA 30281

Address:

2. **Manager's name and address:**

Name: Navpreet Kaur

Home address:

Phone number: 478-832-5551

3. **Personal identification information:**

Race: Asian Sex: F Height: 5.3 Weight: 138 Age: 48yrs

Color of hair: Brown Color of eyes: brown/black

4. **Manager's birth information:**

Location of birth: India

Date of birth:

5. **Spousal information: (If married, please complete)**

Spouse's full name: Krunal. K. Patel

Maiden name if applicable: None

Date of Birth: Date married:

Employer: Self Employed

6. **Employment record:**
(Please list your previous employment information for the last past 10 years) (Attach separate sheet if necessary)

Employer: _____

Location: _____ Dates – From:____ To: ____

Employer: _____

Location: _____ Dates – From:____ To: ____

Employer: _____

Location: _____ Dates – From:____ To: ____

7. **Financial interest:**

Do you or your spouse, or any member of your family:

A. Have any interest, financial or otherwise, in other malt beverage, wine, or distilled spirits stores or establishments? _____ Yes ___X___ No

If YES, please list:

_____

_____

B. Ever been denied a license or had a license revoked? _____ Yes ___X___ No

If YES, please list:

_____

_____

8. **Prior residences:**
(Please list all residences you have had in the past ten (10) years.) *(Include a separate sheet if necessary)*

Street Address _____ City _____ State GA Years 12 yrs

_____

_____

9. **Tax return:**
Did you file a Georgia tax return last year?

X Yes _____ No

10. Convictions:
Has the applicant, or any individual having an interest either as owner, partner, member, or stockholder been convicted or entered a plea of Nolo Contendere within fifteen (10) years immediately prior to the filing of this application, for any felony or misdemeanor in any state or for an offense cited by the United States; or any violation of municipal ordinances except traffic violations? If yes, please explain below:

No

Charge: _____

Place of arrest: _____ Date: _____

Disposition: _____

11. Personal References:
(Please list three personal references not related to you, whom you have known for at least five years)

Name: Paul david Castrovillari Phone #: 478-972-7645

Address: _____

Name: Lee Ezekiel Brown Phone #: 713-673-9110

Address: _____

Name: Vishal Da Phone #: 225-747-7973

Address: _____

12. Emergency Contact:

Contact name: Navpreet Kaur Phone #: 478-832-5551

I, Navpreet Kaur, do solemnly swear, that the foregoing statements are true. I understand that any falsehoods are grounds for automatic dismissal of this application.

Signature of Manager

Navpreet Kaur
Print Name

Owner
Title of Applicant

J SPECK
MY COMMISSION EXPIRES
NOTARY
PUBLIC
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

Subscribed and Sworn before me on this the 6 day of June, 20 24

JSpeck
NOTARY PUBLIC signature

4.11.25
Notary Commission Expires

J. Speck
NOTARY PUBLIC printed name

Stockbridge

Where Community Connects

City of Stockbridge
Community Development Department

BACKGROUND AND SECURITY CLEARANCE FORM
OWNER, APPLICANT, MANAGER
Alcohol License ONLY

Authorization for Release of Personal Information
(Attach photocopy of Social Security Card and Photo ID)

I, Navpreet Kaur, do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the City of Stockbridge, whether said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure pertaining to the background investigation necessary to process my application as required under the Alcohol Beverage Ordinance (Chapter 9) governing licensing in the City.

I also certify that any person, firm, or other entity ("the providing entity") who may furnish such information concerning me, shall not be held liable or accountable for giving this information and I do hereby fully and completely release the providing entity from all liability, which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the photocopy does not contain the original writing of my signature.

JSpeck
Notary

4.11.25
Notary Commission Expires

J SPECK
MY COMMISSION EXPIRES
NOTARY
PUBLIC
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

Signature

06-06-24
Date

Date of Birth

Social Security Number

Driver's License Number

5-3
Height

138 lbs
Weight

City of Stockbridge

SAVE Public Benefits Affidavit
O.C.G.A § 50-36-1 (e) (2)

Instructions: As required by Georgia Security and Immigration Compliance Act of 2006, as amended, every agency administering or providing Public Benefits is responsible for requiring that applicants for public benefits execute a sworn affidavit verifying the applicant's lawful presence in the United States {Ga. Code 50-36-1(e) (2)}. By executing this affidavit under oath, as an applicant for the City of Stockbridge, Georgia public benefit as supplemented by resolution of the City Council, I am stating the following with respect to my application to the City of Stockbridge.

Navpreet Kaur

Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity.

478-832-5551

Telephone Number

OCCUPATIONAL TAX CERTIFICATE

Name of business, corporation for whom application is being made.

Category of Public Benefit

1. ✓ I am a United States citizen. **{REQUIRES VERIFICATION AT SUBMISSION}**
2. _____ I am a legal permanent resident of the United States.
3. _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: _____.

The undersigned applicant has also hereby verifies that he or she is 18 years of age or older and has provided at least one source and verifiable document, as required by Georgia Law O.C.G.A § 50-36-1 (e) (1). A complete list of secure and verifiable documents is on the back of this form.

REQUIRES VERIFICATION AT SUBMISSION – Which type of secure and verifiable document was provided with this affidavit? : Driver Licence

In making the above representation under oath, I understand that any person who knowingly and willfully who makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties as allowed by such criminal statute.

MUST BE COMPLETED BY NOTARY

I, Navpreet Kaur {representative for} _____
(Printed NAME of individual and natural person) (Name of Business, corporation, partnership, etc.)

Signature of Applicant — Date: 6/6/24

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 6 DAY OF June, 20 24

Executed in Warner Robins (City), Ga (State)

gSpeck — NOTARY PUBLIC Signature

4.11.25 — My Commission Expires

J SPECK
MY COMMISSION EXPIRES
NOTARY PUBLIC
APRIL 11, 2025
HOUSTON COUNTY, GEORGIA

SECURE AND VERIFIABLE DOCUMENTS

The following list of secure and verifiable documents, published under the authority of O.C.G.A § 50-36-2 contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative or residency or immigration status.

- A United States passport or passport card
- A United States military identification card
- A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer.
- A tribal identification card of the federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable identification of the bearer. A listing of the federally reorganized Native American tribes may be found at: http//www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm
- A United States Permanent Resident Card or Alien Registration Receipt Card
- An Employment Authorization Document that contains a photograph of the bearer
- A passport issued by a foreign government, must have I-94 attached
- A Merchant Mariner Document Mariner Credential issued by the United States Coast Guard
- A Free and Secure Trade (FAST) card
- A NEXUS card
- A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card
- A driver's license issued by a Canadian government
- A Certificate of Citizenship issued by the United States Department of Citizenship
- Immigration Services (USCIS) (Form N-560 or Form N-561)
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570)

USA

Georgia

DRIVER'S LICENSE

GOVERNOR

041376

DL NO. [redacted] DOB [redacted]

CLASS C EXP 04/13/2027

NAVPREET

KAUR

[redacted]

COMMISSIONER

BIBB

Restrictions A End NONE

Iss [redacted]

Sex F Eyes BR

Hgt 5'-03" Wgt 14 lb

DD [redacted]

DONOR

Rev 07/01/2015

www.dds.ga.gov
(678) 413-8400

MEDICAL
INFORMATION:
None

CLASS: C-≤ 26,000 lbs. GVWR and Trailer ≤ 10,000 lbs. All recreational vehicles included

ENDORSEMENTS: None

RESTRICTIONS: A-None

THE UNITED STATES OF AMERICA

No.

CERTIFICATE OF NATURALIZATION

Personal description of holder as of date of naturalization:

Date of birth:

Sex: FEMALE

Height: 5 *feet* 3 *inches*

Marital status: MARRIED

Country of former nationality: INDIA

INS Registration No.

rify that the description given is true, and that the photograph affixed o is a likeness of me.

Navpreet Kaur
(Complete and true signature of holder)

Be it known that, pursuant to an application filed with the Attorney General

at: ATLANTA, GEORGIA

The Attorney General having found that:

NAVPREET KAUR

then residing in the United States, intends to reside in the United States when so required by the Naturalization Laws of the United States, and had in all other respects complied with the applicable provisions of such naturalization laws and was entitled to be admitted to citizenship, such person having taken the oath of allegiance in a ceremony conducted by the

U.S. IMMIGRATION AND NATURALIZATION SERVICE

at: ATLANTA, GEORGIA *on:*

that such person is admitted as a citizen of the United States of America.

IT IS PUNISHABLE BY U. S. LAW TO COPY, PRINT OR PHOTOGRAPH THIS CERTIFICATE, WITHOUT LAWFUL AUTHORITY.

Commissioner Immigration and Naturalization

DEPARTMENT OF JUSTICE

FORM N-550 REV. 6-91

PASSPORT
PASSEPORT / PASAPORTE

THE UNITED STATES OF AMERICA

USA

Type/Type/Tipo	Code/Code/Código	Passport No./No. du Passeport/No. de Pasaporte
P	USA	

Surname/Nom/Apellidos
KAUR

Given names/Prénoms/Nombres
NAVPREET

Nationality/Nationalité/Nacionalidad
UNITED STATES OF AMERICA

Date of birth/Date de naissance/Fecha de nacimiento

F

Place of birth/Lieu de naissance/Lugar de nacimiento
INDIA

Date of issue/Date de délivrance/Fecha de expedición
27 JAN 2023

Date of expiration/Date d'expiration/Fecha de caducidad
26 JAN 2033

Authority/Autorité/Autoridad
UNITED STATES DEPARTMENT OF STATE

P<USAKAUR<<NAVPREET<<<<<<<<<<<<<<<<<<<<<<<<<<<<

Endorsements / Mentions Spéciales / Anotaciones

If your passport expires within six months of your date of departure, you may be denied entry into some countries

SIGNATURE OF BEARER / SIGNATURE DU TITULAIRE / FIRMA DEL TITULAR

Krunal Patel & Navpreet Kaur	**Exchange Bank**	TYPE OF CREDIT	
	6081 Lake Oconee Parkway		Individual - Provide your financial information only
	Greensboro, GA 30642	X	Joint, with Navpreet Kaur
			Information on separate financial statement
Applicant's Name & Address	**Creditor's Name and Address**	Relationship	Spouse

Individual Information				**Joint Party Information**			
Business or Occupation				Business or Occupation			
Employer's Name & Address				Employer's Name & Address			
Length of Employment				Length of Employment			
Home Phone		Bus. Phone	478-731-4926	Home Phone		Bus. Phone	478-731-6613
Date of Birth		SS #		Date of Birth		SS #	

PLEASE COMPLETE SCHEDULES FIRST

ASSETS - Summary from Schedules				**LIABILITIES - Summary from Schedule**			
Cash on Hand and in Bank	Sched. A	$	3,017,921.00	Notes Due to Banks	Sched. A	$	-
Cash Value of Life Insurance	Sched. B	$	425,000.00	Notes Due to Relatives and Friends	Sched. H	$	-
U.S. Gov. Securities	Sched. C	$	-	Notes Due to Others	Sched. H	$	-
Other Marketable Securities	Sched. C	$	-	Accounts and Bills Payable	Sched. H	$	-
		$	-	Loans on Life Ins Policy	Sched. B	$	-
		$	-	Contract Accounts Payable	Sched. H	$	-
		$	-	Cash Rent Payable		$	-
	TOTAL LIQUID ASSETS	$	3,442,921.00	Other Liabilities Due within 1 year - Itemize		$	-
Real Estate Owned	Sched. E	$	45,045,000.00				
Mortgages & Contracts Owned	Sched. F	$	-				
Notes & Accounts Receivable - current	Sched. D	$	-				
Notes & Accounts Receivable - over 90 days	Sched. D	$	-		TOTAL SHORT TERM LIABILITIES	$	-
Notes Due From Relatives and Friends	Sched. D	$	-	Real Estate Mortgages Payable	Sched. E	$	7,167,550.00
Other Securities - Not Readily Marketable	Sched. C	$	-	Personal Property Debts Payable	Sched. G	$	-
Personal Properties	Sched. G	$	2,980,000.00	Other Debts - Itemize		$	-
IRA and Tax Deferred Accounts		$	-		TOTAL LONG TERM LIABILITIES	$	7,167,550.00
Other Assets - Itemized on attachment		$	-	Total Liabilities		$	7,167,550.00
	TOTAL PRODUCTIVE ASSETS	$	48,025,000.00	Net Worth (Total Assets Minus Total Liabilities)		$	44,300,371.00
TOTAL ASSETS		$	51,467,921.00	**TOTAL LIABILITIES AND NET WORTH**		$	51,467,921.00

ANNUAL INCOME		**ESTIMATE OF ANNUAL EXPENSES**	
Salary, Bonuses and Commissions	$ 275,000	Income Taxes	$ -
Dividends and Interest	$ -	Other Taxes	$ -
Rental and Lease Income (Net)	$ 135,000	Insurance Premiums	$ -
Alimony, child support, or separate maintenance income need not be revealed if		Mortgage Payments	$ -
you do not wish to have it considered as a basis for repaying		Rent Payable	$ -
this obligation. Other Income - Itemized	$ -	Other Expenses	$ -
Provide the following information only if Joint Credit is checked above			
Other Person's Salary, Bonuses and Commissions	$ -		
Alimony, child support, or separate maintenance income need not be revealed if			
you do not wish to have it considered as a basis for repaying			
this obligation. Other Income of Other Person - Itemized	$ -		
TOTAL	$ 410,000	**TOTAL**	$ -

GENERAL INFORMATION			**CONTINGENT LIABILITIES**		
Are any Assets Pledged Other Than Those listed on Schedules?			As Endorser, Co-Maker or Guarantor		
YES	NO			YES	NO
Are you a Defendant in Any Suits or Legal Actions?			On Leases or Contracts		
YES	NO			YES	NO
Date Income Taxes were last filed?			Legal Claims		
				YES	NO
Have you ever been declared Bankrupt in the last 10 years?			Federal - State Income Taxes		
YES	NO			YES	NO
Are you a Partner or Officer in any other Venture?			Other		
YES	NO				

SCHEDULES

A. CASH IN BANKS AND NOTES DUE TO BANKS (List all Real Estate Loans in Sched E)

NAME OF BANK	Type of Acct	Type of Ownership	On Deposit	Notes Due to Bank	Collateral (if Any) and Type of Ownership
MORRIS JAY SURJ SADHI	3517		$ 36,756.00	$ -	
TRUIST BANK	3415		$ 85,000.00	$ -	
MORRIS PERSONAL	570		$ 2,606,288.00	$ -	
MORRIS A K DEVLOPMENT	7519		$ 77,222.00	$ -	
MORRIS GOGA 4	7634		$ 62,362.00	$ -	
		Cash On Hand	$ -	$ -	
		TOTALS	$ 2,867,628.00	$ -	

B LIFE INSURANCE (List only those Policies that you own)

COMPANY	FACE OF POLICY	Cash Surrender Value	Policy Loan Cash Insurance Co	Other Loans Policy as Collateral	BENEFICIARY
New York Life Insurance	$ 1,000,000.00	$ 375,000.00			
	$ -	$ -	$ -		
	$ -	$ -	$ -		
	$ -	$ -	$ -		
TOTALS		$ 375,000.00	$ -		

C SECURITIES OWNED (including U.S. Government Bonds and all other Stocks and Bonds)

Face Value Bonds, # Shares of Stock	DESCRIPTION	Type of Ownership	COST	Market Value - US Gov Sec	Market Value Marketable Sec	Market value Non Mkt Sec	Amount Pledged To Secured Loan
			TOTALS	$ -	$ -	$ -	

D NOTES AND ACCOUNTS RECEIVABLE (Money Payable or Owed to You Individually - Indicate % of your Ownership Interest)

MAKER/DEBTOR	%	When Due	Original Amt	Balance Due Current Accounts	Balance Due Over 90 Days	Balance Due Notes Rel & Friends	Security (If Any)
				$ -	$ -	$ -	
				$ -	$ -	$ -	
				$ -	$ -	$ -	
				$ -	$ -	$ -	
				$ -	$ -	$ -	

E REAL ESTATE OWNED (Indicate % of your Ownership Interest)

TITLE IN NAME OF	%	Date Acquired		Original Cost	Present Value of Real Estate	MORTGAGE OR CONTRACT PAYABLE Balance Due	Mo. Payment	Maturity
Krunal Patel				$ 740,000.00	$ 790,000.00	$ -	$ -	
AK Family Development llc				$ 13,000,000.00	$ 19,500,000.00			
Gaga 4 LLC				$ 800,000.00	$ 1,750,000.00	$ 652,589.00	$ 6,294.00	
Gaga 4 LLC				$ 935,000.00	$ 1,970,000.00			
Gaga 4 LLC				$ 150,000.00	$ 580,000.00			
Gaga 4 LLC				$ 1,250,000.00	$ 6,700,000.00	$ 7,562,183.00	$ 24,050.00	
Gaga 4 LLC				$ 411,000.00	$ 970,000.00			
Gaga 2 LLC				$ 1,080,000.00	$ 2,470,000.00	$ 750,640.00	$ 8,291.00	
Krunal Patel				$ 1,670,000.00	$ 1,865,000.00	$ 492,000.00	$ 4,430.95	
A k Developments Group llc				$ 475,000.00	$ 980,000.00	$ 775,000.00	$ 4,000.00	
A k Developments Group llc				$ 475,000.00	$ 870,000.00			
A k Developments Group llc				$ 3,250,000.00	$ 4,470,000.00	$ 2,236,138.00	$ 22,400.00	
R & K Shopping Center llc				$ 700,000.00	$ 1,460,000.00	$ -	$ -	
R & K Shopping Center llc				$ 475,000.00	$ 580,000.00	$ -	$ -	
			TOTALS	$ 46,046,000.00	$ 7,167,558.00			

F MORTGAGES AND CONTRACTS OWNED (Indicate % of your Ownership Interest)

Mortgage or Contract	%	MAKER Name & Address	Property Covered	Starting Date	Payments	Maturity	Balance Due
							$ -
							$ -
							$ -
							$ -
						TOTALS	$ -

G PERSONAL PROPERTY (Indicate % of your Ownership Interest)

DESCRIPTION	Date When New	%	Cost When New	Value Today	LOAN ON PROPERTY Balance Due	To Whom Payable
Jewerly, Furniture			$ 2,470,000.00	$ 2,650,000.00		
2020 Land Rover Autobiography			$ 87,000.00	$ 72,000.00		
2020 Hyundai Palisade			$ 48,000.00	$ 32,000.00		
2004 Porsche Boxter			$ 15,000.00	$ 12,000.00		
2007 Honda Odyssey			$ 8,000.00	$ 7,000.00		
2008 Cadillac Escalade			$ 18,000.00	$ 13,000.00		
			$ -	$ -	$ -	
			TOTALS	$ 2,746,000.00	$ -	

H NOTES

PAYABLE TO	Other Obligors (if any)	Notes Due To Rel. and Friends	Notes Due "Others" (Not Banks)	Accounts and Bills	Contracts Payable	COLLATERAL	When Due
		$ -	$ -	$ -	$ -		
		$ -	$ -	$ -	$ -		
		$ -	$ -	$ -	$ -		
	TOTALS	$ -	$ -	$ -	$ -		

I have read, understand and agree to make these representations and warranties

If an individual statement

Signature Krunal Patel Date 05-20-24

If a joint statement

Spouse Signature Date 5/20/24

June 6, 2024

Re: A K Development Group LLC and Krunal Patel

To Whom It May Concern,

Mr Krunal Patel has been a valued customer of Morris Bank. Mr. Patel has performed on all credit obligations with us. Mr Patel has maintained a signifcant deposit relationship with us as well. His assets, credit, and liquidity would warrant him access to extend his banking relationship with us.

Respectfully yours,

Steve Williams

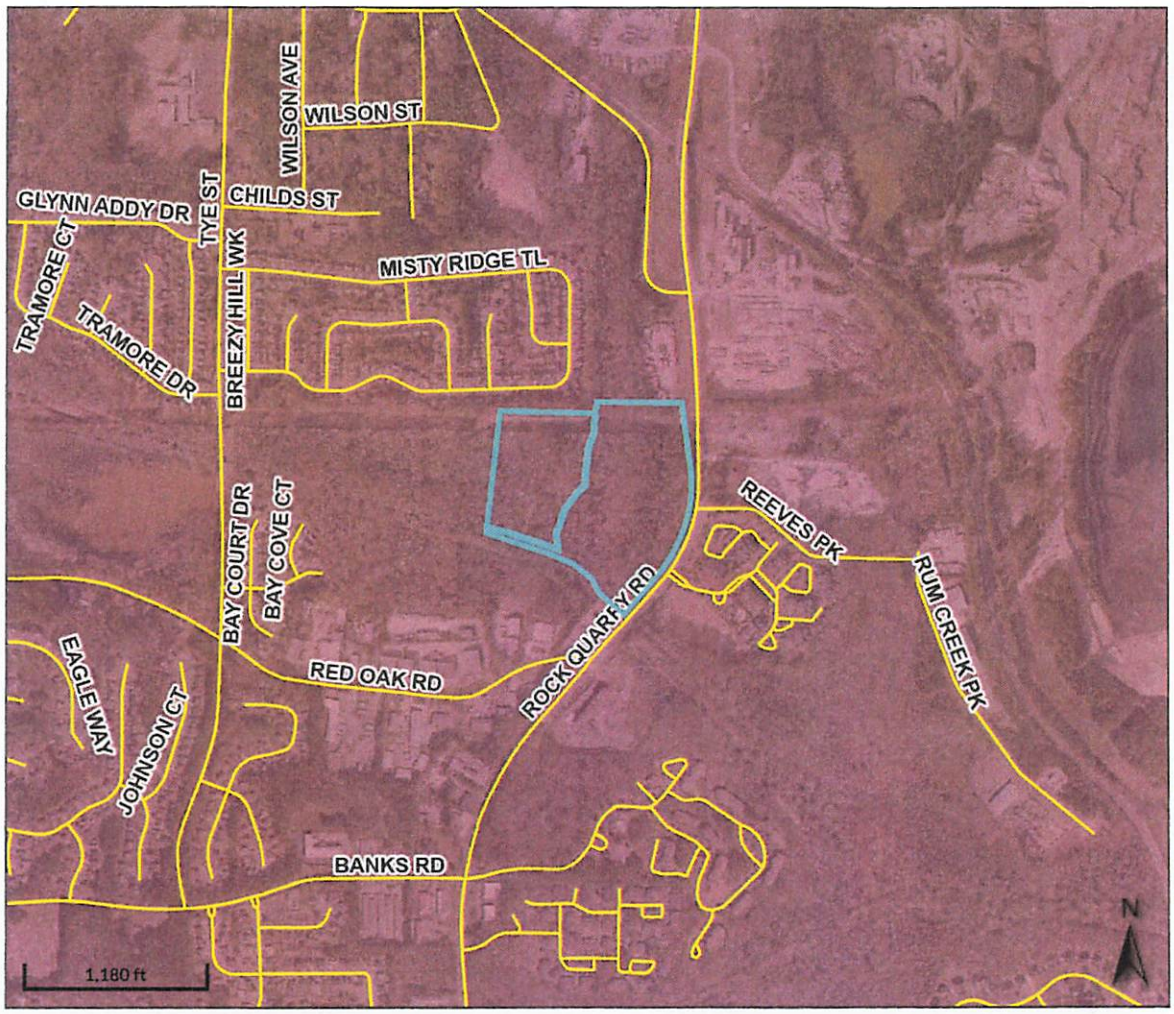
Steve Williams
Commercial Banker
swilliams@morris.bank

478-333-7049

301 Bellevue
Avenue P.O. Box 520
Dublin, Georgia
31040 478.272.5202
main 478.275.3094
fax
www.morris.bank

Member
FDIC

Henry County, GA



Overview

Legend

- Parcels
- Roads
- Cities

Parcel ID	050-01002002	**Class**	I	**Owner**	STUTTS JAMES	**Land Value:**	$423,100	**Last 2 Sales**			
Property		**Acreage**	27.41	**Address**	J	**Building**	$0	**Date**	**Price**	**Reason**	**Qual**
Address					PO BOX 184	**Value:**		12/20/2013	$0	D OF	U
District	City/Stockbridge				KILLEN AL	**Misc Value:**	$0			ASSNT	
					35645	**Total Value:**	$423,100	4/3/1989	$194,300	n/a	Q

Parcel lines depicted on the maps do not reflect a true and exact representation of property boundaries and should not be relied upon for said purpose. Property boundary lines are depicted on recorded plats available at the Henry County Courthouse or can be determined by employing the services of a licensed surveyor.

Date created: 6/6/2024
Last Data Uploaded: 6/6/2024 10:06:15 AM

Developed by Schneider GEOSPATIAL

790 Rock Quarry Rd
Red

City of Stockbridge

AGENDA ITEM

MEETING DATE

JULY 30, 2024

- [x] RESOLUTION
- [ ] ORDINANCE
- [ ] CONTRACT APPROVAL/RENEWAL
- [ ] PUBLIC HEARING
- [ ] PRESENTATION
- [ ] BID SELECTION/AWARD
- [ ] TASK ORDER
- [ ] CHANGE ORDER
- [ ] BUDGET AMENDMENT
- [ ] BUDGET TRANSFER
- [ ] PAYMENT APPROVAL
- [ ] OTHER

FUNDING SOURCE

- [ ] GENERAL FUND
- [ ] FUND BALANCE
- [ ] SPLOST or TSPLOST
- [ ] ARPA
- [ ] GRANT
- [ ] HOTEL/MOTEL TOURISM
- [ ] COUNCIL INITIATIVE
- [ ] PARTNER/SPONSOR
- [ ] DEPARTMENT FUND BALANCE
- [ ] BONDING

ACCOUNT TRANSFER FROM:

ACCOUNT TRANSFER TO:

PRESENTER: Community Development Staff

DEPARTMENT: Community Development

ITEM/PROJECT/EVENT:

Resolution to accept Tract Two of the property at 3986 Jodeco Road, adjacent to Candler Road, to be dedicated by the property owner, Candler Road Stockbridge Propco, LLC, for use by the City as a public park, and for other public purposes, per the terms of a Dedication Agreement between the parties, executed on December 13, 2023. The park is to be constructed by the property owner, according to a mutually-agreeable development plan.

BACKGROUND INFORMATION:

The property is located at the southeast corner of Jodeco Road and Candler Road. Tract One and Tract Three were previously accepted for dedication to the City at the February 12, 2024 Council meeting. A Lot Division Subdivision Plat was approved by the City on 11-13-23.

APPROVALS: CITY MANAGER_____

CITY TREASURER_____

CITY ATTORNEY_____

GRANTS ADMIN._____

☐ FINANCIAL IMPACT ☐ N/A

AMOUNT $

ATTACHMENTS: ☐

ITEM/PROJECT/EVENT:

Resolution to accept the dedication of Tract Two of the property at 3986 Jodeco Road to the City of Stockbridge.

BACKGROUND INFORMATION:

STAFF RECOMMENDATION:

APPROVAL.

Staff Signature_____

Community Development Director: _____

Community Development Engineering: _____

(FOR RECORDING PURPOSES ONLY)

I:\2023\2023220\0 SURVEY_DWG\2023220_JODECO RD SD PLAT, MATT WORKING CTB,MATTHEW ROLLINS, 10/4/2023 4:08:10 PM

PROPERTY INFORMATION

OWNER: CANDLER ROAD STOCKBRIDGE PROPCO LLC

ADDRESS: 3986 JODECO ROAD
STOCKBRIDGE, GA 30253

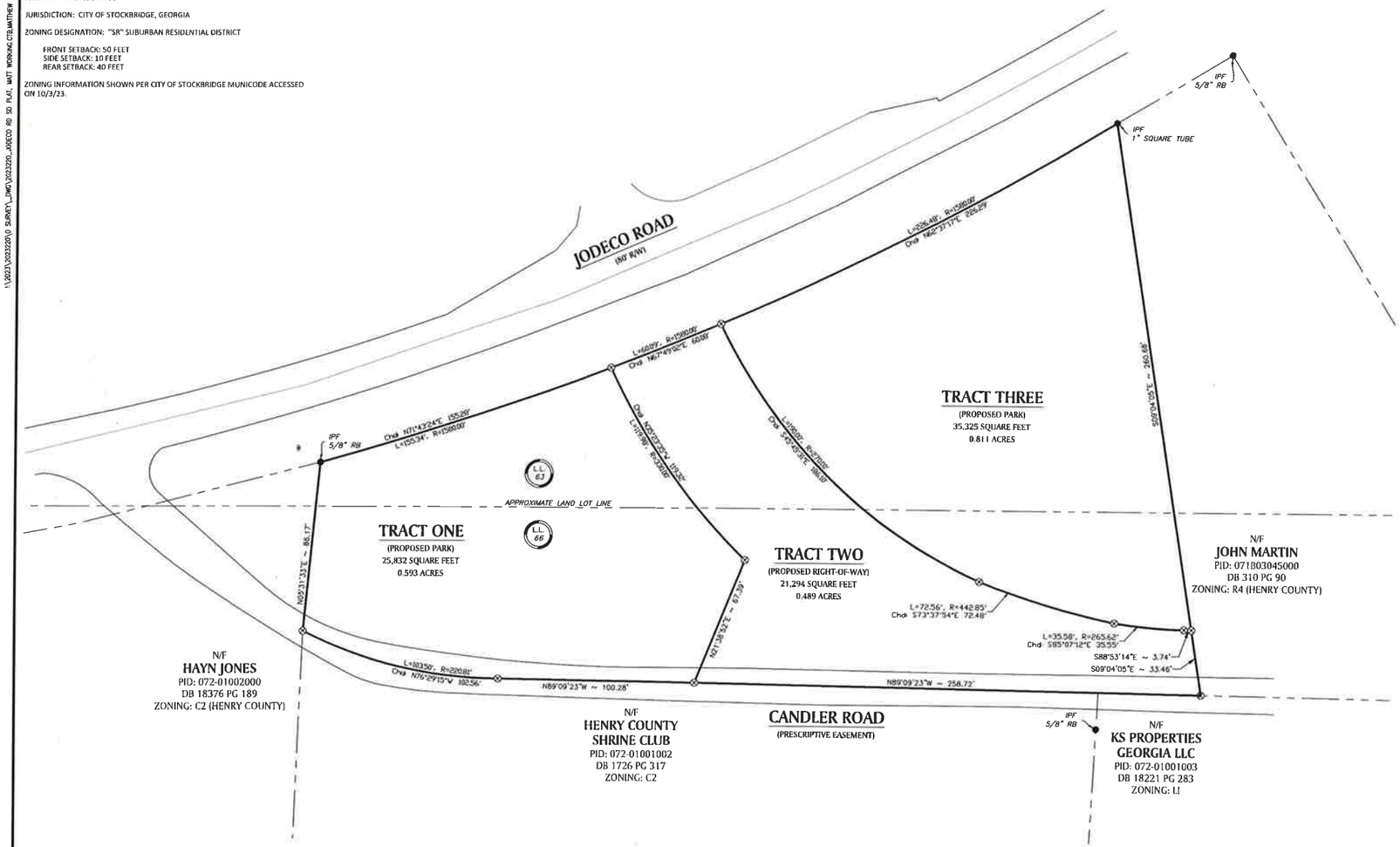
PARCEL ID: 071B03046000

JURISDICTION: CITY OF STOCKBRIDGE, GEORGIA

ZONING DESIGNATION: "SR" SUBURBAN RESIDENTIAL DISTRICT

FRONT SETBACK: 50 FEET
SIDE SETBACK: 10 FEET
REAR SETBACK: 40 FEET

ZONING INFORMATION SHOWN PER CITY OF STOCKBRIDGE MUNICODE ACCESSED ON 10/3/23.



LEGEND

BOUNDARY	BUILDING LINE
ADJACENT BOUNDARY	LAND LOT LINE
STORM SEWER LINE	WALL
STORM SEWER LINE	TREE LINE
SANITARY SEWER LINE	FENCE
A.D.A. PARKING	IRON PIN SET
DROP INLET	IRON PIN FOUND
JUNCTION BOX	POWER POLE
DOUBLE-WING CATCH BASIN	LIGHT POLE
SINGLE-WING CATCH BASIN	ELECTRIC BOX
SANITARY SEWER MANHOLE	ELECTRIC METER
CLEAN OUT	PULL BOX
WATER METER	TELEPHONE PEDESTAL
WATER VALVE	GAS VALVE
FIRE HYDRANT	SIGN
IRRIGATION CONTROL VALVE	TREE
FIRE DEPT. CONNECTION	BOLLARD

30 0 30 60
SCALE IN FEET: 1"=30'

GRID NORTH
GEORGIA WEST ZONE
(NAD 83)

VICINITY MAP
SCALE: NTS

SURVEYOR'S NOTES

1. THE PROPERTY DESCRIBED HEREIN MAY BE SUBJECT TO OTHER EASEMENTS, SUBSURFACE CONDITIONS, PRESCRIPTIONS, CLAIMS OR ADDITIONAL MATTERS OF TITLE WHICH ARE NOT VISIBLE, NOT RECORDED OR DISCLOSED WITHIN THE TITLE COMMITMENT.
2. THE UTILITIES SHOWN HEREIN ARE STRICTLY FOR THE CLIENT'S CONVENIENCE ONLY. THERE MAY BE OTHER UNDERGROUND UTILITIES THAT ARE NOT SHOWN ON THE FACE OF THIS SURVEY. PAULSON MITCHELL, INCORPORATED, INCLUDING THE SURVEYOR LISTED HEREIN, DOES NOT ASSUME ANY RESPONSIBILITY FOR THE UNDERGROUND UTILITIES SHOWN OR NOT SHOWN ON THIS SURVEY.
3. THIS PLAT IS INTENDED FOR THE EXCLUSIVE USE OF THE PARTIES STATED HEREIN. THE USE OF THIS SURVEY BY ANY THIRD PARTIES IS AT THEIR OWN RISK.
4. PER F.E.M.A. FLOOD INSURANCE RATE MAP NUMBER 13151C0156D, EFFECTIVE DATE OF 10/06/2016, HENRY COUNTY, GEORGIA, THE SUBJECT PROPERTY DOES NOT LIE WITHIN A FLOOD HAZARD AREA. THE SUBJECT PROPERTY LIES IN UNSHADED FLOOD ZONE X.
5. FIELD WORK FOR THIS SURVEY WAS COMPLETED ON 07/15/2020 USING A TRIMBLE S6 ROBOTIC TOTAL STATION AND A TRIMBLE TSC3 DATA COLLECTOR. THE LINEAR PRECISION OF THE TRAVERSE IS 1/79,117 FEET, HAVING AN ANGULAR ERROR OF 1.3" PER SETUP. THE LINEAR PRECISION OF THIS PLAT IS 1/620,675 FEET.
6. BEARINGS SHOWN HEREIN ARE BASED ON GRID NORTH, USING THE GEORGIA WEST STATE PLANE COORDINATE SYSTEM - NAD83 ESTABLISHED BY GPS OBSERVATIONS.
7. ALL STREAMS AND BODIES OF WATER MAY BE SUBJECT TO STATE, COUNTY, AND LOCAL BUFFERS AND/OR RESTRICTIONS. THE SURVEYOR MAKES NO INTERPRETATION REGARDING THESE BUFFERS AND/OR RESTRICTIONS. THE USER OF THIS SURVEY SHOULD CONSULT WITH THE APPROPRIATE GOVERNING AUTHORITIES CONCERNING POSSIBLE BUFFERS OR RESTRICTIONS.

SURVEYORS CERTIFICATIONS

(i) As required by subsection (d) of O.C.G.A. Section 15-6-67, this plat has been prepared by a land surveyor and approved by all applicable local jurisdictions for recording as evidenced by approval certificates, signatures, stamps, or statements hereon. Such approvals or affirmations should be confirmed with the appropriate governmental bodies by any purchaser or user of this plat as to intended use of any parcel. Furthermore, the undersigned land surveyor certifies that this plat complies with the minimum technical standards for property surveys in Georgia as set forth in the rules and regulations of the Georgia Board of Registration for Professional Engineers and Land Surveyors and as set forth in O.C.G.A. Section 15-6-67.

FINAL

Matthew Rollins, GA PLS 3509 — Date: 11/07/2023

LAND PLANNERS
ENGINEERS · SURVEYORS
TRANSPORTATION
LANDSCAPE ARCHITECTS

PAULSON MITCHELL
INCORPORATED

85-A MILL STREET
SUITE 200
ROSWELL, GEORGIA 30075

VOICE 770.650.7685
FAX 770.650.7684
www.paulsonmitchell.com

MINOR SUBDIVISION PLAT

JODECO ROAD AT CANDLER ROAD

LAND LOTS 63 & 66
DISTRICT 7
CITY OF STOCKBRIDGE
HENRY COUNTY, GEORGIA

REVISIONS

PROJECT NUMBER: 2023220
DATE: 10/03/2023
FIELD DATE: 8/14/2023
DRAWN BY: MBR
CHECKED BY: MRE
FILE NAME: 2023220_JODECO RD SD PLAT

SHEET 1 OF 1

As-Surveyed Legal Description

TRACT TWO

All that tract or parcel of land lying and being in Land Lots 63 and 66 of the 7th District, Henry County, Georgia, and being more particularly described as follows:

COMMENCING at a point formed at the intersection formed by the southerly right of way line of Jodeco Road (80' R/W) and the northeasterly right of way line of Norfolk Southern Railroad; THENCE, easterly along the southerly right of way of Jodeco Road a distance of 451.38 feet to a 5/8" inch rebar found; THENCE, following a curve to the left with an arc length of 155.34 feet, having a radius of 1,580.00 feet, and being subtended by a chord with a bearing of North 71 degrees 43 minutes 24 seconds East, a distance of 155.28 feet to a point; said point also being known as the POINT OF BEGINNING.

THENCE, from the POINT OF BEGINNING and northeasterly along the southerly right of way of Jodeco Road following a curve to the left with an arc length of 60.09 feet, having a radius of 1,580.00 feet and being subtended by a chord with a bearing of North 67 degrees 49 minutes 02 seconds East, a distance of 60.08 feet to a point on the common line with Tract Three;
THENCE, southerly leaving said right of way of Jodeco Road along the common line with Tract Three the following bearings and distances: southerly following a curve to the left with an arc length of 190.00 feet, having a radius of 270.00 feet and being subtended by a chord with a bearing of South 45 degrees 45 minutes 31 seconds East, a distance of 186.10 feet to a point; THENCE, following a curve to the left with an arc length of 72.56 feet, having a radius of 442.85 feet and being subtended by a chord with a bearing of South 73 degrees 37 minutes 54 seconds East, a distance of 72.48 feet to a point; THENCE, following a curve to the left with an arc length of 35.58 feet, having a radius of 265.62 feet and being subtended by a chord with a bearing of South 85 degrees 07 minutes 12 seconds East, a distance of 35.55 feet to a point; THENCE, a bearing of South 88 degrees 53 minutes 14 seconds East, a distance of 3.74 feet to a point on the common line with Now or Formerly John Martin;
THENCE, southerly along said common line a bearing of South 09 degrees 04 minutes 05 seconds East, a distance of 33.46 feet to a point located on the centerline of Candler Road;
THENCE, westerly along said centerline of Candler Road a bearing of North 89 degrees 09 minutes 23 seconds West, a distance of 258.72 feet to a point on the common line with Tract One;
THENCE, northerly leaving the centerline of Candler Road along the common line with Tract One the following bearings and distances: North 21 degrees 38 minutes 52 seconds East, a distance of 67.39 feet to a point; THENCE, following a curve to the right with an arc length of 119.98 feet, having a radius of 330.00 feet and being subtended by a chord with a bearing of North 35 degrees 23 minutes 35 seconds West, a distance of 119.32 feet to the POINT OF BEGINNING.

The herein described tract of land contains 21,294 square feet or 0.489 acre, more or less.

DEDICATION AGREEMENT

THIS DEDICATION AGREEMENT (this "Agreement"), dated as of December 8th, 2023 (the "Effective Date"), is made by and between **CANDLER ROAD STOCKBRIDGE PROPCO, LLC**, a Delaware limited liability company ("Owner"), and **THE CITY OF STOCKBRIDGE, GEORGIA**, a political subdivision of the State of Georgia (the "City").

W I T N E S S E T H:

WHEREAS, Owner is the owner of certain real property located in Stockbridge, Georgia, as described on Exhibit "A" and depicted on Exhibit "B" attached hereto (the "Property");

WHEREAS, Owner desires to dedicate the Property to the City for public use, namely use as a public park (the "Dedication"); and

WHEREAS, the parties desire to enter into this Agreement for purposes of documenting their mutual understanding with respect to the Dedication.

NOW THEREFORE, in consideration of the premises and of the respective representations, warranties, covenants and conditions contained herein, the parties hereto agree as follows:

1. Dedication and Acceptance. Subject to approval of the City Council of the City of Stockbridge (the "City Council"), Owner agrees to dedicate to the City, and the City agrees to accept from the Owner, the Property for use as a public park and other public purposes. Notwithstanding anything contained herein to the contrary, in the event the City Council fails to approve the acceptance of such Dedication and other terms of this Agreement within _____ days from the Effective Date, this Agreement shall automatically terminate and neither party shall have any further rights or obligations hereunder.

2. Construction of Park. Upon approval by the City Council of the Dedication and terms of this Agreement, the Owner agrees that it shall construct a park upon the Property substantially in accordance with the plans and specifications attached as Exhibit "C" attached hereto (the "Park Improvements").

3. Conveyance of Property. Upon completion of the Park Improvements, the Owner and the City shall execute and record a Deed of Dedication substantially in the form attached hereto as Exhibit "D" for purposes of formally dedicating the Property to the City for public use.

4. Miscellaneous. This Agreement may not be modified or amended except pursuant to an instrument in writing signed by the Owner and the City. In case any provision contained in this Agreement should be invalid, illegal or unenforceable in any respect, the validity, legality and enforceability of the remaining provisions contained herein shall not in any way be affected or impaired thereby.

5. Counterparts. This Agreement may be executed in any number of separate counterparts, each such counterpart being deemed to be an original instrument, and all such counterparts will together constitute the same Agreement. Executed signature pages to this Agreement may be delivered by facsimile or other electronic means and will be deemed as sufficient as if original signature pages had been delivered.

[Signatures Commence on Following Page]

IN WITNESS WHEREOF, this Agreement has been duly executed and delivered by the duly authorized officers of the parties hereto as of the date first hereinabove written.

OWNER:

CANDLER ROAD STOCKBRIDGE PROPCO, LLC,
a Delaware limited liability company

By: _____
Name: David Burch
Title: Authorized Representative

CITY:

THE CITY OF STOCKBRIDGE, GEORGIA,
a political subdivision of the State of Georgia

By: _____
Name: FREDERICK GARDINER
Title: City Manager

RATIFICATION AND APPROVAL BY THE CITY COUNCIL OF THE CITY OF STOCKBRIDGE, GEORGIA

By: _____
Name: FREDERICK GARDINER
Title: City MANAGER

EXHIBIT "A"

Legal Description of Property

TRACT ONE

All that tract or parcel of land lying and being in Land Lots 63 and 66 of the 7th District, Henry County, Georgia, and being more particularly described as follows:

COMMENCING at a point formed at the intersection formed by the southerly right of way line of Jodeco Road (80' R/W) and the northeasterly right of way line of Norfolk Southern Railroad; THENCE, easterly along the southerly right of way of Jodeco Road a distance of 451.38 feet to a 5/8" inch rebar found; said 5/8" rebar also being known as the POINT OF BEGINNING.

THENCE, from the POINT OF BEGINNING and easterly along the southerly right of way of Jodeco Road following a curve to the left with an arc length of 155.34 feet, having a radius of 1,580.00 feet and being subtended by a chord with a bearing of North 71 degrees 43 minutes 24 seconds East, a distance of 155.28 feet to a point on the common line with the Proposed Right of Way Tract;
THENCE, southerly leaving said right of way of Jodeco Road along the common line with the Proposed Right of Way Tract following a curve to the left with an arc length of 119.98 feet, having a radius of 330.00 feet and being subtended by a chord with a bearing of South 35 degrees 23 minutes 35 seconds East, a distance of 119.32 feet to a point;
THENCE, southerly continuing along said common line a bearing of South 21 degrees 38 minutes 52 seconds West, a distance of 67.39 feet to a point located in Candler Road;
THENCE, westerly along the centerline of Candler Road the following courses and distances: North 89 degrees 09 minutes 23 seconds West, a distance of 100.28 feet to a point; THENCE, following a curve to the right with an arc length of 103.50 feet, having a radius of 220.81 feet and being subtended by a chord with a bearing of North 76 degrees 29 minutes 15 seconds West, a distance of 102.56 feet to a point on the common line with Hayn C Jones;
THENCE, northerly along said common line North 05 degrees 31 minutes 33 seconds East, a distance of 86.17 feet to the POINT OF BEGINNING.

The herein described tract of land contains 25,832 square feet or 0.593 acre, more or less.

TRACT THREE

All that tract or parcel of land lying and being in Land Lots 63 and 66 of the 7th District, Henry County, Georgia, and being more particularly described as follows:

COMMENCING at a point formed at the intersection formed by the southerly right of way line of Jodeco Road (80' R/W) and the northeasterly right of way line of Norfolk Southern Railroad; THENCE, easterly along the southerly right of way of Jodeco Road a distance of 451.38 feet to a 5/8" inch rebar found; THENCE, following a curve to the left with an arc length of 155.34 feet, having a radius of 1,580.00 feet, and being subtended by a chord with a bearing of North 71 degrees 43 minutes 24 seconds East, a distance of 155.28 feet to a point at the common corner with the Proposed Right of Way Tract; THENCE, continuing along the southerly right of way of Jodeco Road following a curve to the left with an arc length of 60.09 feet, having a radius of 1,580.00 feet, and being subtended by a chord with a bearing of North 67 degrees 49 minutes 02 seconds East, a distance of 60.08 to a point; said point also being known as the POINT OF BEGINNING.

THENCE, from the POINT OF BEGINNING and easterly along the southerly right of way of Jodeco Road following a curve to the left with an arc length of 226.48 feet, having a radius of 1,580.00 feet and being subtended by a chord with a bearing of North 62 degrees 37 minutes 17 seconds East, a distance of 226.29 feet to a 1-inch square tube found on the common line with John Martin;

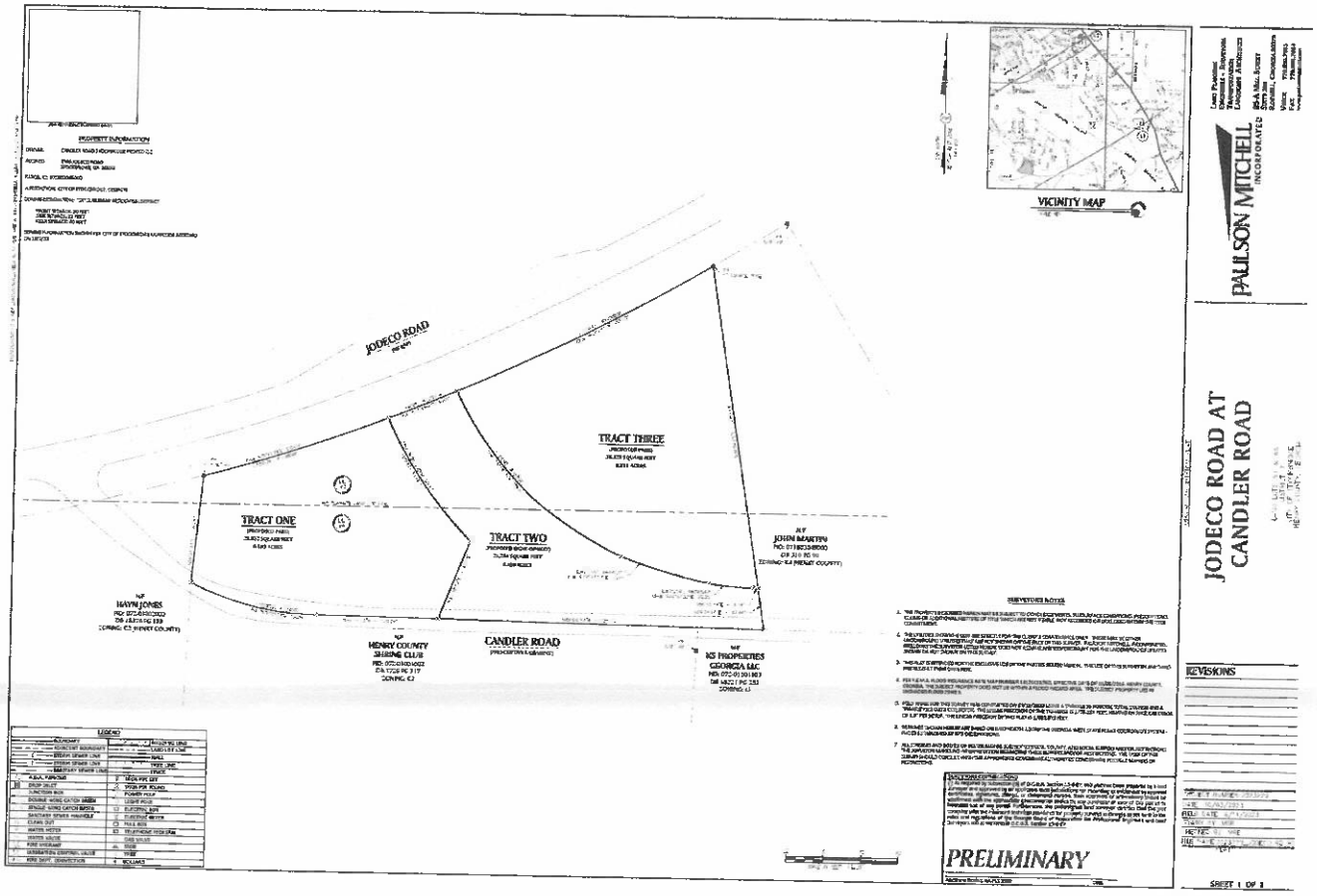
THENCE, southerly leaving said right of way of Jodeco Road along the common line with John Martin a bearing of South 09 degrees 04 minutes 05 seconds East, a distance of 260.68 feet to a point on the common line with the Proposed Right of Way Tract;

THENCE, westerly along said common line the following bearings and distances: North 88 degrees 53 minutes 14 West, a distance of 3.74 feet to a point; THENCE, following a curve to the right with an arc length of 35.58 feet, having a radius of 265.62 feet and being subtended by a chord with a bearing of North 85 degrees 07 minutes 12 seconds West, a distance of 35.55 feet to a point; THENCE, following a curve to the right with an arc length of 72.56 feet, having a radius of 442.85 feet and being subtended by a chord with a bearing of North 73 degrees 37 minutes 54 seconds West, a distance of 72.48 feet to a point; THENCE, following a curve to the right with an arc length of 190.00 feet, having a radius of 270.00 feet and being subtended by a chord with a bearing of North 45 degrees 45 minutes 31 seconds West, a distance of 186.10 feet to the POINT OF BEGINNING.

The herein-described tract of land contains 35,325 square feet or 0.811 acre, more or less.

EXHIBIT "B"

Depiction of Property



The Property is "Tract One" and "Tract Three" depicted above.

EXHIBIT "C"

Concept Plan

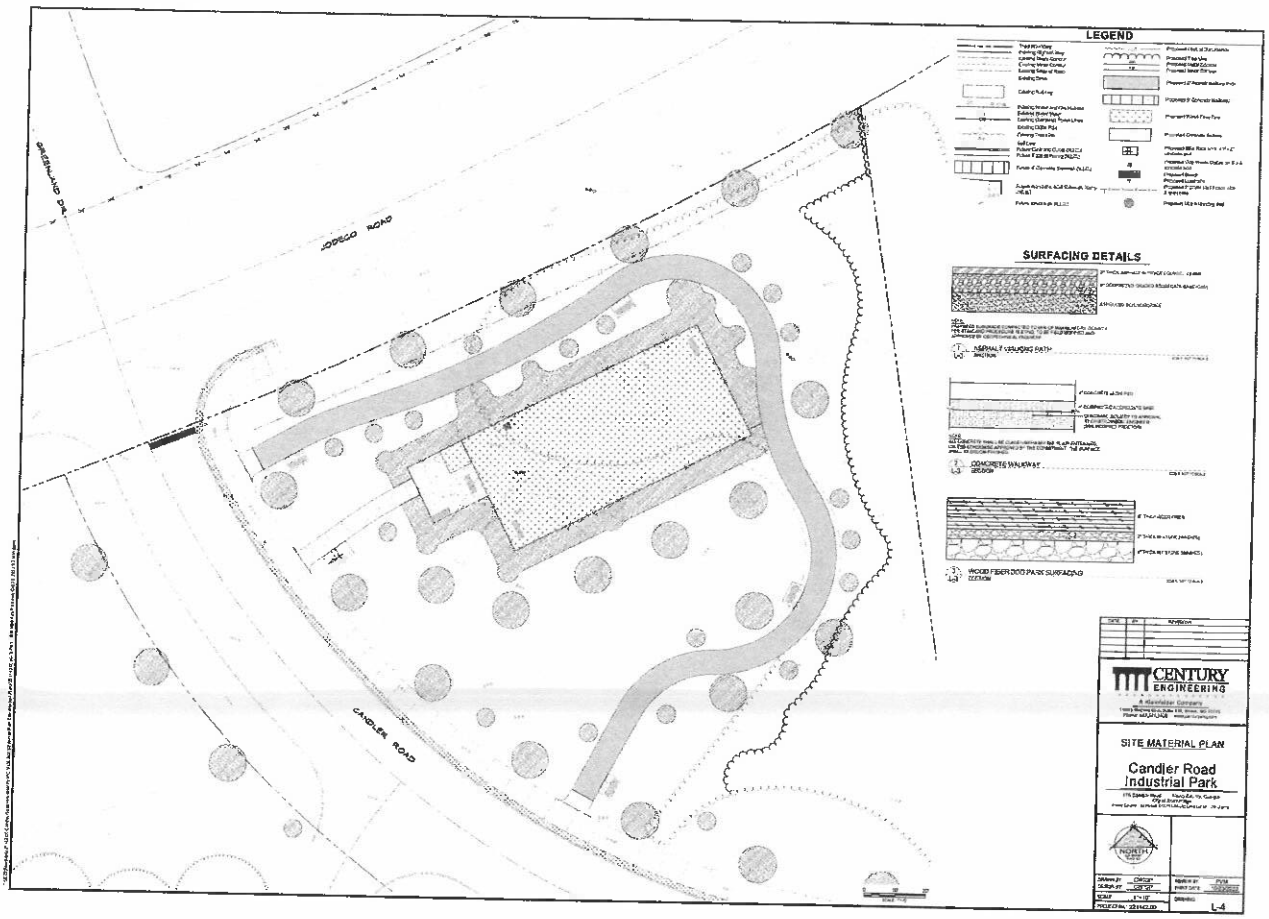


EXHIBIT "D"

Prepared by and after recording to be returned to:

Thompson Burton PLLC
One Franklin Park
6100 Tower Circle, Suite 200
Franklin, TN 37067
Attn: Walt Burton, Esq.

DEED OF DEDICATION

THIS INDENTURE made this 8th day of December 2023, between the undersigned **CANDLER ROAD STOCKBRIDGE PROPCO, LLC**, a Delaware limited liability company (hereinafter referred to as the "Grantor") and **THE CITY OF STOCKBRIDGE, GEORGIA**, a political subdivision of the State of Georgia (hereinafter referred to as the "Grantee").

WITNESSETH

That for and in consideration of the sum of One Dollar ($1.00) in hand paid, and the benefits flowing from the project hereinafter described, Grantor does grant and convey unto Grantee, its successors and assigns, all that tract or parcel of land lying and being in Henry County, Georgia, as more particularly described on **Exhibit "A"** attached hereto (the "Land"), for public use, namely, a public park and other public purposes.

To have and to hold the bargained premises unto grantee, its successors and assigns forever in fee simple.

Grantor will forever warrant and defend the title to the bargained premises unto Grantee, its successors and assigns the claims of all persons claiming by, through or under Grantor, but no further or otherwise.

The Grantee does hereby join in the execution of this Indenture for purposes of documenting its acceptance of the foregoing dedication and conveyance.

[*Signatures commence on the following page*]

IN WITNESS WHEREOF, Grantor has signed and sealed this Deed, the day, month and year first above written.

Signed, sealed and delivered in the presence of:

Unofficial Witness

Notary Public

My commission expires: 12/5/2027

(NOTARY SEAL)

TAMMARRA KUTZ
Notary Public, State of Florida
Commission No. HH 470148
My Comm. Exp. Dec. 5, 2027

GRANTOR:

CANDLER ROAD STOCKBRIDGE PROPCO, LLC,
a Delaware limited liability company

By: _____
Name: David Burch
Title: Authorized Representative

The foregoing dedication and conveyance is hereby accepted on behalf of the City of Stockbridge, Georgia, a political subdivision of the State of Georgia, as of the 13 day of December, 2023.

Signed, sealed and delivered in the presence of:

_____
Unofficial Witness

_____
Notary Public

My commission expires: _____

(NOTARY SEAL)

CHARISMA WEBSTER
Notary Public, Georgia
Fayette County
My Commission Expires
May 26, 2025

GRANTEE:

THE CITY OF STOCKBRIDGE, GEORGIA,
a political subdivision of the State of Georgia

By: _____
Name: Frederick Gardiner
Title: City Manager

EXHIBIT A – Legal Description (to be added)

Community Development Director: _____

Community Development Engineering: _____

(FOR RECORDING PURPOSES ONLY)

I:\2023\2023220\0 SURVEY_DWG\2023220_JODECO RD SD PLAT, MATT WORKING CTB,MATTHEW ROLLINS, 10/4/2023 4:08:10 PM

PROPERTY INFORMATION

OWNER: CANDLER ROAD STOCKBRIDGE PROPCO LLC

ADDRESS: 3986 JODECO ROAD
STOCKBRIDGE, GA 30253

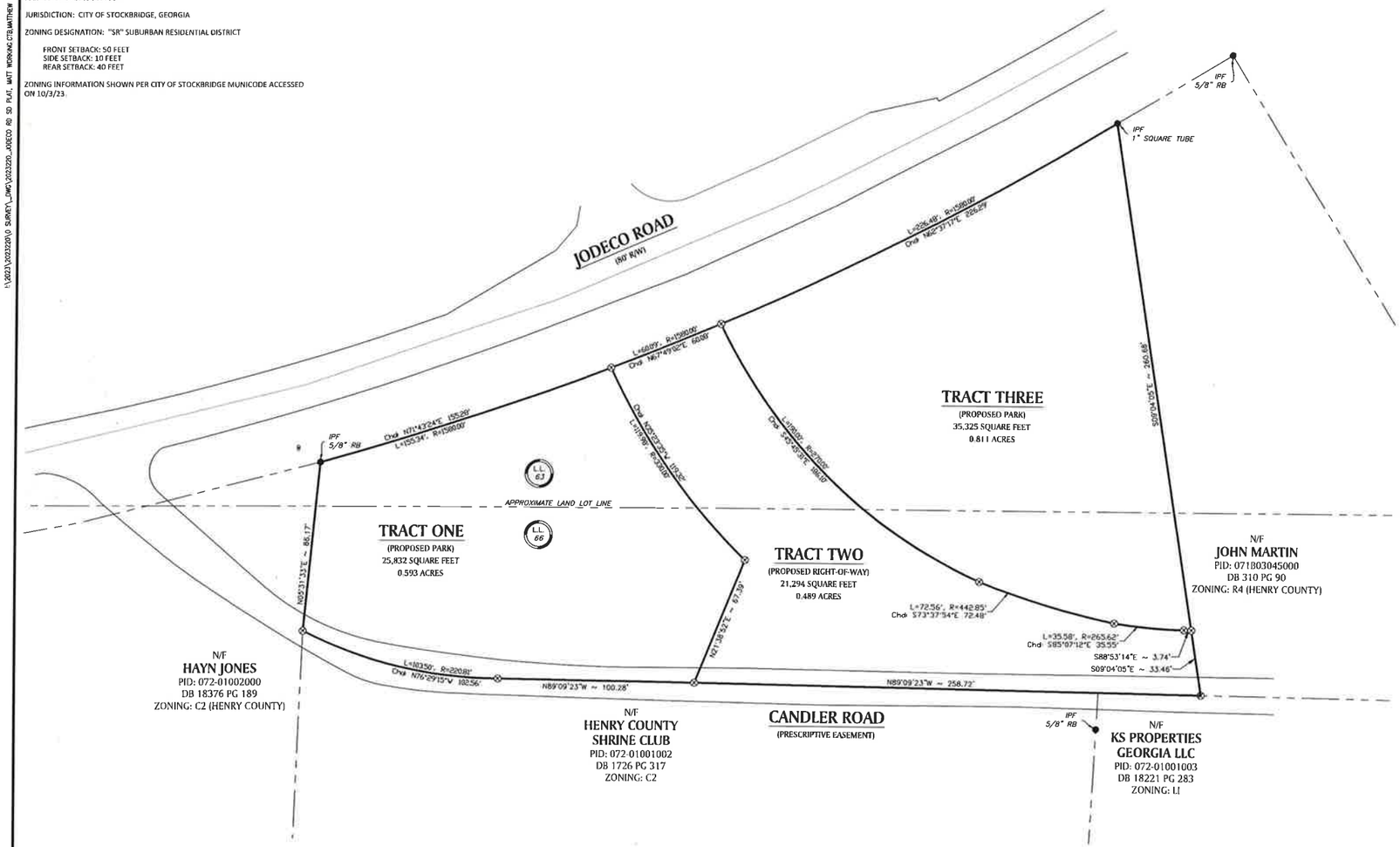
PARCEL ID: 071B03046000

JURISDICTION: CITY OF STOCKBRIDGE, GEORGIA

ZONING DESIGNATION: "SR" SUBURBAN RESIDENTIAL DISTRICT

FRONT SETBACK: 50 FEET
SIDE SETBACK: 10 FEET
REAR SETBACK: 40 FEET

ZONING INFORMATION SHOWN PER CITY OF STOCKBRIDGE MUNICODE ACCESSED ON 10/3/23.



LEGEND

BOUNDARY	BUILDING LINE
ADJACENT BOUNDARY	LAND LOT LINE
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STORM SEWER LINE	TREE LINE
SANITARY SEWER LINE	FENCE
A.D.A. PARKING	IRON PIN SET
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WATER VALVE	GAS VALVE
FIRE HYDRANT	SIGN
IRRIGATION CONTROL VALVE	TREE
FIRE DEPT. CONNECTION	BOLLARD

30 0 30 60
SCALE IN FEET: 1"=30'

GRID NORTH
GEORGIA WEST ZONE
(NAD 83)

VICINITY MAP
SCALE: NTS

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(i) As required by subsection (d) of O.C.G.A. Section 15-6-67, this plat has been prepared by a land surveyor and approved by all applicable local jurisdictions for recording as evidenced by approval certificates, signatures, stamps, or statements hereon. Such approvals or affirmations should be confirmed with the appropriate governmental bodies by any purchaser or user of this plat as to intended use of any parcel. Furthermore, the undersigned land surveyor certifies that this plat complies with the minimum technical standards for property surveys in Georgia as set forth in the rules and regulations of the Georgia Board of Registration for Professional Engineers and Land Surveyors and as set forth in O.C.G.A. Section 15-6-67.

FINAL

Matthew Rollins, GA PLS 3509 — Date: 11/07/2023

LAND PLANNERS
ENGINEERS · SURVEYORS
TRANSPORTATION
LANDSCAPE ARCHITECTS

PAULSON MITCHELL
INCORPORATED

85-A MILL STREET
SUITE 200
ROSWELL, GEORGIA 30075

VOICE 770.650.7685
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www.paulsonmitchell.com

MINOR SUBDIVISION PLAT

JODECO ROAD AT CANDLER ROAD

LAND LOTS 63 & 66
DISTRICT 7
CITY OF STOCKBRIDGE
HENRY COUNTY, GEORGIA

REVISIONS

PROJECT NUMBER: 2023220
DATE: 10/03/2023
FIELD DATE: 8/14/2023
DRAWN BY: MBR
CHECKED BY: MRE
FILE NAME: 2023220_JODECO RD SD PLAT

SHEET 1 OF 1

As-Surveyed Legal Description

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COMMENCING at a point formed at the intersection formed by the southerly right of way line of Jodeco Road (80' R/W) and the northeasterly right of way line of Norfolk Southern Railroad; THENCE, easterly along the southerly right of way of Jodeco Road a distance of 451.38 feet to a 5/8" inch rebar found; said 5/8" rebar also being known as the POINT OF BEGINNING.

THENCE, from the POINT OF BEGINNING and easterly along the southerly right of way of Jodeco Road following a curve to the left with an arc length of 155.34 feet, having a radius of 1,580.00 feet and being subtended by a chord with a bearing of North 71 degrees 43 minutes 24 seconds East, a distance of 155.28 feet to a point on the common line with the Proposed Right of Way Tract;
THENCE, southerly leaving said right of way of Jodeco Road along the common line with the Proposed Right of Way Tract following a curve to the left with an arc length of 119.98 feet, having a radius of 330.00 feet and being subtended by a chord with a bearing of South 35 degrees 23 minutes 35 seconds East, a distance of 119.32 feet to a point;
THENCE, southerly continuing along said common line a bearing of South 21 degrees 38 minutes 52 seconds West, a distance of 67.39 feet to a point located in Candler Road;
THENCE, westerly along the centerline of Candler Road the following courses and distances: North 89 degrees 09 minutes 23 seconds West, a distance of 100.28 feet to a point; THENCE, following a curve to the right with an arc length of 103.50 feet, having a radius of 220.81 feet and being subtended by a chord with a bearing of North 76 degrees 29 minutes 15 seconds West, a distance of 102.56 feet to a point on the common line with Hayn C Jones;
THENCE, northerly along said common line North 05 degrees 31 minutes 33 seconds East, a distance of 86.17 feet to the POINT OF BEGINNING.

The herein described tract of land contains 25,832 square feet or 0.593 acre, more or less.

As-Surveyed Legal Description

TRACT TWO

All that tract or parcel of land lying and being in Land Lots 63 and 66 of the 7th District, Henry County, Georgia, and being more particularly described as follows:

COMMENCING at a point formed at the intersection formed by the southerly right of way line of Jodeco Road (80' R/W) and the northeasterly right of way line of Norfolk Southern Railroad; THENCE, easterly along the southerly right of way of Jodeco Road a distance of 451.38 feet to a 5/8" inch rebar found; THENCE, following a curve to the left with an arc length of 155.34 feet, having a radius of 1,580.00 feet, and being subtended by a chord with a bearing of North 71 degrees 43 minutes 24 seconds East, a distance of 155.28 feet to a point; said point also being known as the POINT OF BEGINNING.

THENCE, from the POINT OF BEGINNING and northeasterly along the southerly right of way of Jodeco Road following a curve to the left with an arc length of 60.09 feet, having a radius of 1,580.00 feet and being subtended by a chord with a bearing of North 67 degrees 49 minutes 02 seconds East, a distance of 60.08 feet to a point on the common line with Tract Three;
THENCE, southerly leaving said right of way of Jodeco Road along the common line with Tract Three the following bearings and distances: southerly following a curve to the left with an arc length of 190.00 feet, having a radius of 270.00 feet and being subtended by a chord with a bearing of South 45 degrees 45 minutes 31 seconds East, a distance of 186.10 feet to a point; THENCE, following a curve to the left with an arc length of 72.56 feet, having a radius of 442.85 feet and being subtended by a chord with a bearing of South 73 degrees 37 minutes 54 seconds East, a distance of 72.48 feet to a point; THENCE, following a curve to the left with an arc length of 35.58 feet, having a radius of 265.62 feet and being subtended by a chord with a bearing of South 85 degrees 07 minutes 12 seconds East, a distance of 35.55 feet to a point; THENCE, a bearing of South 88 degrees 53 minutes 14 seconds East, a distance of 3.74 feet to a point on the common line with Now or Formerly John Martin;
THENCE, southerly along said common line a bearing of South 09 degrees 04 minutes 05 seconds East, a distance of 33.46 feet to a point located on the centerline of Candler Road;
THENCE, westerly along said centerline of Candler Road a bearing of North 89 degrees 09 minutes 23 seconds West, a distance of 258.72 feet to a point on the common line with Tract One;
THENCE, northerly leaving the centerline of Candler Road along the common line with Tract One the following bearings and distances: North 21 degrees 38 minutes 52 seconds East, a distance of 67.39 feet to a point; THENCE, following a curve to the right with an arc length of 119.98 feet, having a radius of 330.00 feet and being subtended by a chord with a bearing of North 35 degrees 23 minutes 35 seconds West, a distance of 119.32 feet to the POINT OF BEGINNING.

The herein described tract of land contains 21,294 square feet or 0.489 acre, more or less.

As-Surveyed Legal Description

TRACT THREE

All that tract or parcel of land lying and being in Land Lots 63 and 66 of the 7th District, Henry County, Georgia, and being more particularly described as follows:

COMMENCING at a point formed at the intersection formed by the southerly right of way line of Jodeco Road (80' R/W) and the northeasterly right of way line of Norfolk Southern Railroad; THENCE, easterly along the southerly right of way of Jodeco Road a distance of 451.38 feet to a 5/8" inch rebar found; THENCE, following a curve to the left with an arc length of 155.34 feet, having a radius of 1,580.00 feet, and being subtended by a chord with a bearing of North 71 degrees 43 minutes 24 seconds East, a distance of 155.28 feet to a point at the common corner with the Proposed Right of Way Tract; THENCE, continuing along the southerly right of way of Jodeco Road following a curve to the left with an arc length of 60.09 feet, having a radius of 1,580.00 feet, and being subtended by a chord with a bearing of North 67 degrees 49 minutes 02 seconds East, a distance of 60.08 to a point; said point also being known as the POINT OF BEGINNING.

THENCE, from the POINT OF BEGINNING and easterly along the southerly right of way of Jodeco Road following a curve to the left with an arc length of 226.48 feet, having a radius of 1,580.00 feet and being subtended by a chord with a bearing of North 62 degrees 37 minutes 17 seconds East, a distance of 226.29 feet to a 1-inch square tube found on the common line with John Martin;
THENCE, southerly leaving said right of way of Jodeco Road along the common line with John Martin a bearing of South 09 degrees 04 minutes 05 seconds East, a distance of 260.68 feet to a point on the common line with the Proposed Right of Way Tract;
THENCE, westerly along said common line the following bearings and distances: North 88 degrees 53 minutes 14 West, a distance of 3.74 feet to a point; THENCE, following a curve to the right with an arc length of 35.58 feet, having a radius of 265.62 feet and being subtended by a chord with a bearing of North 85 degrees 07 minutes 12 seconds West, a distance of 35.55 feet to a point; THENCE, following a curve to the right with an arc length of 72.56 feet, having a radius of 442.85 feet and being subtended by a chord with a bearing of North 73 degrees 37 minutes 54 seconds West, a distance of 72.48 feet to a point; THENCE, following a curve to the right with an arc length of 190.00 feet, having a radius of 270.00 feet and being subtended by a chord with a bearing of North 45 degrees 45 minutes 31 seconds West, a distance of 186.10 feet to the POINT OF BEGINNING.

The herein described tract of land contains 35,325 square feet or 0.811 acre, more or less.

BK:19182 PG:332-338
Filed and Recorded
Jun-20-2022 02:17 PM
DOC# 2022 - 023537
Real Estate Transfer Tax
Paid: $ 6600.00
0752022007120
SABRIYA HILL
CLERK OF SUPERIOR COURT
HENRY COUNTY, GA
Participant ID: 0397807349

After recording, please return to:

Thompson Burton PLLC
6100 Tower Circle, Suite 200
Franklin, TN 37067
Attn: Walt Burton, Esq.

(Above Space for Recorder's Use)

STATE OF GEORGIA
COUNTY OF HENRY

LIMITED WARRANTY DEED

THIS INDENTURE is made this 17th day of June, 2022 from **BLACKSTONE CANDLER DEV LLC,** a Georgia limited liability company (hereinafter collectively, referred to as the "Grantor"), to **CANDLER ROAD STOCKBRIDGE PROPCO, LLC**, a Delaware limited liability company (hereinafter referred to as the "Grantee") (the words "Grantor" and "Grantee" shall include their respective heirs, legal representatives, successors and assigns where the context requires or permits).

W I T N E S S E T H:

THAT GRANTOR, for and in consideration of the sum of Ten and No/100 Dollars ($10.00) in hand paid at and before the sealing and delivery of these presents, the receipt whereof is hereby acknowledged, has granted, aliened, bargained, sold, and conveyed, and by these presents does hereby grant, alien, bargain, sell, and convey unto the Grantee, its successors, legal representatives and assigns all that tract or parcel of land lying and being in Henry County, Georgia, being more particularly described on **Exhibit A** attached hereto and by this reference made a part hereof, and all rights, improvements, alleys, timber, shrubbery, trees, plants, fixtures, easements, benefits, privileges, and appurtenances pertaining thereto or held and enjoyed in connection therewith (collectively, the "**Property**"), subject to the matters set forth on **Exhibit B** attached hereto and by this reference made a part hereof (the "**Permitted Title Exceptions**").

TO HAVE AND TO HOLD the Property, together with all and singular the rights, members and appurtenances thereof, to the same being, belonging, or in anywise appertaining, to the only proper use, benefit and behoof of the Grantee, its successors, legal representatives and assigns forever in FEE SIMPLE.

AND THE GRANTOR shall warrant and forever defend the right and title to the Property hereby conveyed by the Grantor, unto the Grantee against the claims of all persons whomsoever claiming by, through, or under such Grantor, subject only to the Permitted Title Exceptions.

[Signatures commence on following page]

IN WITNESS WHEREOF, the Grantor has executed this Indenture under seal on the day and year written above.

Signed, sealed and delivered in the presence of:

_____
Unofficial Witness

_____
Notary Public

My commission expires: _____

(NOTARY SEAL)

WILLIAM A MILLER
MY COMMISSION EXPIRES
NOTARY
PUBLIC
DECEMBER 03, 2025
CLAYTON COUNTY, GEORGIA

GRANTOR:

BLACKSTONE CANDLER DEV LLC,
a Georgia limited liability company

By: HFG DEVELOPMENT LLC, its Manager

_____(Seal)
By: Alvin D. Hosford
Title: Manager

[Signature Page to Limited Warranty Deed]

Exhibit A
Legal Description of Property

PARCEL I:

ALL THAT TRACT OR PARCEL OF LAND CONTAINING 1.8 ACRES, LYING AND BEING IN LAND LOT 63 OF THE 7TH DISTRICT OF HENRY COUNTY, GEORGIA, PER SURVEY AND PLAT MADE FOR HENRY F. ALLEN BY JOE ROWAN, JR., HENRY COUNTY SURVEYOR, DATED NOVEMBER 26, 1965, AND MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGINNING AT AN IRON PIN ON THE SOUTHERLY RIGHT OF WAY LINE OF STATE ROUTE 351, SAID IRON PIN BEING 535 FEET EASTERLY ALONG SAID RIGHT OF WAY LINE FROM THE INTERSECTION OF SAID RIGHT OF WAY LINE WITH THE CENTER OF SOUTHERN RAILWAY COMPANY TRACK IN FLIPPEN COMMUNITY, THENCE RUNNING NORTH 69 DEGREES 30 MINUTES EAST ALONG SAID RIGHT OF WAY LINE 218 FEET; THENCE NORTH 62 DEGREES 30 MINUTES EAST ALONG SAID RIGHT OF WAY LINE 225 FEET TO AN IRON PIN; THENCE SOUTH 10 DEGREES 03 MINUTES EAST 292 FEET TO THE CENTER OF A PUBLIC ROAD; THENCE WESTERLY ALONG THE CENTER OF SAID PUBLIC ROAD 450 FEET; THENCE NORTH 2 DEGREES 00 MINUTES WEST 92 FEET TO THE POINT OF BEGINNING, BEING IMPROVED PROPERTY WITH A FRAME HOUSE AND BARN THEREON.

SAID PROPERTY BEING FURTHER DESCRIBED AS FOLLOWS:

ALL THAT TRACT OR PARCEL OF LAND LYING AND BEING IN LAND LOTS 63 AND 66 OF THE 7TH DISTRICT, HENRY COUNTY, GEORGIA AND BEING 1.915 ACRES AS SHOWN AND DELINEATED ON A PLAT OF SURVEY FOR HOSPITALITY DEVELOPMENT GROUP AND FIRST AMERICAN TITLE INSURANCE COMPANY, BY JAMES R. GREEN, REGISTERED LAND SURVEYOR NO. 2543, DATED NOVEMBER 4, 2001 AND BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

COMMENCING AT A POINT FORMED AT THE INTERSECTION OF SOUTHERLY RIGHT OF WAY LINE OF JODECO ROAD (80' RIGHT-OF-WAY) AND NORTHERN RIGHT OF WAY LINE OF NORFOLK SOUTHERN RAILROAD; THENCE EASTERLY ALONG THE SOUTHERLY RIGHT-OF-WAY LINE OF JODECO ROAD AT A DISTANCE OF 451.38 FEET TO AN IRON PIN FOUND AND THE POINT OF BEGINNING;

THENCE ALONG THE SOUTHERLY RIGHT OF WAY LINE OF JODECO ROAD ON THE ARC OF A CURVE TO THE LEFT A DISTANCE OF 441.91 FEET, SAID ARC BEING SUBTENDED BY A CHORD BEARING NORTH 66 DEGREES 32 MINUTES 26 SECONDS EAST, 440.86 FEET TO A SQUARE TUBE FOUND; THENCE SOUTH 09 DEGREES 03 MINUTES 17 SECONDS EAST, 265.50 FEET TO AN IRON PIN FOUND; THENCE NORTH 89 DEGREES 29 MINUTES 38 SECONDS WEST,

359.00 FEET TO A POINT; THENCE ALONG THE CENTERLINE OF CANDLER ROAD (A PERSCRIPTIVE EASEMENT) ON THE ARC OF A CURVE TO THE RIGHT A DISTANCE OF 104.37 FEET, SAID ARC BEING SUBTENDED BY A CHORD BEARING NORTH 75 DEGREES 10 MINUTES 40 SECONDS WEST, 103.28 FEET TO A POINT; THENCE NORTH 05 DEGREES 32 MINUTES 21 SECONDS EAST, 85.16 FEET TO AN IRON PIN FOUND AND THE POINT OF BEGINNING.

PARCEL II:

ALL THAT TRACT OR PARCEL OF LAND LYING AND BEING IN LAND LOT 66 OF THE 7TH DISTRICT OF HENRY COUNTY, GEORGIA, CONTAINING 40 ACRES, MORE OR LESS, AND BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGINNING AT A POINT ON THE SOUTH SIDE OF PUBLIC ROAD AT NORTHWEST CORNER OF LANDS OF R.T. TURNER, AND RUNNING THENCE SOUTH ALONG WEST LINE OF TURNER PROPERTY TO NORTH LINE OF RIGHT OF WAY OF SOUTHERN RAILWAY COMPANY; THENCE NORTHWESTERLY ALONG RIGHT OF WAY OF SOUTHERN RAILWAY COMPANY TO EAST LINE OF L. B. CASON PROPERTY; THENCE NORTH ALONG EAST LINE OF CASON PROPERTY TO SOUTH SIDE OF AFOREMENTIONED PUBLIC ROAD; THENCE EASTERLY ALONG SOUTH SIDE OF SAID PUBLIC ROAD TO POINT OF BEGINNING.

LESS AND EXCEPT ALL PARCELS WHICH HAVE BEEN CONVEYED FROM THE ABOVE DESCRIBED PROPERTY.

SAID PROPERTY ALSO BEING DESCRIBED AS FOLLOWS:

ALL THAT TRACT OR PARCEL OF LAND LYING AND BEING IN LAND LOT 66 OF THE 7TH DISTRICT, HENRY COUNTY, GEORGIA AND BEING 44.315 ACRES AS SHOWN AND DELINEATED ON A PLAT OF SURVEY FOR HOSPITALITY GROUP AND FIRST AMERICAN TITLE INSURANCE COMPANY, BY JAMES R. GREEN, REGISTERED LAND SURVEYOR NO. 2543, DATED NOVEMBER 2, 2021 AND BEING MORE PARTICULARY DESCRIBED AS FOLLOWS:

BEGINNING AT THE INTERSECTION OF THE EASTERLY BOUNDARY OF LAND LOT 66 AND THE SOUTHERN RIGHT OF WAY OF LINE OF CANDLER ROAD, A COUNTY ROAD HAVING A RIGHT OF WAY OF 60 FEET IN WIDTH; BEING MARKED WITH A ½ INCH REBAR AND CAP PLACED; THENCE LEAVING SAID RIGHT OF WAY ALONG THE EASTERLY BOUNDARY OF LAND LOT 66 AND COMMON WITH LANDS OWNED BY BURNETTE; SOUTH 00 DEGREES 12 MINUTES 32 SECONDS WEST, A DISTANCE OF 1417.03 FEET TO A 3/8 INCH REBAR FOUND; THENCE LEAVING SAID LAND LOT LINE ALONG LANDS COMMON TO HAMMOCK; SOUTH 89 DEGREES 57 MINUTES 30 SECONDS WEST, A DISTANCE OF 503.05 FEET TO A 3/8 INCH REBAR FOUND ON THE NORTHWESTERLY RIGHT OF WAY OF THE NORFOLK SOUTHERN RAILROAD (HAVING A RIGHT OF WAY OF 150 FEET); THENCE ALONG SAID RIGHT OF WAY THE FOLLOWING COURSES; NORTH 56 DEGREES 35 MINUTES 23 SECONDS WEST, A DISTANCE OF 438.17 FEET TO A POINT; THENCE ALONG A CURVE TO THE LEFT HAVING A RADIUS OF 7072.12 FEET AND AN ARC LENGTH OF 678.26 FEET AND BEING SUBTENDED BY

A CHORD HAVING A BEARING OF NORTH 59 DEGREES 18 MINUTES 37 SECONDS WEST, A DISTANCE OF 678.00 FEET TO A POINT; THENCE NORTH 62 DEGREES 06 MINUTES 36 SECONDS WEST, A DISTANCE OF 192.00 FEET TO A 3/8 INCH REBAR FOUND; THENCE LEAVING SAID RIGHT OF WAY ALONG LANDS COMMON WITH KS PROPERTIES, NORTH 00 DEGREES 06 MINUTES 57 SECONDS EAST, A DISTANCE OF 771.82 FEET TO A ½ INCH REBAR AND PLASTIC CAP PLACED ON THE SOUTHERN RIGHT OF WAY LINE OF CANDLER ROAD; THENCE ALONG SAID RIGHT OF WAY SOUTH 88 DEGREES 53 MINUTES 14 SECONDS EAST, A DISTANCE OF 1625.47 FEET TO THE POINT OF BEGINNING.

Exhibit B

Permitted Title Exceptions

1. All taxes for the year 2022 and subsequent years.

2. A plat of survey for Hospitality Group, LLC and First American Title Insurance Company, by James R. Green, Registered Land Surveyor No. 2543, dated November 4, 2021 reflects the following (as to Parcel I):

    a. The edge of paving for Candler Road encroaches the southern boundary line by 28.02 feet and runs along the entire property line.

3. A plat of survey for Hospitality Group, LLC and First American Title Insurance Company, by James R. Green, Registered Land Surveyor No. 2543, dated November 2, 2021 reflects the following (as to Parcel II):

    a. a 70 foot front set back line

    b. a 20 foot rear set back line

City of Stockbridge

AGENDA ITEM

MEETING DATE

JULY 30, 2024

- [ ] RESOLUTION
- [x] ORDINANCE
- [ ] CONTRACT APPROVAL/RENEWAL
- [ ] PUBLIC HEARING
- [ ] PRESENTATION
- [ ] BID SELECTION/AWARD
- [ ] TASK ORDER
- [ ] CHANGE ORDER
- [ ] BUDGET AMENDMENT
- [ ] BUDGET TRANSFER
- [ ] PAYMENT APPROVAL
- [ ] OTHER

FUNDING SOURCE

- [ ] GENERAL FUND
- [ ] FUND BALANCE
- [ ] SPLOST or TSPLOST
- [ ] ARPA
- [ ] GRANT
- [ ] HOTEL/MOTEL TOURISM
- [ ] COUNCIL INITIATIVE
- [ ] PARTNER/SPONSOR
- [ ] DEPARTMENT FUND BALANCE
- [ ] BONDING

ACCOUNT TRANSFER FROM:

ACCOUNT TRANSFER TO:

PRESENTER: Community Development Staff

DEPARTMENT: Community Development

ITEM/PROJECT/EVENT:

DE-ANNEXATION CASE #DX-2024-02 FOR THE MANDERLEY SUBDIVISION, PHASE 2. Consideration of an Ordinance to de-annex from the Corporate Limits of the City of Stockbridge nine parcels within the Manderley Subdivision, representing Phase 2. The request was made by the owners of the nine parcels, which would become part of unincorporated Henry County.

BACKGROUND INFORMATION:

The City Council previously approved (on April 30, 2024) De-Annexation Case #DX-2024-01 for the Manderley Subdivision, Phase 1, which concerned ten nearby parcels.

APPROVALS: CITY MANAGER_____

CITY TREASURER_____

CITY ATTORNEY_____

GRANTS ADMIN._____

☐ FINANCIAL IMPACT ☐ N/A

AMOUNT $

ATTACHMENTS: ☐

ITEM/PROJECT/EVENT:

De-Annexation Case #DX-2024-02 for the Manderley Subdivision, Phase 2.

BACKGROUND INFORMATION:

STAFF RECOMMENDATION:

Approval.

Staff Signature_____

Henry County
Department of Planning & Zoning
Toussaint Kirk, Director

June 14, 2024

Stockbridge City Hall
4640 North Henry Boulevard
Stockbridge, GA 30281
Attn: Frederick Gardiner, City Manager of the City of Stockbridge

RE: Request for Deannexation of Nine Properties into Unincorporated Henry County:

The Henry County Planning & Zoning Department has received an application for the deannexation of nine properties within the Manderley Subdivision, totaling 13.366 +/- acres in incorporated City of Stockbridge. The properties are as follows:

160 Jasper Drive, 013A01023000
165 Jasper Drive, 013A01024000
195 Jasper Drive, 013A01050000
310 Kerrith Drive, 013A01039000
320 Kerrith Drive, 013A01038000
325 Kerrith Drive, 013A01025000
510 Portloe Court, 013A01049000
515 Portloe Court, 013A01047000
520 Portloe Court, 013A01048000

Enclosed for your review is a copy of the deannexation report prepared by Henry County Planning & Zoning Staff with application materials, the resolution of acceptance by the Henry County Board of Commissioners as a result of the June 11, 2024 Board of Commissioners meeting.

Please provide an official letter regarding the City of Stockbridge's agreement or non-agreement to this proposed deannexation. If you have any questions or need additional information, please contact the undersigned at 770-288-7526.

Best Regards,

Toussaint Kirk,
Director, Planning and Zoning

Cc: Cheri Hobson-Matthews, County Manager
Serena L. Nowell, County Attorney

Enclosures

140 Henry Parkway • McDonough, Georgia 30253
MAIN: (770) 288-7526 • FAX: (770) 288-7550

RESOLUTION #24-155

RESOLUTION ACCEPTING PROPOSED DEANNEXATION FROM THE CITY OF STOCKBRIDGE OF NINE (9) PARCEL OF LAND CONSISTING OF A COMBINED 13.366 +/- ACRES IN LAND LOTS 8 AND 9 OF THE 12TH DISTRICT, HENRY COUNTY, GEORGIA

WHEREAS, pursuant to *O.C.G.A. Article 8,* the Henry County Board of Commissioners have received application from property owners ("Applicants") advising Henry County of their intent to deannex (DE-AX-24-02) nine (9) properties consisting of a combined total of 13.366 +/- acres in Land Lots 8 and 9 of the 12th District from the municipal boundary of the City of Stockbridge, Henry County, Georgia, being **Parcels 013A01023000, 013A01024000, 013A01050000, 013A01039000, 013A01038000, 013A01025000, 013A01049000, 013A01047000, and 013A01048000** (the" Property") (*see,* Exhibit A, attached hereto); and

WHEREAS, in connection with, and immediately following, the annexation, the property owners seek to change the zoning for the Property from the City of Stockbridge SR (Suburban Residential) zoning district to the Henry County R-1 (Single-Family Residence) zoning district; and

WHEREAS, *O.C.G.A. § 36-36-131* grants the City of Stockbridge the authority to deannex an area or areas of the existing corporate limits upon the adoption of a resolution by the governing authority of the county in which such property is located consenting to such deannexation; and

WHEREAS, Henry County Board of Commissioners analyzed and whether the deannexation may be detrimental to the health, safety, and welfare of the residents and property owners of the area to be deannexed or to the area remaining within the municipality; and

WHEREAS, the Henry County Board of Commissioners has determined that the proposed deannexation of the Property into the County would not cause a material increase in the burden on Henry County; and

WHEREAS, the Henry County Board of Commissioners has determined that the proposed deannexation of the Property into the County would not result in an increase in density and infrastructure

demands which would be detrimental to Henry County and to the health, safety, and welfare of Henry County and its citizens; and

WHEREAS, the Henry County Board of Commissioners has determined that the proposed deannexation would not be detrimental to the health, safety, and welfare of the residents and property owners of the area to be deannexed or to the area remaining within the municipality.

NOW THEREFORE, BE IT RESOLVED that, pursuant to the provisions of *O.C.G.A. § 36-36-131*, et seq, Henry County accepts the proposed deannexation (DE-AX-24-02) of the Property, as described in Exhibit A, from the municipal boundaries of the City of Stockbridge to the corporate boundary of Henry County, Georgia, on the grounds that the proposed the proposed deannexation would not be detrimental to the health, safety, and welfare of the residents and property owners of the area to be deannexed or to the area remaining within the municipality.

BE IT FURTHER RESOLVED that the County Manager and/or the County Attorney are authorized and directed to send such notice(s) as are required by law to the City of Stockbridge and/or the effected property owners.

BE IS FURTHER RESOLVED that the County Attorney is authorized to initiate such legal proceedings as are proper to enjoin the deannexation of the Property and/or initiate and/or engage in the arbitration proceedings authorized per *O.C.G.A. § 36-36-114*.

BE IT FURTHER RESOLVED that this Resolution shall be forwarded to the City, together with such supporting documentation as are reasonable and necessary to support the same.

BE IT SO RESOLVED THIS 11TH DAY OF JUNE, 2024.

BOARD OF COMMISSIONERS
OF HENRY COUNTY, GEORGIA

Carlotta Harrell, Chair

ATTEST:

Stephanie Braun, County Clerk

Henry County SEAL Henry County, GA Board of Commissioners

Henry County Planning & Zoning

CITY OF STOCKBRIDGE
DE-AX-24-02

Commission District*:* 2
Commissioner: Neat Robinson
Report Prepared by: Kenta Lanham, Planner III

Property Owners: Mark Covino and Jennifer M. Covino
Steve C. Bullard
Janet F. Drosky
Vanessa Martinez
Linda P. Northington
Zr Chao Zhu
Nhu Bich Khuu
Carey Remo
Francisco Chevres

Location: 160 Jasper Drive
165 Jasper Drive
195 Jasper Drive
310 Kerrith Drive
320 Kerrith Drive
325 Kerrith Drive
510 Portloe Court
515 Portloe Court
520 Portloe Court

Parcel ID(s): 013A01023000
013A01024000
013A01050000
013A01039000
013A01038000
013A01025000
013A01049000
013A01047000
013A01048000

Request: Deannexation

BOC Meeting: **June 11, 2024**

Lot Size: 13.366 +/- acres (total)

Zoning History: A review of zoning files indicates that a rezoning request from RA-200 to RM-75 (RZ-66-12) which included the subject property as part of a larger property was denied by the Henry County Board of Commissioners of Roads and Revenues on January 3, 1967.

A review of zoning files indicates that a rezoning request from RA-200 to RM-85 (RZ-67-01) which included the subject property as part of a larger property was withdrawn by the applicant on February 7, 1967, before consideration by the Henry County Board of Commissioners of Roads and Revenues.

A review of zoning files indicates that a rezoning request from RA-200 to RA-100 (RZ-67-02) which included the subject property as part of a larger property was approved by the Henry County Board of Commissioners of Roads and Revenues on March 7, 1967.

A review of zoning files indicates that a rezoning request from RA-200 and RA-100 to C-2 (RZ-71-07) which included the subject property as part of a larger property was approved by the Henry County Board of Commissioners on August 30, 1971.

A review of zoning files indicates that a rezoning request from RA-200 to RA-150A* (RZ-82-08) which included the subject property as part of a larger property was approved by the Henry County Board of Commissioners on October 5, 1982.

*** With the adoption of the ULDC in 2009, those properties zoned RA-150 or RA with one (1) acre lots were rezoned to R-1 (Single-Family Residence). As such, the current zoning of the Manderley subdivision is now R-1.**

Previous to annexation by the City of Stockbridge, the properties were zoned R-1 (Single-Family Residence) as illustrated on the Henry County Official Zoning Map. which was adopted on November 19, 2013, by the Henry County Board of Commissioners.

The subject properties were annexed by the City of Stockbridge on January 1, 2023, per Georgia Senate Bill 612 (2021-2022).

Per correspondence received by Planning staff on October 19, 2023, from City of Stockbridge Community Development Department staff, the subject properties are zoned SR (Suburban Residential).

Adjacent properties are as follows:

North: City of Stockbridge
South: City of Stockbridge
East: City of Stockbridge
West: Unincorporated Henry County and City of Stockbridge

Current Land Use: Single-Family Residences

Future Land Use: The City of Stockbridge 2024 Comprehensive Plan designates the subject property as Low Density Residential (up to 1-4 units per acre). Previous to annexation by the City of Stockbridge, the properties had a FLUM designation of Low Density Residential (up to 2.0 dwelling units per acre, net).

Proposed Zoning: As per the application materials, the residents of nine (9) properties, consisting of a combined total of 13.366 +/- acres, within the Manderley subdivision propose to deannex the subject properties from the municipal boundaries of the City of

Stockbridge to the unincorporated limits of Henry County. Upon deannexation, the properties would be zoned R-1 (Single-Family Residence), which is the previous zoning designation of the properties previous to annexation by the City of Stockbridge.

Comments: The owners of the subject property are requesting the 100% deannexation method into the City of Stockbridge. According to the Official Code Georgia Annotated, *O.C.G.A § 36-36-131*, municipal corporations can deannex incorporated area or areas which directly abut the existing municipal boundary or would directly abut on the municipal boundary if it were not otherwise separated from the municipal boundary by lands owned by the municipal corporation or some other political subdivision, by lands owned by this state, or by the definite width of any street or street right of way; any creek or river; or any right of way of a railroad or other public service corporation.

The application packet, including the written and signed applications of all of the owners of all of the land proposed to be deannexed, and containing a complete description of the lands to be deannexed was submitted to Henry County via electronic mail (e-mail) on May 22, 2024, in accordance with *O.C.G.A. § 36-36-113.*

As per the application materials, the residents of nine (9) properties, consisting of a combined 13.366 +/- acres, within the Manderley subdivision propose to deannex the subject properties from the municipal boundaries of the City of Stockbridge to the unincorporated limits of Henry County. Upon deannexation, the properties would be zoned R-1 (Single-Family Residence), which is the previous designation of the properties previous to annexation by the City of Stockbridge.

The City of Stockbridge 2024 Comprehensive Plan designates the subject property as Low Density Residential (up to 1-4 units per acre). Previous to annexation by the City of Stockbridge, the properties had a FLUM designation of Low Density Residential (up to 2.0 dwelling units per acre, net).

The Future Land Use Map (FLUM), as part of the Henry County 2045 Comprehensive Plan, designation of the surrounding unincorporated Henry County properties is Medium Density Residential, which is described in the Comprehensive Plan as areas consisting of single family homes on a single lot. New development in these areas should provide pedestrian facilities, including sidewalks and crosswalks, and have an appropriate streetscape. Walkable neighborhoods should be created with appropriate parks and open space. The Medium Density Residential FLUM designation supports developments with a density of up to 4.0 dwelling units per acre, net.

The subject property is located within an area designated as a Suburban Mix on the Henry County Development and Infrastructure Strategy Area Map. The vision for Suburban Mix areas is to accommodate a variety of types of residential neighborhoods that are predominantly single family, as well as some supporting areas of retail (shopping) and workplaces. A system of multi-use trails supports both transportation and recreational goals with sidewalks prioritized around schools, parks, and designed community centers.

Per *O.C.G.A. 36-36-134*, in the event of a deannexation, a municipality may, but is not required to, continue to provide any services to the property which it was providing immediately prior to the deannexation, provided that the county and municipality have agreed to terms and conditions for the municipality continuing to provide such services.

Per *O.C.G.A. 36-36-131*, a municipality is granted the authority to deannex an area or areas of the existing corporate limits upon the adoption of a resolution by the governing authority of the county in which such property is located consenting to such deannexation. If the governing authority of the county consents to the deannexation and the deannexation conforms with the requirements of *O.C.G.A. Article 8*, the governing authority of the municipal corporation shall approve such deannexation unless it finds that the deannexation would be detrimental to the health, safety, and welfare of the residents and property owners of the area to be deannexed or to the area remaining within the municipality.

Recommendation: It is Planning & Zoning staff's opinion that the deannexation would not be detrimental to the health, safety, and welfare of the residents and property owners of the area to be deannexed or to the area remaining within the City of Stockbridge.

Attachments:

- RZ-82-08 October 5, 1982, Board of Commissioner meeting minutes
- Aerial Map
- Zoning Map
- Tax Map
- Future Land Use Map
- Resolution
- Application Packet

STATE OF GEORGIA

COUNTY OF HENRY

October 5, 1982

The regular meeting of the Board of Commissioners of Henry County was held in the Administration Building on October 5, 1982 at 9:35 a.m.

Those present were:

Edward H. Whiddon, Sr., Chairman, presiding
William M. Gardner, Vice Chairman
James R. Brannan, Commissioner
W. D. Patrick, Commissioner
Marion Hall Simpson, Commissioner

Ron Rabun, County Administrator; Philip Keen, County Attorney; Beverly McLeod, Clerk; Tom Shedd, Zoning Administrator; Sherri DeCinque, Henry Herald; Pat Murdock, Henry Neighbor; Robert Clough, WZAL; Lewis Hurd; Mac Irvin; Phil Kelley; and several visitors.

The Reverend Lindsey Smith, Associate Pastor of Bear Creek Baptist Church, gave the invocation and the Chairman led in the pledge to the flag.

The Chairman explained to those present that the County Administrator would open the bids at this time and that the bids would be awarded later during the meeting after tabulation was complete.

Officer James L. Dunlap, a Deputy Jailer, was presented with a Letter of Commendation for the bravery exercised by him on September 11, 1982 when he rescued jail inmates during a fire. The Chairman expressed his appreciation to Officer Dunlap and Sheriff Chaffin who also was present.

Mr. Charles Shaw of Dailey Mill Road spoke to the Board regarding damage that had been done to the road by garbage trucks. Commissioner Patrick stated that he and Road Superintendent Dickey would go to the road and investigate the matter. Mr. Shaw expressed his thanks.

Mr. Robert Whitaker of Camp Fortson came before the Board to present a deed copy of a previously unnamed road (currently know as Russell Road). He wanted to verify that the road was a county road. The Chairman stated that if Mr. Whitaker could provide the County Attorney with a photostat of the 1903 deed that the matter would be investigated.

Mr. Lewis Hurd, who was representing J. P. Evans (a developer), presented copies of plats to the Board to assist them in reviewing Mr. Evans' rezoning request change from C-2 and RM-75 to R-150B on Highway 351, LL 22 & 43 of the 6th district. Change was requested for the future development of Windhaven Plantation Subdivision and the Planning Board recommended approval. Mr. Hurd explained that since part of the property was zoned C-2 and part RM-75, the desire was to zone both landlots residential. Commissioner Brannan made the motion to approve this rezoning request and Commissioner Patrick seconded. Motion passed with unanimous approval.

A preliminary plat approval for J. P. Evans, Windhaven Planation, Unit Two, was granted on a motion made by Commissioner Simpson with the stipulation that it pass soil and erosion and road specs. Commissioner Patrick seconded and motion passed unanimously.

The Zoning Administrator presented a rezoning request change of Zack's Properties from C-1 to C-4 on the corner of Hwy. 138 and Hwy. 155 for a convenience store (Nite Owl#13). C-4 was requested since Zack's Properties would like to sell beer and wine at the proposed location, LL 133 of the 11th district. The Planning Board recommended approval. Since a store had previously been at that location,

Commissioner Brannan inquired of the Zoning Administrator if this request would be grandfathered. The Zoning Administrator stated that the grandfather clause does not apply when there is a change of tenant, a considerable amount of expansion, or a change in use, Section 8-6, Page 68, of the Zoning Manual. Mr. Wayne Staples, Mrs. Davidson, Mrs. Crumbley, and Mrs. Louise Fitzgerald, concerned citizens who were present, opposed the request, stating that this was a dangerous intersection, believed the store would increase the number of DUIs on the Road if it sells beer and wine, and do not want the added litter that could possibly result. Commissioner Patrick inquired about the lot size and Zack Hinton informed the Board that the lot was approximately 270' x 270', the lot has been recurbed with underground drainage, there will be an access lane coming off of Hwy. 138 and 155, and that the request has been approved by State D.O.T. Commissioner Tom Moreland and the State Fire Marshall. Stating that since it was already zoned C-1, the Vice Chairman made a motion to rezone the lot C-4. Commissioner Patrick seconded and motion passed by quorem with Commissioners Brannan and Simpson opposing.

At this time, the Zoning Administrator presented a beer and wine application for Nite Owl #13 for the Board's approval. He advised the Board that the manager's check from the Police Department had not been received. Commissioner Patrick made the motion to table the request until 9:30 a.m., October 19, 1982. Commissioner Simpson seconded and all were in favor.

Mr. Richard Chatham of Koppar Corporation presented a rezoning request change from RA-200 to R-150A in LL 7, 8, and 26 of the 12th district (former "Lion Country Safari" property). The Planning Board had approved the request subject to the proper letter from the Water Authority; and also approved a variance of the required 30' sidelines. Mr. Chatham explained to the Commissioners that the Planning Board had not approved the request two years ago; subsequently, his corporation had upgraded the subdivision project which would include a community center, beach, pool, clubhouse, and tennis court with one-acre lots. Mr. Chatham stated that the R-150A zoning was requested because of needed flexibility to shift the houses if necessary and maintain the land mass and that his corporation would be willing to work with any restrictive covenants that the Board required. Commissioner Simpson inquired about the flood way of the Lake Spivey dam located inthe area and stated that in the final approval, he would not vote for the project if the flood way is not indicated on the preliminary plat. Mr. Chatham stated that he was in receipt of a letter from the State indicating that the dam was safe. Commissioner Brannan made a motion to approve the rezoning request and the Vice Chairman seconded. All were in favor.

A preliminary plat approval of Unit 1 (66.92 acres) for the above project was presented. Commissioner Brannan made the motion to approve the preliminary plat subject to a soil and erosion plan, passing of restrictive covenants, approved by the Board of Commissioners, and an indication of how the community property (community center, beach, pool, etc.) will be divided. The Vice Chairman seconded and motion passed unanimously.

Robert E. Kordet, who was present, presented a conditional use request for additional greenhouses at LL 73 of the 8th district, containing 5.16 acres located on River Road. The Planning Board had approved the conditional use subject to a) a one-year review, b) shrubs be planted and all landscaping of property to be properly done prior to any building permits for requested additional greenhouses, and c) that Kordet build only three greenhouses in 1983 and three greenhouses in 1984. The Zoning Administrator explained to the Board that the above stipulations were placed on this request due to the public input obtained at the Planning Board's meeting. The Vice Chairman made the motion to approve the conditional use subject to the same aforementioned stipulations. Commissioner Brannan seconded and all were in favor.

Mike Clanton came before the Board to present a rezoning request change from M-1 to C-4 for a body repair shop at LL 155 of the 7th district located on the corner of Highway Barn Road and Hwy. 42 (formerly known as Holbrook Machinery, Inc.). The Planning Board had recommended approval with appropriate screening of the fenced areas. Commissioner Patrick made the motion to approve the rezoning request change to C-4 with appropriate screening installed and the Vice Chairman seconded. Motion passed unanimously.

Mr. Ralph Keenan, who was present, requested a variance to convert single family dwelling into a duplex in LL 159 of the 7th district located on Weeping Willow Lane. Planning Board had denied on the basis that it was spot zoning. Mr. Ralph Painter, the adjacent landowner to the property in question, opposed the request since he feared a constant turnover of residents if duplexes were allowed. In view of the fact that this would possibly set a precedent for future requests, Commissioner Brannan made a motion to deny the request. Commissioner Patrick seconded and motion passed by quorem with the Vice Chairman and Commissioner Simpson opposing.

The Zoning Administrator presented a conditional exception for Richard's Paint and Body Shop to have an impound lot in LL 135 of the 7th district located on Highway 81 East. The property is currently zoned R-85 and is classified as a non-conforming use, but is allowed to operate as a non-conforming use under "grandfather" provisions. The Planning Board had earlier denied due to the fact that the impound lot would not be in the proper location. Mr. Richard Reece was present to answer questions. The Vice Chairman made the motion to table the request and Commissioner Patrick seconded. Motion passed by quorem with Commissioner Simpson opposing. The Chairman advised the public that the new zoning manual does not have a classification for an impound lot and that the Board will resolve the issue in the near future.

Senator Janice Horton requested that the Board proclaim October 17-23, 1982, as "National Business Women's Week." The proclamation was presented to the Board by Mrs. Hazel Gardner and the Vice Chairman read to those present. Commissioner Brannan made the motion to adopt the resolution affecting the request and Commissioner Simpson seconded. Motion passed unanimously.

Ken Belcher of Ken's Garage requested a conditional exception for a storage lot in LL 33 of the 12th district on N. Henry Blvd., at Highland Village. Property is presently zoned C-1. The Planning Board denied since the Board decided it was not the best use for the property. Commissioner Simpson, however, made the motion to approve the request with an automatic one-year review and for the lot not be used for an impound lot. Commissioner Patrick seconded and all were in favor.

Mr. Clarence Powell of Powell's Wrecker and Huskey Wrecker Services spoke to the Board regarding an impound lot for the county and regarding 1843 East Atlanta Road where he had been operating a business under a non-conforming use. His attorney, Mr. Tankersly, requested the Board to inform Mr. Powell of the conditions that he should meet before he can obtain a county license. Commissioner Simpson made the motion to authorize the Zoning Administrator to gather information for the Board's review of this matter. The Zoning Administrator stated that a permit would be issued to Mr. Powell when certain questions could be cleared up. Representatives from Wanda's Wrecker Service and another company were also present to support the request for county designated impound lots.

A one-year review was conducted on a conditional use for A. C. Aukerman for a mobile home for a night watchman for his business in Hampton. Property presently zoned M-1 and is LL 166 of the 6th district, located at 595 N. Steel Drive, Hampton, Planning Board recommended approval to continue one year. The Vice Chairman made the motion to grant the conditional use and Commissioner Brannan seconded. Motion passed by quorem with Commissioner Simpson opposing.

Ron Rabun, County Administrator, presented an employment contract for Sharon Williams of Cobb County, to be employed as a temporary part-time computer operator in the Commissioners' Office at a rate of $10/hour beginning October 9, 1982 and ending November 19, 1982. Commissioner Brannan made the motion to authorize the Chairman to sign the contract and the Vice Chairman seconded. Motion passed unanimously.

The purchase of the following used equipment was read into the minutes:

a. Used fire vehicles:

MODEL & MAKE	SERIAL NUMBERS	COST	DATE OF PURCHASE
Two (2) 1968 Pierch Fire Trucks on a Ford chassis, 1,000 gal. pumper, 500 gal. water tank, 176-inch wheel base, gasoline engine, air brakes, 5 speed transmission	CØØLUF3Ø438	$ 7,750	10/4/82
	CØØLUD13253	7,750	10/4/82

On a motion made by Commissioner Brannan, the minutes for September 7, 20, 21, and 24, 1982 were approved, subject to one correction. The Vice Chairman seconded and all were in favor.

On a motion made by Commissioner Simpson and seconded by Commissioner Brannan, the following budget amendment was approved. Budget Amendment No. 4 which transfers $735 from Sheriff-Office Equipment to Jail-Office Equipment (to purchase AIR PAK for Jail). All were in favor.

Two Water and Sewer Authority contracts were presented for the Board's approval. Contract No. 16, Indian Creek Water Supply Project, Dam, Spillway, and Access Roads. Contract No. 17, Indian Creek Water Supply Project, Raw Water Pump Station, and Raw Water Main. The County Attorney advised the Board that the contracts appear to be in order. Commissioner Brannan made the motion to allow the Chairman to sign both contracts and Commissioner Patrick seconded. Motion passed by quorem with Commissioner Simpson opposing on the grounds that he would not approve if it in any way restricted public access onto the public property of the proposed new reservoir.

At this time, the County Administrator declared for those present the bids for a new 1250 GPM Two Stage Centrifugal Pumper Truck for the Fire Department. They were: Harless, low bid, at $137,783 with a finance rate of 10.94%, Maxim from Vitco Fire and Safety with no financing provided, American La France at $155,450 at 9.25%, and FMC at $160,594 at 8.5%. Mr. J. R. Roberts of Harless was present and explained to the Board that if Harless is awarded the bid, the interest rate would not accrue until approximately April, 1983 when the truck is delivered and accepted by the Fire Chief, and the first 20% downpayment would not be due until July, 1983. He also stated that the quoted interest rate would be firm. Mr. Roberts advised that the truck has a 24-foot ladder and that the Insurance Services Office (ISO) no longer sets a 15-year limit as long as the pumper can perform at the required rate. Commissioner Brannan made the motion to table the bids and Commissioner Patrick seconded. All were in favor.

On a motion made by Commissioner Brannan and seconded by Commissioner Patrick, the meeting was recessed for lunch at 1:00 p.m. Motion passed unanimously.

The meeting came back into session at 1:45 p.m. Those present were all Commissioners, Ron Rabun, Philip Keen, Beverly McLeod, Tom Shedd, Chief of Police Elkins, and several visitors.

As five beer and wine violation hearings had been scheduled for this time, the Chairman stated that the Board would hear all the evidence in all cases and then pass judgment at the end if there were no objections. Attorneys Richard Mylam and A. J. Welch stated they had no objections. The pertinent facts are listed below with each violation.

Brannan's Gas and Oil had its license suspended 21 September 1982 on an alleged sell of beer to a minor by a Mr. Horace Paul Brannan. Location of store is I-75 and SR 351 and date of alleged offense was September 17, 1982 at 7:15 p.m. Detective Tony Selph was sworn in and advised that he, Detective Sgt. Hill, and a 17-year old black juvenile, Johnny Glover, Jr. went to the location. Johnny Glover, Jr. was sent into the store with a marked $5 bill, Serial # F93633161B, and came out with a sack which contained a six-pack of Schlitz malt

liquor. The stated $5 bill was recovered from the cash register and Glover, according to Detective Selph, identified Horace P. Brannan as the one who sold him the beer. According to testimony, no ID had been solicited. A. L. Brannan, Sr. stated that Glover did not positively identify Horace Brannan as the seller, that he felt he had been "set up," and that the Police Department "was working against us."

Detective Glen Kettering was sworn in to give testimony on Lil- General Store who had its license suspended on September 24, 1982 for allegedly selling to a minor on September 3, 1982 at 10:00 p.m. Detective Kettering said he responded to a call that three juveniles had been observed buying beer, i.e., Joseph Bastarache, 12 years old, Jeffery Abernathy, 16 years old, and Daniel Peake, 15. Detective Kettering advised that upon questioning Kimberly L. Phelps she did admit to selling the beer. William E. Holliway, Division Manager of those stores in Georgia and owner of license, asked Mrs. Debbie Georgie and Mrs. Jerry Rogers, employees of the store who were present, to verify the allegation that Detective Kettering had stated that "If Miss Phelps is fired, you will lose your license."

Attorney A. J. Welch, who was representing Thomas A. Nash of Highway 81 Package Store, asked that the witnessses in this case be identified. They were: Detective Selph, Detective Sgt. Hill, Johnny Glover, Jr. The alleged violation occurred on or about 6:00 p.m., September 17, 1982 and license was suspended September 21, 1982. Detective Selph stated that this store was a spot check, that Glover was sent in with a $5 bill, Serial #93633161D, and did buy a 1-quart bottle of Schlitz malt liquor. Glover identified Eugene Tschudy as the seller of the beer. Mr. Nash, owner of the license, was sworn in and answered several questions.

Detective Selph was again sworn in to give testimony on al alleged violation of selling beer to a minor at Red Ace Fuel Stop on Jonesboro Road at I-75. Detective Selph stated that Glover was sent in with a $10 bill, Serial F29602115B, and returned with a six-pack of Schlitz malt liquor. Selph also stated that this was a spot check with no previous complaints. According to Detective Selph, Glover identified Nancy L. Howard as the seller of the beer, however, the $10 bill was not recovered. Detective Hill was sworn in at approximately 3:10 p.m. Glover was sworn in and stated that he had purchased "Magnum" beer and not Schlitz beer.

At this point, the Board by unanimous vote, recessed at 3:30 p.m. and reconvened at 3:40 p.m. to continue discussion of the alleged violations at the Red Ace (Delta) Fuel Stop. Paul A. Melton, manager of Red Ace, was sworn in and stated that he instructs his employees on the selling beer to minors and/or on holidays, that he had hired Ms. Howard, and that she was paid an hourly wage and did not receive a sales commission. John W. Williams, owner of the license, was sworn in and stated that their corporation does not condone selling to minors since they believe it to be morally wrong and is not good business.

Detective Tony Selph was sworn in to testify for an alleged selling of beer to a minor by Lonnie O. Thurman at Love's Package Store, Hwy. 138 and 42 South, on or about 7:50 p.m., September 17, 1982. License was suspended September 21, 1982. Detective Selph stated that Glover, Jr. was again sent into the store with a $5 bill, Serial #93633161B, and came back to the car with a six-pack of Schlitz malt liquor. Detective Selph stated that Thurman had stated to him that he had sold Glover the beer, and $5 bill was recovered from Love's cash register, and the Police Department had responded to this store due to complaints.

After hearing from each of the attorneys for the license holders, a motion was made by Mr. Gardner and seconded by Mr. Patrick to adjourn into executive session to deliberate their findings.

The Board returned approximately 25 minutes later and issued their findings.

After some initial discussion and comments, a motion was made by Mr. Gardner and seconded by Mr. Patrick to suspend the licenses of all violators for a period of 30 days retroactive to the date of the original suspension. Commissioners Whiddon, Gardner, and Patrick voted for and Simpson and Brannan against.

Mr. Rabun, County Administrator, presented bids on various items at this time.

Antifreeze:	Interstate Ford Sales	$1,581.10
	Downey Auto Store	1,185.00
	Mercer Truck & Tractor	1,161.50
	C & H Interprises	1,145.00
	Parker Brothers	1,098.00
	Beaudry Ford	1,083.50

Motion was made by Mr. Gardner to accept the bid of $1,098 from Parker Brothers, their being a local vendor. The motion was seconded by Mr. Brannan. All were in favor with Mr. Simpson abstaining.

Gasoline:	Ward Oil Company	$1.0165 per gallon
	May & Carter Oil Co.	1.01455 " "
	Anderson Oil Company	1.003125 " "
	Jones Petroleum	.9975 " "

This is an average price per gallon for the four types of fuel for which bids were solicited. Motion was made by Mr. Gardner and seconded by Mr. Patrick to award the bid to Jones Petroleum Company at an average price per gallon of $.9975. Motion passed unanimously.

Uniforms Police Dept.	Burdon Uniform Company	$18,759.40
	Martins' Service Uniforms	16,236.72

Motion was made by Mr. Gardner and seconded by Mr. Brannan to accept the low bid of $16,236.72 from Martin's Service Uniforms. All were in favor.

Uniforms Sheriff's Dept.	Banner Uniform Company	$ 7,676.25
	Burdon Uniform Company	6,360.00
	Martins' Service Uniforms	5,827.50

Motion was made by Mr. Gardner and seconded by Mr. Simpson to accept the low bid of $5,827.50 from Martins' Service Uniforms. The vote was unanimous.

Two mobile radios	Motorola	$ 2,986.00
	Custom Installation	2,924.00

Motion was made by Mr. Gardner and seconded by Mr. Simpson to award the bid to Custom Installation. All were in favor.

Two walkie talkies	Custom Installation	$ 1,880.00
	Motorola	1,696.00

Motion was made by Mr. Brannan and seconded by Mr. Gardner to accept the low bid of $1,696.00 from Motorola. The vote was unanimous.

Upon motion by Mr. Gardner and seconded by Mr. Simpson, the meeting adjourned at 6:15 p.m.

October 5, 1982

Beverly P. McLeod, Clerk

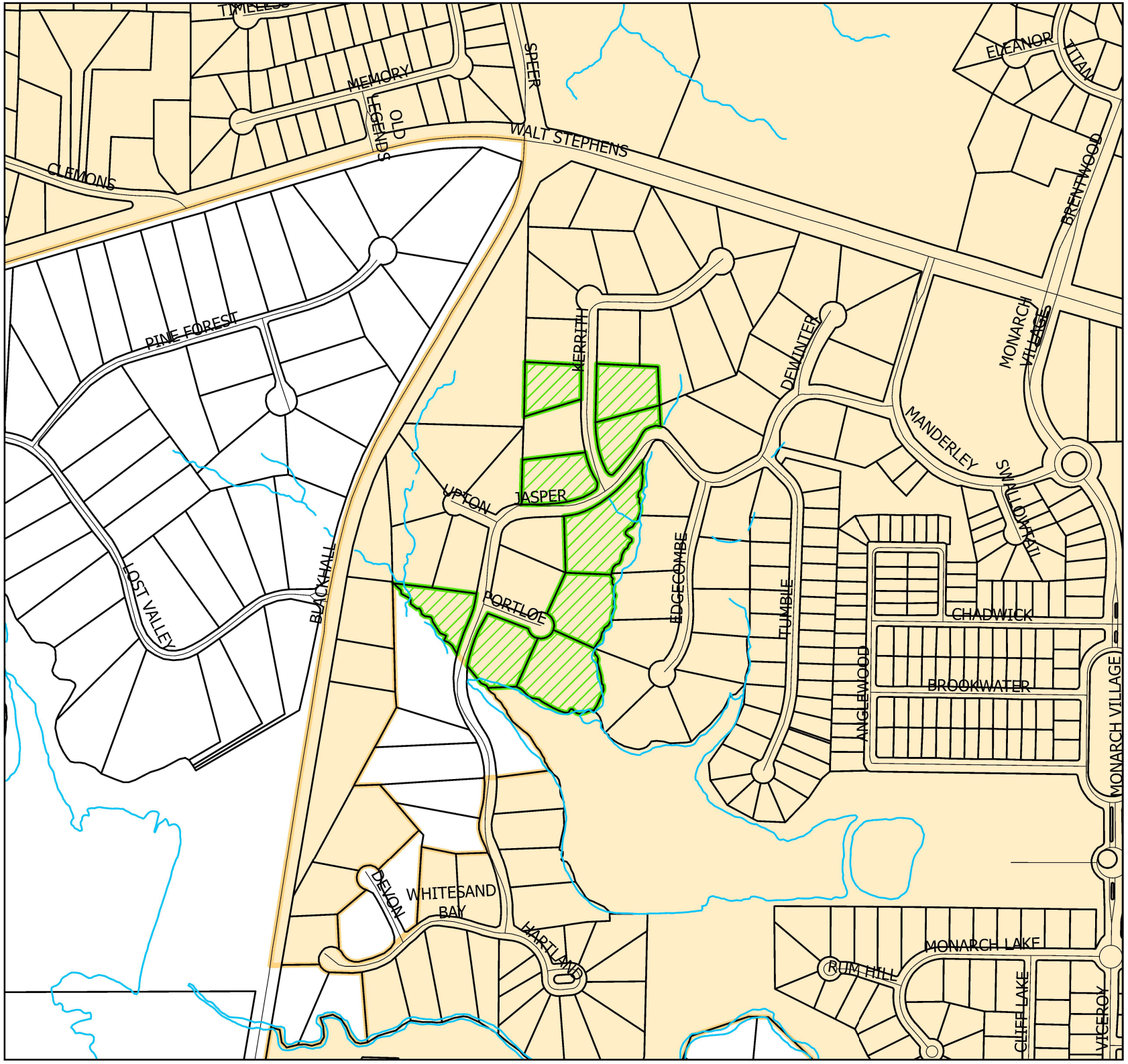
Edward H. Whiddon, Sr., Chairman

William M. Gardner, Vice Chairman

James R. Brannan, Commissioner

W. D. Patrick, Commissioner

Marion Hall Simpson, Commissioner



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REQUEST

DE-AX-24-02

Cities

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REQUEST

- DE-AX-24-02
- Cities

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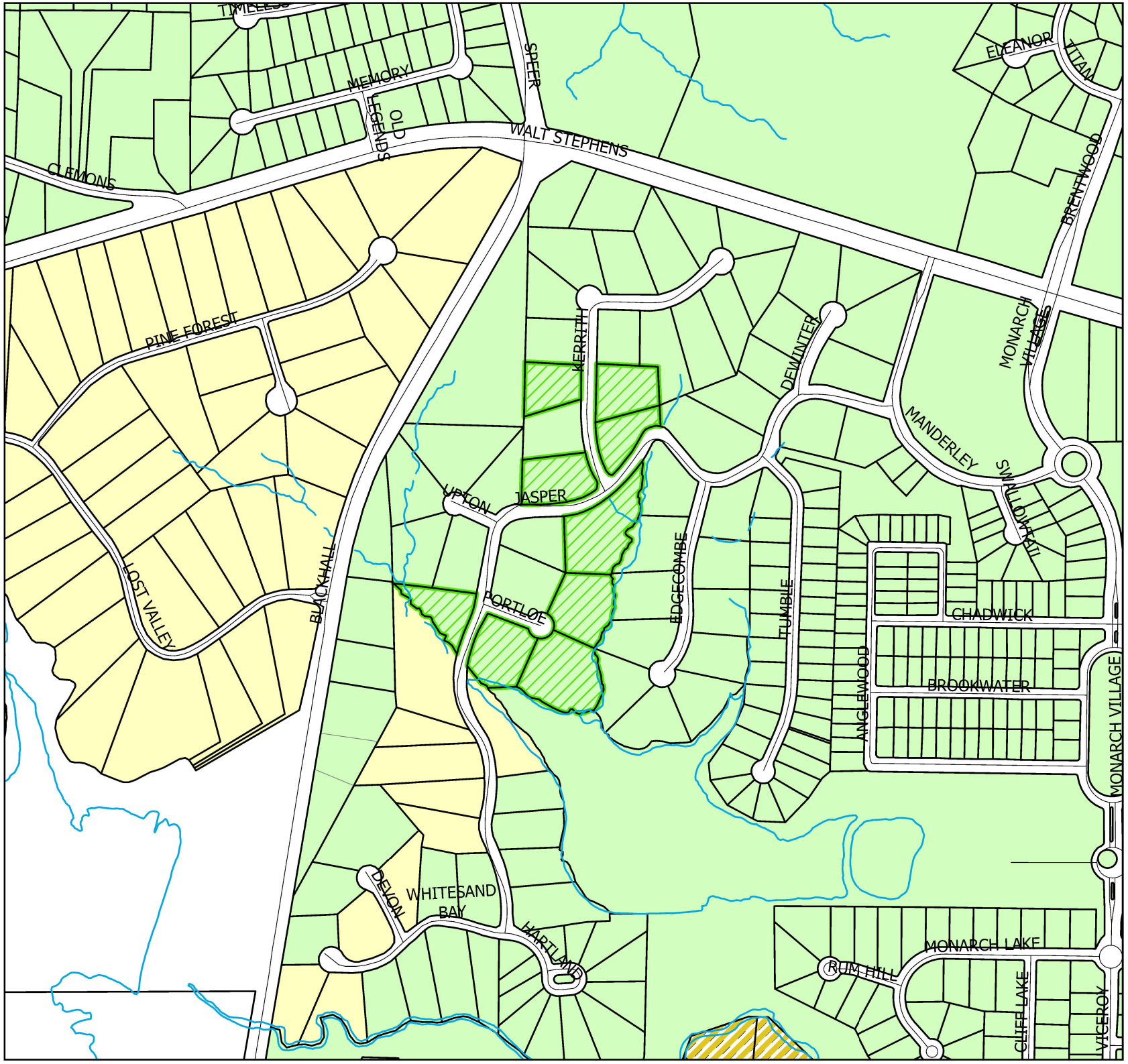

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REQUEST

DE-AX-24-02

Current Zoning

- RA
- RS
- R-1
- R-2
- R-3
- R-4
- RD
- RM
- RMH
- OI
- C-1
- C-2
- C-3
- M-1
- M-2
- MU
- PD
- CITY

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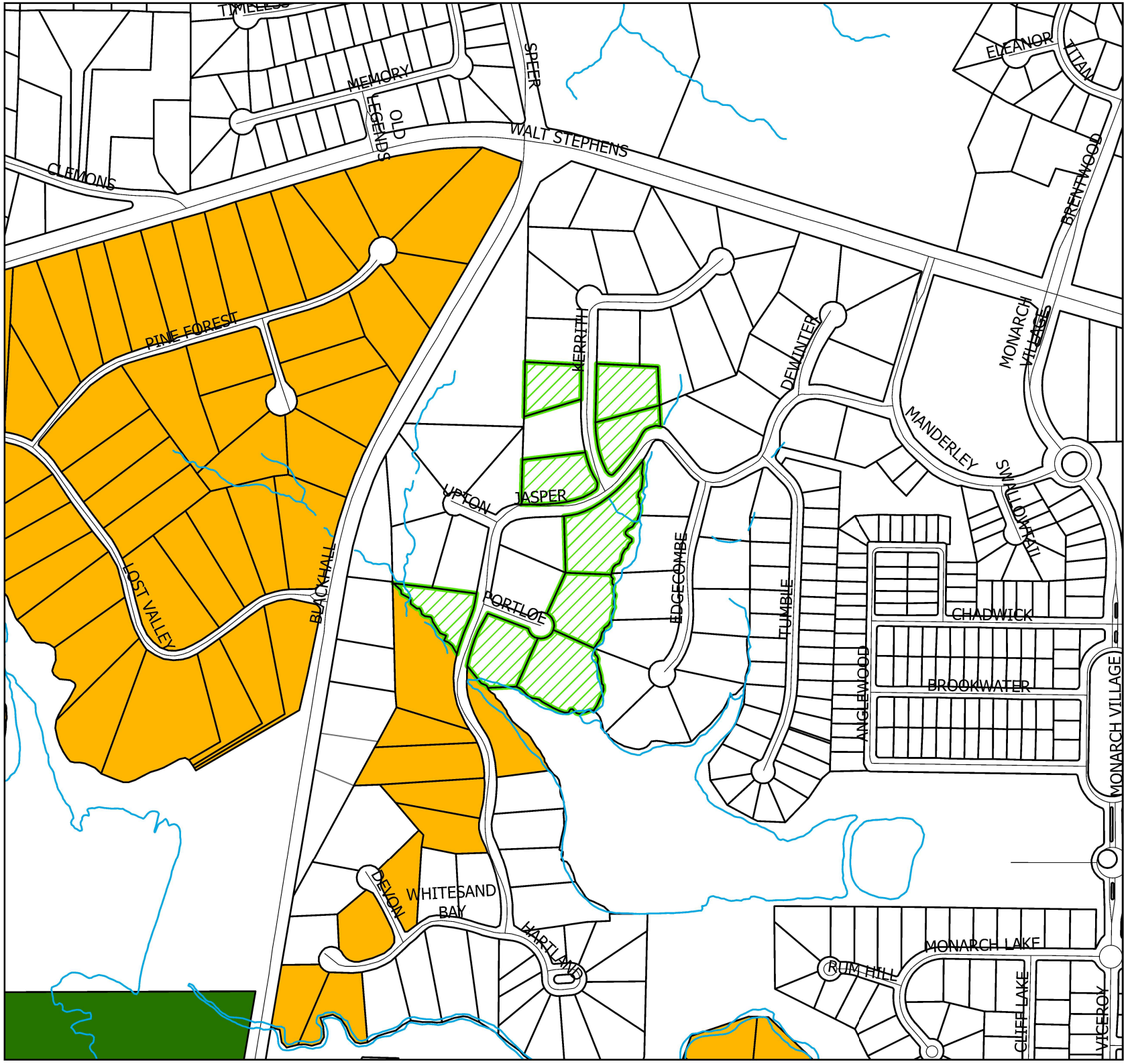

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REQUEST

DE-AX-24-02

Future Land Use

- COM
- GREEN
- HDMU
- HDS
- INDUS
- LDMU
- LDS
- MDS
- PI
- RR
- UR
- UTI
- VC
- CITY

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This map is for graphical representation only. It is not a legal document.

160 JASPER DR. ✓

Deannexation Application

THANK YOU FOR YOUR INTEREST IN HENRY COUNTY, GEORGIA. THIS PACKET INCLUDES THE NECESSARY DOCUMENTS NEEDED FOR DEANNEXATION REQUESTS TO BE HEARD BY THE HENRY COUNTY BOARD OF COMMISSIONERS.

PLEASE NOTE: ALL FEES ARE NON-REFUNDABLE. THERE ARE NO EXCEPTIONS.

A PRE-APPLICATION MEETING IS ADVISED, BUT NOT REQUIRED, FOR DEANNEXATION REQUESTS. THE HENRY COUNTY PLANNING AND ZONING DEPARTMENT WILL ONLY CONDUCT PRE-APPLICATION MEETINGS ON TUESDAY, WEDNESDAY, AND THURSDAY OF EACH WEEK. PLEASE VISIT **HTTP://WWW.CO.HENRY.GA.US/DEPARTMENTS/M-R/PLANNING-ZONING** TO SCHEDULE A MEETING ONLINE.

NO PRE-APPLICATION MEETING WILL BE CONDUCTED WITHOUT AN APPOINTMENT.

SHOULD YOU NEED FURTHER ASSISTANCE, PLEASE FEEL FREE TO CONTACT OUR OFFICE BETWEEN 8:00 AM AND 5:00 PM, MONDAY THROUGH FRIDAY

AT (770) 288-7526.

THE LOCATION OF ALL COUNTY RELATED BOARD MEETINGS IS:

140 HENRY PARKWAY

MCDONOUGH, GEORGIA 30253

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

APPLICATION FOR DEANNEXATION

To the Board of Commissioners of Henry County, Georgia.

1. We, the undersigned, all of the owners of all real property of the territory described herein respectfully request that the Henry County Board of Commissioners accept the deannexation request of this territory from city boundaries, and extend the County services to include the same.

2. The territory to be deannexed is contiguous to existing unincorporated areas and complies with requirements established in *O.C.G.A Title 36, Chapter 36*. The description of such territory is attached hereto.

OWNER(S) NAME(S) MARK COVINO
JENNIFER MARIE COVINO

*PHONE NUMBER 802-999-3647 EMAIL ADDRESS onivoc@gmail.com

DEANNEXATION FROM ☐HAMPTON ☐LOCUST GROVE ☐MCDONOUGH ☑STOCKBRIDGE

LOCATION/ADDRESS 160 JASPER DR. STOCKBRIDGE, GA 30281

LAND LOT/DISTRICT 8/12 ACERAGE 2.301

PARCEL ID NUMBER 013A01023000 ZONING DISTRICT(S) SR

ONE FORM PER PROPERTY. USE ADDITIONAL SHEETS IF REQUIRED.

SIGNATURE(S) DATE 10/8/2023

DATE 10/8/2023

ALL PROPERTY OWNERS MUST SIGN AS THEIR NAME APPEARS ON THE DEED. USE ADDITIONAL SHEETS IF REQUIRED.

NOTARY SIGNATURE AND SEAL DATE 10-8/2023

KATHLEEN WATSON My Commission Expires June 29 2026 NOTARY PUBLIC HENRY COUNTY, GEORGIA

(Office use only)

Pre-application meeting: Title: Date:

Application checked by: Kenta Lanham Title: Planner III Date: 5/22/2024

BOC Meeting Date: 06/11/2024 BOC Decision: Acceptance Date: 6/11/2024

Planning Director's Signature: Date: 6/13/24

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

OWNERSHIP VERIFICATION

The undersigned is the / an owner of an interest in the lands described in the attached deannexation application, which proposes to amend the Official Zoning Map of the deannexing municipal jurisdiction and of Henry County, Georgia, and concurs in the application. The undersigned's interest in the lands described in the application is as follows:

Location/Address: 160 JASPER DRIVE STOCKBRIDGE, GA 30281

Parcel ID Number: 013A01023000

Owner's name(s): MARK COVINO — Percentage of interest: 50%

JENNIFER MARIE COVINO — Percentage of interest: 50%

We certify that the foregoing information is true and correct, this _____ day of _____, _____

Mark Covino
Property Owner- Printed

Signature of Property Owner

Jennifer Marie Covino
Property Owner- Printed

Signature of Property Owner

Sworn to and subscribed before me, this 8 day of October 2023

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Notary Public (Seal)

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Residential Declaration

In order to comply with the United States Department of Justice's procedures for the administration of Section 5 of the Voting Rights Act of 1965 as amended, Subpart B, Section 51.28, the following information is required for the deannexation of any residential properties. Must be completed for ALL residential properties (regardless of zoning designation). Use as many forms as needed.

Location/Address 160 JASPER DR. STOCKBRIDGE, GA 30281

Parcel ID Number 013A01 023000

1. Total number of existing residential structures located on the subject parcel: 1
2. Description of the residential structures located on the subject property as listed above: Private home
3. Total number of person(s) residing within each structure: 2
4. Age, Sex, and Race of each of those individuals:
   USE ADDITIONAL FORMS IF NEEDED

Age	Sex	Race
42	M	white
43	F	White

5. Henry County Commission District: 2
6. City Council Voting District: 1

CERTIFICATION AND AUTHORIZATION

I hereby certify that, to the best of my knowledge and belief, the above listed information and all attached supporting documents are complete and accurate.

Applicant Signature _____ Date 10/8/2023

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Campaign Disclosure Form

Must be completed by ALL applicant(s), property owner(s), agent(s) and/or attorney(s). Use as many forms as needed.

CHECK ONE: ✓ **APPLICANT** _____ **PROPERTY OWNER** _____ **AGENT** _____ **ATTORNEY** _____ **OTHER**

Has the person described below made, within two (2) years immediately preceding the filing of this application campaign contributions aggregating $250 or more or made gifts having in the aggregate a value of $250 or more to a member of the Henry County Board of Commissioners who will consider the application?

Yes _____ **No** ✓

If **Yes**, the applicant/property owner/agent and/or attorney representing the applicant must file the following information with the Henry County Board of Commissioners within ten (10) days after this application is first filed:

Commissioner/Zoning Advisory Board Member Name	Dollar amount of Campaign Contribution	Description of Gift $250 or greater given to Board Member

We certify that the foregoing information is true and correct, this 8 day of October, 2023

Jennifer Marie Covino

Applicant/Property Owner/Agent/Other Name - Printed

Signature of Applicant/Property Owner/Agent/Other

Sworn to and subscribed before me, this 8 day of October, 2023

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Notary Public (Seal)

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Campaign Disclosure Form

Must be completed by ALL applicant(s), property owner(s), agent(s) and/or attorney(s). Use as many forms as needed.

CHECK ONE: ✓ **APPLICANT** _____ **PROPERTY OWNER** _____ **AGENT** _____ **ATTORNEY** _____ **OTHER**

Has the person described below made, within two (2) years immediately preceding the filing of this application campaign contributions aggregating $250 or more or made gifts having in the aggregate a value of $250 or more to a member of the Henry County Board of Commissioners who will consider the application?

Yes _____ **No** ✓

If **Yes**, the applicant/property owner/agent and/or attorney representing the applicant must file the following information with the Henry County Board of Commissioners within ten (10) days after this application is first filed:

Commissioner/Zoning Advisory Board Member Name	Dollar amount of Campaign Contribution	Description of Gift $250 or greater given to Board Member

We certify that the foregoing information is true and correct, this 8 day of October, 2023

Mark Covino

Applicant/Property Owner/Agent/Other Name - Printed

Signature of Applicant/Property Owner/Agent/Other

Sworn to and subscribed before me, this 8 day of October, 2023

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Notary Public (Seal)

LETTER OF INTENT

Henry County Board of Commissioners:

As de-annexation requests are not subject to public hearing requirements, please consider this information in your decision for de-annexation of this Manderley property:

De-annexation reason # 1: **Trust**

On 5-24-2018, the Stockbridge Director of Community Development Services met with Manderley property owners and asked for our support to defeat the referendum for the creation of the City of Eagles Landing. She stated that Stockbridge believed Manderley would be better off to stay unincorporated because we weren't a good fit for the City of Eagles Landing, and added that we weren't a good fit for the City of Stockbridge either. She went on to reassure us that they would not attempt to annex us in the future. **Stockbridge broke their promise when they annexed Manderley.**

De-annexation reason # 2: **Services**

On 9-29-2022, Stockbridge Representatives held another meeting with homeowners in our area, and the Director of Public Works was asked if he could guarantee that Stockbridge would provide the same DOT services that Henry County was providing us. His answer was "no". When we inquired if Stockbridge even owns the equipment needed for these projects, the answer was again, "no". **Stockbridge has been unable to commit to the same level of service that Henry County provides.**

De-annexation reason #3: **Taxation without representation**

On 11-8-2022, Manderley's voting district voted against annexation. The financial instability of Stockbridge is a major problem, and they are in desperate need of a cash infusion to offset budget shortfalls created before we were annexed. **It is wrongheaded for a city that we did not vote to be in, to annex us anyway and then tax us for millions of dollars of mistakes made by city officials that we did not elect.**

Signature

Mark Covino

Printed Name

10/8/2023

Date

BK: 15593 PG: 95-97
RECEIVED IN OFFICE
HENRY COUNTY
CLERK OF SUPERIOR COURT
2017 DEC -4 PM 2: 50
Filed and Recorded Dec-05-2017 10:56:55AM
DOC#: D2017-032145
Real Estate Transfer Tax $0.00
0752017009885
BARBARA A. HARRISON
CLERK OF SUPERIOR COURT Henry County GA.

Return Recorded Document to:
Raimondi & Associates, LLC
1301 Shiloh Road, NW #1520
Kennesaw, GA 30144

WARRANTY DEED
(WITH SURVIVORSHIP)

STATE OF GEORGIA

COUNTY OF FULTON File # **R17-1383**

This Indenture made this **27th** day of **November, 2017** between **Mark Covino**, of the County of **Henry**, State of **Georgia**, as party or parties of the first part, hereinafter called Grantor, and **Mark Covino and Jennifer Marie Covino**, as joint tenants with right of survivorship and not as tenants in common as parties of the second part, hereinafter called Grantees (the words "Grantor" and "Grantee" to include their respective heirs, successors and assigns where the context requires or permits).

W I T N E S S E T H that: Grantor, for and in consideration of the sum of **TEN AND 00/100'S ($10.00) Dollars** and other good and valuable considerations in hand paid at and before the sealing and delivery of these presents, the receipts whereof is hereby acknowledged, has granted, bargained, sold, aliened, conveyed and confirmed, and by these presents does grant, bargain, sell, alien, convey and confirm unto the said Grantees, as joint tenants and not as tenants in common, for and during their joint lives, and upon the death of either of them, then to the survivor of them, in fee simple, together with every contingent remainder and right of reversion, and to the heirs and assigns of said survivor, the following described property:

SEE ATTACHED EXHIBIT "A" WHICH IS ATTACHED HERETO AND MADE A PART HEREOF.

THIS CONVEYANCE IS EXPRESSLY SUBJECT TO ANY AND ALL EASEMENTS, RESTRICTIONS, COVENANTS, LIENS OR ENCUMBRANCES OF PUBLIC RECORD, AS WELL AS ANY SUCH MATTERS OF WHICH GRANTEE HAS KNOWLEDGE.

[SIGNATURES FOR THE SURVIVORSHIP DEED ON THE FOLLOWING PAGE]

[SIGNATURES FOR THE SURVIVORSHIP DEED]

TO HAVE AND TO HOLD the said tract or parcel of land, with all and singular the rights, members and appurtenances thereof, to the same being, belonging, or in anywise appertaining, to the only proper use, benefit and behoove of the said Grantees, as joint tenants and not as tenants in common, for and during their joint lives, and upon the death of either of them, then to the survivor of them in **FEE SIMPLE**, together with every contingent remainder and right of reversion, and to the heirs and assigns of said survivor.

THIS CONVEYANCE is made pursuant to Official Code of Georgia Section 44-6-190, and it is the intention of the parties hereto to hereby create in Grantees a joint tenancy estate with right of survivorship and not as tenants in common.

AND THE SAID Grantor will warrant and forever defend the right and title to the above described property unto the said Grantee against the lawful claims and demands of all persons claiming by, through or under the above named Grantor, but against none other.

IN WITNESS WHEREOF, the Grantor has hereunto set grantor's hand and seal this day and year first above written.

Signed, sealed and delivered in the presence of:

GRANTOR:

Witness

Notary Public

My Commission Expires:

LAWRENCE N RAIMONDI JR
MY COMMISSION EXPIRES
NOTARY
PUBLIC
APRIL 24, 2018
DEKALB COUNTY, GEORGIA

(Seal)

Mark Covino

EXHIBIT "A"

All that tract or parcel of land lying and being in Land Lot 8, 12th Land District, Henry County, Georgia, being Lot 24, Block A, Manderley Subdivision, Unit 1, as per plat thereof recorded in Plat Book 9, Page 269, Henry County, Georgia Records, said plat being incorporated herein and made a part hereof by reference.

Property Address: **160 Jasper Drive**
Stockbridge, GA 30281

Bk 19 Page 269

96-M-83

NOTE: This survey and plot subject to such Easements and/or Right-Of-Ways as may now exist. No investigation of the Records of Title by the undersigned.

Linear measurement made with Topcon E.D.M.
Angular measurement made with Topcon 10" Theodolite.

An angular error of 01" per angle was adjusted using Compass Rule.
Error of closure: 1 foot in 6159+ feet.

The owner of the land shown on this plat and whose name is subscribed there to, in person or through a duly Authorized Agent dedicates to the use of the Public forever all streets, Easements, and other Public Grounds shown.

Owner _____ Date _____

Agent _____ Date _____

NOTE: Property lines as shown on this plat were controlled as to distance and direction by physical evidence found and as shown (S.F.), conc R/W mon, fences and R/W on County Roads) and upon legal description furnished by Kaiper Corp. Distances and bearings on this plat do not agree exactly with legal description due to actual location of said physical evidence.

NOTE: R/W on Blackhall Road based upon conc R/W mon. found and iron stake found (S.F.) as shown hereon and also upon plat recorded in PB. 4, Page 271.

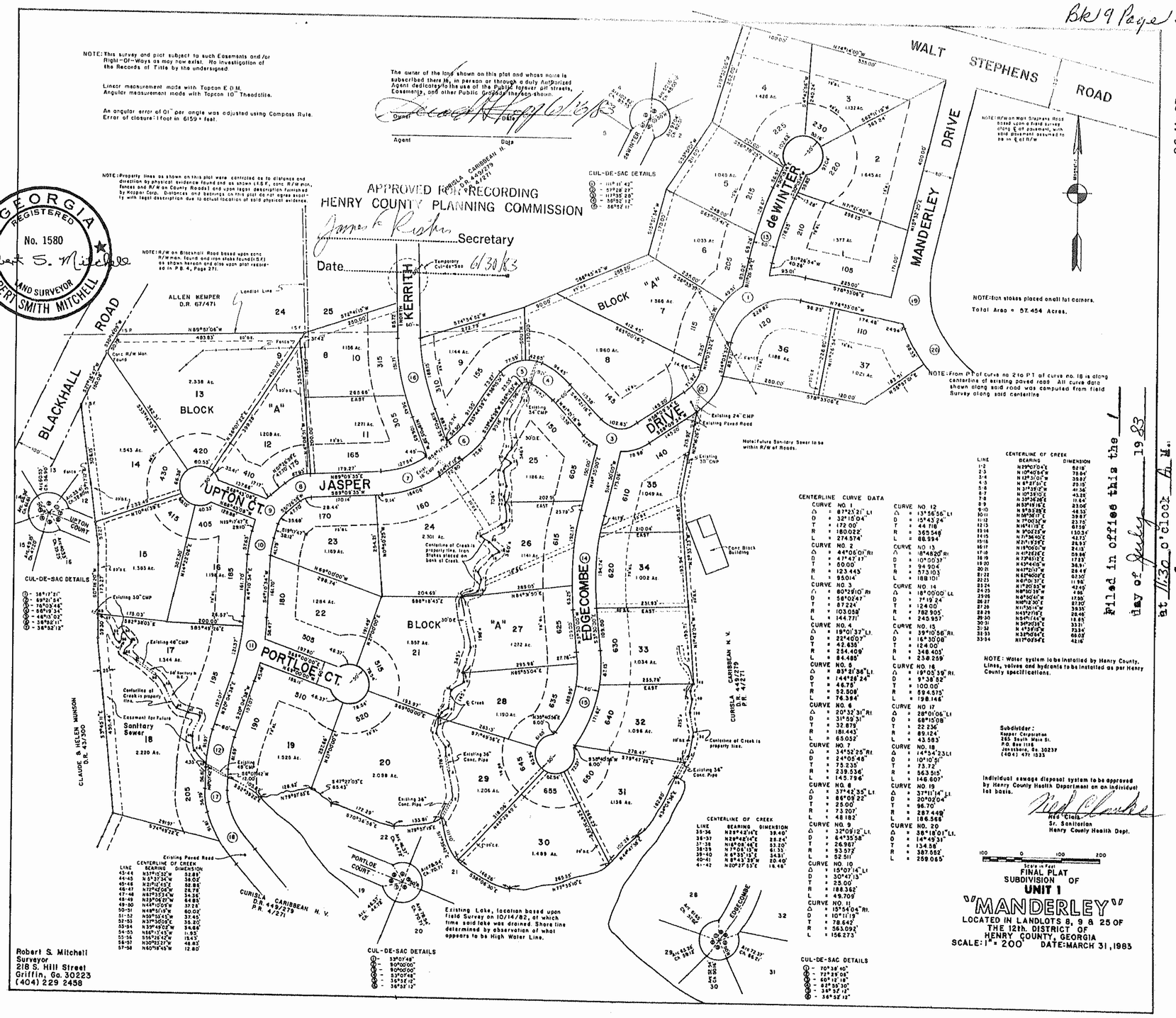
GEORGIA REGISTERED No. 1580 LAND SURVEYOR ROBERT SMITH MITCHELL

Robert S. Mitchell

APPROVED FOR RECORDING
HENRY COUNTY PLANNING COMMISSION

James L. Rushing Secretary

Date 6/30/83



CUL-DE-SAC DETAILS

- 1 - 119°11'42"
- 2 - 57°28'27"
- 3 - 113°35'20"
- 4 - 36°52'12"
- 5 - 56°52'11"

CUL-DE-SAC DETAILS

- 6 - 38°17'21"
- 7 - 59°21'54"
- 8 - 76°03'44"
- 9 - 56°16'34"
- 10 - 46°53'02"
- 11 - 38°52'11"
- 12 - 38°52'12"

CUL-DE-SAC DETAILS

- 13 - 33°07'48"
- 14 - 90°00'00"
- 15 - 90°00'00"
- 16 - 53°07'48"
- 17 - 36°52'12"
- 18 - 36°52'12"

CUL-DE-SAC DETAILS

- 19 - 70°38'40"
- 20 - 72°23'06"
- 21 - 60°12'18"
- 22 - 42°55'30"
- 23 - 36°52'12"
- 24 - 36°52'12"

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
1-2	N29°07'04"E	62.18'
2-3	N10°40'04"W	78.64'
3-4	N12°31'01"W	35.87'
4-5	N 4°27'01"E	23.15'
5-6	N37°35'17"W	41.38'
6-7	N10°33'01"E	43.28'
7-8	N39°36'08"E	17.64'
8-9	N53°16'16"E	23.06'
9-10	N 9°53'03"E	48.53'
10-11	N69°58'17"E	39.87'
11-12	N 7°00'37"W	23.75'
12-13	N16°41'15"E	61.59'
13-14	N 9°02'23"W	100.34'
14-15	N 7°36'50"E	42.73'
15-16	N17°39'07"E	24.93'
16-17	N19°00'01"W	24.13'
17-18	N41°22'42"E	09.88'
18-19	N23°51'21"E	17.33'
19-20	N33°41'09"W	36.31'
20-21	N41°52'07"W	28.49'
21-22	N42°00'01"E	02.30'
22-23	N07°01'37"E	11.90'
23-24	N17°20'23"W	42.49'
24-25	N8°50'38"W	4.66'
25-26	N41°00'41"W	17.55'
26-27	N08°12'30"E	27.70'
27-28	N11°30'14"W	39.38'
28-29	N43°27'16"E	28.46'
29-30	N51°16'14"W	12.81'
30-31	N47°01'13"E	33.31'
31-32	N 4°37'15"E	23.54'
32-33	N33°08'47"E	66.02'
33-34	N11°07'54"E	42.16'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
35-34	N83°43'16"E	39.40'
36-37	N26°48'16"E	23.24'
37-38	N16°08'46"E	53.20'
38-39	N7°05'13"W	61.33'
39-40	N 6°35'13"E	34.31'
40-41	N 8°43'35"W	20.40'
41-42	N20°27'53"E	18.48'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
43-44	N37°12'32"W	52.81'
44-45	N 5°37'34"W	38.02'
45-46	N23°12'45"E	52.82'
46-47	N72°42'06"W	26.78'
47-48	N63°23'54"W	34.36'
48-49	N39°06'27"W	64.85'
49-50	N44°02'01"W	37.23'
50-51	N49°53'19"W	60.02'
51-52	N59°50'43"W	37.45'
52-53	N37°30'09"E	35.20'
53-54	N39°40'02"W	34.66'
54-55	N66°13'43"W	11.93'
55-56	S56°25'42"W	18.43'
56-57	N30°52'27"W	48.83'
57-58	N60°18'45"W	12.80'

CENTERLINE CURVE DATA

CURVE NO. 1		CURVE NO. 12	
Δ	= 87°21'21" Lt	Δ	= 13°56'56" Lt
D	= 32°15'04"	D	= 15°43'24"
T	= 172.00'	T	= 44.716'
R	= 180.022'	R	= 365.548'
L	= 274.574'	L	= 88.994'
CURVE NO. 2		CURVE NO. 13	
Δ	= 44°06'01" Rt	Δ	= 18°46'20" Rt
D	= 47°47'17"	D	= 10°00'37"
T	= 50.00'	T	= 94.904'
R	= 123.445'	R	= 573.103'
L	= 95.014'	L	= 188.101'
CURVE NO. 3		CURVE NO. 14	
Δ	= 80°29'10" Rt	Δ	= 18°00'00" Lt
D	= 58°02'47"	D	= 7°19'24"
T	= 87.224'	T	= 124.00'
R	= 103.058'	R	= 782.905'
L	= 144.771'	L	= 245.957'
CURVE NO. 4		CURVE NO. 15	
Δ	= 19°01'37" Lt	Δ	= 39°10'56" Rt
D	= 22°40'07"	D	= 16°30'08"
T	= 42.635'	T	= 124.00'
R	= 254.409'	R	= 346.405'
L	= 84.485'	L	= 236.259'
CURVE NO. 5		CURVE NO. 16	
Δ	= 83°21'36" Lt	Δ	= 19°05'39" Rt
D	= 144°58'24"	D	= 9°38'52"
T	= 46.75'	T	= 100.00'
R	= 52.508'	R	= 594.575'
L	= 76.394'	L	= 198.146'
CURVE NO. 6		CURVE NO. 17	
Δ	= 20°32'31" Rt	Δ	= 28°01'06" Lt
D	= 31°59'31"	D	= 68°15'08"
T	= 32.879'	T	= 22.236'
R	= 181.443'	R	= 89.124'
L	= 65.052'	L	= 43.583'
CURVE NO. 7		CURVE NO. 18	
Δ	= 34°52'25" Rt	Δ	= 14°54'23" Lt
D	= 24°05'48"	D	= 10°10'31"
T	= 75.230'	T	= 73.72'
R	= 239.534'	R	= 563.515'
L	= 145.796'	L	= 146.607'
CURVE NO. 8		CURVE NO. 19	
Δ	= 37°42'35" Lt	Δ	= 37°11'14" Lt
D	= 86°08'22"	D	= 20°02'04"
T	= 25.00'	T	= 96.70'
R	= 73.207'	R	= 287.449'
L	= 48.182'	L	= 186.568'
CURVE NO. 9		CURVE NO. 20	
Δ	= 32°09'12" Lt	Δ	= 38°18'01" Lt
D	= 64°35'58"	D	= 14°49'31"
T	= 26.987'	T	= 134.88'
R	= 93.572'	R	= 387.552'
L	= 52.511'	L	= 259.065'
CURVE NO. 10			
Δ	= 15°07'14" Lt		
D	= 30°47'13"		
T	= 25.00'		
R	= 188.362'		
L	= 49.709'		
CURVE NO. 11			
Δ	= 15°54'04" Rt		
D	= 10°11'19"		
T	= 78.642'		
R	= 563.092'		
L	= 156.273'		

NOTE: Water system to be installed by Henry County. Lines, valves and hydrants to be installed as per Henry County specifications.

Subdivider:
Kaiper Corporation
265 South Main St.
P.O. Box 1118
Jonesboro, Ga. 30237
(404) 471-1533

Individual sewage disposal system to be approved by Henry County Health Department on an individual lot basis.

Hal Clark
Sr. Sanitarian
Henry County Health Dept.

Scale in Feet: 100 0 100 200

FINAL PLAT
SUBDIVISION OF
UNIT 1
"MANDERLEY"
LOCATED IN LANDLOTS 8, 9 & 25 OF
THE 12th. DISTRICT OF
HENRY COUNTY, GEORGIA
SCALE: 1" = 200' DATE: MARCH 31, 1983

Robert S. Mitchell
Surveyor
218 S. Hill Street
Griffin, Ga. 30223
(404) 229 2458

Filed in office this the 1 day of July 1983 at 11:30 o'clock A.M.

Dare E. Sanford
Clerk Superior Court

96-M-83

165 JASPER DR.

Deannexation Application

HENRY COUNTY
Government

THANK YOU FOR YOUR INTEREST IN HENRY COUNTY, GEORGIA. THIS PACKET INCLUDES THE NECESSARY DOCUMENTS NEEDED FOR DEANNEXATION REQUESTS TO BE HEARD BY THE HENRY COUNTY BOARD OF COMMISSIONERS.

PLEASE NOTE: ALL FEES ARE NON-REFUNDABLE. THERE ARE NO EXCEPTIONS.

A PRE-APPLICATION MEETING IS ADVISED, BUT NOT REQUIRED, FOR DEANNEXATION REQUESTS. THE HENRY COUNTY PLANNING AND ZONING DEPARTMENT WILL ONLY CONDUCT PRE-APPLICATION MEETINGS ON TUESDAY, WEDNESDAY, AND THURSDAY OF EACH WEEK. PLEASE VISIT **HTTP://WWW.CO.HENRY.GA.US/DEPARTMENTS/M-R/PLANNING-ZONING** TO SCHEDULE A MEETING ONLINE.

NO PRE-APPLICATION MEETING WILL BE CONDUCTED WITHOUT AN APPOINTMENT.

SHOULD YOU NEED FURTHER ASSISTANCE, PLEASE FEEL FREE TO CONTACT OUR OFFICE BETWEEN 8:00 AM AND 5:00 PM, MONDAY THROUGH FRIDAY

AT (770) 288-7526.

THE LOCATION OF ALL COUNTY RELATED BOARD MEETINGS IS:

140 HENRY PARKWAY

MCDONOUGH, GEORGIA 30253

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

APPLICATION FOR DEANNEXATION

To the Board of Commissioners of Henry County, Georgia.

1. We, the undersigned, all of the owners of all real property of the territory described herein respectfully request that the Henry County Board of Commissioners accept the deannexation request of this territory from city boundaries, and extend the County services to include the same.

2. The territory to be deannexed is contiguous to existing unincorporated areas and complies with requirements established in *O.C.G.A Title 36, Chapter 36*. The description of such territory is attached hereto.

OWNER(S) NAME(S) STEVE C BULLARD

* PHONE NUMBER 404-630-5671 EMAIL ADDRESS SBULLARD@CLAWEN BANKER.COM

DEANNEXATION FROM ☐HAMPTON ☐LOCUST GROVE ☐MCDONOUGH ☑STOCKBRIDGE

LOCATION/ADDRESS 165 JASPER DR. STOCKBRIDGE, GA 30281

LAND LOT/DISTRICT 849/12 ACERAGE 1.271

PARCEL ID NUMBER 013A01024000 ZONING DISTRICT(S) SR

ONE FORM PER PROPERTY. USE ADDITIONAL SHEETS IF REQUIRED.

SIGNATURE(S) _____ DATE 10/8/23

_____ DATE _____

ALL PROPERTY OWNERS MUST SIGN AS THEIR NAME APPEARS ON THE DEED. USE ADDITIONAL SHEETS IF REQUIRED.

_____ DATE 10-8-2023

NOTARY SIGNATURE AND SEAL

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

(Office use only)

Pre-application meeting: _____ Title: _____ Date: _____

Application checked by: Kenta Lanham Title: Planner III Date: 5/22/2024

BOC Meeting Date: 06/11/2024 BOC Decision: Acceptance Date: 6/11/2024

Planning Director's Signature: _____ Date: 6/13/24

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

OWNERSHIP VERIFICATION

The undersigned is the / an owner of an interest in the lands described in the attached deannexation application, which proposes to amend the Official Zoning Map of the deannexing municipal jurisdiction and of Henry County, Georgia, and concurs in the application. The undersigned's interest in the lands described in the application is as follows:

Location/Address 165 JASPER DR. STOCKBRIDGE GA 30281

Parcel ID Number 013A01 024000

* Owner's name(s) STEVE C BULLARD Percentage of interest: 100%

Percentage of interest:

We certify that the foregoing information is true and correct, this 8TH day of OCTOBER 23

STEVE C. BULLARD

Property Owner- Printed

Signature of Property Owner

Property Owner- Printed

Signature of Property Owner

Sworn to and subscribed before me, this 8 day of October, 2023

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Notary Public (Seal)

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Campaign Disclosure Form

Must be completed by ALL applicant(s), property owner(s), agent(s) and/or attorney(s). Use as many forms as needed.

CHECK ONE: ✓ **APPLICANT** _____ **PROPERTY OWNER** _____ **AGENT** _____ **ATTORNEY** _____ **OTHER**

Has the person described below made, within two (2) years immediately preceding the filing of this application campaign contributions aggregating $250 or more or made gifts having in the aggregate a value of $250 or more to a member of the Henry County Board of Commissioners who will consider the application?

Yes _____ **No** X

If **Yes**, the applicant/property owner/agent and/or attorney representing the applicant must file the following information with the Henry County Board of Commissioners within ten (10) days after this application is first filed:

Commissioner/Zoning Advisory Board Member Name	Dollar amount of Campaign Contribution	Description of Gift $250 or greater given to Board Member

We certify that the foregoing information is true and correct, this 8TH day of 10 - 20 23

STEVE C. BULLARD

Applicant/Property Owner/Agent/Other Name - Printed

Signature of Applicant/Property Owner/Agent/Other

Sworn to and subscribed before me, this 8 day of October, 2023.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Notary Public (Seal)

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Residential Declaration

In order to comply with the United States Department of Justice's procedures for the administration of Section 5 of the Voting Rights Act of 1965 as amended, Subpart B, Section 51.28, the following information is required for the deannexation of any residential properties. Must be completed for ALL residential properties (regardless of zoning designation). Use as many forms as needed.

Location/Address 165 JASPER DR. STOCKBRIDGE GA 30281

Parcel ID Number 013A01024000

1. Total number of existing residential structures located on the subject parcel: 1
2. Description of the residential structures located on the subject property as listed above: PRIVATE HOME
3. Total number of person(s) residing within each structure: _____
4. Age, Sex, and Race of each of those individuals:
   USE ADDITIONAL FORMS IF NEEDED

Age	Sex	Race
74	M	W
40	M	W

5. Henry County Commission District: 2
6. City Council Voting District: 1

CERTIFICATION AND AUTHORIZATION

I hereby certify that, to the best of my knowledge and belief, the above listed information and all attached supporting documents are complete and accurate.

Applicant Signature [signature] Date 10/8/23

LETTER OF INTENT

Henry County Board of Commissioners:

As de-annexation requests are not subject to public hearing requirements, please consider this information in your decision for de-annexation of this Manderley property:

TAX REDUCTION

Signature

STEVE C. BOYKIN

Printed Name

10/8/23

Date

BOOK 3470 PAGE 252

REC'D IN BK 3470
PAGE
DATE REC'D 10-7-99
CLERK Sara E Taylor

Oct 6 1 03 PM '99

FILED IN OFFICE
CLERK OF SUPERIOR COURT
HENRY COUNTY, GA.

RETURN TO:
MORRIS & SCHNEIDER, P.C.
2781 WHITLEY ROAD
ATLANTA, GEORGIA 30339
99J0340Y

HENRY COUNTY GEORGIA
REAL ESTATE TRANSFER TAX
PAID $ 207.00
DATE 10-6-99
Sara E Taylor
Clerk of Superior Court

WARRANTY DEED

STATE OF GEORGIA
COUNTY OF CLAYTON

This Indenture made this **10th** day of **September,** in the year **One Thousand Nine Hundred Ninety-Nine**, between **Darrell J. Oldfield and Melody K. Oldfield**, of the County of Henry, State of Georgia, as party or parties of the first part, hereinunder called Grantor, and **Steve C. Bullard**, as party or parties of the second part, hereinafter called Grantee (the words "Grantor" and "Grantee" to include their respective heirs, successors and assigns where the context requires or permits).

W I T N E S S E T H that: Grantor, for and in consideration of the sum of **TEN AND 00/100'S ($10.00) Dollars** and other good and valuable considerations in hand paid at and before the sealing and delivery of these presents, the receipt whereof is hereby acknowledged, has granted, bargained, sold, aliened, conveyed and confirmed, and by these presents does grant, bargain, sell, alien, convey and confirm unto the said Grantee, the following described property:

ALL THAT TRACT OR PARCEL OF LAND lying and being in Land Lots 8 & 9, 12th District, Henry County, Georgia, being Lot 11, Block A, Manderly Subdivision, Unit 1, as per plat recorded in Plat Book 10, Page 69, Henry County, Georgia records, which plat is hereby referred to and incorporated herein.

Subject to all easements and restrictions of record.

TO HAVE AND TO HOLD the said tract or parcel of land, with all and singular the rights, members and appurtenances thereof, to the same being, belonging, or in anywise appertaining, to the only proper use, benefit and behoof of the said Grantee forever in **FEE SIMPLE.**

AND THE SAID Grantor will warrant and forever defend the right and title to the above described property unto the said Grantee against the claims of all persons whomsoever.

IN WITNESS WHEREOF, Grantor has hereunto set grantor's hand and seal this day and year first above written.

Signed, sealed and delivered in the presence of:

Yvonne C. Mayl
Witness

Notary Public

DON A. DIXON JR.
NOTARY
EXPIRES
GEORGIA
JAN. 10, 2003
PUBLIC
HENRY COUNTY

_____ (Seal)
Darrell J. Oldfield

_____ as attorney in fact for Melody K Oldfield (Seal)
Melody K. Oldfield

_____ (Seal)

_____ (Seal)

36273

Bk 19 Page 269

96-M-83

NOTE: This survey and plot subject to such Easements and/or Right-Of-Ways as may now exist. No investigation of the Records of Title by the undersigned.

Linear measurement made with Topcon E.D.M.
Angular measurement made with Topcon 10" Theodolite.

An angular error of 01" per angle was adjusted using Compass Rule.
Error of closure: 1 foot in 6159+ feet.

The owner of the land shown on this plat and whose name is subscribed there to, in person or through a duly Authorized Agent dedicates to the use of the Public forever all streets, Easements, and other Public Grounds shown.

Owner _____ Date _____

Agent _____ Date _____

NOTE: Property lines as shown on this plat were controlled as to distance and direction by physical evidence found and as shown (S.F.), conc R/W mon, fences and R/W on County Roads) and upon legal description furnished by Kaiper Corp. Distances and bearings on this plat do not agree exactly with legal description due to actual location of said physical evidence.

NOTE: R/W on Blackhall Road based upon conc R/W mon. found and iron stake found (S.F.) as shown hereon and also upon plat recorded in PB. 4, Page 271.

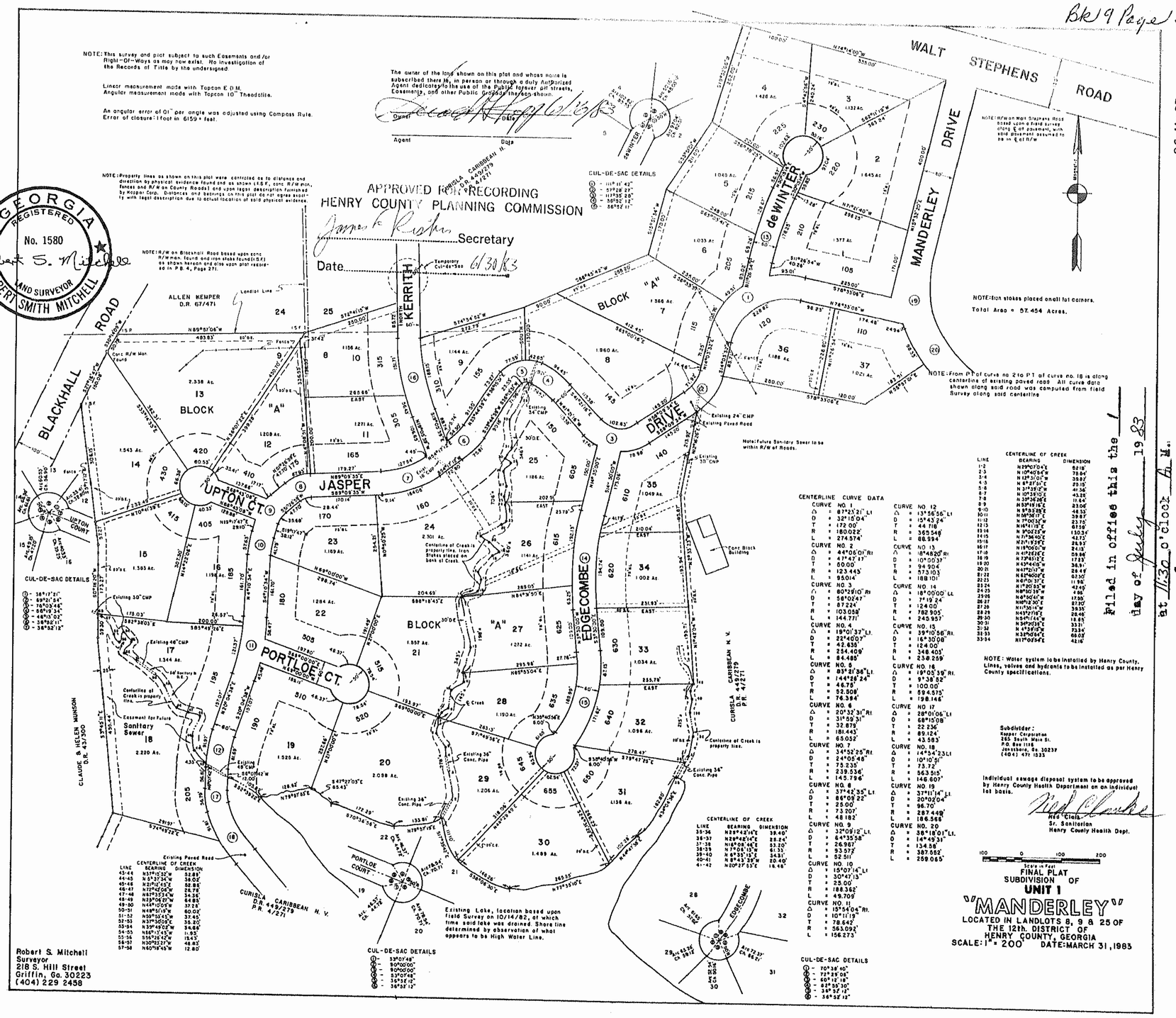
GEORGIA REGISTERED No. 1580 LAND SURVEYOR ROBERT SMITH MITCHELL

Robert S. Mitchell

APPROVED FOR RECORDING
HENRY COUNTY PLANNING COMMISSION

James L. Rushing Secretary

Date 6/30/83



CUL-DE-SAC DETAILS

- 1 - 119°11'42"
- 2 - 57°28'27"
- 3 - 113°35'20"
- 4 - 36°52'12"
- 5 - 56°52'11"

CUL-DE-SAC DETAILS

- 6 - 38°17'21"
- 7 - 59°21'54"
- 8 - 76°03'44"
- 9 - 56°16'34"
- 10 - 46°53'02"
- 11 - 38°52'11"
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CUL-DE-SAC DETAILS

- 13 - 33°07'48"
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CUL-DE-SAC DETAILS

- 19 - 70°38'40"
- 20 - 72°23'06"
- 21 - 60°12'18"
- 22 - 42°55'30"
- 23 - 36°52'12"
- 24 - 36°52'12"

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
1-2	N29°07'04"E	62.18'
2-3	N10°40'04"W	78.64'
3-4	N12°31'01"W	35.87'
4-5	N 4°27'01"E	23.15'
5-6	N37°35'17"W	41.38'
6-7	N10°33'01"E	43.28'
7-8	N39°36'08"E	17.64'
8-9	N53°16'16"E	23.06'
9-10	N 9°53'03"E	48.53'
10-11	N69°58'17"E	39.87'
11-12	N 7°00'37"W	23.75'
12-13	N16°41'15"E	61.59'
13-14	N 9°02'23"W	100.34'
14-15	N 7°36'50"E	42.73'
15-16	N17°39'07"E	24.93'
16-17	N19°00'01"W	24.13'
17-18	N41°22'42"E	09.88'
18-19	N23°51'21"E	17.33'
19-20	N33°41'09"W	36.31'
20-21	N41°52'07"W	28.49'
21-22	N42°00'01"E	02.30'
22-23	N07°01'37"E	11.90'
23-24	N17°20'23"W	42.49'
24-25	N8°50'38"W	4.66'
25-26	N41°00'41"W	17.55'
26-27	N08°12'30"E	27.70'
27-28	N11°30'14"W	39.38'
28-29	N43°27'16"E	28.46'
29-30	N51°16'14"W	12.81'
30-31	N47°01'13"E	33.31'
31-32	N 4°37'15"E	23.54'
32-33	N33°08'47"E	66.02'
33-34	N11°07'54"E	42.16'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
35-34	N83°43'16"E	39.40'
36-37	N26°48'16"E	23.24'
37-38	N16°08'46"E	53.20'
38-39	N7°05'13"W	61.33'
39-40	N 6°35'13"E	34.31'
40-41	N 8°43'35"W	20.40'
41-42	N20°27'53"E	18.48'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
43-44	N37°12'32"W	52.81'
44-45	N 5°37'34"W	38.02'
45-46	N23°12'45"E	52.82'
46-47	N72°42'06"W	26.78'
47-48	N63°23'54"W	34.36'
48-49	N39°06'27"W	64.85'
49-50	N44°02'01"W	37.23'
50-51	N49°53'19"W	60.02'
51-52	N59°50'43"W	37.45'
52-53	N37°30'09"E	35.20'
53-54	N39°40'02"W	34.66'
54-55	N66°13'43"W	11.93'
55-56	S56°25'42"W	18.43'
56-57	N30°52'27"W	48.83'
57-58	N60°18'45"W	12.80'

CENTERLINE CURVE DATA

CURVE NO. 1		CURVE NO. 12	
Δ	= 87°21'21" Lt	Δ	= 13°56'56" Lt
D	= 32°15'04"	D	= 15°43'24"
T	= 172.00'	T	= 44.716'
R	= 180.022'	R	= 365.548'
L	= 274.574'	L	= 88.994'
CURVE NO. 2		CURVE NO. 13	
Δ	= 44°06'01" Rt	Δ	= 18°46'20" Rt
D	= 47°47'17"	D	= 10°00'37"
T	= 50.00'	T	= 94.904'
R	= 123.445'	R	= 573.103'
L	= 95.014'	L	= 188.101'
CURVE NO. 3		CURVE NO. 14	
Δ	= 80°29'10" Rt	Δ	= 18°00'00" Lt
D	= 58°02'47"	D	= 7°19'24"
T	= 87.224'	T	= 124.00'
R	= 103.058'	R	= 782.905'
L	= 144.771'	L	= 245.957'
CURVE NO. 4		CURVE NO. 15	
Δ	= 19°01'37" Lt	Δ	= 39°10'56" Rt
D	= 22°40'07"	D	= 16°30'08"
T	= 42.635'	T	= 124.00'
R	= 254.409'	R	= 346.405'
L	= 84.485'	L	= 236.259'
CURVE NO. 5		CURVE NO. 16	
Δ	= 83°21'36" Lt	Δ	= 19°05'39" Rt
D	= 144°58'24"	D	= 9°38'52"
T	= 46.75'	T	= 100.00'
R	= 52.508'	R	= 594.575'
L	= 76.394'	L	= 198.146'
CURVE NO. 6		CURVE NO. 17	
Δ	= 20°32'31" Rt	Δ	= 28°01'06" Lt
D	= 31°59'31"	D	= 68°15'08"
T	= 32.879'	T	= 22.236'
R	= 181.443'	R	= 89.124'
L	= 65.052'	L	= 43.583'
CURVE NO. 7		CURVE NO. 18	
Δ	= 34°52'25" Rt	Δ	= 14°54'23" Lt
D	= 24°05'48"	D	= 10°10'31"
T	= 75.230'	T	= 73.72'
R	= 239.534'	R	= 563.515'
L	= 145.796'	L	= 146.607'
CURVE NO. 8		CURVE NO. 19	
Δ	= 37°42'35" Lt	Δ	= 37°11'14" Lt
D	= 86°08'22"	D	= 20°02'04"
T	= 25.00'	T	= 96.70'
R	= 73.207'	R	= 287.449'
L	= 48.182'	L	= 186.568'
CURVE NO. 9		CURVE NO. 20	
Δ	= 32°09'12" Lt	Δ	= 38°18'01" Lt
D	= 64°35'58"	D	= 14°49'31"
T	= 26.987'	T	= 134.88'
R	= 93.572'	R	= 387.552'
L	= 52.511'	L	= 259.065'
CURVE NO. 10			
Δ	= 15°07'14" Lt		
D	= 30°47'13"		
T	= 25.00'		
R	= 188.362'		
L	= 49.709'		
CURVE NO. 11			
Δ	= 15°54'04" Rt		
D	= 10°11'19"		
T	= 78.642'		
R	= 563.092'		
L	= 156.273'		

NOTE: Water system to be installed by Henry County. Lines, valves and hydrants to be installed as per Henry County specifications.

Subdivider:
Kaiper Corporation
265 South Main St.
P.O. Box 1118
Jonesboro, Ga. 30237
(404) 471-1533

Individual sewage disposal system to be approved by Henry County Health Department on an individual lot basis.

Hal Clark
Sr. Sanitarian
Henry County Health Dept.

Scale in Feet: 100 0 100 200

FINAL PLAT
SUBDIVISION OF
UNIT 1
"MANDERLEY"
LOCATED IN LANDLOTS 8, 9 & 25 OF
THE 12th. DISTRICT OF
HENRY COUNTY, GEORGIA
SCALE: 1" = 200' DATE: MARCH 31, 1983

Robert S. Mitchell
Surveyor
218 S. Hill Street
Griffin, Ga. 30223
(404) 229 2458

Filed in office this the 1 day of July 1983 at 11:30 o'clock A.M.

Dare E. Sanford
Clerk Superior Court

96-M-83

195 JASPER DR.

Deannexation Application

THANK YOU FOR YOUR INTEREST IN HENRY COUNTY, GEORGIA. THIS PACKET INCLUDES THE NECESSARY DOCUMENTS NEEDED FOR DEANNEXATION REQUESTS TO BE HEARD BY THE HENRY COUNTY BOARD OF COMMISSIONERS.

PLEASE NOTE: ALL FEES ARE NON-REFUNDABLE. THERE ARE NO EXCEPTIONS.

A PRE-APPLICATION MEETING IS ADVISED, BUT NOT REQUIRED, FOR DEANNEXATION REQUESTS. THE HENRY COUNTY PLANNING AND ZONING DEPARTMENT WILL ONLY CONDUCT PRE-APPLICATION MEETINGS ON TUESDAY, WEDNESDAY, AND THURSDAY OF EACH WEEK. PLEASE VISIT **HTTP://WWW.CO.HENRY.GA.US/DEPARTMENTS/M-R/PLANNING-ZONING** TO SCHEDULE A MEETING ONLINE.

NO PRE-APPLICATION MEETING WILL BE CONDUCTED WITHOUT AN APPOINTMENT.

SHOULD YOU NEED FURTHER ASSISTANCE, PLEASE FEEL FREE TO CONTACT OUR OFFICE BETWEEN 8:00 AM AND 5:00 PM, MONDAY THROUGH FRIDAY

AT (770) 288-7526.

THE LOCATION OF ALL COUNTY RELATED BOARD MEETINGS IS:

140 HENRY PARKWAY

MCDONOUGH, GEORGIA 30253

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

APPLICATION FOR DEANNEXATION

To the Board of Commissioners of Henry County, Georgia.

1. We, the undersigned, all of the owners of all real property of the territory described herein respectfully request that the Henry County Board of Commissioners accept the deannexation request of this territory from city boundaries, and extend the County services to include the same.

2. The territory to be deannexed is contiguous to existing unincorporated areas and complies with requirements established in *O.C.G.A Title 36, Chapter 36*. The description of such territory is attached hereto.

OWNER(S) NAME(S) JANET FIORE DROSKY

* PHONE NUMBER 678-491-9856 EMAIL ADDRESS janetgilbert@bellsouth.net

DEANNEXATION FROM ☐HAMPTON ☐LOCUST GROVE ☐MCDONOUGH ☑STOCKBRIDGE

LOCATION/ADDRESS 195 JASPER DR. STOCKBRIDGE, GA 30281

LAND LOT/DISTRICT 9/12 ACERAGE 1.344

PARCEL ID NUMBER 013A01050000 ZONING DISTRICT(S) SR

ONE FORM PER PROPERTY. USE ADDITIONAL SHEETS IF REQUIRED.

SIGNATURE(S) Janet Fiore Drosky DATE 10/8/23

DATE

ALL PROPERTY OWNERS MUST SIGN AS THEIR NAME APPEARS ON THE DEED. USE ADDITIONAL SHEETS IF REQUIRED.

Kathleen Watson DATE 10-8-2023

NOTARY SIGNATURE AND SEAL

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

(Office use only)

Pre-application meeting: Title: Date:

Application checked by: Kenta Lanham Title: Planner III Date: 5/22/2024

BOC Meeting Date: 06/11/2024 BOC Decision: Acceptance Date: 6/11/2024

Planning Director's Signature: Date: 6/13/24

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

OWNERSHIP VERIFICATION

The undersigned is the / an owner of an interest in the lands described in the attached deannexation application, which proposes to amend the Official Zoning Map of the deannexing municipal jurisdiction and of Henry County, Georgia, and concurs in the application. The undersigned's interest in the lands described in the application is as follows:

Location/Address 195 JASPER DR. STOCKBRIDGE, GA 30281

Parcel ID Number 013A01050000

* Owner's name(s) JANET FIORE DROSKY Percentage of interest: 100%

Percentage of interest:

We certify that the foregoing information is true and correct, this 8th day of October, 2023

Janet Fiore Drosky
Property Owner- Printed

Janet Fiore Drosky
Signature of Property Owner

Property Owner- Printed

Signature of Property Owner

Sworn to and subscribed before me, this 8 day of October, 2023

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Notary Public (Seal)

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Residential Declaration

In order to comply with the United States Department of Justice's procedures for the administration of Section 5 of the Voting Rights Act of 1965 as amended, Subpart B, Section 51.28, the following information is required for the deannexation of any residential properties. Must be completed for ALL residential properties (regardless of zoning designation). Use as many forms as needed.

Location/Address 195 JASPER DR, STOCKBRIDGE, GA 30281

Parcel ID Number 013A01050000

1. Total number of existing residential structures located on the subject parcel: 1

2. Description of the residential structures located on the subject property as listed above: Private Home

3. Total number of person(s) residing within each structure: 2

4. Age, Sex, and Race of each of those individuals:
USE ADDITIONAL FORMS IF NEEDED

Age	Sex	Race
74	F	White
50	M	White

5. Henry County Commission District: 2

6. City Council Voting District: 1

CERTIFICATION AND AUTHORIZATION

I hereby certify that, to the best of my knowledge and belief, the above listed information and all attached supporting documents are complete and accurate.

Applicant Signature Janet Faye Dusky Date 10/8/23

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Campaign Disclosure Form

Must be completed by ALL applicant(s), property owner(s), agent(s) and/or attorney(s). Use as many forms as needed.

CHECK ONE: ✓ **APPLICANT** ____ **PROPERTY OWNER** ____ **AGENT** ____ **ATTORNEY** ____ **OTHER**

Has the person described below made, within two (2) years immediately preceding the filing of this application campaign contributions aggregating $250 or more or made gifts having in the aggregate a value of $250 or more to a member of the Henry County Board of Commissioners who will consider the application?

✗ **Yes** ____ **No** X

If **Yes**, the applicant/property owner/agent and/or attorney representing the applicant must file the following information with the Henry County Board of Commissioners within ten (10) days after this application is first filed:

✗

Commissioner/Zoning Advisory Board Member Name	Dollar amount of Campaign Contribution	Description of Gift $250 or greater given to Board Member

We certify that the foregoing information is true and correct, this 8th day of October, 2023.

Janet Fiore Drosky

Applicant/Property Owner/Agent/Other Name - Printed

Janet Fiore Drosky

Signature of Applicant/Property Owner/Agent/Other

Sworn to and subscribed before me, this 8 day of October, 2023.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Kathleen Watson

Notary Public (Seal)

LETTER OF INTENT

Henry County Board of Commissioners:

As de-annexation requests are not subject to public hearing requirements, please consider this information in your decision for de-annexation of this Manderley property:

De-annexation reason # 1: **Trust**

On 5-24-2018, the Stockbridge Director of Community Development Services met with Manderley property owners and asked for our support to defeat the referendum for the creation of the City of Eagles Landing. She stated that Stockbridge believed Manderley would be better off to stay unincorporated because we weren't a good fit for the City of Eagles Landing, and added that we weren't a good fit for the City of Stockbridge either. She went on to reassure us that they would not attempt to annex us in the future. **Stockbridge broke their promise when they annexed Manderley.**

De-annexation reason # 2: **Services**

On 9-29-2022, Stockbridge Representatives held another meeting with homeowners in our area, and the Director of Public Works was asked if he could guarantee that Stockbridge would provide the same DOT services that Henry County was providing us. His answer was "no". When we inquired if Stockbridge even owns the equipment needed for these projects, the answer was again, "no". **Stockbridge has been unable to commit to the same level of service that Henry County provides.**

De-annexation reason #3: **Taxation without representation**

On 11-8-2022, Manderley's voting district voted against annexation. The financial instability of Stockbridge is a major problem, and they are in desperate need of a cash infusion to offset budget shortfalls created before we were annexed. **It is wrongheaded for a city that we did not vote to be in, to annex us anyway and then tax us for millions of dollars of mistakes made by city officials that we did not elect.**

Janet Fiore Drosky
Signature

Janet Fiore Drosky
Printed Name

10/8/23
Date

BOOK 1588 PAGE 104

STATE OF GEORGIA

COUNTY OF CLAYTON

WARRANTY DEED

THIS INDENTURE, Made the 17TH day of February, in the year one thousand nine hundred ninety-three, between

WILLIAM C. DROSKY

of the County of Clayton, and State of Georgia, as party or parties of the first part, hereinafter called Grantor, and

JANET FIORE DROSKY
[a/k/a Janet E. Drosky]

as party or parties of the second part, hereinafter called Grantee (the words "Grantor" and "Grantee" to include their respective heirs, successors and assigns where the context requires or permits).

WITNESSETH that: Grantor, for and in consideration of the sum of TEN ($10.00) DOLLARS and other valuable consideration in hand paid at and before the sealing and delivery of these presents, the receipt whereof is hereby acknowledged, has granted, bargained, sold, aliened and conveyed, and by these presents does grant, bargain, sell, alien, convey and confirm unto the said Grantee,

AN UNDIVIDED ONE-HALF (1/2) INTEREST IN AND TO:

ALL THAT TRACT or parcel of land lying and being in Land Lot 9 of the 12th District of Henry County, Georgia, being Lot 17, Block A, Unit 1, Manderley Subdivision, as per plat thereof recorded in Plat Book 9, Page 269, Henry County, Georgia Records, being improved real property known as 195 Jasper Drive in accordance with the present system of numbering in Henry County, Georgia.

THIS DEED is made pursuant to that certain Divorce Settlement Agreement between the parties hereto, dated May 26, 1992 [Henry County Superior Court Civil Action No. 92-CV-1091], Grantor acknowledging payment in full of his equity in the above described property.

REC'D IN BK 1588
PAGE 104
DATE REC'D 2-22-93
CLERK Carol E Taylor
FEB 18 11 31 AM '93
FILED IN OFFICE
CLERK OF SUPERIOR COURT
HENRY COUNTY, GA.

REAL ESTATE TRANSFER TAX
PAID $ -0-
DATE 2-18-93
Carol E Taylor

TO HAVE AND TO HOLD the said tract or parcel of land, with all and singular the rights, members and appurtenances thereof, to the same being, belonging, or in anywise appertaining, to the only proper use, benefit and behoof of the said Grantee forever in FEE SIMPLE.

AND THE SAID Grantor will warrant and forever defend the right and title to the above described property unto the said Grantee against the claims of all persons whomsoever.

IN WITNESS WHEREOF, the Grantor has signed and sealed this deed, the day and year above written.

Signed, sealed and delivered in presence of:

Unofficial Witness

Notary Public

PIERS J. WEYANT NOTARY PUBLIC DEKALB
Notary Public, DeKalb County, Georgia
My Commission Expires Oct. 1, 1996

William C. Drosky (Seal)
William C. Drosky

(Seal)

3164

Bk 19 Page 269

96-M-83

NOTE: This survey and plot subject to such Easements and/or Right-Of-Ways as may now exist. No investigation of the Records of Title by the undersigned.

Linear measurement made with Topcon E.D.M.
Angular measurement made with Topcon 10" Theodolite.

An angular error of 01" per angle was adjusted using Compass Rule.
Error of closure: 1 foot in 6159+ feet.

The owner of the land shown on this plat and whose name is subscribed there to, in person or through a duly Authorized Agent dedicates to the use of the Public forever all streets, Easements, and other Public Grounds shown.

Owner _____ Date _____

Agent _____ Date _____

NOTE: Property lines as shown on this plat were controlled as to distance and direction by physical evidence found and as shown (S.F.), conc R/W mon, fences and R/W on County Roads) and upon legal description furnished by Kaiper Corp. Distances and bearings on this plat do not agree exactly with legal description due to actual location of said physical evidence.

NOTE: R/W on Blackhall Road based upon conc R/W mon. found and iron stake found (S.F.) as shown hereon and also upon plat recorded in PB. 4, Page 271.

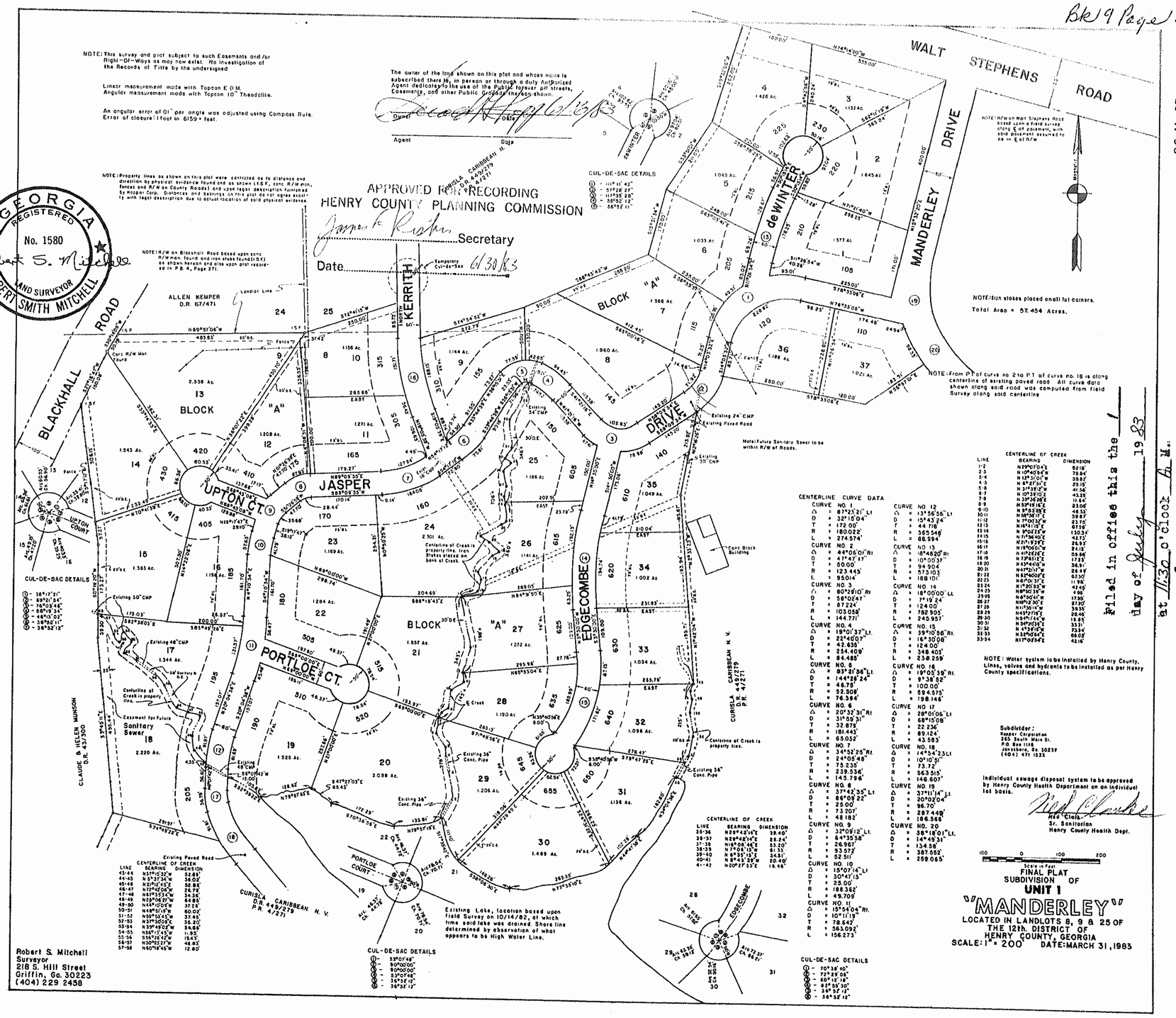
GEORGIA REGISTERED No. 1580 LAND SURVEYOR ROBERT SMITH MITCHELL

Robert S. Mitchell

APPROVED FOR RECORDING
HENRY COUNTY PLANNING COMMISSION

James L. Rushing Secretary

Date 6/30/83



CUL-DE-SAC DETAILS

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CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
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6-7	N10°33'01"E	43.28'
7-8	N39°36'08"E	17.64'
8-9	N53°16'16"E	23.06'
9-10	N 9°53'03"E	48.53'
10-11	N69°58'17"E	39.87'
11-12	N 7°00'37"W	23.75'
12-13	N16°41'15"E	61.59'
13-14	N 9°02'23"W	100.34'
14-15	N 7°36'50"E	42.73'
15-16	N17°39'07"E	24.93'
16-17	N19°00'01"W	24.13'
17-18	N41°22'42"E	09.88'
18-19	N23°51'21"E	17.33'
19-20	N33°41'09"W	36.31'
20-21	N41°52'07"W	28.49'
21-22	N42°00'01"E	02.30'
22-23	N07°01'37"E	11.90'
23-24	N17°20'23"W	42.49'
24-25	N8°50'38"W	4.66'
25-26	N41°00'41"W	17.55'
26-27	N08°12'30"E	27.70'
27-28	N11°30'14"W	39.38'
28-29	N43°27'16"E	28.46'
29-30	N51°16'14"W	12.81'
30-31	N47°01'13"E	33.31'
31-32	N 4°37'15"E	23.54'
32-33	N33°08'47"E	66.02'
33-34	N11°07'54"E	42.16'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
35-34	N83°43'16"E	39.40'
36-37	N26°48'16"E	23.24'
37-38	N16°08'46"E	53.20'
38-39	N7°05'13"W	61.33'
39-40	N 6°35'13"E	34.31'
40-41	N 8°43'35"W	20.40'
41-42	N20°27'53"E	18.48'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
43-44	N37°12'32"W	52.81'
44-45	N 5°37'34"W	38.02'
45-46	N23°12'45"E	52.82'
46-47	N72°42'06"W	26.78'
47-48	N63°23'54"W	34.36'
48-49	N39°06'27"W	64.85'
49-50	N44°02'01"W	37.23'
50-51	N49°53'19"W	60.02'
51-52	N59°50'43"W	37.45'
52-53	N37°30'09"E	35.20'
53-54	N39°40'02"W	34.66'
54-55	N66°13'43"W	11.93'
55-56	S56°25'42"W	18.43'
56-57	N30°52'27"W	48.83'
57-58	N60°18'45"W	12.80'

CENTERLINE CURVE DATA

CURVE NO. 1		CURVE NO. 12	
Δ	= 87°21'21" Lt	Δ	= 13°56'56" Lt
D	= 32°15'04"	D	= 15°43'24"
T	= 172.00'	T	= 44.716'
R	= 180.022'	R	= 365.548'
L	= 274.574'	L	= 88.994'
CURVE NO. 2		CURVE NO. 13	
Δ	= 44°06'01" Rt	Δ	= 18°46'20" Rt
D	= 47°47'17"	D	= 10°00'37"
T	= 50.00'	T	= 94.904'
R	= 123.445'	R	= 573.103'
L	= 95.014'	L	= 188.101'
CURVE NO. 3		CURVE NO. 14	
Δ	= 80°29'10" Rt	Δ	= 18°00'00" Lt
D	= 58°02'47"	D	= 7°19'24"
T	= 87.224'	T	= 124.00'
R	= 103.058'	R	= 782.905'
L	= 144.771'	L	= 245.957'
CURVE NO. 4		CURVE NO. 15	
Δ	= 19°01'37" Lt	Δ	= 39°10'56" Rt
D	= 22°40'07"	D	= 16°30'08"
T	= 42.635'	T	= 124.00'
R	= 254.409'	R	= 346.405'
L	= 84.485'	L	= 236.259'
CURVE NO. 5		CURVE NO. 16	
Δ	= 83°21'36" Lt	Δ	= 19°05'39" Rt
D	= 144°58'24"	D	= 9°38'52"
T	= 46.75'	T	= 100.00'
R	= 52.508'	R	= 594.575'
L	= 76.394'	L	= 198.146'
CURVE NO. 6		CURVE NO. 17	
Δ	= 20°32'31" Rt	Δ	= 28°01'06" Lt
D	= 31°59'31"	D	= 68°15'08"
T	= 32.879'	T	= 22.236'
R	= 181.443'	R	= 89.124'
L	= 65.052'	L	= 43.583'
CURVE NO. 7		CURVE NO. 18	
Δ	= 34°52'25" Rt	Δ	= 14°54'23" Lt
D	= 24°05'48"	D	= 10°10'31"
T	= 75.230'	T	= 73.72'
R	= 239.534'	R	= 563.515'
L	= 145.796'	L	= 146.607'
CURVE NO. 8		CURVE NO. 19	
Δ	= 37°42'35" Lt	Δ	= 37°11'14" Lt
D	= 86°08'22"	D	= 20°02'04"
T	= 25.00'	T	= 96.70'
R	= 73.207'	R	= 287.449'
L	= 48.182'	L	= 186.568'
CURVE NO. 9		CURVE NO. 20	
Δ	= 32°09'12" Lt	Δ	= 38°18'01" Lt
D	= 64°35'58"	D	= 14°49'31"
T	= 26.987'	T	= 134.88'
R	= 93.572'	R	= 387.552'
L	= 52.511'	L	= 259.065'
CURVE NO. 10			
Δ	= 15°07'14" Lt		
D	= 30°47'13"		
T	= 25.00'		
R	= 188.362'		
L	= 49.709'		
CURVE NO. 11			
Δ	= 15°54'04" Rt		
D	= 10°11'19"		
T	= 78.642'		
R	= 563.092'		
L	= 156.273'		

NOTE: Water system to be installed by Henry County. Lines, valves and hydrants to be installed as per Henry County specifications.

Subdivider:
Kaiper Corporation
265 South Main St.
P.O. Box 1118
Jonesboro, Ga. 30237
(404) 471-1533

Individual sewage disposal system to be approved by Henry County Health Department on an individual lot basis.

Hal Clark
Sr. Sanitarian
Henry County Health Dept.

Scale in Feet: 100 0 100 200

FINAL PLAT
SUBDIVISION OF
UNIT 1
"MANDERLEY"
LOCATED IN LANDLOTS 8, 9 & 25 OF
THE 12th. DISTRICT OF
HENRY COUNTY, GEORGIA
SCALE: 1" = 200' DATE: MARCH 31, 1983

Robert S. Mitchell
Surveyor
218 S. Hill Street
Griffin, Ga. 30223
(404) 229 2458

Filed in office this the 1 day of July 1983 at 11:30 o'clock A.M.

Dare E. Sanford
Clerk Superior Court

96-M-83

310 KERRITH ✓✓

Deannexation Application

THANK YOU FOR YOUR INTEREST IN HENRY COUNTY, GEORGIA. THIS PACKET INCLUDES THE NECESSARY DOCUMENTS NEEDED FOR DEANNEXATION REQUESTS TO BE HEARD BY THE HENRY COUNTY BOARD OF COMMISSIONERS.

PLEASE NOTE: ALL FEES ARE NON-REFUNDABLE. THERE ARE NO EXCEPTIONS.

A PRE-APPLICATION MEETING IS ADVISED, BUT NOT REQUIRED, FOR DEANNEXATION REQUESTS. THE HENRY COUNTY PLANNING AND ZONING DEPARTMENT WILL ONLY CONDUCT PRE-APPLICATION MEETINGS ON TUESDAY, WEDNESDAY, AND THURSDAY OF EACH WEEK. PLEASE VISIT **HTTP://WWW.CO.HENRY.GA.US/DEPARTMENTS/M-R/PLANNING-ZONING** TO SCHEDULE A MEETING ONLINE.

NO PRE-APPLICATION MEETING WILL BE CONDUCTED WITHOUT AN APPOINTMENT.

SHOULD YOU NEED FURTHER ASSISTANCE, PLEASE FEEL FREE TO CONTACT OUR OFFICE BETWEEN 8:00 AM AND 5:00 PM, MONDAY THROUGH FRIDAY

AT (770) 288-7526.

THE LOCATION OF ALL COUNTY RELATED BOARD MEETINGS IS:

140 HENRY PARKWAY

MCDONOUGH, GEORGIA 30253

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

APPLICATION FOR DEANNEXATION

To the Board of Commissioners of Henry County, Georgia.

1. We, the undersigned, all of the owners of all real property of the territory described herein respectfully request that the Henry County Board of Commissioners accept the deannexation request of this territory from city boundaries, and extend the County services to include the same.

2. The territory to be deannexed is contiguous to existing unincorporated areas and complies with requirements established in *O.C.G.A Title 36, Chapter 36*. The description of such territory is attached hereto.

OWNER(S) NAME(S) VANESSA MARTINEZ

PHONE NUMBER 470-230-2442 EMAIL ADDRESS MARTIN3201@gmail.com

DEANNEXATION FROM ☐HAMPTON ☐LOCUST GROVE ☐MCDONOUGH ☑STOCKBRIDGE

LOCATION/ADDRESS 310 JERRITT DR. STOCKBRIDGE, GA 30281

LAND LOT/DISTRICT 84 25/12 ACERAGE 1.144

PARCEL ID NUMBER 013A01039000 ZONING DISTRICT(S) SR

ONE FORM PER PROPERTY. USE ADDITIONAL SHEETS IF REQUIRED.

SIGNATURE(S) VaMz DATE 10-11-23

DATE

ALL PROPERTY OWNERS MUST SIGN AS THEIR NAME APPEARS ON THE DEED. USE ADDITIONAL SHEETS IF REQUIRED.

Kathleen Watson DATE 10-11-23

NOTARY SIGNATURE AND SEAL

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

(Office use only)

Pre-application meeting: Title: Date:

Application checked by: Kenta Lanham Title: Planner III Date: 5/22/2024

BOC Meeting Date: 06/11/2024 BOC Decision: Acceptance Date: 6/11/2024

Planning Director's Signature: Date: 6/13/24

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Residential Declaration

In order to comply with the United States Department of Justice's procedures for the administration of Section 5 of the Voting Rights Act of 1965 as amended, Subpart B, Section 51.28, the following information is required for the deannexation of any residential properties. Must be completed for ALL residential properties (regardless of zoning designation). Use as many forms as needed.

Location/Address 310 KERRITH DR, STOCKBRIDGE, GA 30281

Parcel ID Number 013A01039000

1. Total number of existing residential structures located on the subject parcel: 1
2. Description of the residential structures located on the subject property as listed above: private home
3. Total number of person(s) residing within each structure: 4
4. Age, Sex, and Race of each of those individuals:
   USE ADDITIONAL FORMS IF NEEDED

Age	Sex	Race
35	M	Black
35	F	Other
10	F	Other
11mos	M	Other

5. Henry County Commission District: 2
6. City Council Voting District: 1

CERTIFICATION AND AUTHORIZATION

I hereby certify that, to the best of my knowledge and belief, the above listed information and all attached supporting documents are complete and accurate.

Applicant Signature [signature] Date 10-11-23

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

OWNERSHIP VERIFICATION

The undersigned is the / an owner of an interest in the lands described in the attached deannexation application, which proposes to amend the Official Zoning Map of the deannexing municipal jurisdiction and of Henry County, Georgia, and concurs in the application. The undersigned's interest in the lands described in the application is as follows:

Location/Address 310 KERRITH DR., STOCKBRIDGE, GA 30281

Parcel ID Number 013A01039000

* Owner's name(s) VANESSA MARTINEZ Percentage of interest: 100%

Percentage of interest:

We certify that the foregoing information is true and correct, this 11th day of October, 2023

Vanessa Martinez
Property Owner- Printed

Signature of Property Owner

Property Owner- Printed

Signature of Property Owner

Sworn to and subscribed before me, this 11 day of OCTOBER, 2023.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Notary Public (Seal)

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Campaign Disclosure Form

Must be completed by ALL applicant(s), property owner(s), agent(s) and/or attorney(s). Use as many forms as needed.

CHECK ONE: ✓ **APPLICANT** _____ **PROPERTY OWNER** _____ **AGENT** _____ **ATTORNEY** _____ **OTHER**

Has the person described below made, within two (2) years immediately preceding the filing of this application campaign contributions aggregating $250 or more or made gifts having in the aggregate a value of $250 or more to a member of the Henry County Board of Commissioners who will consider the application?

Yes _____ **No** X

If **Yes**, the applicant/property owner/agent and/or attorney representing the applicant must file the following information with the Henry County Board of Commissioners within ten (10) days after this application is first filed:

Commissioner/Zoning Advisory Board Member Name	Dollar amount of Campaign Contribution	Description of Gift $250 or greater given to Board Member

We certify that the foregoing information is true and correct, this 11th day of October, 2023

Vanessa Martinez

Applicant/Property Owner/Agent/Other Name - Printed

Signature of Applicant/Property Owner/Agent/Other

Sworn to and subscribed before me, this 11 day of October, 23.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Notary Public (Seal)

LETTER OF INTENT

Henry County Board of Commissioners:

As de-annexation requests are not subject to public hearing requirements, please consider this information in your decision for de-annexation of this Manderley property:

De-annexation reason # 1: **Trust**

On 5-24-2018, the Stockbridge Director of Community Development Services met with Manderley property owners and asked for our support to defeat the referendum for the creation of the City of Eagles Landing. She stated that Stockbridge believed Manderley would be better off to stay unincorporated because we weren't a good fit for the City of Eagles Landing, and added that we weren't a good fit for the City of Stockbridge either. She went on to reassure us that they would not attempt to annex us in the future. **Stockbridge broke their promise when they annexed Manderley.**

De-annexation reason # 2: **Services**

On 9-29-2022, Stockbridge Representatives held another meeting with homeowners in our area, and the Director of Public Works was asked if he could guarantee that Stockbridge would provide the same DOT services that Henry County was providing us. His answer was "no". When we inquired if Stockbridge even owns the equipment needed for these projects, the answer was again, "no". **Stockbridge has been unable to commit to the same level of service that Henry County provides.**

De-annexation reason #3: **Taxation without representation**

On 11-8-2022, Manderley's voting district voted against annexation. The financial instability of Stockbridge is a major problem, and they are in desperate need of a cash infusion to offset budget shortfalls created before we were annexed. **It is wrongheaded for a city that we did not vote to be in, to annex us anyway and then tax us for millions of dollars of mistakes made by city officials that we did not elect.**

Signature

Vanessa Martinez
Printed Name

10-11-23
Date

BK:17751 PG:330-331
Filed and Recorded
Jan-06-2021 12:47 PM
DOC# 2021 - 000633
Real Estate Transfer Tax
Paid: $ 400.00
0752021000102
SABRIYA HILL
CLERK OF SUPERIOR COURT
HENRY COUNTY, GA
Participant ID: 4836538760

Please return to:
The Closing Firm of Shola Oyekan
225 Corporate Center Drive Suite B
Stockbridge, GA 30281
File # 20-10-04
STATE OF GEORGIA
COUNTY OF HENRY

LIMITED WARRANTY DEED

THIS INDENTURE made this **6th day of January, 2021** between

ERICK WILLIAMS AND ERICKA J. RICHARDS

as party or parties of the first part, hereinafter called Grantor, and

Vanessa Martinez

as party or parties of the second part, hereinafter called Grantee (the words "Grantor" and "Grantee" to include their respective heirs, successors and assigns where the context requires or permits).

WITNESSETH that: Grantor, for and in consideration of the sum of TEN DOLLARS and other good and valuable consideration ($10.00) in hand paid at and before the sealing and delivery of these presents, the receipt whereof is hereby acknowledged, has granted, bargained, sold, aliened, conveyed and confirmed, and by these presents does grant, bargain, sell, alien, convey and confirm unto the said Grantee, the following described property:

See attached Exhibit "A" legal description
Address: 310 Kerrith Drive, Stockbridge, Georgia

Subject to easements, covenants, restrictions, right of way deeds, agreements, matters of plat, governmental ordinances and other lawful matters affecting said property

TO HAVE AND TO HOLD the said tract or parcel of land, with all and singular the rights, members and appurtenances thereof, to the same being, belonging, or in anywise appertaining, to the only proper use, benefit and behoof of the said Grantee forever in FEE SIMPLE.

AND THE SAID Grantor will warrant and forever defend the right and title to the above-described property unto the said Grantee against the claims of all persons owning, holding or claiming by, through or under the said Grantor.

IN WITNESS WHEREOF, Grantor has hereunto set grantor's hand and seal this first day and year first above written.

Signed, sealed and delivered in the presence of:

Witness

Notary Public
My commission expires
(Notary Seal)

(Seal)
Erick Williams

(Seal)
Ericka J. Richards

SHOLA OYEKAN
NOTARY PUBLIC
My Commission Expires
10-18-2021
FULTON COUNTY, GEORGIA

Exhibit "A" legal description
310 Kerrith Drive, Stockbridge, Georgia

ALL THAT TRACT OR PARCEL OF LAND LYING AND BEING IN LAND LOT 8 AND 25 OF THE 12TH DISTRICT, HENRY COUNTY, GEORGIA BEING LOT 9, BLOCK A, UNIT 1 OF THE MANDERLEY SUBDIVISION, AS PER PLAT RECORDED IN PLAT BOOK 9, PAGE 269, HENRY COUNTY, GEORGIA RECORDS; SAID PLAT IS BEING INCORPORATED HEREIN AND MADE A PART OF THIS DESCRIPTION BY REFERENCE, BEING THE SAME PROPERTY CONVEYED BY CHARLES POLK & ASSOCIATES, INC. TO ROBERT F. ENGERMAN UNDER DEED RECORDED IN DEED BOOK 629, PAGE 301, HENRY COUNTY, GEORGIA RECORDS.

Parcel ID#: 013A01039000

Subject to easements, covenants, restrictions, agreements, right of way deeds, matters of plat, governmental ordinances and other lawful matters affecting said property

Bk 19 Page 269

96-M-83

NOTE: This survey and plot subject to such Easements and/or Right-Of-Ways as may now exist. No investigation of the Records of Title by the undersigned.

Linear measurement made with Topcon E.D.M.
Angular measurement made with Topcon 10" Theodolite.

An angular error of 01" per angle was adjusted using Compass Rule.
Error of closure: 1 foot in 6159+ feet.

The owner of the land shown on this plat and whose name is subscribed there to, in person or through a duly Authorized Agent dedicates to the use of the Public forever all streets, Easements, and other Public Grounds shown.

Owner _____ Date _____

Agent _____ Date _____

NOTE: Property lines as shown on this plat were controlled as to distance and direction by physical evidence found and as shown (S.F.), conc R/W mon, fences and R/W on County Roads) and upon legal description furnished by Kaiper Corp. Distances and bearings on this plat do not agree exactly with legal description due to actual location of said physical evidence.

NOTE: R/W on Blackhall Road based upon conc R/W mon. found and iron stake found (S.F.) as shown hereon and also upon plat recorded in PB. 4, Page 271.

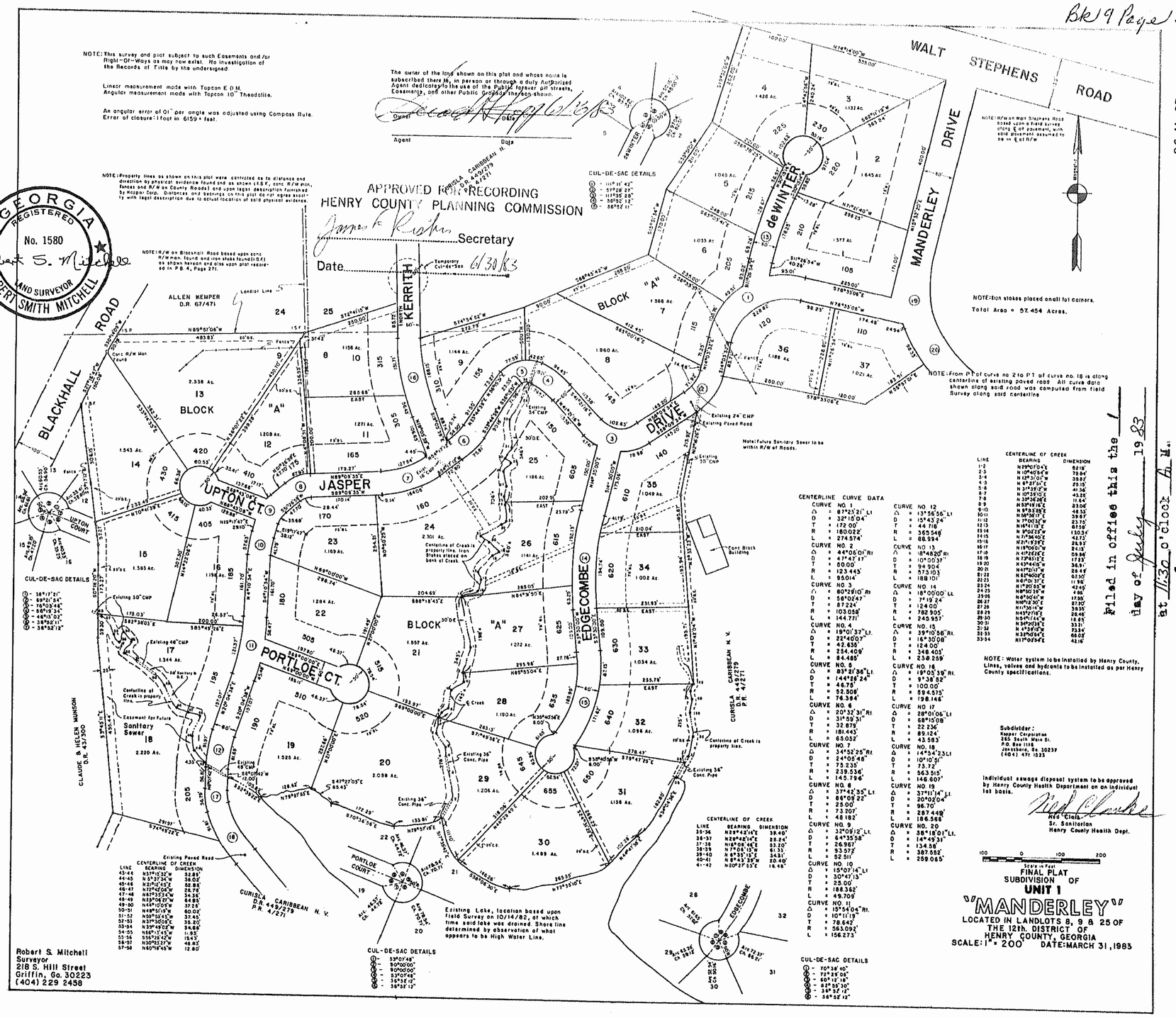
GEORGIA REGISTERED No. 1580 LAND SURVEYOR ROBERT SMITH MITCHELL

Robert S. Mitchell

APPROVED FOR RECORDING
HENRY COUNTY PLANNING COMMISSION

James L. Rushing Secretary

Date 6/30/83



CUL-DE-SAC DETAILS

- 1 - 119°11'42"
- 2 - 57°28'27"
- 3 - 113°35'20"
- 4 - 36°52'12"
- 5 - 56°52'11"

CUL-DE-SAC DETAILS

- 6 - 38°17'21"
- 7 - 59°21'54"
- 8 - 76°03'44"
- 9 - 56°16'34"
- 10 - 46°53'02"
- 11 - 38°52'11"
- 12 - 38°52'12"

CUL-DE-SAC DETAILS

- 13 - 33°07'48"
- 14 - 90°00'00"
- 15 - 90°00'00"
- 16 - 53°07'48"
- 17 - 36°52'12"
- 18 - 36°52'12"

CUL-DE-SAC DETAILS

- 19 - 70°38'40"
- 20 - 72°23'06"
- 21 - 60°12'18"
- 22 - 42°55'30"
- 23 - 36°52'12"
- 24 - 36°52'12"

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
1-2	N29°07'04"E	62.18'
2-3	N10°40'04"W	78.64'
3-4	N12°31'01"W	35.87'
4-5	N 4°27'01"E	23.15'
5-6	N37°35'17"W	41.38'
6-7	N10°33'01"E	43.28'
7-8	N39°36'08"E	17.64'
8-9	N53°16'16"E	23.06'
9-10	N 9°53'03"E	48.53'
10-11	N69°58'17"E	39.87'
11-12	N 7°00'37"W	23.75'
12-13	N16°41'15"E	61.59'
13-14	N 9°02'23"W	100.34'
14-15	N 7°36'50"E	42.73'
15-16	N17°39'07"E	24.93'
16-17	N19°00'01"W	24.13'
17-18	N41°22'42"E	09.88'
18-19	N23°51'21"E	17.33'
19-20	N33°41'09"W	36.31'
20-21	N41°52'07"W	28.49'
21-22	N42°00'01"E	02.30'
22-23	N07°01'37"E	11.90'
23-24	N17°20'23"W	42.49'
24-25	N8°50'38"W	4.66'
25-26	N41°00'41"W	17.55'
26-27	N08°12'30"E	27.70'
27-28	N11°30'14"W	39.38'
28-29	N43°27'16"E	28.46'
29-30	N51°16'14"W	12.81'
30-31	N47°01'13"E	33.31'
31-32	N 4°37'15"E	23.54'
32-33	N33°08'47"E	66.02'
33-34	N11°07'54"E	42.16'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
35-34	N83°43'16"E	39.40'
36-37	N26°48'16"E	23.24'
37-38	N16°08'46"E	53.20'
38-39	N7°05'13"W	61.33'
39-40	N 6°35'13"E	34.31'
40-41	N 8°43'35"W	20.40'
41-42	N20°27'53"E	18.48'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
43-44	N37°12'32"W	52.81'
44-45	N 5°37'34"W	38.02'
45-46	N23°12'45"E	52.82'
46-47	N72°42'06"W	26.78'
47-48	N63°23'54"W	34.36'
48-49	N39°06'27"W	64.85'
49-50	N44°02'01"W	37.23'
50-51	N49°53'19"W	60.02'
51-52	N59°50'43"W	37.45'
52-53	N37°30'09"E	35.20'
53-54	N39°40'02"W	34.66'
54-55	N66°13'43"W	11.93'
55-56	S56°25'42"W	18.43'
56-57	N30°52'27"W	48.83'
57-58	N60°18'45"W	12.80'

CENTERLINE CURVE DATA

CURVE NO. 1		CURVE NO. 12	
Δ	= 87°21'21" Lt	Δ	= 13°56'56" Lt
D	= 32°15'04"	D	= 15°43'24"
T	= 172.00'	T	= 44.716'
R	= 180.022'	R	= 365.548'
L	= 274.574'	L	= 88.994'
CURVE NO. 2		CURVE NO. 13	
Δ	= 44°06'01" Rt	Δ	= 18°46'20" Rt
D	= 47°47'17"	D	= 10°00'37"
T	= 50.00'	T	= 94.904'
R	= 123.445'	R	= 573.103'
L	= 95.014'	L	= 188.101'
CURVE NO. 3		CURVE NO. 14	
Δ	= 80°29'10" Rt	Δ	= 18°00'00" Lt
D	= 58°02'47"	D	= 7°19'24"
T	= 87.224'	T	= 124.00'
R	= 103.058'	R	= 782.905'
L	= 144.771'	L	= 245.957'
CURVE NO. 4		CURVE NO. 15	
Δ	= 19°01'37" Lt	Δ	= 39°10'56" Rt
D	= 22°40'07"	D	= 16°30'08"
T	= 42.635'	T	= 124.00'
R	= 254.409'	R	= 346.405'
L	= 84.485'	L	= 236.259'
CURVE NO. 5		CURVE NO. 16	
Δ	= 83°21'36" Lt	Δ	= 19°05'39" Rt
D	= 144°58'24"	D	= 9°38'52"
T	= 46.75'	T	= 100.00'
R	= 52.508'	R	= 594.575'
L	= 76.394'	L	= 198.146'
CURVE NO. 6		CURVE NO. 17	
Δ	= 20°32'31" Rt	Δ	= 28°01'06" Lt
D	= 31°59'31"	D	= 68°15'08"
T	= 32.879'	T	= 22.236'
R	= 181.443'	R	= 89.124'
L	= 65.052'	L	= 43.583'
CURVE NO. 7		CURVE NO. 18	
Δ	= 34°52'25" Rt	Δ	= 14°54'23" Lt
D	= 24°05'48"	D	= 10°10'31"
T	= 75.230'	T	= 73.72'
R	= 239.534'	R	= 563.515'
L	= 145.796'	L	= 146.607'
CURVE NO. 8		CURVE NO. 19	
Δ	= 37°42'35" Lt	Δ	= 37°11'14" Lt
D	= 86°08'22"	D	= 20°02'04"
T	= 25.00'	T	= 96.70'
R	= 73.207'	R	= 287.449'
L	= 48.182'	L	= 186.568'
CURVE NO. 9		CURVE NO. 20	
Δ	= 32°09'12" Lt	Δ	= 38°18'01" Lt
D	= 64°35'58"	D	= 14°49'31"
T	= 26.987'	T	= 134.88'
R	= 93.572'	R	= 387.552'
L	= 52.511'	L	= 259.065'
CURVE NO. 10			
Δ	= 15°07'14" Lt		
D	= 30°47'13"		
T	= 25.00'		
R	= 188.362'		
L	= 49.709'		
CURVE NO. 11			
Δ	= 15°54'04" Rt		
D	= 10°11'19"		
T	= 78.642'		
R	= 563.092'		
L	= 156.273'		

NOTE: Water system to be installed by Henry County. Lines, valves and hydrants to be installed as per Henry County specifications.

Subdivider:
Kaiper Corporation
265 South Main St.
P.O. Box 1118
Jonesboro, Ga. 30237
(404) 471-1533

Individual sewage disposal system to be approved by Henry County Health Department on an individual lot basis.

Hal Clark
Sr. Sanitarian
Henry County Health Dept.

Scale in Feet: 100 0 100 200

FINAL PLAT
SUBDIVISION OF
UNIT 1
"MANDERLEY"
LOCATED IN LANDLOTS 8, 9 & 25 OF
THE 12th. DISTRICT OF
HENRY COUNTY, GEORGIA
SCALE: 1" = 200' DATE: MARCH 31, 1983

Robert S. Mitchell
Surveyor
218 S. Hill Street
Griffin, Ga. 30223
(404) 229 2458

Filed in office this the 1 day of July 1983 at 11:30 o'clock A.M.

Dare E. Sanford
Clerk Superior Court

96-M-83

320 KERRITH

Deannexation Application

THANK YOU FOR YOUR INTEREST IN HENRY COUNTY, GEORGIA. THIS PACKET INCLUDES THE NECESSARY DOCUMENTS NEEDED FOR DEANNEXATION REQUESTS TO BE HEARD BY THE HENRY COUNTY BOARD OF COMMISSIONERS.

PLEASE NOTE: ALL FEES ARE NON-REFUNDABLE. THERE ARE NO EXCEPTIONS.

A PRE-APPLICATION MEETING IS ADVISED, BUT NOT REQUIRED, FOR DEANNEXATION REQUESTS. THE HENRY COUNTY PLANNING AND ZONING DEPARTMENT WILL ONLY CONDUCT PRE-APPLICATION MEETINGS ON TUESDAY, WEDNESDAY, AND THURSDAY OF EACH WEEK. PLEASE VISIT **HTTP://WWW.CO.HENRY.GA.US/DEPARTMENTS/M-R/PLANNING-ZONING** TO SCHEDULE A MEETING ONLINE.

NO PRE-APPLICATION MEETING WILL BE CONDUCTED WITHOUT AN APPOINTMENT.

SHOULD YOU NEED FURTHER ASSISTANCE, PLEASE FEEL FREE TO CONTACT OUR OFFICE BETWEEN 8:00 AM AND 5:00 PM, MONDAY THROUGH FRIDAY

AT (770) 288-7526.

THE LOCATION OF ALL COUNTY RELATED BOARD MEETINGS IS:

140 HENRY PARKWAY

MCDONOUGH, GEORGIA 30253

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

APPLICATION FOR DEANNEXATION

To the Board of Commissioners of Henry County, Georgia.

1. We, the undersigned, all of the owners of all real property of the territory described herein respectfully request that the Henry County Board of Commissioners accept the deannexation request of this territory from city boundaries, and extend the County services to include the same.

2. The territory to be deannexed is contiguous to existing unincorporated areas and complies with requirements established in *O.C.G.A Title 36, Chapter 36*. The description of such territory is attached hereto.

OWNER(S) NAME(S) LINDA PEARSON NORTHINGTON

PHONE NUMBER 804-691-5852 EMAIL ADDRESS japginger@gmail.com

DEANNEXATION FROM ☐HAMPTON ☐LOCUST GROVE ☐MCDONOUGH ☑STOCKBRIDGE

LOCATION/ADDRESS 320 KERRITH DR. STOCKBRIDGE, GA 30281

LAND LOT/DISTRICT 8 & 25/12 ACERAGE 1.05

PARCEL ID NUMBER 013A01038000 ZONING DISTRICT(S) SR

ONE FORM PER PROPERTY. USE ADDITIONAL SHEETS IF REQUIRED.

SIGNATURE(S) Linda Pearson Northington DATE 10/10/23

DATE

ALL PROPERTY OWNERS MUST SIGN AS THEIR NAME APPEARS ON THE DEED. USE ADDITIONAL SHEETS IF REQUIRED.

Kathleen Watson DATE 10-10-23

NOTARY SIGNATURE AND SEAL

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

(Office use only)

Pre-application meeting: Title: Date:

Application checked by: Kenta Lanham Title: Planner III Date: 5/22/2024

BOC Meeting Date: 06/11/2024 BOC Decision: Acceptance Date: 6/11/2024

Planning Director's Signature: Date: 6/13/24

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

OWNERSHIP VERIFICATION

The undersigned is the / an owner of an interest in the lands described in the attached deannexation application, which proposes to amend the Official Zoning Map of the deannexing municipal jurisdiction and of Henry County, Georgia, and concurs in the application. The undersigned's interest in the lands described in the application is as follows:

Location/Address 320 KERRITH DR., STOCKBRIDGE GA 30281

Parcel ID Number 013A01038000

X Owner's name(s) LINDA PEARSON NORTHINGTON Percentage of interest: 100%

_____ Percentage of interest: _____

We certify that the foregoing information is true and correct, this 10 day of October 2023

Linda Pearson Northington — Property Owner- Printed

Linda Pearson Northington — Signature of Property Owner

_____ Property Owner- Printed

_____ Signature of Property Owner

Sworn to and subscribed before me, this 10 day of October 2023

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Kathleen Watson

Notary Public (Seal)

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Residential Declaration

In order to comply with the United States Department of Justice's procedures for the administration of Section 5 of the Voting Rights Act of 1965 as amended, Subpart B, Section 51.28, the following information is required for the deannexation of any residential properties. Must be completed for ALL residential properties (regardless of zoning designation). Use as many forms as needed.

Location/Address 320 KERRISH DR, STOCKBRIDGE, GA 30281

Parcel ID Number 013A01038000

1. Total number of existing residential structures located on the subject parcel: 1
2. Description of the residential structures located on the subject property as listed above: Private home
3. Total number of person(s) residing within each structure: 2
4. Age, Sex, and Race of each of those individuals:
   USE ADDITIONAL FORMS IF NEEDED

Age	Sex	Race
70	F	BLK
71	M	BLK

5. Henry County Commission District: 2
6. City Council Voting District: 1

CERTIFICATION AND AUTHORIZATION

I hereby certify that, to the best of my knowledge and belief, the above listed information and all attached supporting documents are complete and accurate.

Applicant Signature Linda Pearson Northington Date 10/10/23

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Campaign Disclosure Form

Must be completed by ALL applicant(s), property owner(s), agent(s) and/or attorney(s). Use as many forms as needed.

CHECK ONE: ✓ **APPLICANT** ____ **PROPERTY OWNER** ____ **AGENT** ____ **ATTORNEY** ____ **OTHER**

Has the person described below made, within two (2) years immediately preceding the filing of this application campaign contributions aggregating $250 or more or made gifts having in the aggregate a value of $250 or more to a member of the Henry County Board of Commissioners who will consider the application?

* **Yes** ____ **No** ✓

If **Yes**, the applicant/property owner/agent and/or attorney representing the applicant must file the following information with the Henry County Board of Commissioners within ten (10) days after this application is first filed:

*

Commissioner/Zoning Advisory Board Member Name	Dollar amount of Campaign Contribution	Description of Gift $250 or greater given to Board Member

We certify that the foregoing information is true and correct, this 10 day of October, 2023

Linda Pearson Northington

Applicant/Property Owner/Agent/Other Name - Printed

Linda Pearson Northington

Signature of Applicant/Property Owner/Agent/Other

Sworn to and subscribed before me, this 10 day of October, 2023.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Kathleen Watson

Notary Public (Seal)

LETTER OF INTENT

Henry County Board of Commissioners:

As de-annexation requests are not subject to public hearing requirements, please consider this information in your decision for de-annexation of this Manderley property:

- Property owners are seniors 70 + →
- On fixed income
- we did not vote to be in Stockbridge (not fair)

Linda Pearson Northington
Signature

Linda Pearson Northington 10/10/23
Printed Name Date

RECEIVED IN OFFICE
HENRY COUNTY
CLERK OF SUPERIOR COURT

2021 FEB 25 PM 4:49

BK: 17905 PG: 17
Filed and Recorded
Mar-02-2021 02:52:00PM
DOC#: D2021-008478
Real Estate Transfer Tax Paid $235.00
0752021001762
SABRIYA HILL
CLERK OF SUPERIOR COURT Henry County GA.

Return Recorded Document to:
BEN F. WINDHAM, PC
3838 HIGHWAY 42
LOCUST GROVE. GA 30248
FILE #: **LG20469**

LIMITED
WARRANTY DEED

STATE OF GEORGIA
COUNTY OF HENRY

THIS INDENTURE made this **16th** day of **February, 2021**, between **RONALD E. MINTON and JANICE L. MINTON** of the State of Georgia, as party or parties of the first part, hereinunder called Grantor, and **LINDA PEARSON NORTHINGTON** as party or parties of the second part, hereinafter called Grantee (the words "Grantor" and "Grantee" to include their respective heirs, successors and assigns where the context requires
or permits).

WITNESSETH that: Grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS ($10.00) and other good and valuable considerations in hand paid, at and before the sealing and delivery of these presents, the receipt whereof is hereby acknowledged, has granted, bargained, sold, aliened, conveyed and confirmed, and by these presents does grant, bargain, sell, alien, convey and confirm unto the said Grantee.

THE LAND DESCRIBED HEREIN IS SITUATED IN THE STATE OF GEORGIA, COUNTY OF HENRY, AND IS DESCRIBED AS FOLLOWS:

ALL THAT TRACT OR PARCEL OF LAND LYING AND BEING IN LAND LOTS 8 AND 25 OF THE 12TH DISTRICT OF HENRY COUNTY, GEORGIA, BEING LOT 2, BLOCK B, MANDERLEY SUBDIVISION, UNIT II, AS PER PLAT RECORDED IN PLAT BOOK 10, PAGE 69, HENRY COUNTY, GEORGIA RECORDS, TO WHICH REFERENCE IS HEREBY MADE FOR A MORE PARTICULAR DESCRIPTION OF SAID PROPERTY.

PARCEL NUMBER(S): 013A-01-038-000

This Deed is given subject to all easements, covenants and restrictions of record, if any, as amended.

TO HAVE AND TO HOLD the said tract or parcel of land, together with all and singular the rights, members and appurtenances thereof, to the same being, belonging or in anywise appertaining, to the only proper use, benefit and behoof of the said Grantee, forever in **FEE SIMPLE.**

AND THE SAID Grantor will warrant and forever defend the right and title to the above described property unto the said Grantee against the claims of all persons by, through and under the above named grantor.

IN WITNESS WHEREOF, Grantor has hereunto set grantor's hand and seal this day and year first above written.

Signed, sealed and delivered in presence of:

Witness

Notary Public
[Notary Public]

KIMBERLY MICHELLE GA
MY COMMISSION EXPIRES
JAN 21 2022
BUTTS CO., GEORGIA
NOTARY PUBLIC

Ronald E Minton (SEAL)
RONALD E. MINTON

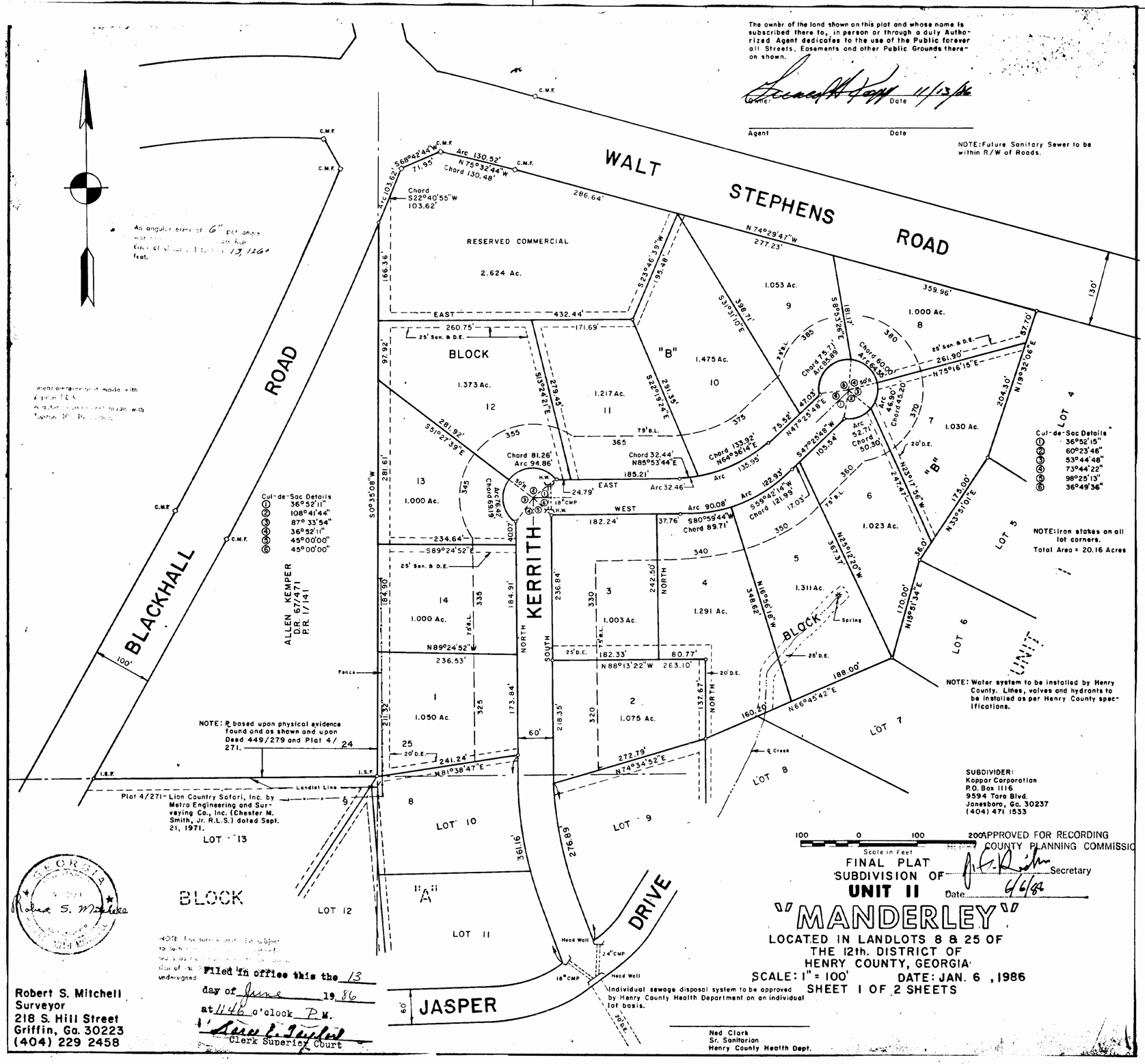
Janice L Minton (SEAL)
JANICE L. MINTON

The owner of the land shown on this plat and whose name is subscribed there to, in person or through a duly Authorized Agent dedicates to the use of the Public forever all Streets, Easements and other Public Grounds thereon shown.

Owner Date 11/13/86

Agent Date

NOTE: Future Sanitary Sewer to be within R/W of Roads.



325 KERRI TH DR.

Deannexation Application

HENRY COUNTY
Government

THANK YOU FOR YOUR INTEREST IN HENRY COUNTY, GEORGIA. THIS PACKET INCLUDES THE NECESSARY DOCUMENTS NEEDED FOR DEANNEXATION REQUESTS TO BE HEARD BY THE HENRY COUNTY BOARD OF COMMISSIONERS.

PLEASE NOTE: ALL FEES ARE NON-REFUNDABLE. THERE ARE NO EXCEPTIONS.

A PRE-APPLICATION MEETING IS ADVISED, BUT NOT REQUIRED, FOR DEANNEXATION REQUESTS. THE HENRY COUNTY PLANNING AND ZONING DEPARTMENT WILL ONLY CONDUCT PRE-APPLICATION MEETINGS ON TUESDAY, WEDNESDAY, AND THURSDAY OF EACH WEEK. PLEASE VISIT **HTTP://WWW.CO.HENRY.GA.US/DEPARTMENTS/M-R/PLANNING-ZONING** TO SCHEDULE A MEETING ONLINE.

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SHOULD YOU NEED FURTHER ASSISTANCE, PLEASE FEEL FREE TO CONTACT OUR OFFICE BETWEEN 8:00 AM AND 5:00 PM, MONDAY THROUGH FRIDAY

AT (770) 288-7526.

THE LOCATION OF ALL COUNTY RELATED BOARD MEETINGS IS:

140 HENRY PARKWAY

MCDONOUGH, GEORGIA 30253

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

APPLICATION FOR DEANNEXATION

To the Board of Commissioners of Henry County, Georgia.

1. We, the undersigned, all of the owners of all real property of the territory described herein respectfully request that the Henry County Board of Commissioners accept the deannexation request of this territory from city boundaries, and extend the County services to include the same.

2. The territory to be deannexed is contiguous to existing unincorporated areas and complies with requirements established in *O.C.G.A Title 36, Chapter 36*. The description of such territory is attached hereto.

OWNER(S) NAME(S) ZR CHAO ZHU

PHONE NUMBER 6788601503 EMAIL ADDRESS ZRCHAOZHU@gmail.co

DEANNEXATION FROM ☐HAMPTON ☐LOCUST GROVE ☐MCDONOUGH ☑STOCKBRIDGE

LOCATION/ADDRESS 325 KERRITH DR. STOCKBRIDGE, GA 30281

LAND LOT/DISTRICT 25/12 ACERAGE 1.05

PARCEL ID NUMBER 013A01025000 ZONING DISTRICT(S) SR

ONE FORM PER PROPERTY. USE ADDITIONAL SHEETS IF REQUIRED.

SIGNATURE(S) ZR CHAO ZHU DATE 10/08/2023

DATE

ALL PROPERTY OWNERS MUST SIGN AS THEIR NAME APPEARS ON THE DEED. USE ADDITIONAL SHEETS IF REQUIRED.

Kathleen Watson DATE 10-8-2023

NOTARY SIGNATURE AND SEAL

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

(Office use only)

Pre-application meeting: Title: Date:

Application checked by: Kenta Lanham Title: Planner III Date: 5/22/2024

BOC Meeting Date: 06/11/2024 BOC Decision: Acceptance Date: 6/11/2024

Planning Director's Signature: Date: 6/13/24

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

OWNERSHIP VERIFICATION

The undersigned is the / an owner of an interest in the lands described in the attached deannexation application, which proposes to amend the Official Zoning Map of the deannexing municipal jurisdiction and of Henry County, Georgia, and concurs in the application. The undersigned's interest in the lands described in the application is as follows:

Location/Address: 325 KERRITH DR. STOCKBRIDGE, GA 30281

Parcel ID Number: 013A01025000

* Owner's name(s): ZR CHAO ZU — Percentage of interest: 100%

_____ Percentage of interest: _____

We certify that the foregoing information is true and correct, this 08 day of Oct, 2023

ZR CHAO ZHU — Property Owner- Printed

ZR CHAO ZHU — Signature of Property Owner

_____ Property Owner- Printed

_____ Signature of Property Owner

Sworn to and subscribed before me, this 8 day of October, 2023.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Kathleen Watson

Notary Public (Seal)

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Residential Declaration

In order to comply with the United States Department of Justice's procedures for the administration of Section 5 of the Voting Rights Act of 1965 as amended, Subpart B, Section 51.28, the following information is required for the deannexation of any residential properties. Must be completed for ALL residential properties (regardless of zoning designation). Use as many forms as needed.

Location/Address 325 KERRITH DR. STOCKBRIDGE, GA 30281

Parcel ID Number 013A01025000

* 1. Total number of existing residential structures located on the subject parcel: one

* 2. Description of the residential structures located on the subject property as listed above: private Home

* 3. Total number of person(s) residing within each structure: 2

*4. Age, Sex, and Race of each of those individuals: Age 60 Sex Race
USE ADDITIONAL FORMS IF NEEDED

Age	Sex	Race
60	M	(2) ~~Asian~~ Asian
56	F	Asian

5. Henry County Commission District: 2

6. City Council Voting District: 1

CERTIFICATION AND AUTHORIZATION

I hereby certify that, to the best of my knowledge and belief, the above listed information and all attached supporting documents are complete and accurate.

Applicant Signature ZR CHAO ZHU Date 10-08-2023

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Campaign Disclosure Form

Must be completed by ALL applicant(s), property owner(s), agent(s) and/or attorney(s). Use as many forms as needed.

CHECK ONE: ✓ **APPLICANT** _____ **PROPERTY OWNER** _____ **AGENT** _____ **ATTORNEY** _____ **OTHER**

Has the person described below made, within two (2) years immediately preceding the filing of this application campaign contributions aggregating $250 or more or made gifts having in the aggregate a value of $250 or more to a member of the Henry County Board of Commissioners who will consider the application?

* **Yes** _____ **No** ✓

If **Yes**, the applicant/property owner/agent and/or attorney representing the applicant must file the following information with the Henry County Board of Commissioners within ten (10) days after this application is first filed:

*

Commissioner/Zoning Advisory Board Member Name	Dollar amount of Campaign Contribution	Description of Gift $250 or greater given to Board Member

We certify that the foregoing information is true and correct, this 08 day of Oct, 2023

ZR CHAO ZHU

Applicant/Property Owner/Agent/Other Name - Printed

ZR CHAO ZHU

Signature of Applicant/Property Owner/Agent/Other

Sworn to and subscribed before me, this 8 day of October, 2023

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Notary Public (Seal)

LETTER OF INTENT

Henry County Board of Commissioners:

As de-annexation requests are not subject to public hearing requirements, please consider this information in your decision for de-annexation of this Manderley property:

De-annexation reason # 1: **Trust**

On 5-24-2018, the Stockbridge Director of Community Development Services met with Manderley property owners and asked for our support to defeat the referendum for the creation of the City of Eagles Landing. She stated that Stockbridge believed Manderley would be better off to stay unincorporated because we weren't a good fit for the City of Eagles Landing, and added that we weren't a good fit for the City of Stockbridge either. She went on to reassure us that they would not attempt to annex us in the future. **Stockbridge broke their promise when they annexed Manderley.**

De-annexation reason # 2: **Services**

On 9-29-2022, Stockbridge Representatives held another meeting with homeowners in our area, and the Director of Public Works was asked if he could guarantee that Stockbridge would provide the same DOT services that Henry County was providing us. His answer was "no". When we inquired if Stockbridge even owns the equipment needed for these projects, the answer was again, "no". **Stockbridge has been unable to commit to the same level of service that Henry County provides.**

De-annexation reason #3: **Taxation without representation**

On 11-8-2022, Manderley's voting district voted against annexation. The financial instability of Stockbridge is a major problem, and they are in desperate need of a cash infusion to offset budget shortfalls created before we were annexed. **It is wrongheaded for a city that we did not vote to be in, to annex us anyway and then tax us for millions of dollars of mistakes made by city officials that we did not elect.**

ZR CHAO ZHU

Signature

ZR CHAO ZHU

Printed Name

10-08-2023

Date

Doc ID: 016284640002 Type: WD
Recorded: 07/22/2013 at 02:28:26 PM
Fee Amt: $184.50 Page 1 of 2
Transfer Tax: $172.50
Henry, GA Clerk of Superior Court
Barbara Harrison Clerk of Court
BK 13197 PG 198-199

After recording, please return to:
Liu & Associates, P.C.
1210 Warsaw Road, Suite 200
Roswell, GA 30076
Firm File No.: 2013074150

PT-61 075-20 13 - 5397

WARRANTY DEED

STATE OF GEORGIA COUNTY OF FULTON

THIS INDENTURE, made this July 17th, 2013, between

The Patterson Real Estate Group, Inc.

of the County of Henry, State of Georgia, as party or parties of the first part, hereinafter called Grantor, and
ZR Chao Zhu

of the County of Henry, State of Georgia, as party or parties of the second part, hereinafter called Grantee (the words "Grantor" and "Grantee" to include their respective heirs, successors and assigns where the context requires or permits).

WITNESSETH: That Grantor(s), for and in consideration of TEN DOLLARS and other good and valuable considerations ($10.00) receipt of which is hereby acknowledged has/have granted, sold, transferred and conveyed, and by these presents does/do grant, sell, transfer and convey unto Grantee(s), the following described property:

All that tract or parcel of land lying and being in Land Lot 25 of the 12th District, Henry County, Georgia, being Lot 1, Block B, Unit II of Manderley Subdivision, as per plat recorded in Plat Book 10, Page 69, Henry County, Georgia records, which plat is incorporated herein and made a part hereof by reference.

Less and Expect: That certain Boundary Line Agreement recorded at Deed Book 7111, Page 301, aforesaid records.

325 Kerrith Court, Stockbridge, GA 30281

This conveyance is made subject to all covenants, easements and restrictions of record.

TO HAVE AND TO HOLD said tract or parcel of land, with all and singular the rights, members and appurtenances thereof, to the same being, belonging, or in anywise appertaining, to the only proper use, benefit and behoof of Grantee forever in FEE SIMPLE.

AND Grantor shall warrant and forever defend the right and title to the above-described property unto Grantee against the claims of all persons whomsoever.

IN WITNESS WHEREOF, Grantor(s)' hand and seal have been hereunto affixed, the day and year first above written.

Signed, sealed and delivered in the presence of:

Witness

Notary Public

CHRISTIE L. HUTTER
COMMISSION EXPIRES
NOTARY
PUBLIC
JUNE 27, 2016
HENRY COUNTY, GEORGIA

The Patterson Real Estate Group, Inc.

BY: _____
James T. Patterson, Jr., Vice President
by Elizabeth Head, Attorney in Fact

Per Attached Exhibit "A"

SEAL AFFIXED

CORPORATE SEAL GEORGIA

LIU & ASSOCIATES, P.C.
1210 Warsaw Road, #200
Roswell, GA 30076
www.attorneyliu.com

#20130074150

AFTER RECORDING RETURN TO:
B. BLAKE EDGE, P.C.
190 WEST CAMPGROUND ROAD
MCDONOUGH, GA 30253

EXIBIT "A"

POWER OF ATTORNEY

GEORGIA, HENRY COUNTY.

KNOW ALL PERSONS BY THESE PRESENTS, that I, JIMMY PATTERSON, VICE-PRESIDENT OF THE PATTERSON REAL ESTATE GROUP, INC. of the County of Henry, State of Georgia, for divers good causes and considerations to me hereunto moving, do hereby nominate, constitute and appoint ELIZABETH HEAD (hereafter, "Agent"), of the County of Henry, State of Georgia, my true and lawful attorney in fact; for me, in my name and for my own proper use and benefit to execute contracts, warranty deeds, affidavits and closing statements; to sell, transfer, assign or otherwise dispose of any or all of my property, real, personal or mixed, under such terms or conditions as my Agent may deem proper; and specifically my Agent shall have the power to endorse checks and execute contracts, warranty deeds, closing statements, affidavits, and all other papers necessary to sell or close the sale of the following described property:

325 KERRITH COURT, STOCKBRIDGE, GA 30281; MAP REFERENCE NUMBER: 013A01025000; ALL THAT TRACT OR PARCEL OF LAND LYING AND BEING IN LAND LOT 25 OF THE 12TH DISTRICT, HENRY COUNTY, GEORGIA, BEING LOT 1, BLOCK B, UNIT II OF MANDERLEY SUBDIVISION, AS PER PLAT RECORDED IN PLAT BOOK 10, PAGE 69, HENRY COUNTY, GEORGIA RECORDS, WHICH PLAT IS INCORPORATED HEREIN AND MADE A PART HEREOF BY THIS REFERENCE. LESS AND EXCEPT: THAT CERTAIN BOUNDARY LINE AGREEMENT RECORDED AT DEED BOOK 7111, PAGE 301, AFORESAID RECORDS.

And to have full power to execute all papers and sufficient instruments for the accomplishment thereof. And to have, use and take all lawful ways and means, in my name, that may be found necessary or proper in the execution of this power of attorney. To do all lawful acts and things whatsoever, concerning the premises, as fully in every respect as I myself might do or could do were I personally present at the doing thereof; hereby ratifying and confirming all things, whatsoever my said attorney in fact shall, in my name, lawfully do or cause to be done, in and about the premises, by virtue of these presents.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal this 1st day of February, 2013.

THE PATTERSON REAL ESTATE GROUP, INC.

Witness

JIMMY PATTERSON, Vice President (Seal)

Notary Public

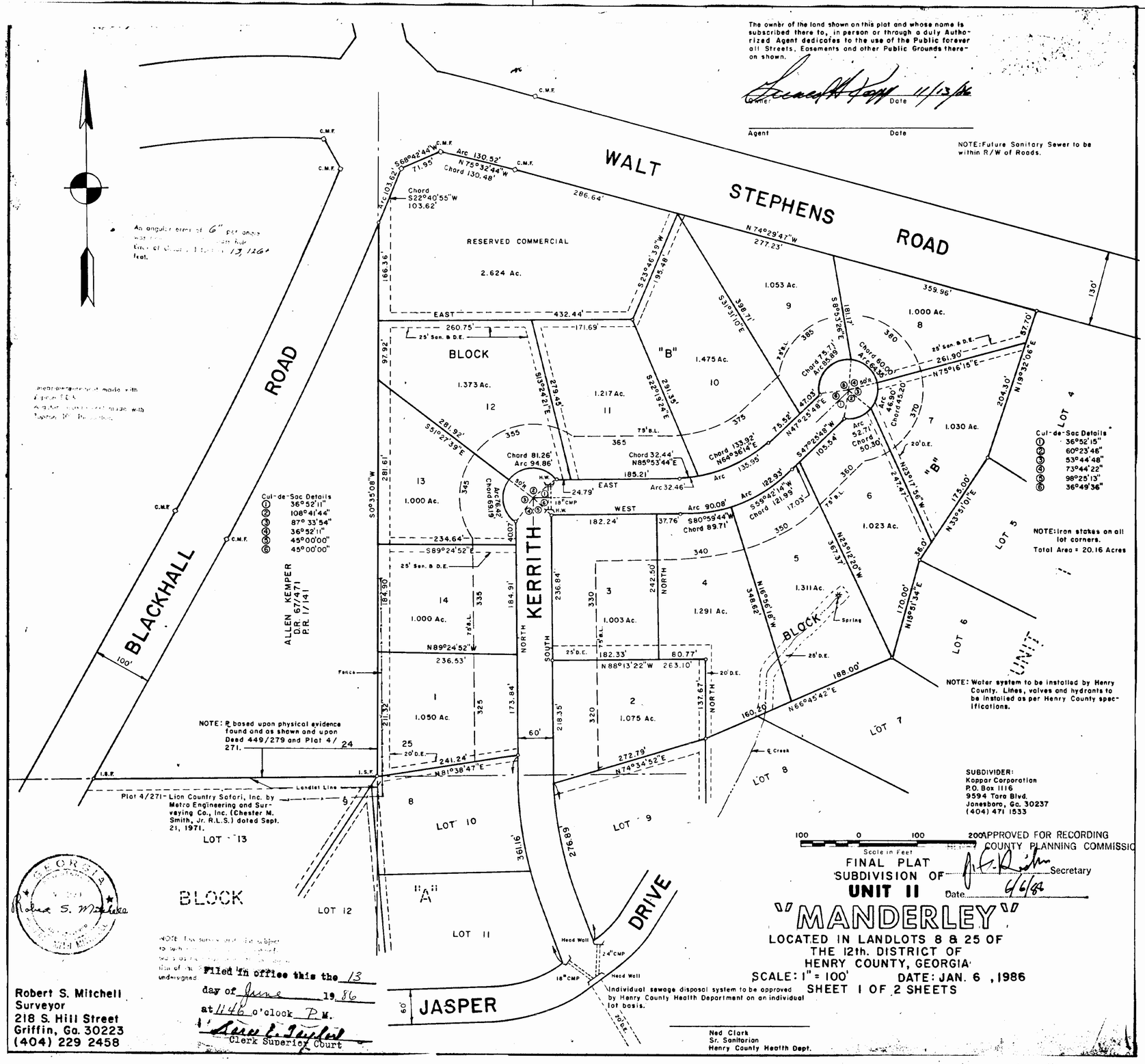
(Seal)

The owner of the land shown on this plat and whose name is subscribed there to, in person or through a duly Authorized Agent dedicates to the use of the Public forever all Streets, Easements and other Public Grounds thereon shown.

Owner Date 11/13/86

Agent Date

NOTE: Future Sanitary Sewer to be within R/W of Roads.



510 PORTLOE CT

Deannexation Application

THANK YOU FOR YOUR INTEREST IN HENRY COUNTY, GEORGIA. THIS PACKET INCLUDES THE NECESSARY DOCUMENTS NEEDED FOR DEANNEXATION REQUESTS TO BE HEARD BY THE HENRY COUNTY BOARD OF COMMISSIONERS.

PLEASE NOTE: ALL FEES ARE NON-REFUNDABLE. THERE ARE NO EXCEPTIONS.

A PRE-APPLICATION MEETING IS ADVISED, BUT NOT REQUIRED, FOR DEANNEXATION REQUESTS. THE HENRY COUNTY PLANNING AND ZONING DEPARTMENT WILL ONLY CONDUCT PRE-APPLICATION MEETINGS ON TUESDAY, WEDNESDAY, AND THURSDAY OF EACH WEEK. PLEASE VISIT **HTTP://WWW.CO.HENRY.GA.US/DEPARTMENTS/M-R/PLANNING-ZONING** TO SCHEDULE A MEETING ONLINE.

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SHOULD YOU NEED FURTHER ASSISTANCE, PLEASE FEEL FREE TO CONTACT OUR OFFICE BETWEEN 8:00 AM AND 5:00 PM, MONDAY THROUGH FRIDAY

AT (770) 288-7526.

THE LOCATION OF ALL COUNTY RELATED BOARD MEETINGS IS:

140 HENRY PARKWAY

MCDONOUGH, GEORGIA 30253

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

APPLICATION FOR DEANNEXATION

To the Board of Commissioners of Henry County, Georgia.

1. We, the undersigned, all of the owners of all real property of the territory described herein respectfully request that the Henry County Board of Commissioners accept the deannexation request of this territory from city boundaries, and extend the County services to include the same.

2. The territory to be deannexed is contiguous to existing unincorporated areas and complies with requirements established in *O.C.G.A Title 36, Chapter 36*. The description of such territory is attached hereto.

OWNER(S) NAME(S) NHU BICH KHUU

THAI-HOA NGOC KIEU

*PHONE NUMBER 678-783-9417 EMAIL ADDRESS thaihoakieu@gmail.com

DEANNEXATION FROM ☐HAMPTON ☐LOCUST GROVE ☐MCDONOUGH ☑STOCKBRIDGE

LOCATION/ADDRESS 510 PORTLOE CT STOCKBRIDGE, GA 30281

LAND LOT/DISTRICT 8 & 9/12 ACERAGE 1.526

PARCEL ID NUMBER 013A01049000 ZONING DISTRICT(S) SR

ONE FORM PER PROPERTY. USE ADDITIONAL SHEETS IF REQUIRED.

SIGNATURE(S) DATE 10-14-2023

DATE 10-14-2023

ALL PROPERTY OWNERS MUST SIGN AS THEIR NAME APPEARS ON THE DEED. USE ADDITIONAL SHEETS IF REQUIRED.

NOTARY SIGNATURE AND SEAL DATE 10-14-2023

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

(Office use only)

Pre-application meeting: Title: Date:

Application checked by: Kenta Lanham Title: Planner III Date: 5/22/2024

BOC Meeting Date: 06/11/2024 BOC Decision: Acceptance Date: 6/11/2024

Planning Director's Signature: Date: 6/13/24

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

OWNERSHIP VERIFICATION

The undersigned is the / an owner of an interest in the lands described in the attached deannexation application, which proposes to amend the Official Zoning Map of the deannexing municipal jurisdiction and of Henry County, Georgia, and concurs in the application. The undersigned's interest in the lands described in the application is as follows:

Location/Address: 510 PORTROE CT. STOCKBRIDGE, GA 30281

Parcel ID Number: 013A01049000

X Owner's name(s): NHU BICH KHUU — Percentage of interest: 50

THAI-HOA NGOC KIEU — Percentage of interest: 50

We certify that the foregoing information is true and correct, this 14th day of October, 2023

NHU BICH KHUU
Property Owner- Printed

Signature of Property Owner

THAI-HOA NGOC KIEU
Property Owner- Printed

Signature of Property Owner

Sworn to and subscribed before me, this 14 th day of October, 2023

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Notary Public (Seal)

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Residential Declaration

In order to comply with the United States Department of Justice's procedures for the administration of Section 5 of the Voting Rights Act of 1965 as amended, Subpart B, Section 51.28, the following information is required for the deannexation of any residential properties. Must be completed for ALL residential properties (regardless of zoning designation). Use as many forms as needed.

Location/Address 510 PORTLOE CT. STOCKBRIDGE, GA 30281

Parcel ID Number 013A01049000

1. Total number of existing residential structures located on the subject parcel: 1 (one)

2. Description of the residential structures located on the subject property as listed above: Private home

3. Total number of person(s) residing within each structure: 4

4. Age, Sex, and Race of each of those individuals:
USE ADDITIONAL FORMS IF NEEDED

Age	Sex	Race
82	M	Asian
58	M	Asian
57	NK ~~M~~ F	Asian
31	M	Asian

5. Henry County Commission District: 2

6. City Council Voting District: 1

CERTIFICATION AND AUTHORIZATION

I hereby certify that, to the best of my knowledge and belief, the above listed information and all attached supporting documents are complete and accurate.

Applicant Signature _____ Date 10-14-2023

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Campaign Disclosure Form

Must be completed by ALL applicant(s), property owner(s), agent(s) and/or attorney(s). Use as many forms as needed.

CHECK ONE: ✓ **APPLICANT** _____ **PROPERTY OWNER** _____ **AGENT** _____ **ATTORNEY** _____ **OTHER**

Has the person described below made, within two (2) years immediately preceding the filing of this application campaign contributions aggregating $250 or more or made gifts having in the aggregate a value of $250 or more to a member of the Henry County Board of Commissioners who will consider the application?

Yes _____ **No** ✓

If **Yes**, the applicant/property owner/agent and/or attorney representing the applicant must file the following information with the Henry County Board of Commissioners within ten (10) days after this application is first filed:

Commissioner/Zoning Advisory Board Member Name	Dollar amount of Campaign Contribution	Description of Gift $250 or greater given to Board Member

We certify that the foregoing information is true and correct, this 14th day of October 2023

THAI-HOA NGOC KIEU

Applicant/Property Owner/Agent/Other Name - Printed

Signature of Applicant/Property Owner/Agent/Other

Sworn to and subscribed before me, this 14th day of October, 2023

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Notary Public (Seal) 10-14-23

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Campaign Disclosure Form

Must be completed by ALL applicant(s), property owner(s), agent(s) and/or attorney(s). Use as many forms as needed.

CHECK ONE: ✓ **APPLICANT** _____ **PROPERTY OWNER** _____ **AGENT** _____ **ATTORNEY** _____ **OTHER**

Has the person described below made, within two (2) years immediately preceding the filing of this application campaign contributions aggregating $250 or more or made gifts having in the aggregate a value of $250 or more to a member of the Henry County Board of Commissioners who will consider the application?

* **Yes** _____ **No** ✓

If **Yes**, the applicant/property owner/agent and/or attorney representing the applicant must file the following information with the Henry County Board of Commissioners within ten (10) days after this application is first filed:

*

Commissioner/Zoning Advisory Board Member Name	Dollar amount of Campaign Contribution	Description of Gift $250 or greater given to Board Member

We certify that the foregoing information is true and correct, this 14 th day of October, 2023.

NHU BICH KHUU

Applicant/Property Owner/Agent/Other Name - Printed

Signature of Applicant/Property Owner/Agent/Other

Sworn to and subscribed before me, this 14 th day of October, 2023.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY GEORGIA

Notary Public (Seal) 10-14-23

LETTER OF INTENT

Henry County Board of Commissioners:

As de-annexation requests are not subject to public hearing requirements, please consider this information in your decision for de-annexation of this Manderley property:

I understand that I have been given the opportunity to state reasons for requesting de-annexation and have decided not to make any statements.

Signature

NK
~~BH~~ NHU BICH KHUU

Printed Name

10-14-2023

Date

BK:18665 PG:99-99
Filed and Recorded
Nov-19-2021 03:07 PM
DOC# 2021 - 048949
Real Estate Transfer Tax
Paid: $ 310.00
0752021012980
SABRIYA HILL
CLERK OF SUPERIOR COURT
HENRY COUNTY, GA
Participant ID: 2190259263

When recorded, please return to:
Walther Law, LLC
5755 North Parkway Suite 202,
Alpharetta, Georgia 30022
File No. 21-1481
Parcel ID: 013A01049000

STATE OF GEORGIA
COUNTY OF FULTON

LIMITED WARRANTY DEED

THIS INDENTURE made the 19th day of November, 2021 between

Brian D. Jeshuran

hereinafter called " Grantor/s", and

Nhu Bich Khuu and Thai-Hoa Ngoc Kieu
As Joint Tenants with Right of Survivorship

hereinafter called "Grantee/s" (the words "Grantor/s" and "Grantee/s" to include their respective heirs, successors and assigns where the context requires or permits).

WITNESSETH: That Grantor/s, for and in consideration of TEN DOLLARS and other good and valuable considerations---($10.00)-----receipt of which is hereby acknowledged has/have granted, sold, transferred and conveyed, and by these presents does/do grant, sell, transfer and convey unto Grantee/s:

All that tract or parcel of land lying and being in Land Lot 9 and 8 of the 12th District of Henry County, Georgia, being Lot 19, Block A of Manderley, as shown on plat of Manderley, Unit 1, prepared by Robert Smith Mitchell, Registered Land Surveyor No. 1580, dated March 31, 1983, recorded in Plat Book 9, Page 269, Henry County records. The description of said property as contained on said plat is hereby incorporated herein and by reference made a part hereof. The above described property is conveyed subject to restrictive covenants as recorded in Deed Book 556, page 41, Deed Book 557, Page 198, Deed Book 1196 Page 298 and Deed Book 3299 Page 172, Henry County, Georgia records. Subject to all easements and restrictive covenants of record, if any.

510 Portloe Court, Stockbridge, GA 30281
013A01049000

This conveyance is made subject to all covenants, easements and restrictions of record.

TO HAVE AND TO HOLD, in fee simple. And Grantor/s will warrant and forever defend the right and title to said premises unto Grantee/s against the lawful claims of all persons claiming by, through or under Grantor, but not otherwise.

IN WITNESS WHEREOF, Grantor's/s' hand and seal have been hereunto affixed, the day and year first above written.

Signed, sealed and delivered
In the presence of:

WITNESS

NOTARY PUBLIC

Brian D. Jeshuran

JIMMY LEE PARKER
NOTARY PUBLIC
MY COMMISSION EXPIRES
AUGUST 2025
FULTON COUNTY, GEORGIA

Bk 19 Page 269

96-M-83

NOTE: This survey and plot subject to such Easements and/or Right-Of-Ways as may now exist. No investigation of the Records of Title by the undersigned.

Linear measurement made with Topcon E.D.M.
Angular measurement made with Topcon 10" Theodolite.

An angular error of 01" per angle was adjusted using Compass Rule.
Error of closure: 1 foot in 6159+ feet.

The owner of the land shown on this plat and whose name is subscribed there to, in person or through a duly Authorized Agent dedicates to the use of the Public forever all streets, Easements, and other Public Grounds shown.

Owner _____ Date _____

Agent _____ Date _____

NOTE: Property lines as shown on this plat were controlled as to distance and direction by physical evidence found and as shown (S.F.), conc R/W mon, fences and R/W on County Roads) and upon legal description furnished by Kaiper Corp. Distances and bearings on this plat do not agree exactly with legal description due to actual location of said physical evidence.

NOTE: R/W on Blackhall Road based upon conc R/W mon. found and iron stake found (S.F.) as shown hereon and also upon plat recorded in PB. 4, Page 271.

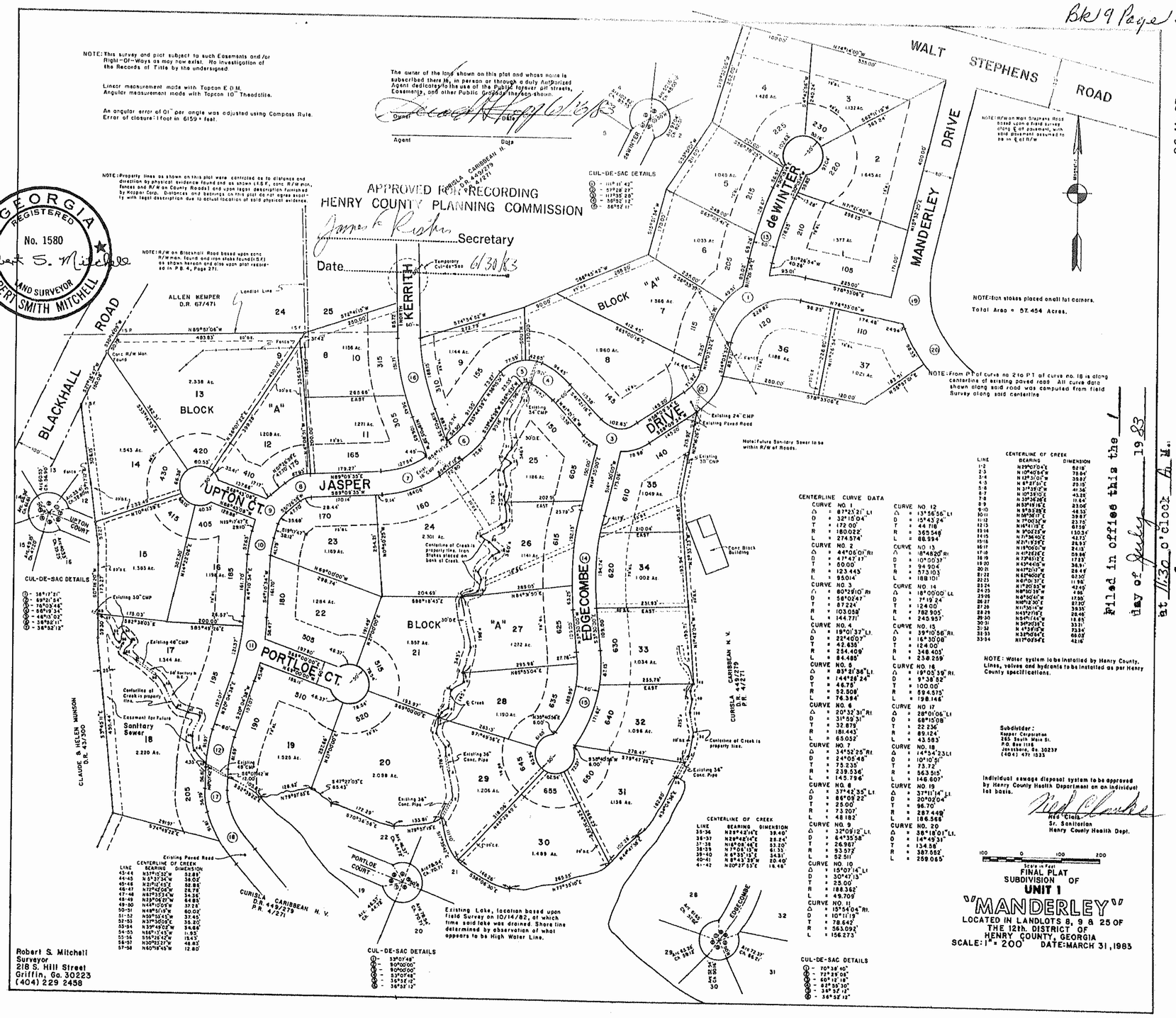
GEORGIA REGISTERED No. 1580 LAND SURVEYOR ROBERT SMITH MITCHELL

Robert S. Mitchell

APPROVED FOR RECORDING
HENRY COUNTY PLANNING COMMISSION

James L. Rushing Secretary

Date 6/30/83



CUL-DE-SAC DETAILS

- 1 - 119°11'42"
- 2 - 57°28'27"
- 3 - 113°35'20"
- 4 - 36°52'12"
- 5 - 56°52'11"

CUL-DE-SAC DETAILS

- 6 - 38°17'21"
- 7 - 59°21'54"
- 8 - 76°03'44"
- 9 - 56°16'34"
- 10 - 46°53'02"
- 11 - 38°52'11"
- 12 - 38°52'12"

CUL-DE-SAC DETAILS

- 13 - 33°07'48"
- 14 - 90°00'00"
- 15 - 90°00'00"
- 16 - 53°07'48"
- 17 - 36°52'12"
- 18 - 36°52'12"

CUL-DE-SAC DETAILS

- 19 - 70°38'40"
- 20 - 72°23'06"
- 21 - 60°12'18"
- 22 - 42°55'30"
- 23 - 36°52'12"
- 24 - 36°52'12"

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
1-2	N29°07'04"E	62.18'
2-3	N10°40'04"W	78.64'
3-4	N12°31'01"W	35.87'
4-5	N 4°27'01"E	23.15'
5-6	N37°35'17"W	41.38'
6-7	N10°33'01"E	43.28'
7-8	N39°36'08"E	17.64'
8-9	N53°16'16"E	23.06'
9-10	N 9°53'03"E	48.53'
10-11	N69°58'17"E	39.87'
11-12	N 7°00'37"W	23.75'
12-13	N16°41'15"E	61.59'
13-14	N 9°02'23"W	100.34'
14-15	N 7°36'50"E	42.73'
15-16	N17°39'07"E	24.93'
16-17	N19°00'01"W	24.13'
17-18	N41°22'42"E	09.88'
18-19	N23°51'21"E	17.33'
19-20	N33°41'09"W	36.31'
20-21	N41°52'07"W	28.49'
21-22	N42°00'01"E	02.30'
22-23	N07°01'37"E	11.90'
23-24	N17°20'23"W	42.49'
24-25	N8°50'38"W	4.66'
25-26	N41°00'41"W	17.55'
26-27	N08°12'30"E	27.70'
27-28	N11°30'14"W	39.38'
28-29	N43°27'16"E	28.46'
29-30	N51°16'14"W	12.81'
30-31	N47°01'13"E	33.31'
31-32	N 4°37'15"E	23.54'
32-33	N33°08'47"E	66.02'
33-34	N11°07'54"E	42.16'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
35-34	N83°43'16"E	39.40'
36-37	N26°48'16"E	23.24'
37-38	N16°08'46"E	53.20'
38-39	N7°05'13"W	61.33'
39-40	N 6°35'13"E	34.31'
40-41	N 8°43'35"W	20.40'
41-42	N20°27'53"E	18.48'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
43-44	N37°12'32"W	52.81'
44-45	N 5°37'34"W	38.02'
45-46	N23°12'45"E	52.82'
46-47	N72°42'06"W	26.78'
47-48	N63°23'54"W	34.36'
48-49	N39°06'27"W	64.85'
49-50	N44°02'01"W	37.23'
50-51	N49°53'19"W	60.02'
51-52	N59°50'43"W	37.45'
52-53	N37°30'09"E	35.20'
53-54	N39°40'02"W	34.66'
54-55	N66°13'43"W	11.93'
55-56	S56°25'42"W	18.43'
56-57	N30°52'27"W	48.83'
57-58	N60°18'45"W	12.80'

CENTERLINE CURVE DATA

CURVE NO. 1		CURVE NO. 12	
Δ	= 87°21'21" Lt	Δ	= 13°56'56" Lt
D	= 32°15'04"	D	= 15°43'24"
T	= 172.00'	T	= 44.716'
R	= 180.022'	R	= 365.548'
L	= 274.574'	L	= 88.994'
CURVE NO. 2		CURVE NO. 13	
Δ	= 44°06'01" Rt	Δ	= 18°46'20" Rt
D	= 47°47'17"	D	= 10°00'37"
T	= 50.00'	T	= 94.904'
R	= 123.445'	R	= 573.103'
L	= 95.014'	L	= 188.101'
CURVE NO. 3		CURVE NO. 14	
Δ	= 80°29'10" Rt	Δ	= 18°00'00" Lt
D	= 58°02'47"	D	= 7°19'24"
T	= 87.224'	T	= 124.00'
R	= 103.058'	R	= 782.905'
L	= 144.771'	L	= 245.957'
CURVE NO. 4		CURVE NO. 15	
Δ	= 19°01'37" Lt	Δ	= 39°10'56" Rt
D	= 22°40'07"	D	= 16°30'08"
T	= 42.635'	T	= 124.00'
R	= 254.409'	R	= 346.405'
L	= 84.485'	L	= 236.259'
CURVE NO. 5		CURVE NO. 16	
Δ	= 83°21'36" Lt	Δ	= 19°05'39" Rt
D	= 144°58'24"	D	= 9°38'52"
T	= 46.75'	T	= 100.00'
R	= 52.508'	R	= 594.575'
L	= 76.394'	L	= 198.146'
CURVE NO. 6		CURVE NO. 17	
Δ	= 20°32'31" Rt	Δ	= 28°01'06" Lt
D	= 31°59'31"	D	= 68°15'08"
T	= 32.879'	T	= 22.236'
R	= 181.443'	R	= 89.124'
L	= 65.052'	L	= 43.583'
CURVE NO. 7		CURVE NO. 18	
Δ	= 34°52'25" Rt	Δ	= 14°54'23" Lt
D	= 24°05'48"	D	= 10°10'31"
T	= 75.230'	T	= 73.72'
R	= 239.534'	R	= 563.515'
L	= 145.796'	L	= 146.607'
CURVE NO. 8		CURVE NO. 19	
Δ	= 37°42'35" Lt	Δ	= 37°11'14" Lt
D	= 86°08'22"	D	= 20°02'04"
T	= 25.00'	T	= 96.70'
R	= 73.207'	R	= 287.449'
L	= 48.182'	L	= 186.568'
CURVE NO. 9		CURVE NO. 20	
Δ	= 32°09'12" Lt	Δ	= 38°18'01" Lt
D	= 64°35'58"	D	= 14°49'31"
T	= 26.987'	T	= 134.88'
R	= 93.572'	R	= 387.552'
L	= 52.511'	L	= 259.065'
CURVE NO. 10			
Δ	= 15°07'14" Lt		
D	= 30°47'13"		
T	= 25.00'		
R	= 188.362'		
L	= 49.709'		
CURVE NO. 11			
Δ	= 15°54'04" Rt		
D	= 10°11'19"		
T	= 78.642'		
R	= 563.092'		
L	= 156.273'		

NOTE: Water system to be installed by Henry County. Lines, valves and hydrants to be installed as per Henry County specifications.

Subdivider:
Kaiper Corporation
265 South Main St.
P.O. Box 1118
Jonesboro, Ga. 30237
(404) 471-1533

Individual sewage disposal system to be approved by Henry County Health Department on an individual lot basis.

Hal Clark
Sr. Sanitarian
Henry County Health Dept.

Scale in Feet: 100 0 100 200

FINAL PLAT
SUBDIVISION OF
UNIT 1
"MANDERLEY"
LOCATED IN LANDLOTS 8, 9 & 25 OF
THE 12th. DISTRICT OF
HENRY COUNTY, GEORGIA
SCALE: 1" = 200' DATE: MARCH 31, 1983

Robert S. Mitchell
Surveyor
218 S. Hill Street
Griffin, Ga. 30223
(404) 229 2458

Filed in office this the 1 day of July 1983 at 11:30 o'clock A.M.

Dare E. Sanford
Clerk Superior Court

96-M-83

5 15 PORTROE ✓

Deannexation Application

HENRY COUNTY
Government

THANK YOU FOR YOUR INTEREST IN HENRY COUNTY, GEORGIA. THIS PACKET INCLUDES THE NECESSARY DOCUMENTS NEEDED FOR DEANNEXATION REQUESTS TO BE HEARD BY THE HENRY COUNTY BOARD OF COMMISSIONERS.

PLEASE NOTE: ALL FEES ARE NON-REFUNDABLE. THERE ARE NO EXCEPTIONS.

A PRE-APPLICATION MEETING IS ADVISED, BUT NOT REQUIRED, FOR DEANNEXATION REQUESTS. THE HENRY COUNTY PLANNING AND ZONING DEPARTMENT WILL ONLY CONDUCT PRE-APPLICATION MEETINGS ON TUESDAY, WEDNESDAY, AND THURSDAY OF EACH WEEK. PLEASE VISIT **HTTP://WWW.CO.HENRY.GA.US/DEPARTMENTS/M-R/PLANNING-ZONING** TO SCHEDULE A MEETING ONLINE.

NO PRE-APPLICATION MEETING WILL BE CONDUCTED WITHOUT AN APPOINTMENT.

SHOULD YOU NEED FURTHER ASSISTANCE, PLEASE FEEL FREE TO CONTACT OUR OFFICE BETWEEN 8:00 AM AND 5:00 PM, MONDAY THROUGH FRIDAY

AT (770) 288-7526.

THE LOCATION OF ALL COUNTY RELATED BOARD MEETINGS IS:

140 HENRY PARKWAY

MCDONOUGH, GEORGIA 30253

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

APPLICATION FOR DEANNEXATION

To the Board of Commissioners of Henry County, Georgia.

1. We, the undersigned, all of the owners of all real property of the territory described herein respectfully request that the Henry County Board of Commissioners accept the deannexation request of this territory from city boundaries, and extend the County services to include the same.

2. The territory to be deannexed is contiguous to existing unincorporated areas and complies with requirements established in *O.C.G.A Title 36, Chapter 36*. The description of such territory is attached hereto.

OWNER(S) NAME(S) CAREY REMO

VALERIE RESPRESS REMO

* PHONE NUMBER 404 814 1487 EMAIL ADDRESS Cremo38@Bellsouth.net

DEANNEXATION FROM ☐HAMPTON ☐LOCUST GROVE ☐MCDONOUGH ☑STOCKBRIDGE

LOCATION/ADDRESS 515 PORTLOE CT. STOCKBRIDGE GA 30281

LAND LOT/DISTRICT 8/12 ACERAGE 1.557

PARCEL ID NUMBER 013A01047000 ZONING DISTRICT(S) SR

ONE FORM PER PROPERTY. USE ADDITIONAL SHEETS IF REQUIRED.

SIGNATURE(S) DATE 10/7/2023

DATE 10/7/2023

ALL PROPERTY OWNERS MUST SIGN AS THEIR NAME APPEARS ON THE DEED. USE ADDITIONAL SHEETS IF REQUIRED.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

NOTARY SIGNATURE AND SEAL DATE 10-7-2023

(Office use only)

Pre-application meeting: Title: Date:

Application checked by: Kenta Lanham Title: Planner III Date: 5/22/2024

BOC Meeting Date: 06/11/2024 BOC Decision: Acceptance Date: 6/11/2024

Planning Director's Signature: Date: 6/13/24

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

OWNERSHIP VERIFICATION

The undersigned is the / an owner of an interest in the lands described in the attached deannexation application, which proposes to amend the Official Zoning Map of the deannexing municipal jurisdiction and of Henry County, Georgia, and concurs in the application. The undersigned's interest in the lands described in the application is as follows:

Location/Address: 515 PORTLOE CT. STOCKBRIDGE, GA 30281

Parcel ID Number: 013A01047000

Owner's name(s): CAREY REMO Percentage of interest: 50% *

VALERIE RESPRESS REMO Percentage of interest: 50%

We certify that the foregoing information is true and correct, this 7th day of October, 2023

Carey Remo
Property Owner- Printed

Signature of Property Owner

Valerie Respress Remo
Property Owner- Printed

Signature of Property Owner

Sworn to and subscribed before me, this 7 day of October, 2023.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Notary Public (Seal)

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Residential Declaration

In order to comply with the United States Department of Justice's procedures for the administration of Section 5 of the Voting Rights Act of 1965 as amended, Subpart B, Section 51.28, the following information is required for the deannexation of any residential properties. Must be completed for ALL residential properties (regardless of zoning designation). Use as many forms as needed.

Location/Address: 515 PORTLOE CT. STOCKBRIDGE, GA 30281

Parcel ID Number: 013A01047000

* 1. Total number of existing residential structures located on the subject parcel: One SFR

* 2. Description of the residential structures located on the subject property as listed above: Private Residence

* 3. Total number of person(s) residing within each structure: 2

* 4. Age, Sex, and Race of each of those individuals:
USE ADDITIONAL FORMS IF NEEDED

Age	Sex	Race
60	m	black
55	f	black

5. Henry County Commission District: 2

6. City Council Voting District: 1

CERTIFICATION AND AUTHORIZATION

I hereby certify that, to the best of my knowledge and belief, the above listed information and all attached supporting documents are complete and accurate.

Applicant Signature: [signature] Date: 10/3/2023

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Campaign Disclosure Form

Must be completed by ALL applicant(s), property owner(s), agent(s) and/or attorney(s). Use as many forms as needed.

* **CHECK ONE:** ✓ **APPLICANT** _____ **PROPERTY OWNER** _____ **AGENT** _____ **ATTORNEY** _____ **OTHER**

Has the person described below made, within two (2) years immediately preceding the filing of this application campaign contributions aggregating $250 or more or made gifts having in the aggregate a value of $250 or more to a member of the Henry County Board of Commissioners who will consider the application?

* **Yes** _____ **No** ✓

If **Yes**, the applicant/property owner/agent and/or attorney representing the applicant must file the following information with the Henry County Board of Commissioners within ten (10) days after this application is first filed:

Commissioner/Zoning Advisory Board Member Name	Dollar amount of Campaign Contribution	Description of Gift $250 or greater given to Board Member

We certify that the foregoing information is true and correct, this 7th day of October, 2023

Carey Rem

Applicant/Property Owner/Agent/Other Name - Printed

Signature of Applicant/Property Owner/Agent/Other

Sworn to and subscribed before me this 7 day of October, 2023.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2025
HENRY COUNTY, GEORGIA

Kathleen Watson

Notary Public (Seal)

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Campaign Disclosure Form

Must be completed by ALL applicant(s), property owner(s), agent(s) and/or attorney(s). Use as many forms as needed.

CHECK ONE: ✓ **APPLICANT** _____ **PROPERTY OWNER** _____ **AGENT** _____ **ATTORNEY** _____ **OTHER**

Has the person described below made, within two (2) years immediately preceding the filing of this application campaign contributions aggregating $250 or more or made gifts having in the aggregate a value of $250 or more to a member of the Henry County Board of Commissioners who will consider the application?

Yes _____ **No** ✓

If **Yes**, the applicant/property owner/agent and/or attorney representing the applicant must file the following information with the Henry County Board of Commissioners within ten (10) days after this application is first filed:

Commissioner/Zoning Advisory Board Member Name	Dollar amount of Campaign Contribution	Description of Gift $250 or greater given to Board Member

We certify that the foregoing information is true and correct, this 7th day of October, 2023

Valerie Respress Remo

Applicant/Property Owner/Agent/Other Name - Printed

Signature of Applicant/Property Owner/Agent/Other

Sworn to and subscribed before me, this 7 day of October, 2023.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Notary Public (Seal)

LETTER OF INTENT

Henry County Board of Commissioners:

As de-annexation requests are not subject to public hearing requirements, please consider this information in your decision for de-annexation of this Manderley property:

I understand that I have been given the opportunity to state reasons for requesting de-annexation and have decided not to make any statements.

Signature

Carey Remo

Printed Name

10/7/2023

Date

05604
00202

BOOK 5604 PAGE 202

DOC# 001733
FILED IN OFFICE
01/13/2003
04:19:07PM
BK:05604 PG:0202
JUDITH A. LEWIS
CLERK OF
SUPERIOR COURT
HENRY COUNTY, GA

REAL ESTATE TRANSFER TAX
HENRY COUNTY
SUPERIOR COURT

JAN 13 2003

PAID $ 0

CLERK OF SUPERIOR COURT

Return Recorded Document to:
GEORGIA CLOSING ASSOCIATES, INC.-MICHAEL C. OBERTONE, ESQ., P.C.
3815 Presidential Parkway, Suite 100
Atlanta, GA 30340

JOINT TENANCY WITH SURVIVORSHIP WARRANTY DEED

STATE OF GEORGIA,

COUNTY OF DEKALB

File #: **H02-1664**

This Indenture made this **11th** day of **December, 2002** between **CAREY REMO**, of the County of DEKALB, State of Georgia, as party or parties of the first part, hereinafter called Grantor, and **CAREY REMO and VALERIE RESPRESS REMO**, as joint tenants with survivorship and not as tenants in common as parties of the second part, hereinafter called Grantees (the words "Grantor" and "Grantees" to include their respective heirs, successors and assigns where the context requires or permits).

W I T N E S S E T H that: Grantor, for and in consideration of the sum of **TEN AND 00/100'S ($10.00) Dollars** and other good and valuable considerations in hand paid at and before the sealing and delivery of these presents, the receipts whereof is hereby acknowledged, has granted, bargained, sold, aliened, conveyed and confirmed, and by these presents does grant, bargain, sell, alien, convey and confirm unto the said Grantees, as joint tenants and not as tenants in common, for and during their joint lives, and upon the death of either of them, then to the survivor of them, in fee simple, together with every contingent remainder and right of reversion, and to the heirs and assigns of said survivor, the following described property:

ALL THAT TRACT OR PARCEL OF LAND LYING AND BEING IN LAND LOT 8 OF THE 12TH DISTRICT, HENRY COUNTY, GEORGIA, BEING LOT 21, BLOCK A, MANDERLEY SUBDIVISION, UNIT I, AS PER PLAT RECORDED IN PLAT BOOK 9, PAGE 269, HENRY COUNTY, GEORGIA RECORDS, WHICH PLAT IS INCORPORATED HEREIN BY REFERENCE AND MADE A PART OF THIS DESCRIPTION.

THIS CONVEYANCE is made subject to all zoning ordinances, easements and restrictions of record affecting said bargained premises.

TO HAVE AND TO HOLD the said tract or parcel of land, with all and singular the rights, members and appurtenances thereof, to the same being, belonging, or in anywise appertaining, to the only proper use, benefit and behoof of the said Grantees, as joint tenants and not as tenants in common, for and during their joint lives, and upon the death of either of them, then to the survivor of them in **FEE SIMPLE**, together with every contingent remainder and right of reversion, and to the heirs and assigns of said survivor.

THIS CONVEYANCE is made pursuant to Official Code of Georgia Section 44-6-190, and it is the intention of the parties hereto to hereby create in Grantees a joint tenancy estate with right of survivorship and not as tenants in common.

AND THE SAID Grantor will warrant and forever defend the right and title to the above described property unto the said Grantee against the claims of all persons whomsoever.

IN WITNESS WHEREOF, the Grantor has hereunto set grantor's hand and seal this day and year first above written.

Signed, sealed and delivered in the presence of:

Witness

Notary Public
My commission expires:

SHANNON M. STEPHENS
NOTARY
My Comm. Expires
May 3, 2005
PUBLIC
GWINNETT COUNTY, GEORGIA

_____(Seal)
CAREY REMO

_____(Seal)

Bk 19 Page 269

96-M-83

NOTE: This survey and plot subject to such Easements and/or Right-Of-Ways as may now exist. No investigation of the Records of Title by the undersigned.

Linear measurement made with Topcon E.D.M.
Angular measurement made with Topcon 10" Theodolite.

An angular error of 01" per angle was adjusted using Compass Rule.
Error of closure: 1 foot in 6159+ feet.

The owner of the land shown on this plat and whose name is subscribed there to, in person or through a duly Authorized Agent dedicates to the use of the Public forever all streets, Easements, and other Public Grounds shown.

Owner _____ Date _____

Agent _____ Date _____

NOTE: Property lines as shown on this plat were controlled as to distance and direction by physical evidence found and as shown (S.F.), conc R/W mon, fences and R/W on County Roads) and upon legal description furnished by Kaiper Corp. Distances and bearings on this plat do not agree exactly with legal description due to actual location of said physical evidence.

NOTE: R/W on Blackhall Road based upon conc R/W mon. found and iron stake found (S.F.) as shown hereon and also upon plat recorded in PB. 4, Page 271.

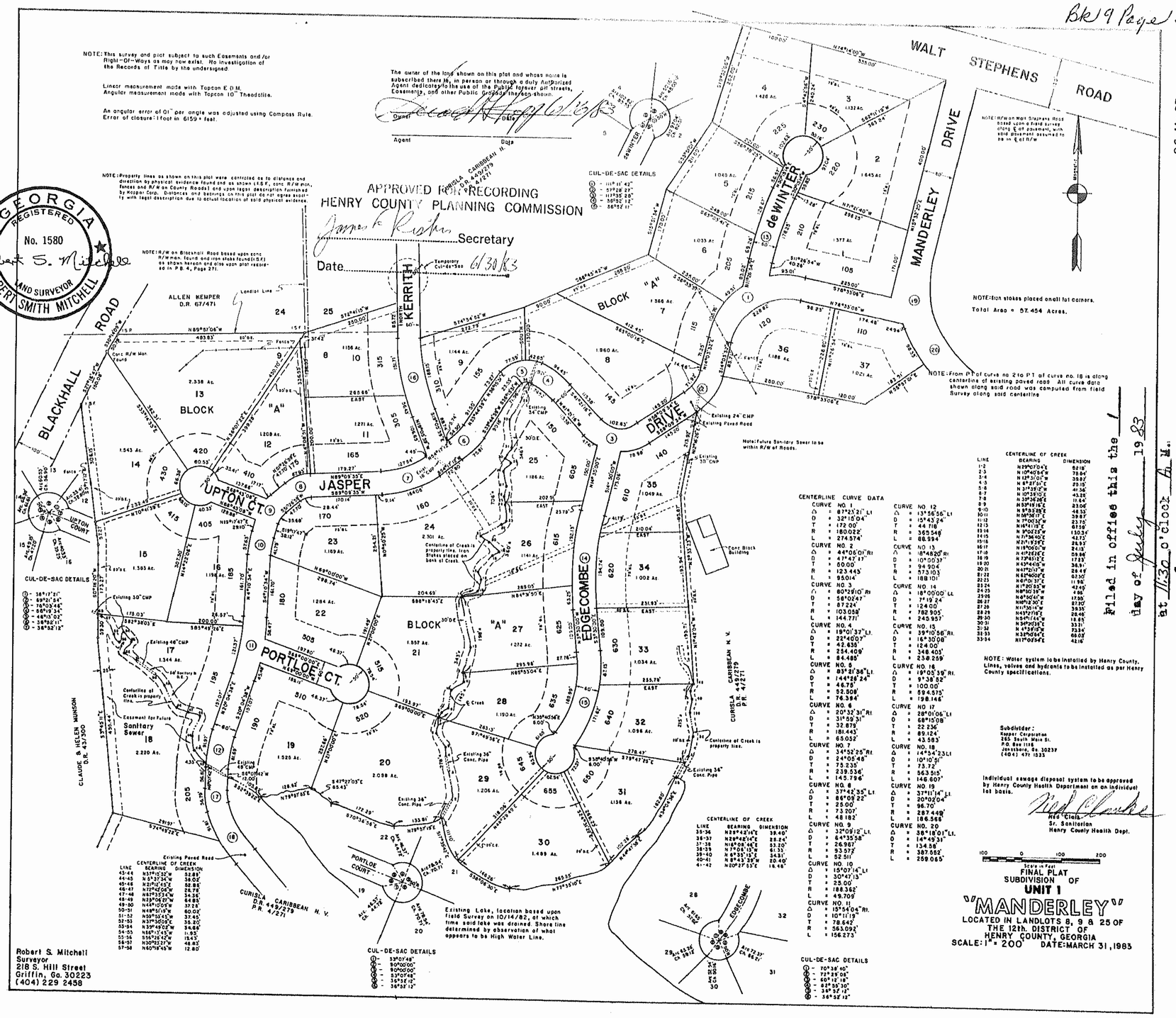
GEORGIA REGISTERED No. 1580 LAND SURVEYOR ROBERT SMITH MITCHELL

Robert S. Mitchell

APPROVED FOR RECORDING
HENRY COUNTY PLANNING COMMISSION

James L. Rushing Secretary

Date 6/30/83



CUL-DE-SAC DETAILS

- 1 - 119°11'42"
- 2 - 57°28'27"
- 3 - 113°35'20"
- 4 - 36°52'12"
- 5 - 56°52'11"

CUL-DE-SAC DETAILS

- 6 - 38°17'21"
- 7 - 59°21'54"
- 8 - 76°03'44"
- 9 - 56°16'34"
- 10 - 46°53'02"
- 11 - 38°52'11"
- 12 - 38°52'12"

CUL-DE-SAC DETAILS

- 13 - 33°07'48"
- 14 - 90°00'00"
- 15 - 90°00'00"
- 16 - 53°07'48"
- 17 - 36°52'12"
- 18 - 36°52'12"

CUL-DE-SAC DETAILS

- 19 - 70°38'40"
- 20 - 72°23'06"
- 21 - 60°12'18"
- 22 - 42°55'30"
- 23 - 36°52'12"
- 24 - 36°52'12"

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
1-2	N29°07'04"E	62.18'
2-3	N10°40'04"W	78.64'
3-4	N12°31'01"W	35.87'
4-5	N 4°27'01"E	23.15'
5-6	N37°35'17"W	41.38'
6-7	N10°33'01"E	43.28'
7-8	N39°36'08"E	17.64'
8-9	N53°16'16"E	23.06'
9-10	N 9°53'03"E	48.53'
10-11	N69°58'17"E	39.87'
11-12	N 7°00'37"W	23.75'
12-13	N16°41'15"E	61.59'
13-14	N 9°02'23"W	100.34'
14-15	N 7°36'50"E	42.73'
15-16	N17°39'07"E	24.93'
16-17	N19°00'01"W	24.13'
17-18	N41°22'42"E	09.88'
18-19	N23°51'21"E	17.33'
19-20	N33°41'09"W	36.31'
20-21	N41°52'07"W	28.49'
21-22	N42°00'01"E	02.30'
22-23	N07°01'37"E	11.90'
23-24	N17°20'23"W	42.49'
24-25	N8°50'38"W	4.66'
25-26	N41°00'41"W	17.55'
26-27	N08°12'30"E	27.70'
27-28	N11°30'14"W	39.38'
28-29	N43°27'16"E	28.46'
29-30	N51°16'14"W	12.81'
30-31	N47°01'13"E	33.31'
31-32	N 4°37'15"E	23.54'
32-33	N33°08'47"E	66.02'
33-34	N11°07'54"E	42.16'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
35-34	N83°43'16"E	39.40'
36-37	N26°48'16"E	23.24'
37-38	N16°08'46"E	53.20'
38-39	N7°05'13"W	61.33'
39-40	N 6°35'13"E	34.31'
40-41	N 8°43'35"W	20.40'
41-42	N20°27'53"E	18.48'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
43-44	N37°12'32"W	52.81'
44-45	N 5°37'34"W	38.02'
45-46	N23°12'45"E	52.82'
46-47	N72°42'06"W	26.78'
47-48	N63°23'54"W	34.36'
48-49	N39°06'27"W	64.85'
49-50	N44°02'01"W	37.23'
50-51	N49°53'19"W	60.02'
51-52	N59°50'43"W	37.45'
52-53	N37°30'09"E	35.20'
53-54	N39°40'02"W	34.66'
54-55	N66°13'43"W	11.93'
55-56	S56°25'42"W	18.43'
56-57	N30°52'27"W	48.83'
57-58	N60°18'45"W	12.80'

CENTERLINE CURVE DATA

CURVE NO. 1		CURVE NO. 12	
Δ	= 87°21'21" Lt	Δ	= 13°56'56" Lt
D	= 32°15'04"	D	= 15°43'24"
T	= 172.00'	T	= 44.716'
R	= 180.022'	R	= 365.548'
L	= 274.574'	L	= 88.994'
CURVE NO. 2		CURVE NO. 13	
Δ	= 44°06'01" Rt	Δ	= 18°46'20" Rt
D	= 47°47'17"	D	= 10°00'37"
T	= 50.00'	T	= 94.904'
R	= 123.445'	R	= 573.103'
L	= 95.014'	L	= 188.101'
CURVE NO. 3		CURVE NO. 14	
Δ	= 80°29'10" Rt	Δ	= 18°00'00" Lt
D	= 58°02'47"	D	= 7°19'24"
T	= 87.224'	T	= 124.00'
R	= 103.058'	R	= 782.905'
L	= 144.771'	L	= 245.957'
CURVE NO. 4		CURVE NO. 15	
Δ	= 19°01'37" Lt	Δ	= 39°10'56" Rt
D	= 22°40'07"	D	= 16°30'08"
T	= 42.635'	T	= 124.00'
R	= 254.409'	R	= 346.405'
L	= 84.485'	L	= 236.259'
CURVE NO. 5		CURVE NO. 16	
Δ	= 83°21'36" Lt	Δ	= 19°05'39" Rt
D	= 144°58'24"	D	= 9°38'52"
T	= 46.75'	T	= 100.00'
R	= 52.508'	R	= 594.575'
L	= 76.394'	L	= 198.146'
CURVE NO. 6		CURVE NO. 17	
Δ	= 20°32'31" Rt	Δ	= 28°01'06" Lt
D	= 31°59'31"	D	= 68°15'08"
T	= 32.879'	T	= 22.236'
R	= 181.443'	R	= 89.124'
L	= 65.052'	L	= 43.583'
CURVE NO. 7		CURVE NO. 18	
Δ	= 34°52'25" Rt	Δ	= 14°54'23" Lt
D	= 24°05'48"	D	= 10°10'31"
T	= 75.230'	T	= 73.72'
R	= 239.534'	R	= 563.515'
L	= 145.796'	L	= 146.607'
CURVE NO. 8		CURVE NO. 19	
Δ	= 37°42'35" Lt	Δ	= 37°11'14" Lt
D	= 86°08'22"	D	= 20°02'04"
T	= 25.00'	T	= 96.70'
R	= 73.207'	R	= 287.449'
L	= 48.182'	L	= 186.568'
CURVE NO. 9		CURVE NO. 20	
Δ	= 32°09'12" Lt	Δ	= 38°18'01" Lt
D	= 64°35'58"	D	= 14°49'31"
T	= 26.987'	T	= 134.88'
R	= 93.572'	R	= 387.552'
L	= 52.511'	L	= 259.065'
CURVE NO. 10			
Δ	= 15°07'14" Lt		
D	= 30°47'13"		
T	= 25.00'		
R	= 188.362'		
L	= 49.709'		
CURVE NO. 11			
Δ	= 15°54'04" Rt		
D	= 10°11'19"		
T	= 78.642'		
R	= 563.092'		
L	= 156.273'		

NOTE: Water system to be installed by Henry County. Lines, valves and hydrants to be installed as per Henry County specifications.

Subdivider:
Kaiper Corporation
265 South Main St.
P.O. Box 1118
Jonesboro, Ga. 30237
(404) 471-1533

Individual sewage disposal system to be approved by Henry County Health Department on an individual lot basis.

Hal Clark
Sr. Sanitarian
Henry County Health Dept.

Scale in Feet: 100 0 100 200

FINAL PLAT
SUBDIVISION OF
UNIT 1
"MANDERLEY"
LOCATED IN LANDLOTS 8, 9 & 25 OF
THE 12th. DISTRICT OF
HENRY COUNTY, GEORGIA
SCALE: 1" = 200' DATE: MARCH 31, 1983

Robert S. Mitchell
Surveyor
218 S. Hill Street
Griffin, Ga. 30223
(404) 229 2458

Filed in office this the 1 day of July 1983 at 11:30 o'clock A.M.

Dare E. Sanford
Clerk Superior Court

96-M-83

520 PORTLOE CT ✓

Deannexation Application

THANK YOU FOR YOUR INTEREST IN HENRY COUNTY, GEORGIA. THIS PACKET INCLUDES THE NECESSARY DOCUMENTS NEEDED FOR DEANNEXATION REQUESTS TO BE HEARD BY THE HENRY COUNTY BOARD OF COMMISSIONERS.

PLEASE NOTE: ALL FEES ARE NON-REFUNDABLE. THERE ARE NO EXCEPTIONS.

A PRE-APPLICATION MEETING IS ADVISED, BUT NOT REQUIRED, FOR DEANNEXATION REQUESTS. THE HENRY COUNTY PLANNING AND ZONING DEPARTMENT WILL ONLY CONDUCT PRE-APPLICATION MEETINGS ON TUESDAY, WEDNESDAY, AND THURSDAY OF EACH WEEK. PLEASE VISIT **HTTP://WWW.CO.HENRY.GA.US/DEPARTMENTS/M-R/PLANNING-ZONING** TO SCHEDULE A MEETING ONLINE.

NO PRE-APPLICATION MEETING WILL BE CONDUCTED WITHOUT AN APPOINTMENT.

SHOULD YOU NEED FURTHER ASSISTANCE, PLEASE FEEL FREE TO CONTACT OUR OFFICE BETWEEN 8:00 AM AND 5:00 PM, MONDAY THROUGH FRIDAY

AT (770) 288-7526.

THE LOCATION OF ALL COUNTY RELATED BOARD MEETINGS IS:

140 HENRY PARKWAY

MCDONOUGH, GEORGIA 30253

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

APPLICATION FOR DEANNEXATION

To the Board of Commissioners of Henry County, Georgia.

1. We, the undersigned, all of the owners of all real property of the territory described herein respectfully request that the Henry County Board of Commissioners accept the deannexation request of this territory from city boundaries, and extend the County services to include the same.

2. The territory to be deannexed is contiguous to existing unincorporated areas and complies with requirements established in *O.C.G.A Title 36, Chapter 36*. The description of such territory is attached hereto.

OWNER(S) NAME(S) FRANCISCO CHEVRES
JUDY PRITCHETT CHEVRES

* PHONE NUMBER 404-304-9300 EMAIL ADDRESS chevstock@comcast.net

DEANNEXATION FROM ☐HAMPTON ☐LOCUST GROVE ☐MCDONOUGH ☑STOCKBRIDGE

LOCATION/ADDRESS 520 PORTLOE CT. STOCKBRIDGE, GA. 30281

LAND LOT/DISTRICT 8/12 ACERAGE 2.09

PARCEL ID NUMBER 013A01048000 ZONING DISTRICT(S) SR

ONE FORM PER PROPERTY. USE ADDITIONAL SHEETS IF REQUIRED.

SIGNATURE(S) Judy Pritchett Chevres DATE 10-8/23
Francisco Chevres DATE 10-08-2023

ALL PROPERTY OWNERS MUST SIGN AS THEIR NAME APPEARS ON THE DEED. USE ADDITIONAL SHEETS IF REQUIRED.

Kathleen Watson 10-8-2023
NOTARY SIGNATURE AND SEAL

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY GEORGIA

(Office use only)

Pre-application meeting: Title: Date:

Application checked by: Kenta Lanham Title: Planner III Date: 5/22/2024

BOC Meeting Date: 06/11/2024 BOC Decision: Acceptance Date: 6/11/2024

Planning Director's Signature: Date: 6/11/24

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

OWNERSHIP VERIFICATION

The undersigned is the / an owner of an interest in the lands described in the attached deannexation application, which proposes to amend the Official Zoning Map of the deannexing municipal jurisdiction and of Henry County, Georgia, and concurs in the application. The undersigned's interest in the lands described in the application is as follows:

Location/Address: 520 PORTLOE CT. STOCKBRIDGE, GA 30281

Parcel ID Number: 013A01048000

* Owner's name(s): FRANCISCO CHEVRES — Percentage of interest: 50%

JUDY PRITCHETT CHEVRES — Percentage of interest: 50%

We certify that the foregoing information is true and correct, this 8th day of OCT. 2023.

Judy Pritchett Chevres
Property Owner- Printed

Judy Pritchett Chevres
Signature of Property Owner

Francisco Chevres
Property Owner- Printed

Francisco Chevres
Signature of Property Owner

Sworn to and subscribed before me, this 8 day of October, 2023.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Kathleen Watson
Notary Public (Seal)

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Residential Declaration

In order to comply with the United States Department of Justice's procedures for the administration of Section 5 of the Voting Rights Act of 1965 as amended, Subpart B, Section 51.28, the following information is required for the deannexation of any residential properties. Must be completed for ALL residential properties (regardless of zoning designation). Use as many forms as needed.

Location/Address 620 PORTLOE CT STOCKBRIDGE, GA 30281

Parcel ID Number 013A01048000

* 1. Total number of existing residential structures located on the subject parcel: (1)

* 2. Description of the residential structures located on the subject property as listed above: Private Residence

* 3. Total number of person(s) residing within each structure: 2

* 4. Age, Sex, and Race of each of those individuals:
USE ADDITIONAL FORMS IF NEEDED

Age	Sex	Race
87	M	C
77	F	C

5. Henry County Commission District: 2

6. City Council Voting District: 1

CERTIFICATION AND AUTHORIZATION

I hereby certify that, to the best of my knowledge and belief, the above listed information and all attached supporting documents are complete and accurate.

Applicant Signature Judy Pritchett Chewes Date Oct ~~8~~ 9, 2023

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Campaign Disclosure Form

Must be completed by ALL applicant(s), property owner(s), agent(s) and/or attorney(s). Use as many forms as needed.

CHECK ONE: ✓ **APPLICANT** _____ **PROPERTY OWNER** _____ **AGENT** _____ **ATTORNEY** _____ **OTHER**

Has the person described below made, within two (2) years immediately preceding the filing of this application campaign contributions aggregating $250 or more or made gifts having in the aggregate a value of $250 or more to a member of the Henry County Board of Commissioners who will consider the application?

Yes _____ **No** ✓

If **Yes**, the applicant/property owner/agent and/or attorney representing the applicant must file the following information with the Henry County Board of Commissioners within ten (10) days after this application is first filed:

Commissioner/Zoning Advisory Board Member Name	Dollar amount of Campaign Contribution	Description of Gift $250 or greater given to Board Member

We certify that the foregoing information is true and correct, this 8th day of Oct 2023, _____

Judy Pritchett Chevres

Applicant/Property Owner/Agent/Other Name - Printed

Judy Pritchett Chevres

Signature of Applicant/Property Owner/Agent/Other

Sworn to and subscribed before me, this 8 day of October, 2023.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Kathleen Watson

Notary Public (Seal)

HENRY COUNTY
DEPARTMENT OF PLANNING & ZONING

Campaign Disclosure Form

Must be completed by ALL applicant(s), property owner(s), agent(s) and/or attorney(s). Use as many forms as needed.

CHECK ONE: ✓ **APPLICANT** ____ **PROPERTY OWNER** ____ **AGENT** ____ **ATTORNEY** ____ **OTHER**

Has the person described below made, within two (2) years immediately preceding the filing of this application campaign contributions aggregating $250 or more or made gifts having in the aggregate a value of $250 or more to a member of the Henry County Board of Commissioners who will consider the application?

Yes ____ **No** ✓

If **Yes**, the applicant/property owner/agent and/or attorney representing the applicant must file the following information with the Henry County Board of Commissioners within ten (10) days after this application is first filed:

Commissioner/Zoning Advisory Board Member Name	Dollar amount of Campaign Contribution	Description of Gift $250 or greater given to Board Member

We certify that the foregoing information is true and correct, this 8th day of Oct 2023

Francisco Chevres

Applicant/Property Owner/Agent/Other Name - Printed

Francisco Chevres

Signature of Applicant/Property Owner/Agent/Other

Sworn to and subscribed before me, this 8 day of October 2023.

KATHLEEN WATSON
My Commission Expires
NOTARY PUBLIC
June 29 2026
HENRY COUNTY, GEORGIA

Kathle Wat

Notary Public (Seal)

LETTER OF INTENT

Henry County Board of Commissioners:

As de-annexation requests are not subject to public hearing requirements, please consider this information in your decision for de-annexation of this Manderley property:

De-annexation reason # 1: **Trust**

On 5-24-2018, the Stockbridge Director of Community Development Services met with Manderley property owners and asked for our support to defeat the referendum for the creation of the City of Eagles Landing. She stated that Stockbridge believed Manderley would be better off to stay unincorporated because we weren't a good fit for the City of Eagles Landing, and added that we weren't a good fit for the City of Stockbridge either. She went on to reassure us that they would not attempt to annex us in the future. **Stockbridge broke their promise when they annexed Manderley.**

De-annexation reason # 2: **Services**

On 9-29-2022, Stockbridge Representatives held another meeting with homeowners in our area, and the Director of Public Works was asked if he could guarantee that Stockbridge would provide the same DOT services that Henry County was providing us. His answer was "no". When we inquired if Stockbridge even owns the equipment needed for these projects, the answer was again, "no". **Stockbridge has been unable to commit to the same level of service that Henry County provides.**

De-annexation reason #3: **Taxation without representation**

On 11-8-2022, Manderley's voting district voted against annexation. The financial instability of Stockbridge is a major problem, and they are in desperate need of a cash infusion to offset budget shortfalls created before we were annexed. **It is wrongheaded for a city that we did not vote to be in, to annex us anyway and then tax us for millions of dollars of mistakes made by city officials that we did not elect.**

Judy Pritchett Chevres
Signature

Judy Pritchett Chevres
Printed Name

Oct 8, 2023
Date

RECEIVED IN OFFICE
HENRY COUNTY
CLERK OF SUPERIOR COURT

2018 JUN 25 PM 1:26

BK: 15920 PG: 257-259
Filed and Recorded
Jun-26-2018 10:01:37AM
DOC#: D2018-016578
Real Estate Transfer Tax $0.00
0752018005111
BARBARA A. HARRISON
CLERK OF SUPERIOR COURT Henry County GA.

STATE OF GEORGIA

COUNTY OF FULTON

LIMITED WARRANTY DEED

A. Kel Long, III
Hendrick, Rascoe, Zitron & Long
The Forum, Suite 925
3290 Northside Parkway
Atlanta, Georgia 30327
TITLE NOT EXAMINED

ENV

THIS INDENTURE is made and entered into this 20 day of June, 2018, by and between FRANK CHEVRES and JUDY CHEVRES, as joint tenants with full survivorship and not merely as tenants in common, herein referred to as "Grantor", and FRANCISCO CHEVRES and JUDY PRITCHETT CHEVRES, Co-Trustees of THE REVOCABLE LIVING TRUST OF FRANCISCO CHEVRES and JUDY PRITCHETT CHEVRES u/a/d JUNE 20, 2018, herein referred to as "Grantee". The words "Grantor" and "Grantee" to include their respective heirs, legal and personal representatives, successors and assigns.

W I T N E S S E T H :

FOR AND IN CONSIDERATION of the sum of Ten ($10.00) Dollars in hand paid to Grantor by Grantee at and before the execution, sealing and delivery hereof, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Grantor has bargained, sold, aliened, conveyed and confirmed, and by these presents does grant, bargain, sell, alien, convey and confirm unto Grantee, and the heirs, legal representatives, successors and assigns of Grantee, ALL THAT TRACT or parcel of land lying and being in **Land Lot 8, Henry County, Georgia**, and being more particularly described on Exhibit "A" attached hereto and by this reference incorporated herein by reference.

TO HAVE AND TO HOLD said tract or parcel of land, with all and singular the rights, members and appurtenances thereof, to the same being, belonging or in anywise appertaining, to the only proper use, benefit and behoof of Grantee forever, in **FEE SIMPLE**; subject to (i) any and all matters that would be disclosed by a current and accurate examination of the county deed records, and (ii) any and all matters that would be disclosed by an accurate and up-to-date survey of subject property.

+2

Grantor, for itself, its successors, legal representatives and assigns, does warrant and will forever defend the right and title to said tract or parcel of land unto Grantee, and the heirs, legal representatives, successors and assigns of Grantee, against the claims of all persons claiming by, through or under Grantor, but not otherwise.

IN WITNESS WHEREOF, Grantor has signed, sealed and delivered this limited warranty deed the day and year first above written.

Signed, sealed and delivered this 20th day of June, 2018, in the presence of:

Witness

Notary Public (AFFIX SEAL)

My commission expires: April 8, 2022

GRANTOR:

_____(SEAL)
FRANK CHEVRES

_____(SEAL)
JUDY CHEVRES

CRYSTAL A AMBROSI
MY COMMISSION EXPIRES
NOTARY
PUBLIC
APRIL 8, 2022
FULTON COUNTY, GEORGIA

BK: 15920 PG: 258

EXHIBIT "A"

PARCEL ID NUMBER: 013A01048000

ALL THAT tract or parcel of land lying and being in Land Lot 8 of the 12th District, Henry County, Georgia, being Lot 20, Block A, Manderly, Unit 1, as per plat recorded at Plat Book 9, Page 269, Henry County Records, to which reference is made for the purpose of incorporating the same as a part herein.

This being the same property conveyed by Warranty Deed to Frank Chevres and Judy Chevres, as joint tenants with full survivorship and not merely as tenants in common, from Frank Chevres and Judy Chevres dated August 30th, 1990, and recorded in Deed Book 1215, Page 182, of the Henry County, Georgia records.

This deed is executed subject to easements and restrictions of record.

BK: 15920 PG: 259

Bk 19 Page 269

96-M-83

NOTE: This survey and plot subject to such Easements and/or Right-Of-Ways as may now exist. No investigation of the Records of Title by the undersigned.

Linear measurement made with Topcon E.D.M.
Angular measurement made with Topcon 10" Theodolite.

An angular error of 01" per angle was adjusted using Compass Rule.
Error of closure: 1 foot in 6159+ feet.

The owner of the land shown on this plat and whose name is subscribed there to, in person or through a duly Authorized Agent dedicates to the use of the Public forever all streets, Easements, and other Public Grounds shown.

Owner _____ Date _____

Agent _____ Date _____

NOTE: Property lines as shown on this plat were controlled as to distance and direction by physical evidence found and as shown (S.F.), conc R/W mon, fences and R/W on County Roads) and upon legal description furnished by Kaiper Corp. Distances and bearings on this plat do not agree exactly with legal description due to actual location of said physical evidence.

NOTE: R/W on Blackhall Road based upon conc R/W mon. found and iron stake found (S.F.) as shown hereon and also upon plat recorded in PB. 4, Page 271.

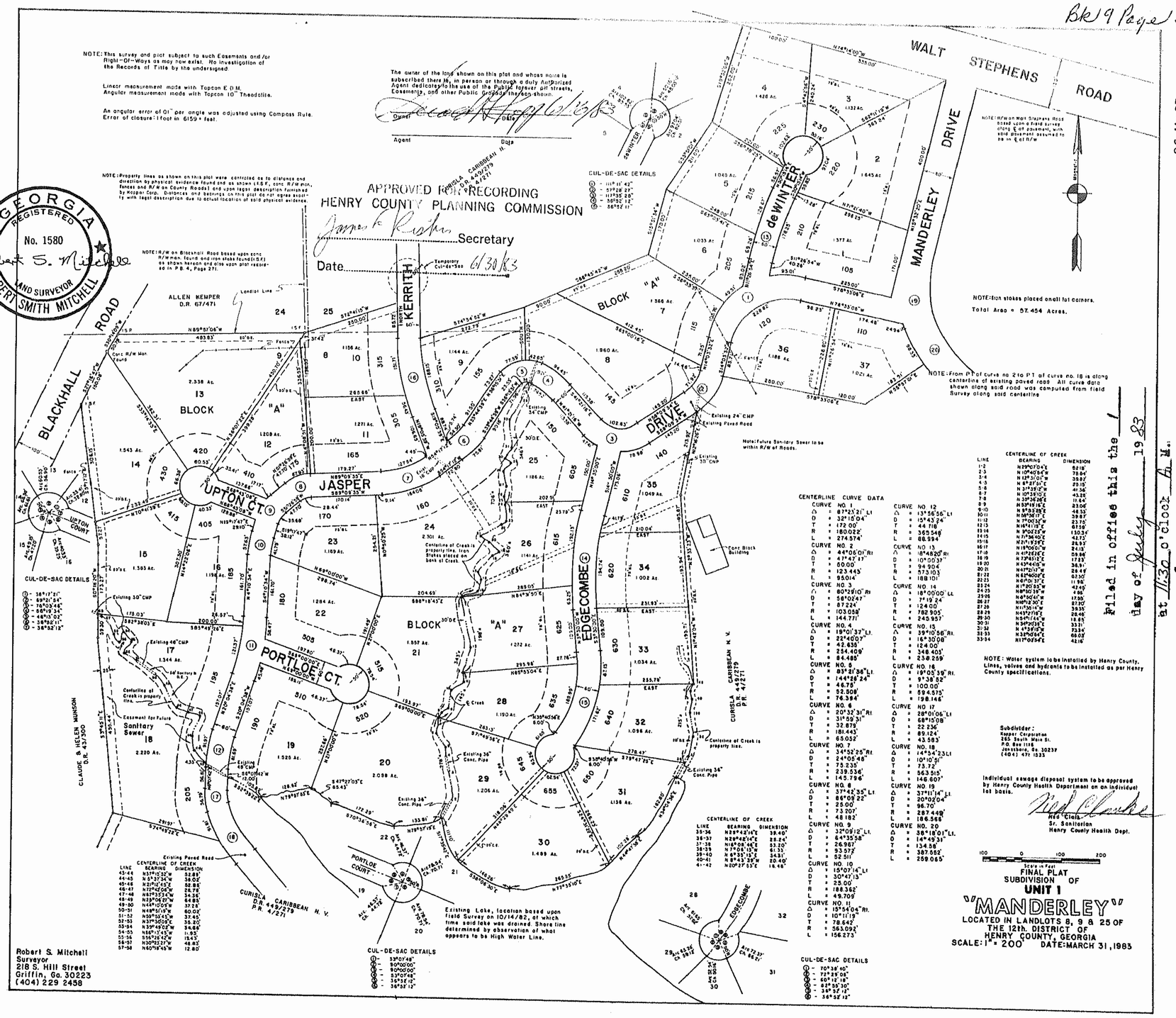
GEORGIA REGISTERED No. 1580 LAND SURVEYOR ROBERT SMITH MITCHELL

Robert S. Mitchell

APPROVED FOR RECORDING
HENRY COUNTY PLANNING COMMISSION

James L. Rushing Secretary

Date 6/30/83



CUL-DE-SAC DETAILS

- 1 - 119°11'42"
- 2 - 57°28'27"
- 3 - 113°35'20"
- 4 - 36°52'12"
- 5 - 56°52'11"

CUL-DE-SAC DETAILS

- 6 - 38°17'21"
- 7 - 59°21'54"
- 8 - 76°03'44"
- 9 - 56°16'34"
- 10 - 46°53'02"
- 11 - 38°52'11"
- 12 - 38°52'12"

CUL-DE-SAC DETAILS

- 13 - 33°07'48"
- 14 - 90°00'00"
- 15 - 90°00'00"
- 16 - 53°07'48"
- 17 - 36°52'12"
- 18 - 36°52'12"

CUL-DE-SAC DETAILS

- 19 - 70°38'40"
- 20 - 72°23'06"
- 21 - 60°12'18"
- 22 - 42°55'30"
- 23 - 36°52'12"
- 24 - 36°52'12"

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
1-2	N29°07'04"E	62.18'
2-3	N10°40'04"W	78.64'
3-4	N12°31'01"W	35.87'
4-5	N 4°27'01"E	23.15'
5-6	N37°35'17"W	41.38'
6-7	N10°33'01"E	43.28'
7-8	N39°36'08"E	17.64'
8-9	N53°16'16"E	23.06'
9-10	N 9°53'03"E	48.53'
10-11	N69°58'17"E	39.87'
11-12	N 7°00'37"W	23.75'
12-13	N16°41'15"E	61.59'
13-14	N 9°02'23"W	100.34'
14-15	N 7°36'50"E	42.73'
15-16	N17°39'07"E	24.93'
16-17	N19°00'01"W	24.13'
17-18	N41°22'42"E	09.88'
18-19	N23°51'21"E	17.33'
19-20	N33°41'09"W	36.31'
20-21	N41°52'07"W	28.49'
21-22	N42°00'01"E	02.30'
22-23	N07°01'37"E	11.90'
23-24	N17°20'23"W	42.49'
24-25	N8°50'38"W	4.66'
25-26	N41°00'41"W	17.55'
26-27	N08°12'30"E	27.70'
27-28	N11°30'14"W	39.38'
28-29	N43°27'16"E	28.46'
29-30	N51°16'14"W	12.81'
30-31	N47°01'13"E	33.31'
31-32	N 4°37'15"E	23.54'
32-33	N33°08'47"E	66.02'
33-34	N11°07'54"E	42.16'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
35-34	N83°43'16"E	39.40'
36-37	N26°48'16"E	23.24'
37-38	N16°08'46"E	53.20'
38-39	N7°05'13"W	61.33'
39-40	N 6°35'13"E	34.31'
40-41	N 8°43'35"W	20.40'
41-42	N20°27'53"E	18.48'

CENTERLINE OF CREEK

LINE	BEARING	DIMENSION
43-44	N37°12'32"W	52.81'
44-45	N 5°37'34"W	38.02'
45-46	N23°12'45"E	52.82'
46-47	N72°42'06"W	26.78'
47-48	N63°23'54"W	34.36'
48-49	N39°06'27"W	64.85'
49-50	N44°02'01"W	37.23'
50-51	N49°53'19"W	60.02'
51-52	N59°50'43"W	37.45'
52-53	N37°30'09"E	35.20'
53-54	N39°40'02"W	34.66'
54-55	N66°13'43"W	11.93'
55-56	S56°25'42"W	18.43'
56-57	N30°52'27"W	48.83'
57-58	N60°18'45"W	12.80'

CENTERLINE CURVE DATA

CURVE NO. 1		CURVE NO. 12	
Δ	= 87°21'21" Lt	Δ	= 13°56'56" Lt
D	= 32°15'04"	D	= 15°43'24"
T	= 172.00'	T	= 44.716'
R	= 180.022'	R	= 365.548'
L	= 274.574'	L	= 88.994'
CURVE NO. 2		CURVE NO. 13	
Δ	= 44°06'01" Rt	Δ	= 18°46'20" Rt
D	= 47°47'17"	D	= 10°00'37"
T	= 50.00'	T	= 94.904'
R	= 123.445'	R	= 573.103'
L	= 95.014'	L	= 188.101'
CURVE NO. 3		CURVE NO. 14	
Δ	= 80°29'10" Rt	Δ	= 18°00'00" Lt
D	= 58°02'47"	D	= 7°19'24"
T	= 87.224'	T	= 124.00'
R	= 103.058'	R	= 782.905'
L	= 144.771'	L	= 245.957'
CURVE NO. 4		CURVE NO. 15	
Δ	= 19°01'37" Lt	Δ	= 39°10'56" Rt
D	= 22°40'07"	D	= 16°30'08"
T	= 42.635'	T	= 124.00'
R	= 254.409'	R	= 346.405'
L	= 84.485'	L	= 236.259'
CURVE NO. 5		CURVE NO. 16	
Δ	= 83°21'36" Lt	Δ	= 19°05'39" Rt
D	= 144°58'24"	D	= 9°38'52"
T	= 46.75'	T	= 100.00'
R	= 52.508'	R	= 594.575'
L	= 76.394'	L	= 198.146'
CURVE NO. 6		CURVE NO. 17	
Δ	= 20°32'31" Rt	Δ	= 28°01'06" Lt
D	= 31°59'31"	D	= 68°15'08"
T	= 32.879'	T	= 22.236'
R	= 181.443'	R	= 89.124'
L	= 65.052'	L	= 43.583'
CURVE NO. 7		CURVE NO. 18	
Δ	= 34°52'25" Rt	Δ	= 14°54'23" Lt
D	= 24°05'48"	D	= 10°10'31"
T	= 75.230'	T	= 73.72'
R	= 239.534'	R	= 563.515'
L	= 145.796'	L	= 146.607'
CURVE NO. 8		CURVE NO. 19	
Δ	= 37°42'35" Lt	Δ	= 37°11'14" Lt
D	= 86°08'22"	D	= 20°02'04"
T	= 25.00'	T	= 96.70'
R	= 73.207'	R	= 287.449'
L	= 48.182'	L	= 186.568'
CURVE NO. 9		CURVE NO. 20	
Δ	= 32°09'12" Lt	Δ	= 38°18'01" Lt
D	= 64°35'58"	D	= 14°49'31"
T	= 26.987'	T	= 134.88'
R	= 93.572'	R	= 387.552'
L	= 52.511'	L	= 259.065'
CURVE NO. 10			
Δ	= 15°07'14" Lt		
D	= 30°47'13"		
T	= 25.00'		
R	= 188.362'		
L	= 49.709'		
CURVE NO. 11			
Δ	= 15°54'04" Rt		
D	= 10°11'19"		
T	= 78.642'		
R	= 563.092'		
L	= 156.273'		

NOTE: Water system to be installed by Henry County. Lines, valves and hydrants to be installed as per Henry County specifications.

Subdivider:
Kaiper Corporation
265 South Main St.
P.O. Box 1118
Jonesboro, Ga. 30237
(404) 471-1533

Individual sewage disposal system to be approved by Henry County Health Department on an individual lot basis.

Hal Clark
Sr. Sanitarian
Henry County Health Dept.

Scale in Feet: 100 0 100 200

FINAL PLAT
SUBDIVISION OF
UNIT 1
"MANDERLEY"
LOCATED IN LANDLOTS 8, 9 & 25 OF
THE 12th. DISTRICT OF
HENRY COUNTY, GEORGIA
SCALE: 1" = 200' DATE: MARCH 31, 1983

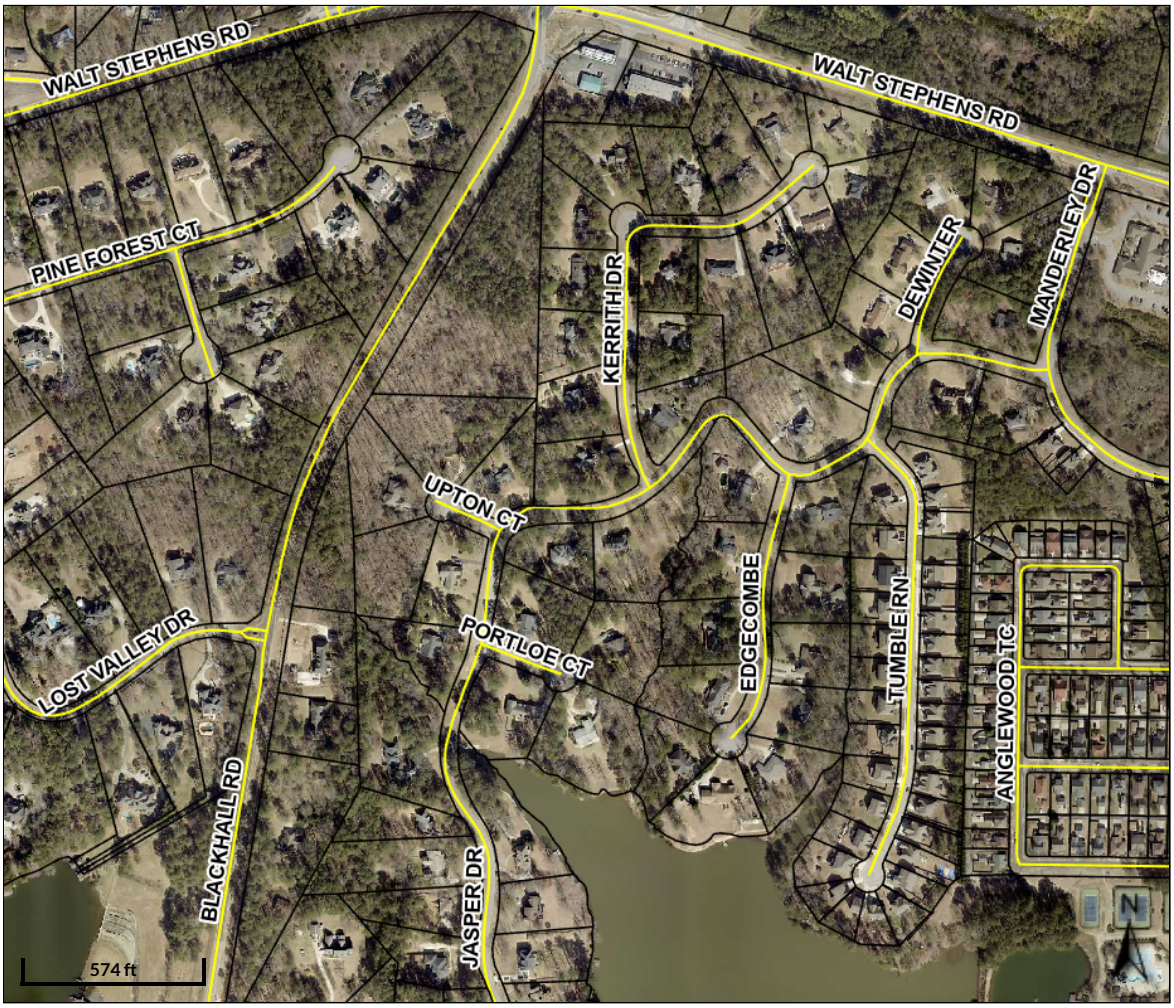
Robert S. Mitchell
Surveyor
218 S. Hill Street
Griffin, Ga. 30223
(404) 229 2458

Filed in office this the 1 day of July 1983 at 11:30 o'clock A.M.

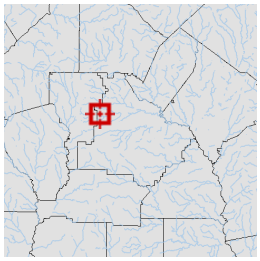
Dare E. Sanford
Clerk Superior Court

96-M-83

Henry County, GA



Overview



Legend

- Parcels
- Roads

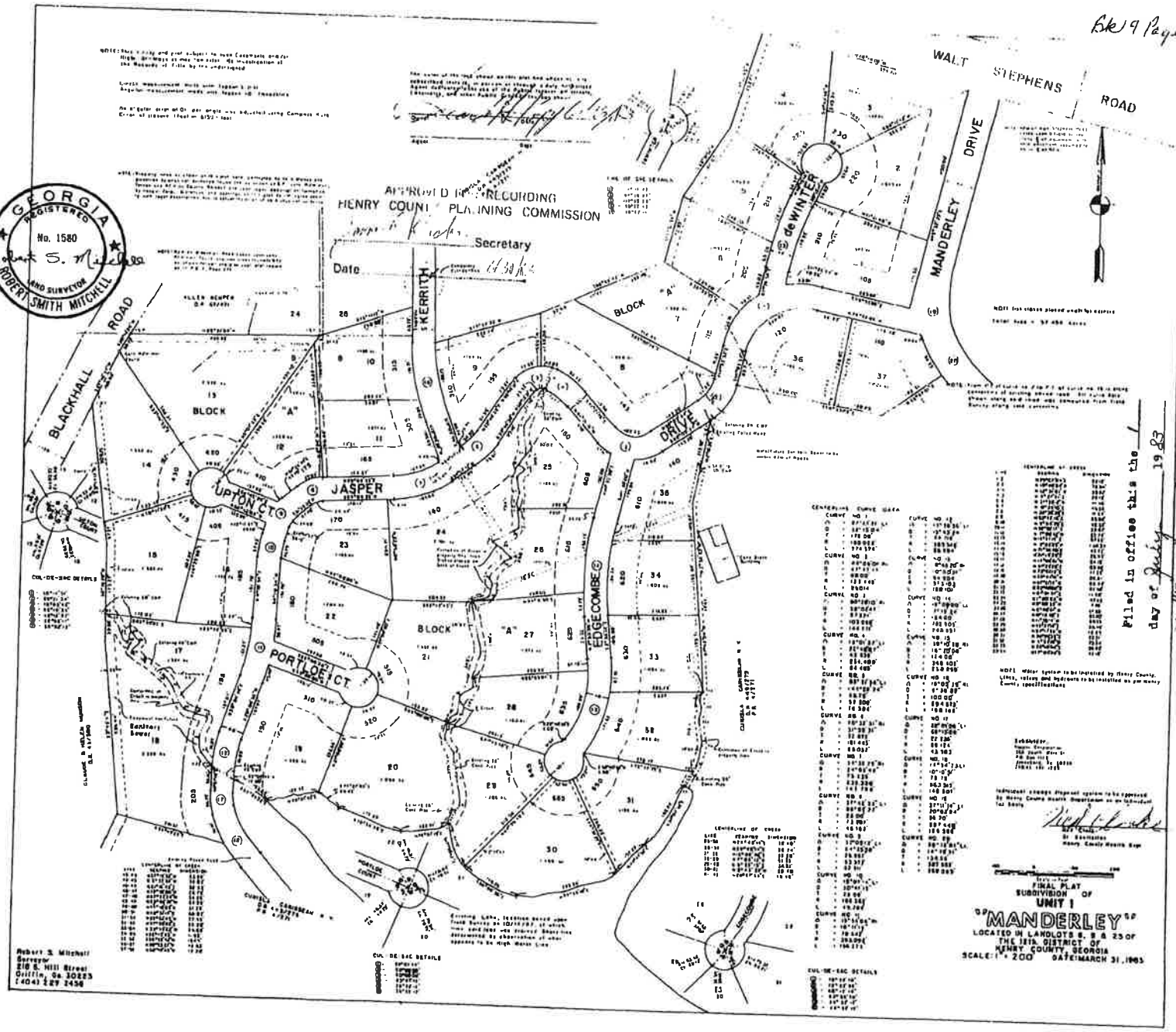
Parcel ID	S26-04009000	**Class**	C	**Owner**	DUBBS CHARLES L JR	**Land**	$151,500				
Property	108 SOUTH LEE	**Acreage**	3.03	**Address**	& LYNDA A	**Value:**					
Address	ST				560 PINEHURST DR	**Building**	$583,300	**Last 2 Sales**			
District	City/Stockbridge				STOCKBRIDGE GA	**Value:**		**Date**	**Price**	**Reason**	**Qual**
					30281	**Misc**	$4,400	9/6/1995	$147,000	n/a	Q
						Value:		9/6/1995	$0	FAMLY/GIFT	U
						Total	$739,200				
						Value:					

Parcel lines depicted on the maps do not reflect a true and exact representation of property boundaries and should not be relied upon for said purpose. Property boundary lines are depicted on recorded plats available at the Henry County Courthouse or can be determined by employing the services of a licensed surveyor.

Date created: 7/8/2024
Last Data Uploaded: 7/8/2024 1:48:26 AM

Developed by Schneider GEOSPATIAL

Bk 9 Page 269



96-M-83

96-M-83

Stockbridge
Where Community Connects

TO: Mayor and City Council

FROM: Linda M. Logan, Senior Planner

CC: Frederick Gardiner, City Manager; Valerie Ross, City Zoning Attorney; Ryan Anderson, Community Development Director; Keedra Jackson, Chief Planner

DATE: July 30, 2024

SUBJECT: **De-Annexation Case #DX-2024-02 (Phase 2):**
Nine Properties in the Manderley Subdivision

Introduction. The City of Stockbridge has received a request to de-annex nine (9) properties within the Manderley Subdivision to the jurisdiction of Henry County. The Manderley Subdivision is located at the western edge of the Stockbridge City Limits, bounded by Walt Stephens Road to the north and Blackall Road to the west. The nine properties have 13 +/- total acres, and they comprise residential lots in the western portion of the subdivision. Table 1 below provides a list of the nine properties by address, parcel number, acreage, and owner/applicant.

DX-2024-02 represents Phase 2 of the Manderley Subdivision de-annexation. The subject properties are located in the western portion of the subdivision, totaling 13 +/- acres of land. Maps and aerial photographs are presented in the Appendix of this Memorandum, and they show the location of the proposed Phase 2 de-annexation area. The resulting new City Limits Map shows how the City Boundary would appear after the approval of the Phase 2 de-annexation. On April 30, 2024, DX-2024-01 was approved by the Stockbridge City Council to allow ten (10) properties, representing Phase 1 of the Manderley Subdivision, to be de-annexed from the Stockbridge City Limits. The Phase 1 de-annexation is located south of the proposed Phase 2 de-annexation.

Table 1—Properties for Proposed De-Annexation (Phase 2)

Property Address	Parcel Number	Number Of Acres (+/-)	Property Owner(s) / Co-Applicant (s)
160 Jasper Drive	013A01023000	2.301	Mark Covino and Jennifer Marie Covino
165 Jasper Drive	013A01024000	1.271	Steve C. Bullard
195 Jasper Drive	013A01050000	1.344	Janet Fiore Drosky
310 Kerrith Drive	013A01039000	1.144	Vanessa Martinez
320 Kerrith Drive	013A01038000	1.050	Linda Pearson Northington
325 Kerrith Drive	013A01025000	1.050	Zr Chao Zhu
510 Portloe Court	013A01049000	1.526	Hnu Bich Khuu and Thai-Hoa Ngoc Kieu
515 Portloe Court	013A01047000	1.557	Carey Remo and Valerie Respress Remo
520 Portloe Court	013A01048000	2.090	Francisco Cevres and Judy Pritchett Chevres (Co-trustees of a revocable living trust)
		13.000 +/- Total Acres*	

***** The individual parcel acreages in Table 1 above were provided on each individual property owner's handwritten de-annexation application comprising the DX-2024-02 package, and the same acreages also appear on the officially-recorded final plat for the Manderley Subdivision, Unit I. The total of 13.000 +/- acres above is derived from a summation of these individual acreages. Henry County, though, reports the total acreage as being 13.366 +/- acres.

Henry County Government's Actions. According to Henry County's Deannexation Evaluation Report #DE-AX-24-02, which was prepared by the Henry County Department of Planning & Zoning, Henry County Government received a combined de-annexation application from the nine applicants electronically on May 22, 2024. The applicants used the 100% method for the proposed de-annexation. The Department then prepared a Deannexation Evaluation Report for Henry County's Case #DE-AX-24-02, whose recommendation was that "the deannexation would not be detrimental to the health, safety, and welfare of the residents and property owners of the area to be deannexed or to the area remaining within the City of Stockbridge." It stated that the subject property was previously zoned 'R-1' (Single-Family Residential) by Henry County prior to its 2022 annexation into the City of Stockbridge, and that the property would revert back to R-1 upon the successful de-annexation of the property from the City back into unincorporated Henry County. The property also had a previous Henry County future land use designation of Low-Density Residential, which allowed a density of up to 2.0 dwelling units per acre. After the completion of the DE-AX-24-02 Evaluation Report, the Henry County Board of Commissioners adopted Henry County Resolution #24-155, dated June 11, 2024, to approve the de-annexation.

City of Stockbridge's Receipt of De-Annexation Application Package. The City of Stockbridge received a package containing a copy of the Phase 2 de-annexation application, which was sent by Henry County via Certified U.S. Mail and postmarked on June 14, 2024. The package contained a letter, which was also dated June 14, 2024. The letter stated that the Department had received an application for the de-annexation of nine properties within the Manderley Subdivision from the City of Stockbridge (which represents Phase 2). A copy of the letter appears in the Appendix.

Background on the Manderley Subdivision. The Manderley Subdivision is established and well-developed. Table 2 below lists basic facts about it, and the Appendix contains several pertinent aerial photos and maps.

Table 2—Facts About Manderley Subdivision

Descriptive Factors:	**Findings:**
Current City of Stockbridge Zoning	SR (Suburban Residential)
Current City of Stockbridge Future Land Use Designation	Low-Density Residential.
Current Annexation Status	Annexed into City via 2022 Referendum.
Estimated Number of Subdivision Lots	79.
Name of Subdivider	Koppar Corporation.
Number of Development Phases	Three.
Years of Recorded Plat Approvals	1983, 1984, 1986, 1988, 1989.*
Status of Subdivision Lots	Nearly all are developed with SF homes.
Sizes of Subdivision Lots	Approximately one to two acres each.
Years of Home Construction	1984-1997, per Tax Assessors' records.

*Includes separate sheets for Unit II, and revisions to Unit I & Unit II.

Background on the Surrounding Area. The surrounding area includes Ingle's Market and several neighborhood commercial uses flanking Walt Stephens Road; and several subdivisions to the south, southeast, and east. To the west are several individual residential parcels outside of Manderley Subdivision, Blackhall Road, the City Limits Line, and Spivey Lake. The commercial uses are located in the C-1 (Neighborhood Commercial) zoning district. The subdivisions to the south, southeast, and east are located in the PUD (Planned Unit Development) district, while the outlying residential parcels to the west are zoned 'SR' (Suburban Residential). Properties west of Blackhall Road, in unincorporated Henry County, are zoned 'R-1' (Single-Family Residential for large lots) and 'RA' (Residential-Agricultural).

Legal Requirements for De-Annexation. The Official Code of Georgia (O.C.G.A.) provides legal requirements for de-annexation in O.C.G.A. Sections 36-131 and 36-132, as are summarized in the list below.

1. Administrative Requirements:
   a. A written, signed application by the owners of no more than ten parcels.
   b. Adoption of a signed resolution by the county in which the property is located,

consenting to the de-annexation.

c. Submittal of a copy of the application to the municipality.
d. Confirmation by City staff that the procedural requirements for de-annexation have been met by the property owners.
e. Verification by City staff that the geographic requirements have been met.
f. Approval by the municipality, unless the geographic requirements have not been met.

2. Geographic Requirements:
   a. At least one of the parcels must abut/be contiguous to the boundaries of the city limits (not separated from the city limits by unincorporated areas, a street, a creek or river, or a railroad).
   b. No prohibited unincorporated island would be created by the proposed de-annexation.
   c. No detrimental effects to the health, safety, and welfare of the property owners of the area to be de-annexed, or to the area remaining in the municipality (causing the de-annexed area to be cut off from receiving county services due to the lack of a reasonable access to the de-annexed area).

Analysis of De-Annexation Proposal:

1. Administrative Requirements – The proposed 2 de-annexation application package has nine co-applicants, who are the property owners for nine parcels within the Manderley Subdivision. Each co-applicant has submitted a written, signed application for inclusion within the combined application package. Further, the request is for the de-annexation of nine parcels, which is fewer than the maximum allowable number of parcels (ten). After the Henry County Department of Planning & Zoning completed its review, a signed resolution was adopted by the Henry County Board of Commissions. The resolution and copy of the application package was sent to the City of Stockbridge by certified mail. The Planning and Zoning Staff has verified that the acceptable 100 percent method of de-annexation has been used, and that the Phase 2 de-annexation proposal meets the geographic requirements, as are discussed below.

2. Geographic Requirements – From the maps appearing in the Appendix, it is apparent that all of the nine parcels within the proposed Phase 2 de-annexation area abut and are contiguous to other parcels within the Stockbridge City Limits, and they would even continue to do so if the de-annexation is approved. Parcel #013A01050000 at 195 Jasper Drive within the Phase 2 area abuts Parcel #013A01061000 at 205 Jasper Drive from Phase 1 to the south; and Parcel #013A01049000 at 510 Portloe Court abuts Parcel #013A01051000 at 200 Jasper Drive from Phase 1 to the south. These abutments enable the proposed Phase 2 de-annexation area to directly connect with the approved Phase 1 de-annexation so that the Phase 2 de-annexation would be contiguous with the Phase 1 de-annexation. As a result, no prohibited unincorporated island would be created by the proposed Phase 2 de-annexation. Further, the Phase 2 de-annexed area would be surrounded on three sides by other parcels remaining within the Stockbridge City Limits. Whenever a new City Limits Map is prepared, the Phase 2 de-annexed area would appear as a continuation of the Phase 1 de-

annexation in a narrow peninsula jutting from the attached Blackhall Road to the southwest. This is evident in the "Resulting Map Showing new City Limits Boundaries Upon the Approval of DX-2024-02." Further, there would be no alteration of the existing streets or access to them; thus, there do not appear to be any health, safety, or welfare issues in terms of providing needed transportation of County service vehicles or emergency vehicles in reaching the homes of the property owners within the de-annexed area.

Conclusion. From the preceding analysis, it appears that both the administrative requirements and the geographic requirements have been met for the proposed Phase 2 de-annexation. Thus, according to the law, the applicants have complied with all of the de-annexation requirements and there are no apparent issues which would prohibit them from de-annexing their properties from the City of Stockbridge.

Recommendation. Since all of the de-annexation requirements have been met, the law states that the Mayor and City Council must approve this de-annexation request for Phase 2 (DX-2024-02).

LML/lml

Appendix

APPENDIX:

1. **Copy of De-Annexation Letter of Request from Henry County for Phase 2**

2. **Map of 2022 City of Stockbridge Annexation Referendum—
   Location of Proposed DX-2024-02 De-Annexation Area**

3. **Aerial Photo Showing the Proposed Phase 3 De-Annexation Area**

4. **Manderley Subdivision Zoning Map for Phase 2**

5. **Manderley Subdivision Vicinity Map Showing Phase 1 and Phase 2**

6. **Manderley Subdivision Parcel Map, Phase 2**

7. **Resulting New City Limits Map from the Approval of DX-2024-01**

8. **Resulting New City Limits Map from the Approval of DX-2024-02**

1. COPY OF DE-ANNEXATION LETTER OF REQUEST FROM HENRY COUNTY FOR PHASE 2 (DX-2024-02)
(LISTS THE NINE PARCELS)

Henry County
Department of Planning & Zoning
Toussaint Kirk, Director

June 14, 2024

Stockbridge City Hall
4640 North Henry Boulevard
Stockbridge, GA 30281
Attn: Frederick Gardiner, City Manager of the City of Stockbridge

RE: Request for Deannexation of Nine Properties into Unincorporated Henry County:

The Henry County Planning & Zoning Department has received an application for the deannexation of nine properties within the Manderley Subdivision, totaling 13.366+/- acres in incorporated City of Stockbridge. The properties are as follows:

160 Jasper Drive, 013A01023000
165 Jasper Drive, 013A01024000
195 Jasper Drive, 013A01050000
310 Kerrith Drive, 013A01039000
320 Kerrith Drive, 013A01038000
325 Kerrith Drive, 013A01025000
510 Portloe Court, 013A01049000
515 Portloe Court, 013A01047000
520 Portloe Court, 013A01048000

Enclosed for your review is a copy of the deannexation report prepared by Henry County Planning & Zoning Staff with application materials, the resolution of acceptance by the Henry County Board of Commissioners as a result of the June 11, 2024 Board of Commissioners meeting.

Please provide an official letter regarding the City of Stockbridge's agreement or non-agreement to this proposed deannexation. If you have any questions or need additional information, please contact the undersigned at 770-288-7526.

Best Regards,

Toussaint Kirk,
Director, Planning and Zoning

Cc: Cheri Hobson-Matthews, County Manager
Serena L. Nowell, County Attorney

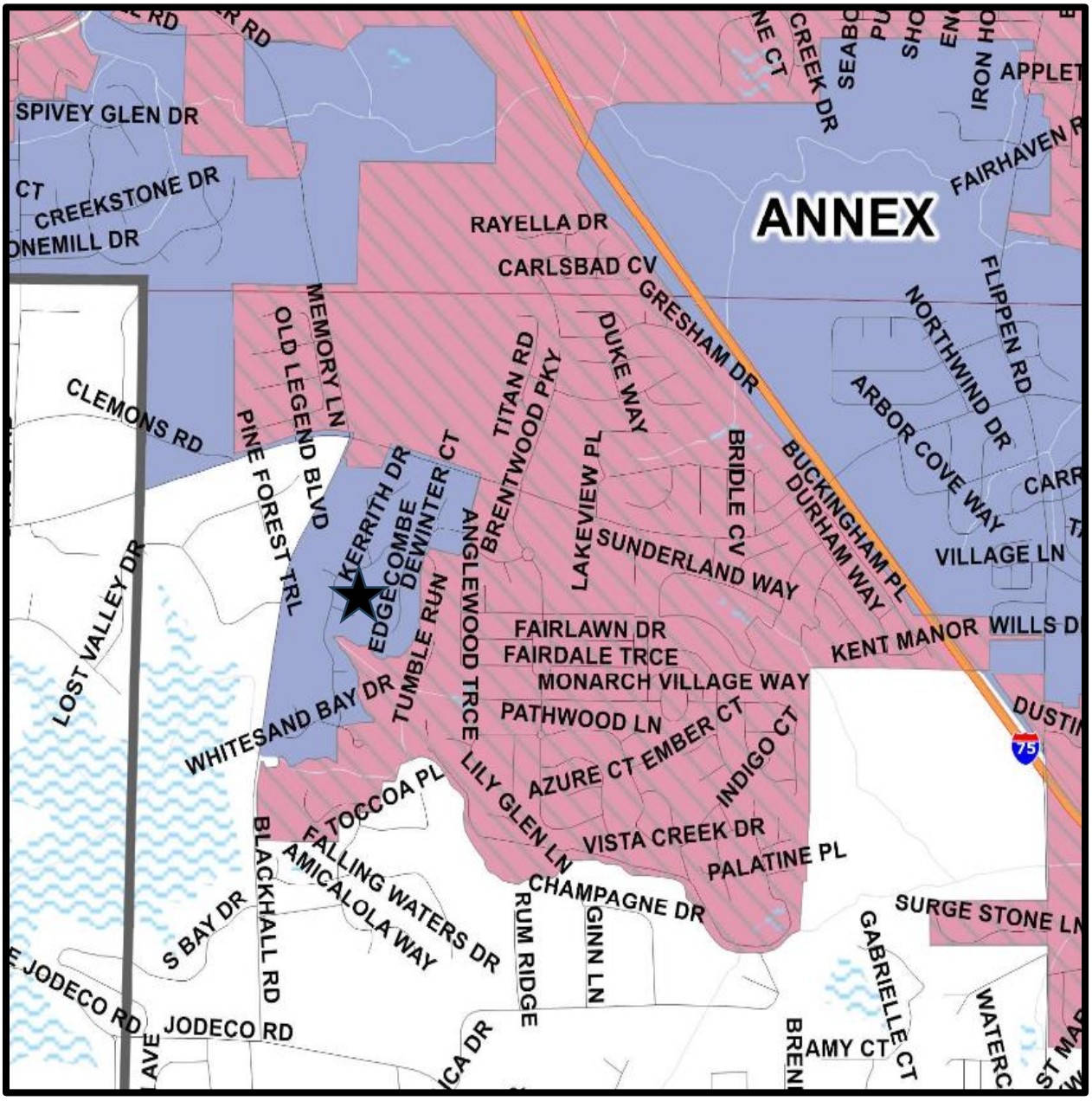
Enclosures

140 Henry Parkway • McDonough, Georgia 30253
MAIN: (770) 288-7526 • FAX: (770) 288-7550

2. MAP OF 2022 CITY OF STOCKBRIDGE ANNEXATION REFERENDUM: LOCATION OF PROPOSED DX-2024-02 DE-ANNEXATION AREA

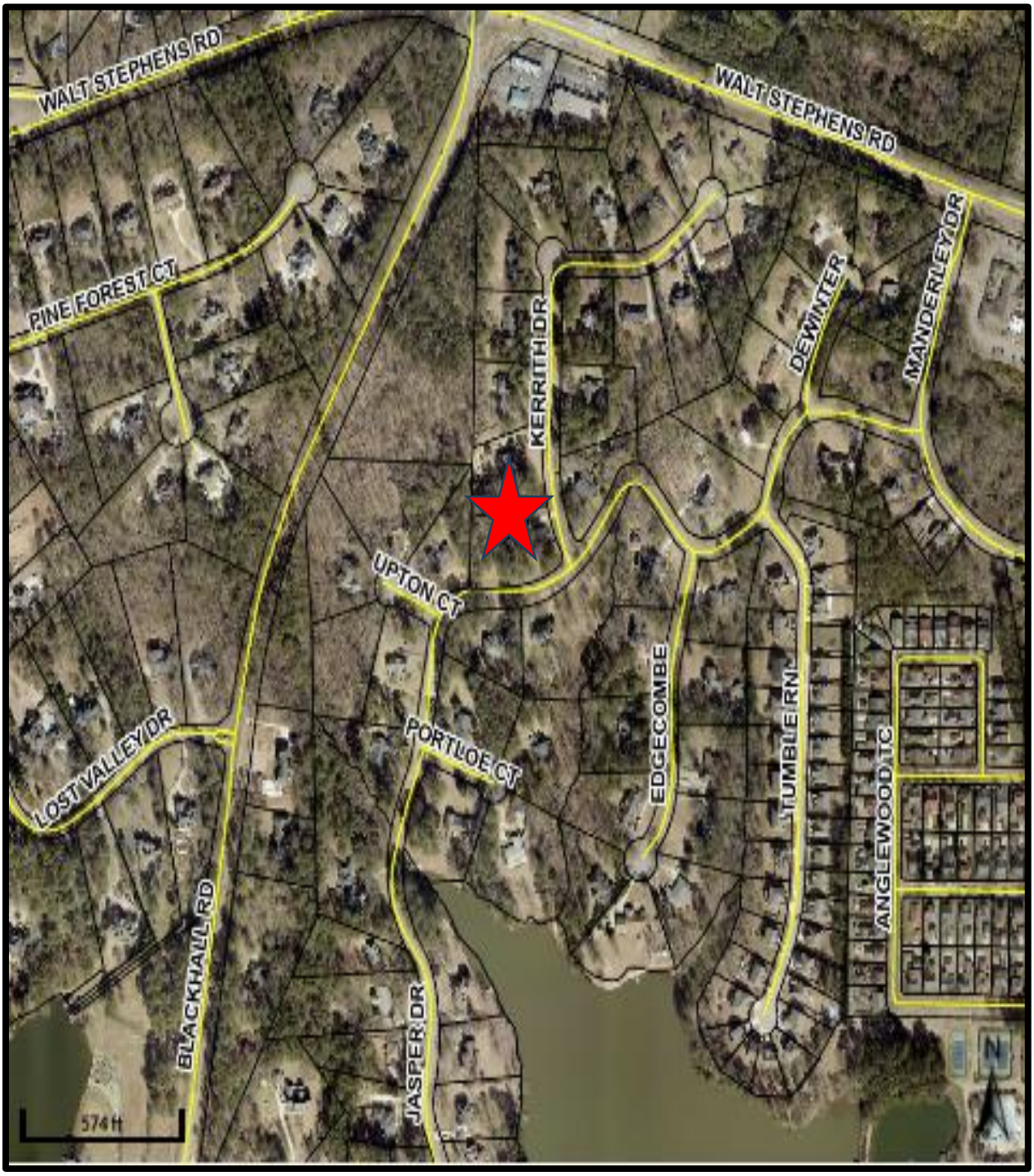
LEGEND:

Pink Striped Areas – Were Already Part of the City of Stockbridge in 2022
Blue Areas – Were Annexed as Part of 2022 City of Stockbridge Annexation Referendum
Star – Location of Proposed DX-2024-01 De-Annexation
Blue Waves – Spivey Lake
★ Black Star—Location of Proposed De-Annexation

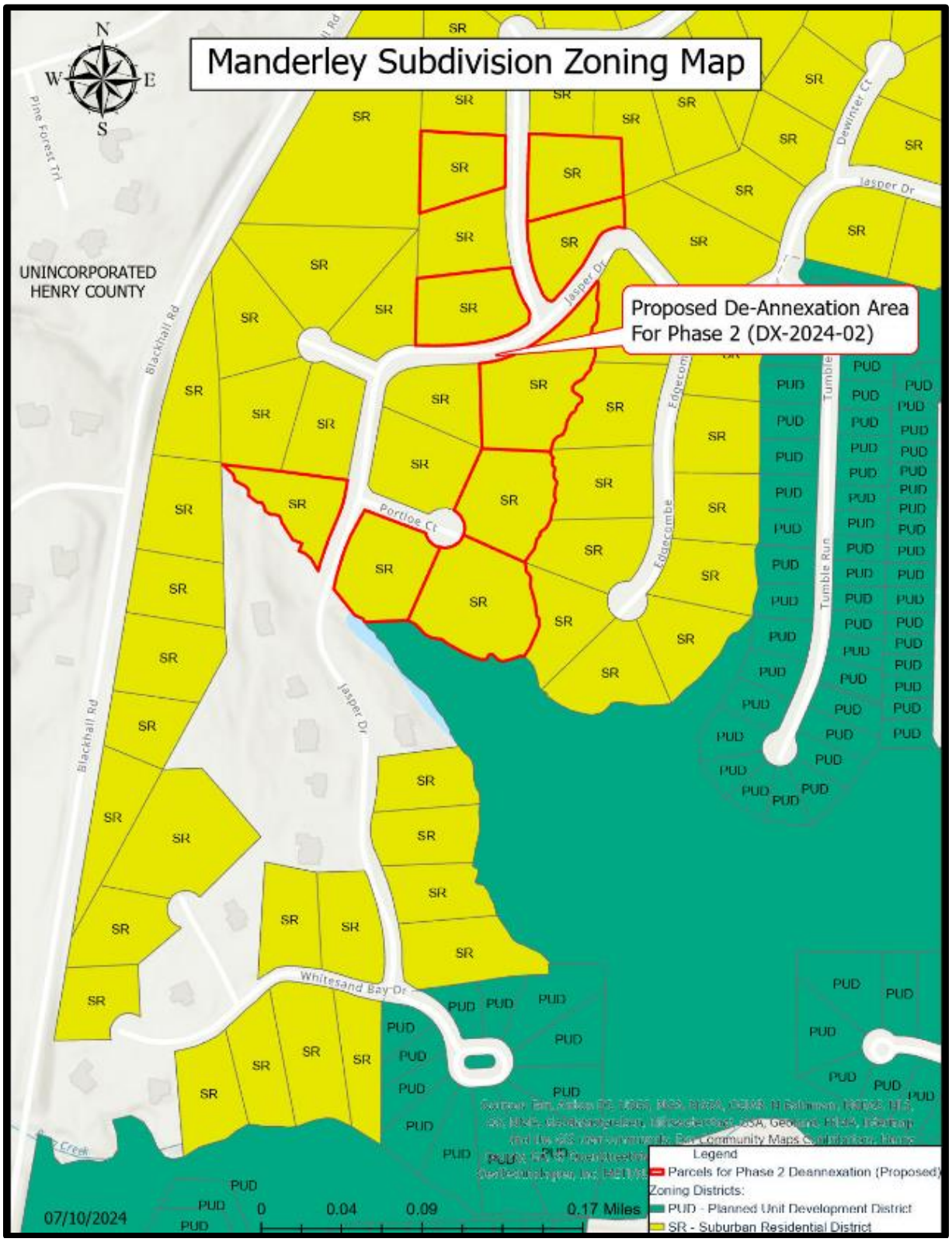


3. AERIAL PHOTO SHOWING THE PROPOSED PHASE 2 DE-ANNEXATION AREA

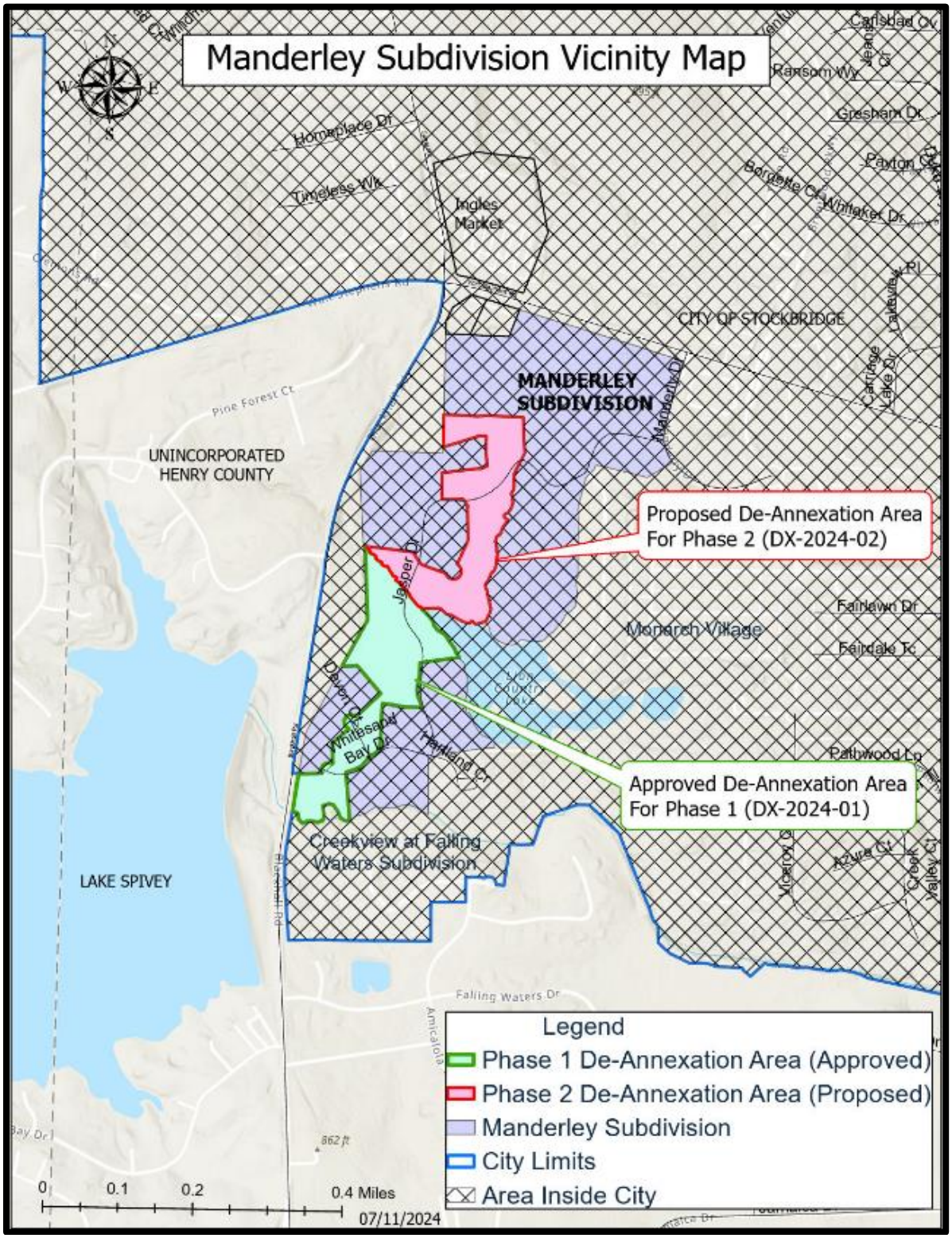
Red Star—Location of Proposed De-Annexation



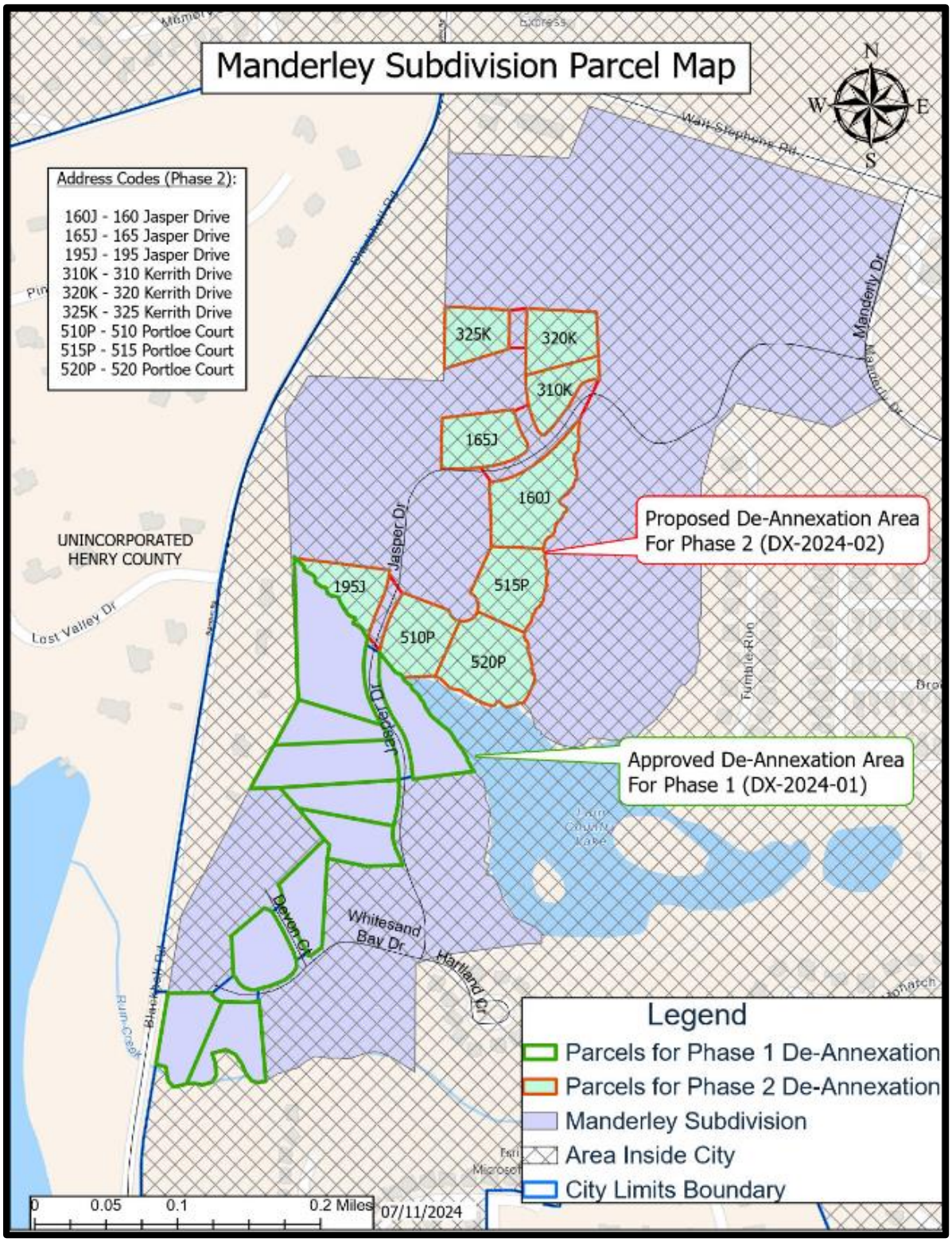
4. MANDERLEY SUBDIVISION ZONING MAP FOR PHASE 2



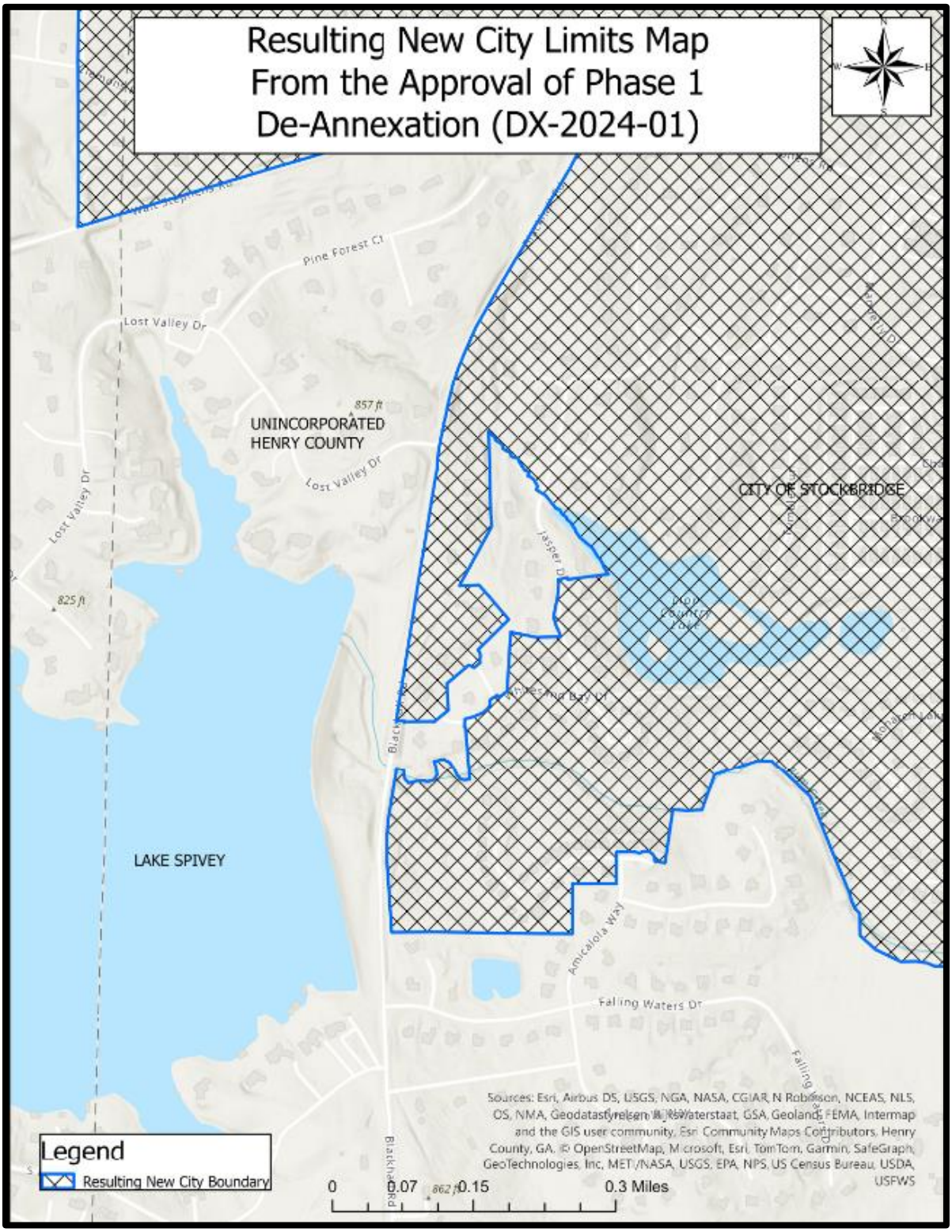
5. MANDERLEY SUBDIVISION VICINITY MAP SHOWING PHASE 1 AND PHASE 2



6. MANDERLEY SUBDIVISION PARCEL MAP FOR PHASE 2

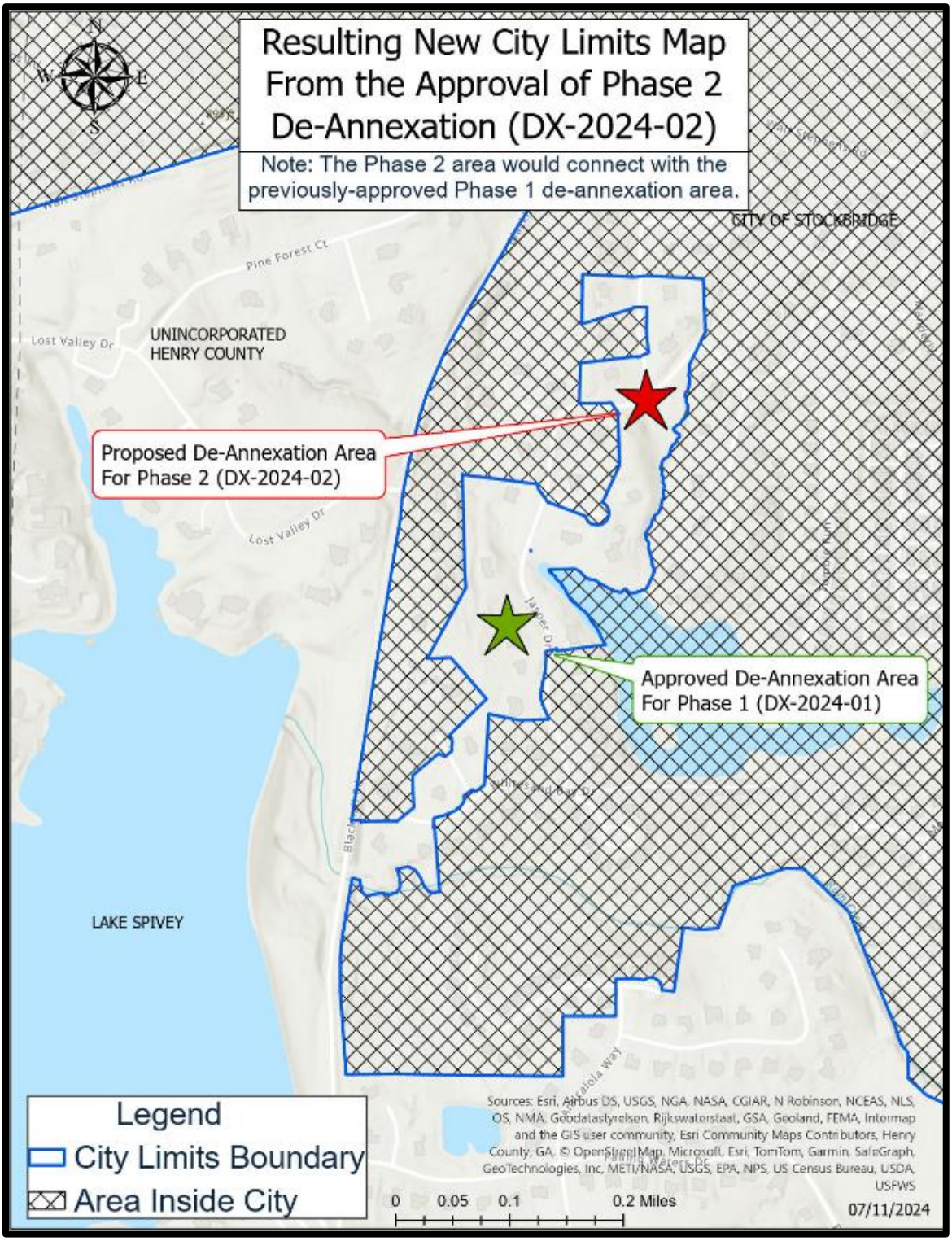


7. RESULTING NEW CITY LIMITS MAP FROM THE APPROVAL OF PHASE 1 DE-ANNEXATION (DX-2024-01)



8. RESULTING MAP SHOWING NEW CITY LIMITS BOUNDARIES UPON THE APPROVAL OF DX-2024-02

★ **Black Star –** **De-Annexed Area**



City of Stockbridge

AGENDA ITEM

MEETING DATE

JULY 30, 2024

- [ ] RESOLUTION
- [ ] ORDINANCE
- [ ] CONTRACT APPROVAL/RENEWAL
- [ ] PUBLIC HEARING
- [x] PRESENTATION
- [ ] BID SELECTION/AWARD
- [ ] TASK ORDER
- [ ] CHANGE ORDER
- [ ] BUDGET AMENDMENT
- [ ] BUDGET TRANSFER
- [ ] PAYMENT APPROVAL
- [ ] OTHER

FUNDING SOURCE

- [ ] GENERAL FUND
- [ ] FUND BALANCE
- [ ] SPLOST or TSPLOST
- [ ] ARPA
- [ ] GRANT
- [ ] HOTEL/MOTEL TOURISM
- [ ] COUNCIL INITIATIVE
- [ ] PARTNER/SPONSOR
- [ ] DEPARTMENT FUND BALANCE
- [ ] BONDING

ACCOUNT TRANSFER FROM:

ACCOUNT TRANSFER TO:

PRESENTER: Community Development Staff

DEPARTMENT: Community Development

ITEM/PROJECT/EVENT:

TEXT AMENDMENT CASE #TX-2024-05 FOR THE MFR (Multiple-Family Residential) ZONING DISTRICT. Presentation of a proposed text amendment to the Unified Development Code (UDC) to revise and add new regulations to the MFR zoning district. The required front yard setbacks would be reduced from 50 feet to 30 feet, and new site and architectural design guidelines would be added.

BACKGROUND INFORMATION:

Most townhome developers have had difficulty in meeting the current front yard setback requirement of 50 feet in the MFR district, which has necessitated their filing of variance applications. The MFR district also does not currently contain any specific regulations for site and architectural design.

APPROVALS: CITY MANAGER_____

CITY TREASURER_____

CITY ATTORNEY_____

GRANTS ADMIN._____

☐ FINANCIAL IMPACT ☐ N/A

AMOUNT $

ATTACHMENTS: ☐

ITEM/PROJECT/EVENT:

TX-2024-05 for the MFR District.

BACKGROUND INFORMATION:

STAFF RECOMMENDATION:

Approval.

Staff Signature_____

TEXT AMENDMENT: TX-2024-05

STATE OF GEORGIA HENRY COUNTY
CITY OF STOCKBRIDGE

ORDINANCE NO. _____

AN ORDINANCE TO AMEND THE CODE OF ORDINANCES, CITY OF STOCKBRIDGE, GEORGIA RELATING TO "MULTIPLE FAMILY RESIDENTIAL (MFR)" BY MAKING ADDITIONS TO VARIOUS SECTIONS OF THE UNIFIED DEVELOPMENT CODE (U.D.C.) TO ALLOW THESE REGULATIONS IN THE MFR DISTRICT AS REQUIRED USES, TO PROVIDE FOR SEVERABILITY; TO REPEAL CONFLICTING ORDINANCES; TO PROVIDE AN EFFECTIVE DATE; AND FOR OTHER PURPOSES.

SECTION 1. Ordinance. That various sections of the Stockbridge Unified Development Code (UDC) be amended, as follows:

- Section 2.4.4, entitled "MULTIPLE FAMILY RESIDENTIAL DISTRICT", be amended to add a section titled "MULTIPLE FAMILY RESIDENTIAL DISTRICT DESIGN GUIDELINES" to read as the following: SEE EXHIBIT A
- Section 2.4.4, entitled "MULTIPLE FAMILY RESIDENTIAL DISRICT", be amended under section titled "Yard Setbacks" to read "Minimum Front Yard Setback: 30 Feet

SECTION 2. Repeal and Add. All ordinances in conflict with this Ordinance are repealed, except as otherwise provided herein.

SECTION 3. Intention of the Governing Body. It is the intention of the governing body, and it is hereby ordained that the provisions of this Ordinance shall be come and be made a part of the Code of Ordinances, City of Stockbridge, Georgia, and the sections of the ordinance may be renumbered to accomplish such intention.

SECTION 4. Approval of Execution. The Mayor is hereby authorized to sign all documents necessary to enact this Ordinance.

SECTION 5. Attestation. The City Clerk is authorized to execute, attest to, and seal any documents which may be necessary to effectuate this ordinance, subject to approval as to form by the City Attorney.

SECTION 6. Authority to Amend the City Attorney is granted authority to amend or correct this Ordinance, with the express consent of the City Council, to reflect the intent of the Council and ensure compliance with applicable laws.

SECTION 7. Effective Date This ordinance becomes effective immediately upon adoption and recording by the City Clerk.

SO ORDAINED this____day of_____, 2024.

DRAFT

_____

ANTHONY S. FORD, Mayor

ATTEST:

_____ (SEAL)

VANESSA HOLIDAY, City Clerk

APPROVED AS TO FORM:

_____

QUINTON G. WASHINGTON, City Attorney

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EXHIBIT A:

Single-Family Development (Attached) - Townhouse:

Townhouses shall either be designed as a unified building or as a series of individualized units. Townhouses are suitable to be in both residential or non- residential areas and may either be on a common Lot or individually lotted.

The development standards for Townhome/Multi-family dwelling units are as follows:

Maximum net density	Nine (9) townhouse dwelling units per acre unless part of a mixed-use development.
Maximum number of lots	N/A; specified in the approved development plan.
Minimum lot size	2 acres
Minimum lot width	100
Maximum unit width	Twenty-four (24) feet
Minimum Lot frontage	100% of the lot width
Minimum front yard	Thirty feet (30)
Minimum front setback	Thirty feet (30)
Minimum side yard	Fifteen feet (15)
Minimum distance between buildings	Twenty feet (20)
Minimum rear yard	20
Minimum Lot Coverage	50%
Minimum Open Space	15%
Maximum height	Forty-five (45) feet for the primary structure and 15 feet for the accessory structure
Minimum Living Area	Studio – 800 sf. Ft. One bedroom – 650 sq. ft Two bedroom – 950 sq. ft Three bedroom – 1150 sq. ft.
Maximum units per building	Six units (6)
Private Streets	Allowed

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Curb and gutter	Required, except for alleys
Paved driveway	Required
Sidewalks	Required
Streetlights	Required
Underground utilities	Required
Public sewer	Required
Public water	Required
Residential parking garage	All townhome units shall have two-car garages.
Parking (Guest)	Required; 1 bedroom or efficiency unit – 1.4 per unit. 2-bedroom unit – 2.0 per unit 3-bedroom unit- 2.25 per unit
Alleys	Allowed, but not required.
Porches	Allowed, but not required.
Concurrent construction requirement	N/A; specified in the approved development plan
Architectural requirements	Yes
Concurrent construction requirement	N/A; specified in the approved DRI
Multi-use paths	10-foot multi-use paths shall be required along the frontage and 8 ft interior trails within the development
Central garbage facility	Required; The development shall provide centralized garbage. facilities for garbage and refuse collection for a certain number of units or percentage of units located within building throughout the development.
Flock Cameras	Flock cameras shall be installed at the entrance of the townhomes.

Definition:

a. Townhomes in buildings containing three or more dwelling units. Current development trends see buildings constructed with six to nine units per building.

1. ***Architectural Image and Character***

Townhome units may vary in size and scale, but all should strive to maintain a residential character through appropriate massing, materials, and detailing. This Guideline does not advocate for or prohibit any architectural style, provided that the minimum requirements of this section are met.

Townhome units should be designed and constructed with facades that are compatible with the custom single-family homes:

One thousand (1,000) square feet for a one (1) bedroom unit; one thousand three hundred (1,300) square feet per two (2) bedroom unit; one thousand four hundred (1,400) square feet per three (3) bedroom unit; and two hundred (200) additional square feet per additional bedroom.

b. The front facade of each dwelling unit Shall be comprised of not less than eighty (80) percent o£ either brick, stone, or stucco, or a combination of

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brick and stone, and the remaining twenty (20) percent may be comprised of stucco, shake, and/or cement fiberboard siding. In determining the percentage of materials on the front facade, neither doors, windows, garage doors, gables nor eaves shall be included in such calculation.

c. The front and side facades of «ach dwelling unit must be comprised of any combination of primary materials including brick and/or stone and secondary materials including stucco, shake and/or cement fiberboard (CF not to exceed 30% of the entire house) siding; provided, however, the proposed materials must be harmonious with the front facade materials for such dwelling unit. The rear elevation can be comprised of cementitious fiber or a combination of primary materials.

d. Review and Approval Process. Site and Architectural plans will be reviewed by the Community Development Department as part of the process for the related site plan, subdivision plat, or other applicable development application. Such a review shall be completed prior to issuance of any permits.

e. In no case shall vinyl, metal, or aluminum siding of any kind be used on the front, side or rear elevations of a dwelling unit, including the gables and eaves.

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2. Building Massing and Roof Form

Townhome units and buildings shall not exceed two-and-one-half stories in height when viewed from the street. When parking is within the above-grade ground floor of the building, it shall be considered a story and must meet all the requirements of this Guideline.

Townhome buildings shall have pitched roofs. The predominant roof form shah be hip. gable, shed, or flat. Building facades shall reflect the roof (e.g., a gable roof shall not be concealed by a parapet w8ll intended to make the building appear to have a flat roof).

Dormers, when provided, shall be functional (correlating to an occupied space) and placed in a manner consistent with the prevailing architectural style of the building. Dormers may be allowed as vents or to conceal equipment provided, they are proportional to thereof.

3. Building Materials and Colors

a. Complimentary Materials. Building design should consider the scale. texture and patterns of the building materials by utilizing them in common recognizable applications.

b. Building Materials, the following guidelines should be followed with regards to building materials:

1. Use high-quality, durable materials that reflect the local character such as brick, stucco, stone, or Cementous fiberboard siding. Three-sided brick or stone and rear shall cementitious fiber or brick, stone, or stucco.

2. Preference is given to natural stone over manufactured stone. However, manufactured stone may be accepted subject to special review of product.

c. Building Colors.

1. Colors should consist of a cohesive, complimentary palette.

2. Limited use of accent colors is permitted if they are not bright or fluorescent and complement the overall palette of materials.

d. Materials and colors.

1. A minimum of three materials and three colors shall be utilized on front or street side elevations, or facade abutting common open space. A minimum of two materials and two colors shall be utilized on interior side and rear elevations.

e. Architectural Wrap.

1. Stone, brick‹, wainscot and other materials shall be wrapped a minimum of two feet into interior side elevations.
2. Stone, brick, wainscot, and other front elevation materials shaft extend the full width ot any street side yard, or facade abutting common open space.

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4. Building Features

The primary common building entrance shall be covered by an appropriately scaled architectural projection from the facade or shall be recessed in order to identify the point of entry. Canvas or other fabric awnings or canopies shall not be permitted at the primary entryway. The entryway shall be connected to a vestibule and an interior lobby.

Each dwelling unit shall have its own, functional balcony (or defined patio area for ground floor units). Juliet balconies shall be permitted when architecturally appropriate to the style of the building. Exterior, elevated open walkways, landings, and common stairs required to access individual units are strictly prohibited.

5. Details and Ornamentation

When thin-veneer brick or stone (Class B) materials are used, either for full-height walls or wainscoting, the material shall return to an inside corner with an adjacent wall. In the case of outside building corners, a minimum twenty-four inches (24") return shall be provided.

Appropriately scaled trim of at least four inches (4") in width shall be included around all window and door openings, building corners, roof lines, and fa5ade material transitions. Trim color shall be of a contrasting but compatible color to the primary building material color.

Shutters, if used, must be in proportion to the area of adjoining windows. All soffits and overhangs shall project no less than twelve inches (12").

6. Landscaping

Landscaping shall comply with Chapter 5, Landscaping Ordinance Codes.

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City of Stockbridge

AGENDA ITEM

MEETING DATE

July 30, 2024

■	RESOLUTION
☐	ORDINANCE
■	CONTRACT APPROVAL/RENEWAL
☐	PUBLIC HEARING
☐	PRESENTATION
☐	BID SELECTION/AWARD
☐	TASK ORDER
☐	CHANGE ORDER
☐	BUDGET AMENDMENT
☐	BUDGET TRANSFER
☐	PAYMENT APPROVAL
☐	OTHER

FUNDING SOURCE

☐	GENERAL FUND
☐	FUND BALANCE
■	SPLOST
■	TSPLOST
☐	CDBG
☐	GRANT FUNDING
☐	COUNCIL INITIATIVE
☐	PARTNER/SPONSOR
■	DEPARTMENT BUDGET
☐	BONDING

ACCOUNT TRANSFER FROM:

ACCOUNT TRANSFER TO:

PRESENTER: Decius T. Aaron

DEPARTMENT: Public Works.

ITEM/PROJECT/EVENT:

REQUEST FOR PROPOSAL NUMBER (RFP) NUMBER: 2022-0006, ANNUAL ON-CALL GENERAL ENGINEERING SERVICES – FALCON DESIGN GROUP, LLC

BACKGROUND INFORMATION:

The Public Works Department is requesting approval to renew the competitive solicited Contract pursuant to Request For Proposal (RFP) Number 2022-0006- Annual On-Call General Engineering Services with Falcon Design Group, LLC.

The vendor was approved by Council on October 10, 2022 and the contract was signed on November 4, 2022. The Agreement is for one (1) year, with the option to renew for four (4) one (1) year periods, with such options in the City's sole discretion. This is the 2nd renewal.

SIGNATURES:

CITY MANAGER _____

CITY TREASURER _____

CITY ATTORNEY _____

■ FINANCIAL IMPACT ☐ N/A

AMOUNT **$200,000.00**

ATTACHMENTS: ■

STAFF RECOMMENDATION:

The Procurement Division is requesting Council's approval for renewal of Request For Proposal (RFP) Number 2022-0006, On-Call General Engineering Services, to Falcon Design Consultants, LLC, to provide On-Call General Municipal Engineering Services, on a per task order basis, related to but not limited to: general consulting; civil engineering; surveying; management of Capital Improvement Projects (CIPs); project design (water, sewer, stormwater, and roadway infrastructure); construction support and other civil engineering and/or community development projects deemed necessary by the City.

The Service Agreement shall expire after one (1) year, though the Agreement can be renewed for up to four (4), one (1) year periods, with such options in the City's sole discretion. This is the second renewal.

The Annual On-Call General Engineering Services scope of services consist of but not limited to: general consulting; civil engineering; surveying; management of Capital Improvement Projects (CIPs); project design (water, sewer, stormwater, and roadway infrastructure); construction support and other civil engineering and/or community development projects deemed necessary by the City.

The Public Works Department has determined that Falcon Design Consultants, LLC., is performing all work in accordance with the contract requirements and is providing quality services to the City. The contract expires November 4, 2024 .

The Public Works Department is requesting a contract renewal through November 4, 2025.

Section 3.30.227 - Renewals and extensions; The city council shall approve all renewals or term contract extensions: (A) to afford the city a continuous supply of items or services in the event of the termination or near termination of the award/contract and (B) where cost is greater than fifty thousand dollars ($50,000.00); and when the original contract was approved by the city council. Section 3.30.227 - Renewals and extensions; The city council shall approve all renewals or term contract extensions: (A) to afford the city a continuous supply of items or services in the event of the termination or near termination of the award/contract and (B) where cost is greater than fifty thousand dollars ($50,000.00); and when the original contract was approved by the city council.

Exhibit I – Contract Agreement

Exhibit II – Contract Renewal Evaluation Form by Public Works Staff

Exhibit III—Cost Proposal

Fiscal Impact: Funds will be provided from account numbers 505-44200-521230, 505-43300-521230, 100-42200-521230, and 100-15650-521230 .

Stockbridge

Where Community Connects

CONTRACT RENEWAL EVALUATION FORM

Date: June 14, 2024

To: Decius Aaron, Public Works Director

From: Wanda J. Cooley, *Procurement Specialist*
Email: wcooley@stockbridge.org

Subject: Contract No. RFP No. 2022-0006 with Falcon Design Group, LLC - Exercise of Second Renewal Option

It is time to review the second option to renew RFP No. 2022-0006, On-Call General Engineering Services with Falcon Design Group, LLC. The contract expires after one (1) year, though the Agreement can be renewed for up to four (4) one (1) year periods.

Please indicate your recommendation as to exercising the option, along with the option-year budgeted amount, account number, and department head's signature. Return to Wanda J. Cooley, Procurement Department, no later than Tuesday, June 18, 2024. If you intend to disapprove this option, please provide a concise statement of your rationale for disapproval.

Per Section 1, please indicate whether you wish to renew this contract.

Complete the Survey (Section 2, below) evaluating the Contractor's performance during the past Contract Term. If answering "No" to any question, please explain briefly.

Section 1: Renewal

Approve Option: Decius T. Aaron (Signature) June 17, 2024 (Date)

Disapprove Option: _____ (Signature) _____ (Date)

Amount Budgeted for Option Year: $ 50,000.00

Account #: 100-2200-521230

Department Head: Decius T. Aaron (Signature)

Section 2: Contractor Evaluation

	YES	NO	N/A
1. Contractor performed all work in conformance with the Contract requirements?	X		
2. Contractor was responsive and professional?	X		
3. Are you satisfied with the quality of the work performed by the Contractor?	X		
4. Did the Contractor anticipate your needs and provide value-added services beyond the scope/requirements of the Contract?	X		

Comments: _____

For Approval:

_____ _____/_____/_____

Frederick Gardiner, City Manager Date

SERVICE AGREEMENT

BY AND BETWEEN
FALCON DESIGN GROUP, LLC
AND
THE CITY OF STOCKBRIDGE, GEORGIA

This Agreement ("Agreement") is made and entered into this 14th day of November, 2022, by and between Falcon Design Group, LLC. (hereinafter, "CONTRACTOR"), and the City of Stockbridge, Georgia (hereinafter, "City") (CONTRACTOR and City sometimes referred to herein as "Parties").

WHEREAS, City desires to engage the services of CONTRACTOR to perform for City services regarding annual on-call engineering services, as stated in City RFP No. 2022-0006 (the "Project"); and

NOW, THEREFORE, in consideration of the promises and mutual agreements herein and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereto hereby agree as follows:

1. **Termination.** This Agreement shall expire after one (1) year, though the Agreement can be renewed for up to four (4), one (1) year periods. The provisions of Section 2(c) below shall specifically survive the termination or expiration of this Agreement. The City may terminate this Agreement at any time for any reason with thirty (30) days advance written notice.

2. **Services**.

(a) Subject to the terms and conditions set forth in this Agreement, City hereby retains CONTRACTOR to provide the services set forth on Exhibit A entitled "Scope of Work" and all responses to the RFP all attached hereto and incorporated herein by reference. The RFP No. 2022-0006 and all terms therein shall be incorporated completely herein by reference.

(b) The standard of care applicable to CONTRACTOR's services will be the degree of skill and diligence normally employed by professional contractors performing the same or similar services at the time said services are performed. CONTRACTOR will re-perform any services not meeting this standard without additional compensation. CONTRACTOR warrants that any services it conducts will be adequate and sufficient to accomplish the purposes for which they are performed, and no review or approval thereof by the City shall be deemed to diminish this warranty in any way.

(c) CONTRACTOR shall indemnify and hold harmless the City and its agents and employees (i) from and against all claims, damages, losses and expenses, including but not limited to attorney's fees, arising out of or resulting from the performance of the Project, provided that any such claim, damage, loss, expense or attorney's fees is attributable to bodily injury, sickness, disease or death, or to injury to or destruction of tangible property including the loss of use resulting therefrom, and is caused in whole or in part by any negligent act or omission of the

CONTRACTOR, any Subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, regardless of whether or not the negligent act is caused in part by a party indemnified hereunder and (ii) from the inadequacy of the Services performed by CONTRACTOR or anyone for whom CONTRACTOR is responsible. Such obligation shall not be construed to negate, abridge, or otherwise reduce any other right or obligation of indemnity which would otherwise exist as to any party or person described in this Clause. In any and all claims against the City or any of its agents or employees, by any employee of the CONTRACTOR, any Subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, the indemnification obligation set forth in this paragraph shall not be limited in any way by any limitation on the amount or type of damages, compensation or benefits payable by or for the CONTRACTOR or any Subcontractor under workers' or workman's compensation acts, disability benefit acts or other employee benefit acts.

3. **Compensation.** CONTRACTOR shall receive compensation from the City as set forth in the cost proposal attached hereto as Exhibit B.

4. **Miscellaneous.**

(a) This Agreement shall be governed by and construed in accordance with the laws of the State of Georgia.

(b) CONTRACTOR may not assign this Agreement, in whole or in part, without the prior written consent of City. City may assign this Agreement, in whole or in part, without the prior consent of CONTRACTOR; however, City shall provide CONTRACTOR with prior written notice of any such assignment.

(c) This Agreement shall be binding on and inure to the benefit of the parties hereto and their respective successors and permitted assigns.

(d) The headings contained herein are for the convenience of the parties only and shall not be interpreted to limit or affect in any way the meaning of the language contained in this Agreement.

(e) This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute the same Agreement. Any signature page of any such counterpart, or any electronic facsimile thereof, may be attached or appended to any other counterpart to complete a fully executed counterpart of this Agreement, and any telecopy or other facsimile transmission of any signature shall be deemed an original and shall bind such party.

(f) If any provision of this Agreement shall be held void, voidable, invalid or inoperative, no other provision of this Agreement shall be affected as a result thereof, and accordingly, the remaining provisions of this Agreement shall remain in full force and effect as though such void, voidable, invalid or inoperative provision had not been contained herein. If any of the provisions of this Agreement shall be declared unenforceable as to certain parties, then the

performance of said provision shall be excused by the parties hereto and the remaining provisions of this Agreement shall remain in full force and effect.

(g) This Agreement, including all exhibits hereto (which are incorporated herein by this reference), contains the entire agreement and understanding concerning the subject matter hereof between the parties hereto. No waiver, termination or discharge of this Agreement, or any of the terms or provisions hereof, shall be binding upon either party hereto unless confirmed in writing. This Agreement may not be modified or amended, except by a writing executed by both parties hereto. No waiver by either party hereto of any term or provision of this Agreement or of any default hereunder shall affect such party's rights thereafter to enforce such term or provision or to exercise any right or remedy in the event of any other default, whether or not similar.

(h) CONTRACTOR shall at all times maintain sufficient liability insurance and payment and performance bonds to cover their services under this Agreement.

IN WITNESS WHEREOF, the Parties intending to be legally bond hereby, have executed this Agreement as of the date first above written.

By: _____
MAYOR
CITY OF STOCKBRIDGE, GEORGIA

By: _____
Falcon Design Group, LLC

ATTEST:

_____
City Clerk

APPROVED AS TO FORM:

_____
City Attorney

REVISED
COST PROPOSAL AND EVALUATION CRITERIA

CLASSIFICATION	2022 Hourly Billing Rate	2023 Hourly Billing Rate	2024 Hourly Billing Rate	2025 Hourly Billing Rate
Principal Engineer	$ 175 /Per hour	$ 175 /Per hour	$ 185 /Per hour	$ 185 /Per hour
Senior Manager	$ 150 /Per hour	$ 150 /Per hour	$ 155 /Per hour	$ 155 /Per hour
Project Manager	$ 135 /Per hour	$ 135 /Per hour	$ 140 /Per hour	$ 140 /Per hour
Senior Designer	$ 120 /Per hour	$ 120 /Per hour	$ 125 /Per hour	$ 125 /Per hour
Project Engineer	$ 140 /Per hour	$ 140 /Per hour	$ 145 /Per hour	$ 145 /Per hour
Appraiser	$ N/A /Per hour	$ N/A /Per hour	$ N/A /Per hour	$ N/A /Per hour
CAD Technician	$ 105 /Per hour	$ 105 /Per hour	$ 110 /Per hour	$ 110 /Per hour
Mapping Technician	$ 115 /Per hour	$ 115 /Per hour	$ 120 /Per hour	$ 120 /Per hour
Licensed Surveyor	$ 120 /Per hour	$ 120 /Per hour	$ 125 /Per hour	$ 125 /Per hour
2- Person Survey Team	$ 150 /Per hour	$ 150 /Per hour	$ 155 /Per hour	$ 155 /Per hour
3- Person Survey Team	$ 185 /Per hour	$ 185 /Per hour	$ 195 /Per hour	$ 195 /Per hour
Senior Inspector	$ N/A /Per hour	$ N/A /Per hour	$ N/A /Per hour	$ N/A /Per hour
Inspector	$ N/A /Per hour	$ N/A /Per hour	$ N/A /Per hour	$ N/A /Per hour
Cost Estimator	$ N/A /Per hour	$ N/A /Per hour	$ N/A /Per hour	$ N/A /Per hour
CAD Drafter	$ 90 /Per hour	$ 90 /Per hour	$ 95 /Per hour	$ 95 /Per hour
Information System Professional	$ N/A /Per hour	$ N/A /Per hour	$ N/A /Per hour	$ N/A /Per hour
Clerical	$ 60 /Per hour	$ 60 /Per hour	$ 65 /Per hour	$ 65 /Per hour

The cost proposal shall be based on the labor categories and qualifications. The Consultant shall identify hourly rates by labor category. Rates shall be fully burdened billing rates to include all overhead and profit, at the prime and sub-consultant levels. Hourly rates shall be provided for each of the four (4) years (one year contract with the option to renew for four (4) additional one year period Agreement. Labor rates to be included in the Services Agreement will be negotiated with the selected Consultant based on its Proposal and the City's analysis of the labor rate proposals submitted by all Consultants.

City of Stockbridge

AGENDA ITEM

MEETING DATE

July 30, 2024

- [x] RESOLUTION
- [ ] ORDINANCE
- [x] CONTRACT APPROVAL/RENEWAL
- [ ] PUBLIC HEARING
- [ ] PRESENTATION
- [ ] BID SELECTION/AWARD
- [ ] TASK ORDER
- [ ] CHANGE ORDER
- [ ] BUDGET AMENDMENT
- [ ] BUDGET TRANSFER
- [ ] PAYMENT APPROVAL
- [ ] OTHER

FUNDING SOURCE

- [ ] GENERAL FUND
- [ ] FUND BALANCE
- [ ] SPLOST
- [ ] TSPLOST
- [ ] CDBG
- [ ] GRANT FUNDING
- [ ] COUNCIL INITIATIVE
- [ ] PARTNER/SPONSOR
- [x] DEPARTMENT BUDGET
- [ ] BONDING

ACCOUNT TRANSFER FROM:

ACCOUNT TRANSFER TO:

PRESENTER: Decius T. Aaron

DEPARTMENT: Public Works.

ITEM/PROJECT/EVENT:

Consideration for renewal of Contract No. RFP No. 2018-0010Q – Non-Hazardous Special Waste Disposal Services with Republic Services.

BACKGROUND INFORMATION:

The Public Works Department is requesting City Council's approval to renew the contract for Request For Proposal (RFP) No. 2018-001Q, for Special Non-Hazardous Waste Services with Republic Services, Inc.

Term of Agreement – This Agreement is effective for one (1) month beginning on November 23, 2021 (the "Initial Term") and shall automatically renew for successive 1 month period (each, a "Renewal Term"), unless written notice of non-renewal is delivered in accordance with Section 19 by one party to the other party at least 30 days before the expiration of the Initial Term or any Renewal Term.

SIGNATURES:

CITY MANAGER _____

CITY TREASURER _____

CITY ATTORNEY _____

[x] FINANCIAL IMPACT [ ] N/A

AMOUNT **$55,000.00**

ATTACHMENTS: [x]

STAFF RECOMMENDATION:

The Public Works Department is requesting City Council's approval to renew the term contract for Request For Proposal (RFP) No. 2018-001Q, Special Non-Hazardous Waste Service Agreement, between Republic Services, Inc, and the City of Stockbridge, for $55,000 annually, authorizing the Mayor to execute same; and authorizing the City Manager to execute all administrative and budgetary actions related to the Agreement.

The agreement with Republic Services, Inc, Request For Proposal (RFP) No. 2018-001Q, Special Non-Hazardous between Republic Services, Inc, was initiated on November 20, 2018. Republic Services, Inc, own and operates the Pine Ridge Landfill, which is the closest landfill within a reasonable distance to dispose of waste, bio solid waste (sludge) and acceptable waste, from the Wastewater Treatment Plant.

City staff is requesting a contract renewal through December 4, 2025. The Public Works Department has determined that Republic Services, Inc, has performed all work in accordance with the contract requirements, and have provided quality service to the City.

The contract was initiated November 20, 2018, for month-to-month and is renewed automatically. The contract expires December 4, 2024. The initial term will be automatically extended annually.

Section 3.30.227 - Renewals and extensions; The city council shall approve all renewals or term contract extensions: (A) to afford the city a continuous supply of items or services in the event of the termination or near termination of the award/contract and (B) where cost is greater than fifty thousand dollars ($50,000.00); and when the original contract was approved by the city council.

3.30.160 - Exceptions. A 6. Utilities, where there is no reasonable basis for competitive procurement, for example electric power, water, and sewerage.

Fiscal Impact: Funds will be provided from account number 505-43300-523990.

Stockbridge

Where Community Connects

CONTRACT RENEWAL EVALUATION FORM

Date: June 14, 2024

To: Decius Aaron, Public Works Director

From: Wanda J. Cooley, *Procurement Specialist*
Email: wcooley@stockbridge.org

Subject: Contract No. RFP No. 2018-001Q with Republic Services for Non-Hazardous Special Waste Disposal - Exercise of Renewal Option

It is time to review the option to renew RFP No. 2018-001Q with Republic Services for Non-Hazardous Special Waste Disposal. The contract expires November 23, 2024, having automatic one (1) month renewable options.

Please indicate your recommendation as to exercising the option, along with the option-year budgeted amount, account number, and department head's signature. Return to Wanda J. Cooley, Procurement Department, no later than Tuesday, June 18, 2024. If you intend to disapprove this option, please provide a concise statement of your rationale for disapproval.

Per Section 1, please indicate whether you wish to renew this contract.

Complete the Survey (Section 2, below) evaluating the Contractor's performance during the past Contract Term. If answering "No" to any question, please explain briefly.

Section 1: Renewal

Approve Option: Decius T. Aaron (Signature) June 17, 2024 (Date)

Disapprove Option: _____ (Signature) _____ (Date)

Amount Budgeted for Option Year: $55,000.00

Account #: 505-43300-523990

Department Head: Decius T. Aaron (Signature)

Section 2: Contractor Evaluation

	YES	NO	N/A
1. Contractor performed all work in conformance with the Contract requirements?	X		
2. Contractor was responsive and professional?	X		
3. Are you satisfied with the quality of the work performed by the Contractor?	X		
4. Did the Contractor anticipate your needs and provide value-added services beyond the scope/requirements of the Contract?			X

Comments: _____

For Approval:

_____ _____ / / _____

Frederick Gardiner, City Manager: Date:

REPUBLIC SERVICES

SPECIAL WASTE DISPOSAL SERVICES AGREEMENT FOR NON-HAZARDOUS WASTES

Special Waste Profile No: 3708 13 1091

INVOICE TO (Generator Billing Information)	
GENERATOR NAME (the "Generator")	City of Stockbridge
ATTN:	Brad Holtsinger
EMAIL:	BHoltsinger@cityofstockbridge.ga.gov
ADDRESS:	100 Stapleton Dr
CITY / STATE / ZIP CODE	Stockbridge / Ga / 30281
TEL. NO. / FAX NO.	770-862-3743

LANDFILL FACILITY ("Facility")	
LEGAL ENTITY NAME	Republic Services of Georgia, LP d/b/a Pine Ridge Landfill
ADDRESS	105 Bailey Jester Rd.
CITY / STATE / ZIP CODE	Griffin / Georgia / 30224
TEL. NO. / FAX NO.	770-233-8081
AUTHORIZED BY / TITLE	Paula Adams / Sales
CONTACT / TITLE	678-290-7360

1 **Special Waste Services.** Subject to the terms and conditions contained in this Agreement (as defined in Section 4), Company agrees to transport for disposal to, and cause to be accepted at, the Facility designated above, Acceptable Waste (as defined in Section 6) as designated below.

2 **Rates:**

A. Rates for Disposal:

Waste	Disposal Method	Disposal Rate:	Fees / Taxes / Misc.	Transportation
Municipal Sludge	Landfill	$60.00 Per ton	+ Applicable Fees: (Current Rates: $3.25 per ton GA State and Host / $18.00 per load Environmental and 7% Fuel Fee)	

Additional Information: **Customer/Client will be responsible for notification of change in waste stream volume. Customer/Client will also be responsible for any additional charges for additional volume.**

$200.00 minimum per load + all applicable fees – weekly billing – Approved Volume: 400 tons **Profile Expires:** 12/4/2024

Cannot Exceed Daily Volume of Landfill Determined Without Prior Approval of Company

B. Incorporation by Reference. In addition to Special Waste Profile(s), the following documents are incorporated by reference into this Agreement as if fully set forth herein

1)

2)

C. Taxes, Fees & Other Charges. Generator shall also be liable for all taxes, fees, or other charges imposed by federal, state, local or provincial laws, ordinances and regulations, and all charges set forth in Section 9, including, without limitation, site specific fees, host fees, fuel recovery fees, environmental recovery fees and administrative fees.

3 **Term of Agreement.** . This Agreement is effective for 1 months beginning on Nov. 23rd, 2021 (the "Initial Term") and shall automatically renew for successive 1 month periods (each, a "Renewal Term"), unless written notice of non-renewal is delivered in accordance with Section 19 by one party to the other party at least 30 days before the expiration of the Initial Term or any Renewal Term.

Except for requests for bids that Generator must send to multiple parties under any Applicable Laws, Generator grants to Company the right to bid and/or compete for any future services sought by Generator, whether by means of competitive bids or otherwise, that are for services comparable to those provided under this Agreement.

COMPANY AND GENERATOR, IN CONSIDERATION OF THE MUTUAL OBLIGATIONS CONTAINED IN THIS AGREEMENT, AGREE THAT THIS IS A LEGALLY BINDING AGREEMENT WHICH IS SUBJECT TO THE TERMS AND CONDITIONS SET FORTH ON THIS PAGE, AND ON THE REVERSE SIDE OF THIS PAGE. IN ADDITION, GENERATOR IS CERTIFYING THE TERMS AND CONDITIONS ON THE REVERSE SIDE OF THIS PAGE HAVE BEEN REVIEWED AND INITIALLED AT THE BOTTOM OF THE PAGE.

GENERATOR	COMPANY
Brad Holtsinger	Paula Adams
SIGNATURE (AUTHORIZED REPRESENTATIVE)	SIGNATURE (AUTHORIZED REPRESENTATIVE)
Brad Holtsinger - Sewer Superintendent	Paula Adams - Sales
NAME AND TITLE (PLEASE PRINT)	NAME AND TITLE (PLEASE PRINT)
DATE: 11/23/2021	DATE: 11/23/2021

Generator

Signature (Authorized Representative)

Name and Title

Date

4 **The Agreement.** This agreemen parties ("Agreement") for the disposal of Acceptable Waste shall consist of the Agreement, riders to the Agreement (if any), any Special Waste Profiles (including any approved changes and re-certifications) and any Application, permit and approval that may be applicable to the disposal of such Acceptable Waste ("Acceptable Waste Documentation").

5 **Waste Accepted at Facility.** Generator represents, warrants and covenants that the waste delivered to Company at its Facility hereunder will be Acceptable Waste and will not contain any unacceptable quantity of hazardous materials or substances, radioactive materials or substances, or toxic waste or substances, as defined by applicable federal, state, local or provincial laws or regulations. Any waste which does not meet these requirements shall hereinafter be referred to as "Unacceptable Waste". The Generator shall, in all matters relating to the collection, transportation and disposal of the Acceptable Waste hereunder, comply with all applicable federal, state and local laws, regulations, rules and orders regarding the same (collectively, "Applicable Laws").

6 **Acceptable Waste.** Only waste that satisfies each of the following criteria shall be accepted for disposal at the Facility ("Acceptable Waste"): (a) the waste conforms to the description set forth in the Acceptable Waste Documentation; (b) the waste does not contain any Unacceptable Waste; (c) the waste is accurately reflected on any Special Waste Profile(s) as directed by the Company pursuant to Section 7; (d) the waste is acceptable for disposal at the Facility under all Applicable Laws; and (e) the transportation to and disposal of the waste at the Facility is otherwise in accordance with this Agreement. The parties may incorporate additional Acceptable Waste as part of this Agreement if prior to delivery of such Waste to Company, Generator has provided an Application for such Acceptable Waste and Company has approved disposal of such Acceptable Waste within the limitations and conditions contained in Company's written notice of approval of Special Waste Disposal. Title to and liability for any and all Acceptable Waste handled or disposed of by Company shall at all times remain with Generator and Broker (if a Broker is involved).

7 **Rights of Refusal/Rejection.** The Generator shall inspect all waste at the place(s) of collection and shall remove any and all Unacceptable Waste. Company has the right to refuse, or to reject after acceptance, any load(s) of waste(s) delivered to its Facility including if the Company believes (a) Generator has breached (or is breaching) its representations, warranties, covenants or agreements in this Agreement or any Acceptable Waste Documentation or any Applicable Laws; or (b) that the waste contains Unacceptable Waste. The Company has the right to refuse, or to reject after acceptance, any load(s) of waste(s) delivered to its Facility if the Company has reason to believe, in its sole discretion, that the waste: (1) emits excessive odors; and/or (2) negatively impacts operations at the Facility. Company shall have the right to inspect all vehicles and containers of waste haulers, including the Generator's vehicles, in order to determine whether the waste is Acceptable Waste pursuant to this Agreement and all Applicable Laws. The Company's exercise, or failure to exercise, its rights hereunder shall not operate to relieve the Generator of its responsibilities or liability under this Agreement.

8 **Limited License to Enter.** This Agreement provides Generator with a license to enter the Facility for the limited purpose of, and only to the extent necessary for, off-loading Acceptable Waste at the Facility in the manner directed by Company. Except in an emergency, Generator's personnel shall not leave the immediate vicinity of their vehicle. After off-loading the Acceptable Waste, Generator's personnel shall promptly leave the Facility. Under no circumstances shall Generator or its personnel engage in any scavenging of waste or other materials at the Facility. The Company reserves the right to make and enforce reasonable rules and regulations concerning the operation of the Facility, the conduct of the drivers and others on the Facility premises, quantities and sources of waste, and any other matters necessary or desirable for the safe, legal and efficient operation of the Facility including, but not limited to, speed limits on haul roads imposed by the Company, and the wearing of hard hats and other personal protection equipment by all individuals allowed on the Facility premises. Generator agrees to conform to such rules and regulations as they may be established and amended from time to time. Company may refuse to accept waste from and shall deny an entrance license to, any of Generator's personnel whom Company believes is under the influence of alcohol or other chemical substances. Generator shall be solely responsible for its employees and subcontractors performing their obligations in a safe manner when at the facility of Company.

9 **Charges and Payment.** Payment shall be made by Generator within thirty (30) days after receipt of invoice from Company. If any amount is overdue, the Company may terminate this Agreement. Generator agrees to pay a finance charge equal to the maximum interest rate permitted by law. Generator shall be liable for all taxes, fees, or other charges imposed upon the disposal of the Acceptable Waste by federal, state, local or provincial laws and regulations. Company, from time to time, may modify its rates upon thirty (30) days written notice to Generator. For the purposes of this section, written notice may be provided via email, certified mail, or overnight courier.

10 **Termination/Suspension.** Company shall have the right to immediately terminate and/or suspend this Agreement upon the occurrence of any of the following events of default: (a) Generator's failure to timely pay any amounts due under this Agreement to Company; (b) Generator's breach of any of its obligations, representations, warranties or covenants under this Agreement or any Acceptable Waste Documentation; or (c) the filing of a voluntary or involuntary petition for reorganization or bankruptcy against Generator. Generator shall be liable for any losses, claims, expenses and damages incurred by Company as a result of suspension or termination hereunder. Generator's obligations, representations, warranties and covenants regarding the Acceptable Waste delivered and all indemnities contained in this Agreement shall survive expiration and termination of this Agreement. Additionally, Company shall have the right to terminate this Agreement for convenience at any time on 30 days notice to Generator.

11 **Personnel Knowledge and Authority.** Generator represents, warrants and covenants that its drivers who deliver Acceptable Waste to Company's Facility have been advised by Generator of the Company's prohibition on deliveries of hazardous materials or substances, radioactive materials or substances, or toxic waste or substances or any other Unacceptable Waste to the Facility, of Company's restrictions on deliveries of Special Waste to the Facility, of the definitions of "Hazardous Waste and Hazardous Substances" as provided by applicable federal, state and local law, rules and regulations and "Special Waste" as provided herein, and of the terms of this license to enter Company's Facility.

12 **Indemnification.** Generator agrees to indemnify, defend and hold harmless Company, the legal entity owning and/or operating the Facility, their subsidiaries, affiliates and parent corporations, as applicable, and each of their respective officers, directors, lenders, employees, subcontractors and agents (collectively, the "Company Indemnified Parties") from and against any and all claims, suits, losses, liabilities, assessments, damages, fines, costs and expenses, including reasonable attorneys' fees (collectively, "Losses") arising out of or related to (a) the transportation to and/or disposal of any Unacceptable Waste at the Facility, whether or not Generator or Company was negligent in failing to identify the Unacceptable Waste; (b) the loading and/or removal of Unacceptable Waste at the Facility; (c) any penalties, fines or remediation activities incurred by or imposed as the result of the transportation and/or disposal of Unacceptable Waste; (d) any increased inspection, testing, study and analysis costs made necessary due to reasonable concerns of Company as to the content of the waste transported and/or disposed of at the Facility following discovery of potentially Unacceptable Waste; and (e) the Company's inability to use the Facility due to the presence of Unacceptable Waste including without limitation any consequential damages. Company may also, in its sole discretion, require Generator to promptly remove the Unacceptable Waste at Generator's sole expense. The indemnification and other obligations stated in this Section 12 shall survive the expiration and termination of this Agreement.

13 **Insurance.** Generator shall maintain in full force and effect throughout the term of this Agreement the following types of insurance in at least the amounts specified below:

Coverages	Minimum Amounts of Insurance
Worker's Compensation	Statutory
Employer's Liability	$1,000,000
General Liability	$1,000,000 combined single limit
Automobile Liability (i (for hauling)	$1,000,000 combined single limit

All insurance will be by insurers authorized to do business in the state in which the Facility is located. Generator shall deliver the Certificates of Insurance evidencing the foregoing policies to Company before Generator delivers any waste to the Facility pursuant to this Agreement. In addition, the (i) Commercial General Liability (including the Umbrella/Excess policy) policy must include Contractual Liability coverage specifically covering Generator's indemnification of Company, and (e) The Commercial General Liability, Automobile Liability and the Umbrella/Excess Liability policies must be written on an "occurrence form". Said policies shall not thereafter be canceled, be permitted to expire or lapse, or be changed without 30 days advance written notice has been given to Company. With the exception of workers' compensation, Company shall be shown as additional insureds under all of the insurance policies required by this Section 13. The policies required by this Section 13 shall be primary and non-contributory with respect to Company, and the insurance providers shall agree to waive their rights of subrogation against Company.

14 **Failure to Perform.** Except for Generator's obligation to pay amounts due to Company, neither party shall be liable for its failure to perform due to circumstances that are both not its fault and beyond its reasonable control, including, but not limited to, strikes or other labor disputes, riots, protests, civil disturbances or sabotage, changes in law, fires, floods, compliance with government requests, explosions, accidents, weather, lack of required natural resources, or acts of God affecting either party. If any of the circumstances provided for in the preceding sentence occur, including, without limitation, whether any federal, state or local court or governmental authority takes any action that would (a) close or restrict operations at the Facility; or (b) limit the quantity or prohibit the disposal of Acceptable Waste at the Facility, Company shall have the right to reduce, suspend or terminate Generator's access to the Facility immediately, without prior notice; provided, however, that Generator's payment and indemnification obligations shall survive such reduction, suspension or termination. Neither Party is required to settle any labor dispute against its own best judgment.

15 **Assignment; Performance of Services.** Generator may not assign, transfer, subcontract or otherwise vest in any other company, entity or person, in whole or in part, any of its rights or obligations under this Agreement without the prior written consent of Company, which Company may withhold in its sole discretion. Company may freely assign this Agreement or any of its rights or obligations thereunder, to any other company, entity or person, in its sole discretion. Additionally, Company may freely use any of its affiliates to provide the services and fulfill Company's obligations under this Agreement.

16 **Right of Disposal.** This Agreement does not grant any rights to dispose of waste other than as specifically set forth in this Agreement.

17 **Continuing Compliance.** The Generator has a continuing obligation to inform the Company of any new information, or information not previously provided to the Company by Generator which may affect the acceptability of the waste by the Company. Further, the Generator shall comply with all Company requests for evidence of Generator's continuing compliance with the terms of the Agreement including but not limited to the following: (i) providing new, updated Special Waste profiles on the waste(s) offered for disposal or, (ii) providing appropriate certification that the waste being offered for disposal is accurately reflected by the appropriate Special Waste Profile or, (iii) re-sample the waste at Generator's expense if reasonable cause exists as to its acceptability under the terms of this Agreement or, (iv) allow the Company to re-sample the waste at Generator's expense if reasonable cause exists as to its acceptability under the terms of this Agreement or any Acceptable Waste Documentation.

18 **Miscellaneous.**

(A) This Agreement shall be governed by the laws of the State in which the Facility is located.

(B) No waiver of a breach of any of the obligations contained in the Agreement shall be construed to be a waiver of any prior or succeeding breach of the same obligation or of any other obligation of this Agreement.

(C) Unless otherwise provided for herein, no modification, release, discharge or waiver of any provision or obligation hereof shall be of any force, or effect, unless in writing signed by all parties to this Agreement.

(D) Generator shall treat as confidential and not disclose to others during or subsequent to the terms of this Agreement, except as is necessary to perform this Agreement, or to comply with any applicable law or regulation any information (including any technical information, experience or data) regarding the Company's plans, programs, plants, processes, products, costs, equipment or operations which may come within the knowledge of the Generator or its employees in the performance of this Agreement, without in each instance securing the prior written consent of the other Company.

(E) If any term, phrase, obligation or provision of this Agreement shall be held to be invalid, illegal or unenforceable in any respect, this Agreement shall remain in effect and be construed without regard to such term, phrase, obligation or provision.

(F) This Agreement constitutes the entire understanding between the parties, replacing and amending any prior agreements between the parties, and shall be binding upon all parties hereto, their successors, heirs, representatives and assigns. Any provision, term or condition in any acknowledgement, purchase order or other response by Generator which is in addition to or different from the provisions of this Agreement shall be deemed objected to by the Company and shall be of no effect.

(G) Generator represents, warrants and covenants that it is and, during the term of this Agreement will remain, in compliance with and will perform its obligations pursuant to all applicable laws and regulations and shall indemnify, defend and hold harmless the Company from any breach thereof.

(H) It is the understanding and agreement of the parties that the Company is an independent contractor, and is not an agent, nor an authorized representative of the Generator.

(I) Company may provide any of the Services covered by this Agreement through any of its affiliates or subcontractors, provided that Company shall remain responsible for the performance of all such services and obligations in accordance with this Agreement.

19 **Notices.** All notices required under this Agreement shall be considered as having been given upon being placed in the mail, certified postage prepaid, addressed to Company or Generator at the address herein set forth in this Agreement or to such other address as may be given to the other party in writing.

20 **Liquidated Damages.** If Generator terminates this Agreement before its expiration other than as a result of a breach by Company, Generator shall pay Company an amount equal to the most recent month's monthly charges multiplied by the lesser of (a) six months or (b) the number of months remaining in the term. Generator acknowledges that in the event of such a termination, actual damages to Company would be uncertain and difficult to ascertain, such amount is the best, reasonable and objective estimate of the actual damages to Company, such amount does not constitute a penalty, and such amount is reasonable under the circumstances. Any amount payable under this paragraph shall be in addition to amounts already owing under this Agreement.

City of Stockbridge

AGENDA ITEM

MEETING DATE
June 26, 2024

[ ]	RESOLUTION
[ ]	ORDINANCE
[ ]	CONTRACT APPROVAL/ RENEWAL
[ ]	PUBLIC HEARING
[ ]	PRESENTATION
[x]	BID/SOLICITATION AWARD
[ ]	TASK ORDER
[ ]	CHANGE ORDER
[ ]	BUDGET AMENDMENT
[ ]	BUDGET TRANSFER
[ ]	PAYMENT APPROVAL
[ ]	OTHER

[ ]	GENERAL FUNDS
[ ]	FUND BALANCE
[ ]	SPLOST OR TSPOST
[ ]	ARPA
[ ]	GRANT
[ ]	HOTEL/MOTEL
[ ]	TOURISM
[ ]	COUNCIL INITIATIVE
[ ]	PARTNER/SPONSOR
[ ]	DEPARTMENT FUND
[ ]	BALANCE

PRESENTER: Frederick Gardiner

DEPARTMENT: Finance

ACCOUNT TRANSFER FROM:

ACCOUNT TRANSFER TO:

ITEM/PROJECT/EVENT:

Consideration for approval of Contract No. 2024-0004, Financial Audit Services with Mauldin & Jenkins Certified Public Accountants.

BACKGROUND INFORMATION:

On April 11, 2024, the City of Stockbridge, Procurement Department received Request for Proposals from qualified firms to provide Financial Audit Services. Upon completion of the review and evaluation of the response proposals, the Selection Committee ranked the responses based on the factors outlined in the RFP.

Three firms submitted proposals which were evaluated and scored by a five-person selection committee based on the firm's Qualifications/Qualifications of Key Personnel, Technical Approach/Project Management, Experience, and Cost. The firm ranks were as follows:

BACKGROUND INFORMATION:

COMPANY	RANKED
Mauldin & Jenkins Certified Public Accountants	#1
CKH CPAs & Advisors, LLC	#2
HCT Certified Public Accountants and Consultants, LLC	#3

This contract will provide Financial Audit Services for the City of Stockbridge financial statements for the fiscal years ending December 31, 2024, December 31, 2025, December 31, 2026, December 31, 2027, and December 31, 2028. These audits will be performed in accordance with generally accepted auditing standards, the standards set forth for financial audits in the U.S. General Accounting Offices (GAO) Government Auditing Standards, the provisions of the Federal Single Audit Act of 1984 and U.S. Office of Management and Budget (OMB) Circular A-133, Audits of State, Local Governments, and nonprofit organizations.

STAFF RECOMMENDATION:

City Staff are requesting approval to award the contract to Mauldin & Jenkins Certified Public Accountants in the amounts of not to exceed Base Year $62,500.00, 1st Option Year $65,000.00, 2nd Option Year $67,500.00, 3rd Option Year $70,000.00, and 4th Option Year $72,500.00.
The Agreement is for one (1) year, with the option to renew for four (4) one (1) year periods, with such options in the City's sole discretion.

ATTACHMENTS:
Contract
Mauldin & Jenkins Certified Public Accountants Response Proposal
Mauldin & Jenkins Certified Public Accountants Cost Proposal

Fiscal Impact: ***Funds will be provided from account number***

APPROVALS:

CITY MANAGER _____

CITY TREASURER _____

CITY ATTORNEY _____

PROCUREMENT Shakera Hall

☐ FINANCIAL IMPACT ■ N/A

AMOUNT $

ATTACHMENTS: X

APPENDIX B
Contract Agreement

This Contract Agreement made and entered into this_____day of_____in the year 2024 (the "Agreement"); by and between The City of Stockbridge, Georgia (the "City"), having its principal place of business at 4640 North Henry Boulevard, Stockbridge, Georgia 30281 and _ **Mauldin & Jenkins Certified Public Accountants** (the "Contractor").

WHEREAS, the City has caused the Request for Proposal 2024-004 to be issued soliciting proposals from qualified firms to furnish all items, labor services, materials and appurtenances called by them in accordance with the RFP No. 2024-0004; and

WHEREAS, the Contractor submitted a proposal in response to the RFP; and

WHEREAS, the Contractor's proposal was deemed by the City to be the most advantageous to the City;

NOW, THEREFORE, for and in consideration of the mutual covenants and promises contained herein, the receipt and sufficiency of which being hereby acknowledged by the parties, the parties agree as follows

1.0 **SCOPE OF WORK**

In accordance with Stockbridge's Financial Audit Services, the Contractor shall furnish all materials, equipment, and labor to provide the services described in the RFP to the specifications as directed in the RFP and pursuant to the terms of this Agreement, including all incidentals as directed by the City's Public Works Department and the City Manager or his/her representative.

The services shall be performed in a prompt and professional manner in accordance with the standards of the profession.

The scope of services for this Agreement consists of the following listed under the proposal, to include janitorial services for the City of Stockbridge's nine (9) locations which are listed within this proposal from a certified, bonded Contractor.

2.0 **PAYMENT**

The City shall pay and the Contractor shall receive the prices stipulated in the bid/proposal hereto attached as full compensation for everything furnished and done by the Contractor under this Agreement, based on the bid/proposal which sum shall be paid in the manner and terms specified in the Agreement. Before issuance of certificate of payment, if the Contractor has not submitted evidence satisfactory to the City that all payrolls, materials bills, and other indebtedness connected with the Project have been paid, the City may withhold, in addition to the retained percentages,

such amount or amounts as may be necessary to pay just claims for labor and services rendered and materials in and about the work on the Project (the "Work"), and such amount or amounts withheld or retained may be applied by the City to the payment of such just claims.

Payment will be made by the City within thirty (30) days of receipt of an accurate invoice by the Finance Department. To ensure prompt and accurate payment all invoices must accompany a purchase order number provided by the City.

2.1 **TERM**

This Agreement shall be effective upon its execution (the "Effective Date") The initial term of this Contract shall be through December 31, 2024. This Contract shall terminate absolutely and without further obligation on the part of the City on December 31, 2024, and each December 31 of each succeeding and renewed year, as required by O.C.G.A. §36-60-13, as amended, unless terminated earlier in accordance with the provisions of this Contract.

This Contract may be renewed for four (4) additional twelve-month terms, upon the same terms and conditions, as provided for in this Contract, unless terminated by the City, by notice to service provider or termination and non-renewal by December 31 of the Contract year.

If the Project has not been completed by (_____N/A_____), this Agreement shall automatically renew for an additional one year or part of the year necessary to conclude the Project unless the City chooses to terminate this Agreement pursuant to the provisions of this Agreement by giving seven (7) days written notice to the Contractor. There are ninety (30) calendar days scheduled for Project duration.

2.2 **CHANGE ORDERS**

Written approval shall be obtained by the Contractor for all change orders or contingency items prior to the start of any work.

3.0 **INDEPENDENT CONTRACTOR**

3.1 The Contractor shall be an independent contractor. The Contractor is not an employee, agent or representative of the City. The Contractor shall obtain and maintain, at the Contractor's expense, all permits, licenses or approvals that may be necessary for the performance of the services. The Contractor shall furnish copies of all such permits, licenses or approvals to the City Representative at the time of executing the Agreement.

3.2 Neither the City nor the Contractor has the authority to bind the other to any third person or otherwise to act in any way as the representative of the other, unless otherwise expressly agreed to in writing signed by both parties hereto. The Contractor agrees not to represent itself as the City's agent for any purpose to any party or to allow any employee of the Contractor to do so, unless specifically authorized, in advance and in writing, to do so, and then only for the limited purpose stated in such authorization.

The Contractor shall assume full liability for any contracts or agreements the Contractor enters into on behalf of the City without the express knowledge and prior written consent of the City.

4.0 INDEMNIFICATION

The Service Provider agrees to indemnify the City (including elected officials and employees) and hold the City harmless from and against any and all claims, liabilities, damages, losses, costs or expenses, including, without limitation, reasonable attorney's fees arising out of or related to: (a) a breach of the contract by Service Provider or (b) the performance of this Contract, whether by Service Provider, a subcontractor, or anyone directly or indirectly employed by them or anyone for whose acts they may be liable, regardless of whether or not such claim, liability, damage, loss, cost or expense is caused by the gross negligence or willful misconduct of a party indemnified hereunder. Service Provider's indemnification obligation shall not be limited by a limitation on amount or type of damages, compensation or benefits payable by or for Service Provider or subcontractor under any insurance required by the contract, including workers' compensation acts, disability benefit acts, other employee benefit acts, or any other insurance. Service Provider shall not settle or compromise any indemnifiable claims hereunder without the prior written consent of the City. The City cannot and does not agree to indemnify, hold harmless, exonerate or assume the defense of Service Provider or any other person or entity whatsoever, for any purpose whatsoever.

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5.0 INSURANCE

The Contractor shall, at its own cost and expense, obtain and maintain workers' compensation and commercial general liability insurance coverage covering the period of this Agreement, such insurance to be obtained from a responsible insurance company acceptable to the City and legally licensed and authorized to transact business in the State of Georgia. Any such insurance shall be in force on the date of execution of the Agreement and shall remain continuously in force for the duration of the Agreement.

The Contractor and its sub-Contractors shall secure and maintain the following insurance as itemized below:

5.1.1 WORKERS' COMPENSATION INSURANCE

Workers' Compensation insurance shall meet the statutory obligations with Coverage B- Employers Liability limits of at least $100,000 each accident, $5,00,000 disease-policy limit and $100,000 disease each employee.

5.1.2 COMMERICAL GENERAL LIABILITY INSURANCE

Commercial General Liability insurance shall be at the limits of at least $1,000,000 general aggregate, $1,000,000 personal and advertising injury, $1,000,000 each occurrence, $50,000 fire damage and $1,000 medical expense any one person. The

policy shall be on an "occurrence "basis shall include contractual liability coverage and the City shall be named an additional insured. The insurance shall include up to $10,000 expenses to extract pollutants from land or water at the" premises" if the discharge, dispersal, seepage, migration, release, escape or emission of the pollutants is caused by or results from a covered cause of loss.

5.1.3 COMMERICAL AUTOMOBILE LIABILITY INSURANCE

Commercial Automobile Liability insurance covering all owned, non-owned and hired automobiles with limits of at least $1,000,000 per accident. This insurance shall include a cause of loss where there is a spill of fuels and lubricants used in the vehicle for its operation.

5.1.4 PROFESSIONAL LIABILITY INSURANCE OR ERRORS & OMISSIONS INSURANCE

The Contractor shall maintain Professional Liability (Errors & Omissions) Insurance with coverage and limits no less than $1,000,000 each occurrence and $1,000,000 annual aggregate, in the event a contractor is performing design, engineering or other professional services.:

The insurance policy must provide the protection stated for three (3) years after completion of the Work. Acceptance of the insurance by the City shall not relieve, limit or decrease the liability of the Contractor. Any policy deductibles or retention shall be the responsibility of the Contractor. The Contractor shall control any special or unusual hazards and be responsible for any damages that results from those hazards.

The City does not represent that the insurance requirements are sufficient to protect the Contractor's interest or provide adequate coverage. Evidence of coverage is to be provided on a City-approved Insurance Certificate. If the policy is canceled, not renewed or materially changed, Contractor must provide notice to the City no more than thirty (30) days after the date of such cancellation, non-renewal or change.

The Contractor shall require any of its Sub-Contractors, if sub-contracting is allowable under this Agreement, to comply with these provisions.

5.2 ACCOUNTING STANDARDS

The Contractor agrees to maintain the necessary source documentation and enforce sufficient internal controls as dictated by Generally Accepted Accounting Principles (GAAP) to properly account for expenses incurred under this Agreement.

5.3 RETENTION OF RECORDS

The Contractor shall retain all records pertinent to expenditures incurred under this Agreement for a period of three (3) years after the resolution of all audit findings. Records for non-expendable property acquired with funds under this Agreement shall be retained for three (3) years after final disposition of such property.

6.0 TERMINATION

6.1 TERMINATION FOR CAUSE:

The City may terminate this Contract for cause upon ten (10) days prior written notice to the Service Provider of the Service Provider's default in the performance of any term

of this Contract. Such termination shall be without prejudice to any City's rights or remedies provided by law.

6.2 **TERMINATION FOR CONVENIENCE:**

The City may terminate this Contract for its convenience at any time upon (30) days written notice to the Service Provider. In the event of the City's termination of this Contract for convenience, the Service Provider will be paid for those services actually performed. Partially completed performance of the Contract will be compensated based upon a signed statement of completion to be submitted by the Service Provider who shall itemize each element of performance.

6.3 **TERMINATION FOR FUND APPROPRIATION:**

The City may unilaterally terminate this Contract due to lack of funding at any time by written notice to the Service Provider. In the event of the City's termination of this Contract for fund appropriation, the Service Provider will be paid for those services actually performed. Partially completed performance of the Contract will be compensated based upon a signed statement of completion to be submitted by the Service Provider which shall itemize each element of performance.

7.0 **INCLUSION OF DOCUMENTS**

The Agreement, any amendments thereto, the RFP, and the Contractor's Bid/Proposal submitted in response thereto, including any best and final offer, are incorporated in this Agreement by reference and form an integral part of this Agreement. In the event of a conflict in language between this Agreement and the foregoing documents incorporated herein, the provisions and requirements set forth in this Agreement shall govern. In the event of a conflict between the language of the RFP, as amended, and the Contractor's Proposal, the language in the former shall govern.

8.0 **COMPLIANCE WITH ALL LAWS AND LICENSES**

The Contractor must obtain all necessary licenses and comply with local, state and federal requirements. The Contractor shall comply with all laws, rules and regulations of any governmental entity pertaining to its performance under this Agreement.

9.0 **ASSIGNMENT**

The Contractor shall not assign or subcontract the whole or any part of this Agreement without the City's prior written consent.

10.0 **AMENDMENTS IN WRITING**

No amendments to this Agreement shall be effective unless it is in writing and signed by duly authorized representatives of the parties.

11.0 DRUG-FREE AND SMOKE-FREE WORKPLACE

11.1 A drug-free and smoke-free workplace will be provided for the Contractor's employees during the performance of this Agreement; and

11.2 The Contractor will secure from any subcontractor hired to work in a drug-free and smoke-free work place a written certification so stating and in accordance with Paragraph (7), subsection (b) of the Official Code of Georgia Annotated Section 50-24-3.

11.3 The Contractor may be suspended, terminated, or debarred if it is determined that:

11.3.1 The Contractor has made false certification herein; or

11.3.2 The Contractor has violated such certification by failure to carry out the

requirements of Official Code of Georgia Annotated Section 50-24-3.

12.0 WORK AUTHORIZATION PROGRAM

Exhibit "A" is hereby incorporated into this Agreement and made a part hereto. Exhibit "A" enables all parties to be in compliance with O.C.G.A. § 13-10-91 as it pertains to statutorily-required verification of employees.

13.0 GOVERNING LAW AND VENUE

This Agreement shall be governed in all respects by the laws of the State of Georgia. Any disputes that arise under this Agreement shall be subject to the jurisdiction of the courts of Henry County, Georgia or the Northern District of Georgia, as applicable.

14.0 MISCELLANEOUS PROVISIONS

A. It is understood and agreed by and between the City and the Contractor that, on account of breach or default by either party of any of their obligations hereunder, it shall become necessary for the other party to employ and/or consult with an attorney to give advice, or to enforce or demand any of either party's rights or remedies hereunder, then, and in any such event, the defaulting or breaching party shall pay all attorney's fees, court costs and other expenses occasioned by such default(s) or breach(es).

B. All notices from Contractor to the City shall be served on or sent to the City at the following address:

City of Stockbridge
Attn: Procurement Department
4640 North Henry Boulevard
Stockbridge, Georgia 30281-3651

With a copy to:
City of Stockbridge
Attn: City Attorney
4640 North Henry Boulevard
Stockbridge, Georgia 30281-3651

All notices from the City to the Contractor shall be served on or sent to the Contractor at its registered office and at the following contact format:

Name:	
Address:	
City, State &Zip	
Telephone Number:	

C. Force Majeure. Neither party hereto shall be liable to the other party for any nonperformance, in whole or in part, of its obligations under this Agreement caused by the occurrence of any contingencies beyond the control of the parties, including but not limited to the weather (including but not limited to rain, showers, hurricanes, floods), declared or undeclared war, sabotage, insurrection, riot or other acts of civil disobedience, acts of a public enemy acts of governments or agencies affecting the terms of this Agreement, strikes, labor disputes, acts of third parties not within the control of the party whose performance is affected, shortages of fuel, failures of power, accidents, fires, explosions, hurricanes, storms, floods, or other acts of GOD. In the event that any such contingencies occur, the party whose performance is affected shall have a reasonable time in which to resume performance and such party's nonperformance shall not constitute a default. Notwithstanding the foregoing, if the non-performing party is unable to resume full performance despite reasonable attempts to do so, the other party shall have the right to terminate this Agreement pursuant to the provisions of Paragraph 4 above.

15.0 **ENTIRE AGREEMENT**

This Agreement constitutes the entire agreement between the parties with respect to the subject matter contained herein; all prior agreements, representations, statement, negotiations, and undertakings are suspended hereby. Neither party has relied on any representation, promise, nor inducement not contained herein WITNESS WHEREOF, the parties hereto have caused this Agreement to be duly executed by their duly authorized officers as of the day and year set forth next to each signature.

MAYOR AND COUNCIL FOR
THE CITY OF STOCKBRIDGE

(SEAL)

By:_____
ANTHONY S. FORD, Mayor

ATTEST:

_____
VANESSA HOLIDAY, City Clerk

Approved as to form:

_____
City Attorney

CONTRACTOR

(SEAL)

By:_____

_____, _____
ATTEST:

_____
_____, _____

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City of Stockbridge

REQUEST FOR PROPOSAL No. 2024-0004

For
Financial Audit Services

On behalf of
(City Manager's Office)

RFP DUE DATE AND TIME
April 11, 2024 @ 3:00 p.m. EST

RFP ISSUANCE DATE:
February 26, 2024

THERE WILL BE NO PRE-PROPOSAL CONFERENCE

PURCHASING CONTACT
Drexal D. Paulk @ 770-389-7900 ext. 322
E-MAIL: dpaulk@stockbridgega.org

LOCATION
City of Stockbridge
Department of Procurement
4640 N. Henry Boulevard
Stockbridge, Ga. 30281

ADVERTISEMENT FOR REQUEST FOR PROPOSALS

RFP 2024-0004 Financial Audit Services

All proposals are due to the Division of Contracts & Procurement on or before **Thursday, April 11, 2024, at 3:00 P.M**., legal prevailing time. Proposals shall be submitted in-person at the Division of Contracts and Procurement. One (1) original and five (5) copies and an electronic version on a thumb drive. Proposals submissions are due up until **3:00 p.m., Thursday April 11,2024**.

Proposals submitted after the proposal close date will not be accepted. Note: Any proposal submitted in any other format (email, paper, fax, mail, etc.) will not be accepted for any reason.

To ensure proper and timely submission please adhere to the dates and times outlined above. Any proposals received after this appointed schedule will be considered late. The proposal due date can be changed only by addendum.

A PRE-PROPOSAL CONFERENCE will NOT be held for this solicitation.

Please feel free to contact the Procurement Officer for this solicitation at (770) 389- 7800 ext. 322 or via email DPaulk@Stockbridgega.org. Please note that the response made by the City will be provided in writing to all Proposers by addendum. No verbal responses shall be authoritative.

EVENT	**DATE**
Request For Proposals Issued to Public	Monday, February 26, 2024
Non-Mandatory Pre-Bid Conference via **Cisco WebEx**.	**NO PRE-PROPOSAL CONFERENCE**
Last Day for Questions to be Submitted	Thursday, March 21, 2024 @ 12Noon EST
RFP Submission Deadline	Thursday, April 11, 2024 @ 3pm

City of Stockbridge
Department of Finance
Division of Contracts & Procurement

REQUEST FOR PROPOSAL SPECIFICATIONS

RFP 2024-0004 Financial Audit Services

1. DESCRIPTION

The City of Stockbridge Department of Procurement is soliciting Proposals from qualified vendors to assist the City with the preparation of a **financial audit.**

Background

The City of Stockbridge is in the northern part of Henry County, Georgia which was founded May 15, 1821. Henry county has an area of approximately 331 square miles located in the Piedmont Section of northern Georgia and is surrounded by the counties of Butts, Clayton, DeKalb, Newton, Rockdale, and Spalding Counties. Stockbridge, Georgia is just minutes south of Atlanta a straight drive down Interstate 75-South. The City is populated with approximately 30,000 residents.

The City of Stockbridge is a relaxed atmosphere, with all the amenities of a major metropolitan area with attractive lifestyle, and business opportunities. Stockbridge is also a wonderful place to live, work and play.

Stockbridge City Council (City) is the governing authority of the City of Stockbridge. The affairs of the City are conducted by a Mayor and five (5) member City Council. This elected body is responsible for the active coordination of community resources, to meet community needs.

The City Manager, who is appointed by the Mayor and City Council, oversees the day-to-day operations of the City, ensuring the efficient delivery of City Services. All activities and functions of the City are administered by the City Manager under the jurisdiction of the Mayor and City Council as set forth in State and Local Laws.

2. CONTACT PERSON

Please contact our procurement agent, Drexal Paulk, via email at DPaulk@Stockbridgega.org with any procedural or technical questions relating to this Request for Proposals. All questions should be submitted in writing to the Purchasing contact person and submitted via email at DPaulk@Stockbridgega.org. All inquiries must contain the request for proposal number and title in the subject line of the email. No phone calls will be accepted. Any responses made by the City will be provided in writing to all Proposers by addendum. No verbal responses shall be authoritative.

3. TERM OF AGREEMENT

The contract is intended for a one (1) year base and four (4) one-year renewable options that are contingent of funds availability.

4. SCOPE OF WORK

4.1 GENERAL INFORMATION

A. Purpose and Invitation to Submit Proposal. The City of Stockbridge is requesting proposals from qualified firms of certified public accountants to audit its financial statements for the fiscal years ending December 31, 2024, December 31, 2025, December 31, 2026, December 31, 2027, and December 31, 2028. These audits are to be performed in accordance with generally accepted auditing standards, the standards set forth for financial audits in the U.S. General Accounting Offices (GAO) Government Auditing Standards, the provisions of the Federal Single Audit Act of 1984 and U.S. Office of Management and Budget (OMB) Circular A-133, Audits of State, Local Governments, and nonprofit organizations. There is no expressed or implied obligation for the City to reimburse the responding firms for any expenses incurred in preparing proposals in response to this request. During the evaluation process, the City reserves the right to request additional information or clarification from proposers, where it may serve the City's best interest. Proposals submitted will be reviewed and evaluated by staff based on evaluation criteria and it is anticipated that the top three (3) will be recommended to the City Evaluation Committee. The top three (3) proposals will be notified to prepare a formal oral presentation to the Evaluation Committee. A “Best and Final” firm will be selected based on evaluation criteria scoring. This firm will be presented to the Finance Committee in the form of a contract for approval and recommendation to the City of Stockbridge City Council for approval in March. The City reserves the right to retain all proposals submitted, and to use any ideas in a proposal regardless of whether that proposal is selected. Submission of a proposal indicates acceptance by the firm of the conditions contained in this request for proposals, unless clearly and specifically noted in the proposal submitted, and confirmed in the contract between the City and the firm selected. It is anticipated that the Finance Committee will make a final recommendation to the City of Stockbridge City Council in April 2024 and that the City of Stockbridge will act upon that recommendation and award a contract in April 2024.

4.2 B. **Term of Contract**. A four-year contract for fiscal years ending December 31, 2024, December 31, 2025, December 31, 2026, December 31, 2027, and December 31, 2028, subject to the review and recommendation of the Finance Committee, the concurrence of the City of Stockbridge City Council, and the annual availability of an appropriation.

The external auditor shall prepare the City's Annual Comprehensive Financial Report (ACFR) in a form similar to the most common report. This includes the preparation of combined and combining financial statements. The City is requesting assistance with preparation of the ACFR. The City also desires the auditor to express an opinion on the fair presentation of its basic financial statements in conformity with generally accepted accounting principles. The basic financial statements are comprised of government-wide financial statements and fund financial statements. For the government-wide statements, the primary government includes governmental activities and business-type activities; and two discreetly presented component units. The fund statements include each major fund, aggregate remaining funds, and budgetary comparison statements for the major funds. Furthermore, the City desires the auditor to express an "in relation to" opinion on the fair presentation of its combining and individual fund financial statements and schedules in conformity with generally accepted accounting principles. The auditor is not required to audit the introductory and statistical section of the ACFR. The auditor shall also be responsible for performing certain limited procedures involving The Management's Discussion and Analysis and Required Supplementary Information required by the Governmental Accounting Standards Board, as mandated by generally accepted auditing standards. 2. The City desires the auditor to conduct a Single Audit of the City's Federal grant programs. This includes Notes to the Schedule of Expenditures of Federal Awards, the Schedule of Findings and Questioned Costs, and a Summary Schedule of Prior Audit Findings Following the preparation of the aforementioned, the auditor shall issue the following reports:

a) Independent Auditor's Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of the Financial Statements Performed in Accordance with Government Auditing Standards.

b) Report on Compliance for Each Major Federal Program; Report on Internal Control over Compliance; and Report on Schedule of Federal Expenditures of Federal Awards Required by OMB Circular, In addition to the Comprehensive Annual Financial Report and the Single Audit Report of the City, this engagement includes an audit from the Clerk of the Circuit Court. This audit requires the preparation of financial statements, as well as a supplemental schedule encompassing detailed information in the Annual Financial Report.

The related audit includes:

a) Independent Auditor's Report

b) Independent Accountants' Report on Compliance and on Internal Control Over Compliance

c) Report on Internal Control over Financial Reporting and on Compliance and Other Matters Based on GAAP Principles. Audit of Financial Statements Performed in Accordance with Government Auditing Standards.

d) Financial Statements: 1) Combined Balance Sheet 2) Notes to the Financial Statements Supplementary Information: Combining Statement of Changes in Assets and Liabilities – Agency Funds Report J – Annual Financial Report.

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i. Project Manager

The awarded service provider shall propose a clear project management and consultation framework.

ii. Project Reporting

The City of Stockbridge requires that the awarded vendor include a detailed project timeline and reporting schedule outlining the steps taken to ensure timely delivery of all project outputs based around interim milestones and a completion date.

1. SPECIAL CONDITIONS/INSTRUCTIONS

No Contact During Procurement Process

The evaluation and award process for City contracts shall be free from both actual and perceived impropriety, and that contacts between potential vendors and City officials, elected officials and staff regarding pending awards of City contracts shall be prohibited.

1. No person, firm, or business entity, however situated or composed, obtaining a copy of or responding to this solicitation, shall initiate or continue any verbal or written communication regarding this solicitation with any City officer, elected official, employee, or designated City representative, between the date of the issuance of this solicitation and the date of the City Manager's recommendation to the City Council for award of the subject contract, except as may otherwise be specifically authorized and permitted by the terms and conditions of this solicitation.

2. All verbal and written communications initiated by such person, firm, or entity regarding this solicitation, if same are authorized and permitted by the terms and conditions of this solicitation, shall be directed to the Purchasing Agent.

3. Any violation of this prohibition of the initiation or continuation of verbal or written communications with City officers, elected officials, employees, or designated City representatives shall result in a written finding by the Purchasing Agent that the submitted bid or proposal of the person, firm, or entity in violation is "non-responsive", and same shall not be considered for award.

TECHNICAL PROPOSAL PART 1- TELL US ABOUT YOUR COMPANY/FIRM

Tab 1 - Cover Letter

The proposal must include a letter of transmittal attesting to its accuracy, signed by an individual authorized to execute binding legal documents on behalf of the vendor. The cover letter shall provide the name, address, telephone, and facsimile numbers of the vendor along with the name, title, address, telephone, and facsimile numbers of the executive that has the authority to contact the City. The cover letter shall present the vendor's understanding of the project, a summary of the approach to be undertaken to perform the services, as well as a summary of the costs to provide the services.

Tab 2 - Executive Summary

The vendor shall submit an executive summary, which outlines its proposal, including the proposed general management philosophy. The executive summary shall at a minimum include an identification of the proposed project team, assign a contractor point of contact for the project, give the responsibilities of the project team, and a summary of the proposed services. This section should highlight aspects of the contractor's proposal which make it superior or unique in addressing the needs of the City.

Tab 3 - Company History

The vendor will provide, in this section of the proposal, pertinent company historical information that will demonstrate its ability to successfully accomplish this project.

Primary Business

The vendor will provide, in this section of the proposal, its primary business interest and/or operations including organization and affiliations, including the magnitude of its operation as it relates to this project.

Tab 4 - Experience

The vendor will provide, in this section of the proposal, a detailed description of similar services or contracts in which the vendor is presently involved or has completed during the past three (3) years. Include the dollar amount of each project with which you were associated.

Tab 5 - Capabilities

The vendor will provide in this section of the proposal a description of the firm's capabilities, any limitations relative to facilities, staff, ongoing projects, or contracts shall be identified and explained. The vendor should be able to adequately showcase their ability to meet all the standards outlined in this RFP.

Tab 6 - Company Principles

Provide a biographic overview of the vendor's key principles.

Staff

The vendor shall provide, in this section of the proposal, a description of key staff and personnel that will be assigned to effectively facilitate the requirements of this project. This description will include, at a minimum, the number of permanent employees, part-time employees and an organizational chart reflecting local and corporate assignments and responsibilities. Specifically, the vendor must identify what priority will be placed on this project and how the firm intends to provide the initial management and staff.

Resumes

The vendor shall provide, in this section of the proposal, resumes of key personnel which will be assigned to this project, both local and corporate. Each resume shall include at a minimum:

- Position/title
- Tenure with the vendor
- Education
- Overall experience
- Other related information pertaining to the work to be performed

PART 2 - TECHNICAL PROPOSAL

TELL US HOW YOU PLAN TO DELIVER/PERFORM THE SCOPE OF WORK.

Project Plan

Please provide a detailed plan of how your firm intends to deliver/perform the scope of work. Please provide full project plan along with tentative timeline. Please also list key personnel that will be performing essential tasks. The project plan should describe the offeror's approach to successful implementation to address the proposed scope of work. At a minimum, the project plan should include:

- A detailed outline of the proposed methodology to complete and manage the project scope including high level timeline and brief description of the key tasks, key milestones, and key deliverables.
- A public involvement plan addressing what types of involvement methods will be used and the frequency of each activity.
- State the vendor/offeror's understanding of the scope services being solicited by the City. If there are any gaps between what the vendor/offeror believes should be the proper scope of services, given all information available, the offeror should clearly identify these gaps.

- Discuss any assumptions relating to the responsibilities and/or commitments the offeror is expecting of the City throughout the life of the project.

- Provide a timeline indicating tasks required and the start and completion dates for each. It is expected that the work will commence as soon as possible after the contract is awarded.

- Provide a detailed breakdown and description of the specific steps, and services that will be provided. Describe how the final product will be structured and presented upon completion. Include any computer/software compatibility information. Vendors may elect to include in the section any innovative methods or concepts that might be beneficial to the City of Stockbridge as long as the minimum requirements set out in this RFP are met.

- Project Team The offeror should document its experience and qualifications for the project highlighting any strategic benefits the City will realize in partnering with the offeror. The offeror should also provide a staffing plan for this project including qualifications (of no more than two pages per person) of the proposed key functional and technical members and their related roles for this project. The proposed project manager should be identified. The intent, if any, to subcontract parts of the scope of work should be described and qualifications for the subcontracting firm and key personnel should also be provided.

COST PROPOSAL: PLEASE PROVIDE AS MUCH ITEMIZATION AS POSSIBLE. DO NOT INCLUDE WITHIN TECHNICAL SPECIFICATIONS COST SHALL BE SUBMITTED IN SEPARATE ENVELOPE

Reasonableness

The Vendor's Fee Schedule, included in this solicitation, must be submitted separately from Technical Proposal. The Cost Proposal shall remain sealed until the Technical Proposals have been opened and evaluated. The vendor whose technical score ranks above the average will have their Cost Proposals unsealed and scored. The vendor whose technical score ranks below the average will NOT have their Cost Proposals unsealed and scored.

The formula used to evaluate price for services outlined in Scope of Work is as follows:

(Lowest price / price of proposal being evaluated) x points available for price = score. The Cost Proposals for all services will be evaluated for completeness and reasonableness.

Best Value

The cost proposal is important; however, it will not be the sole determining factor in the selection process. It is not the intent of the City to limit innovative solutions by dollar constraints, but rather to determine which proposal has the potential of providing the best value for the services required.

Proposal Evaluation Factors

It is the intent of the City to evaluate the proposals based on technical merit and price and to choose the vendors whose proposal best represents the best value to the City. The City reserves the right to waive any irregularities, reject any and/or all proposals, in whole or in part, when, in the opinion of the City, such rejection is in the best interests of the City.

Proposals will be graded based on the following form:

Evaluation Criteria	Weight	Score
Company Background & Qualifications	24%	
Technical Proposal: Plan for execution of Scope of Work	30%	
Cost Proposal	30%	
Performance of Similar Projects	8%	
Local Business: Within City Limits	3%	
Number of CPAs on staff.	5%	
Total	100%	

Ratings descriptions are on the next page.

Rating	Description
1 - 20	**Poor**
21 - 40	**Fair**
41 - 60	**Good**
61 - 80	**Excellent**
81 - 100	**Superior**

BASIS FOR EVALUATION OF PROPOSALS AND AWARD OF PROJECT

The City does not discriminate on the grounds of race, religion, color, age, sex, disability, sexual orientation, or national origin in consideration of an award. Disadvantaged business enterprises are afforded a full opportunity to submit proposals. Proposals will be evaluated on the Consultant's qualifications, experience, project understanding and approach. Based on the preliminary review of the proposals, Consultants may then be interviewed prior to selection. The award will be made to the Consultant providing the best value for the City's requirements. In making such determination, City Council shall consider but not be limited to the following factors:

1. The Consultant's skill, ability, and capacity to perform the services required.
2. The Consultant's interest in the services which is the subject of this RFP, as well as their understanding of the scope of such services and the specific requirements of the City.
3. The Consultant's ability to perform the services within the time period specified, without delay or interference.
4. The Consultant's character, integrity, reputation, judgment, experience and efficiency.
5. The Consultant's previous and current compliance with statutes, ordinances and rules relating to the Project.
6. The sufficiency of the Consultant's financial resources necessary for the performance of the Project.
7. The number and nature of any conditions attached to the proposal.
8. The general organization of the proposal: Special consideration will be given to submittals which appropriately address the goals; and provide in a clear and concise format the requested information; and
9. The scope, responsiveness, efficiency, and quality of the Consultant's administrative services.

The City makes no commitment to any firm or consultant until such time as the City approves the negotiated contract. Upon recommendation of the Procurement Manager and City Manager, the Mayor and the City Council may reject all proposals when it determines that such action is in the public's best interest.

2. INSURANCE & RISK MANAGEMENT PROVISIONS

The contractor will maintain such insurance as will protect it from claims under workmen's compensation acts and from any other claims for damages to property and personal injury, including death, which may arise from operations under this contract, whether such operations be by itself or by any sub-contractor or anyone directly or indirectly employed by either of them. Certificates of such insurance **MUST** be filed with the City.

Contractor Insurance Requirements:

Within 5 days of Notice of Award, and at all times that this Contract is in force, the Contractor shall obtain, maintain, and furnish the City Certificates of Insurance from licensed companies doing business in the State of Georgia with an A.M. Best Rating A-10 or higher and acceptable to the City covering. The City of Stockbridge must be listed as an additional insured. The following minimum requirement shall apply to said Certificate of Insurance:

1. Workers' Compensation & Employer's Liability Insurance. Workers' Compensation Insurance in compliance with the applicable Workers' Compensation Act(s) of the state(s) wherein the work is to be performed or where jurisdiction could apply in amounts required by statutes. Employer's Liability Insurance, with limits of liability of not less than $1,000,000 per accident for bodily injury or disease.

2. Commercial General Liability Insurance, including contractual liability insurance, product and completed operations, personal and advertising injury, and any other type of liability for which this Contract applies with limits of liability of not less than $1,000,000 each occurrence, $2,000,000 policy aggregate for personal injury, bodily injury, and property damage. Commercial General Liability Insurance shall be written on an "occurrence" form.

3. Automobile Liability Insurance with limits of liability of not less than $1,000,000 per accident for bodily injury and property damage if automobiles are to be used in the delivery of or in the completion of services and work or driven onto the City's property. Insurance shall include all owned, non-owned and hired vehicle liability.

4. Umbrella Insurance with limits of liability excess of Employer's Liability Insurance, Commercial General Liability Insurance and Automobile Liability Insurance in the amount of not less than $3,000,000.

5. Professional (Errors and Omissions) Insurance: For Professional Services and for all Design/Build Projects with limits of liability of not less than $3,000,000 per occurrence or claim $3,000,000 policy aggregate. Such policy shall also include coverage for losses arising from the breach of information security or cyber liability (including Errors & Omissions, Security and Privacy Liability and Media Liability), whether combined with the Professional Liability policy or placed as a separate policy but carrying the same limits of liability. Such coverage shall insure damage, injury and loss caused by error, omission or negligent acts, including all prior acts without limitation, related to the professional services to be provided under this Contract. The policy shall be amended to include independent contractors providing professional services on behalf of or at the direction of the Contractor.

The definition of Contractual Liability shall be amended to state that liability under a contract of professional services is covered. Further, coverage shall be afforded for fraudulent acts, misappropriation of trade secrets, internet professional services, computer attacks, personal injury, regulatory actions, wrongful acts, contractual liability, privacy policy, and insured versus insured. The Contractor shall ensure that coverage under this policy continues for a period of thirty-six (36) months after completion of services.

A copy of these endorsements shall be provided to the City.

Certificates of Insurance showing that such coverage is in force shall be filed under this Contract by the Contractor to the City and is a pre-requisite to this contract. Failure to provide insurance within (10) days of award makes any contract award voidable by the City.

The obligations for the Contractor to procure and maintain insurance shall not be construed to waive or restrict other obligations and it is understood that insurance in no way limits the liability of the Contractor whether or not same is covered by insurance.

Certificate Holder should read:
The City of Stockbridge
4640 North Henry Blvd.
Stockbridge, Ga. 30281

END OF SECTION

City of Stockbridge
Department of Finance
Division of Procurement

REQUEST FOR PROPOSALS
GENERAL TERMS AND CONDITIONS

The following provisions are hereby made a part of this Request for Proposal ("RFP"). Any contract or purchase order awarded as the result of this request shall be governed by these General Terms and Conditions. By submission of your responses to this RFP, vendor agrees to furnish the product(s) and/or service(s) pursuant to these conditions.

1. **GENERAL.** These provisions are standard for all City contracts. The City may delete or modify any of these standard provisions for a particular contract or purchase order by indicating a change in the special instructions or provisions. **Any vendor accepting a purchase order award as the result of this request agrees that the provisions included within this Request for Proposal shall prevail over any conflicting provision within any standard form contract of the vendor.**

2. **METHOD OF SOURCE SELECTION.** This procurement is being conducted in accordance with all applicable provisions of the City of Stockbridge Municipal Code and the specific method of source selection for the services required in this solicitation is Competitive Sealed Bidding and Competitive Sealed Proposals.

3. **SUBMISSION OF RESPONSES.** Responses must be submitted for quick quotes on-line via the Georgia Procurement Registry portal at https://ssl.doas.state.ga.us/gpr/index. Response to e-quotes must be received no later than 3:00 p.m. on the date indicated.

4. **STATE OF GEORGIA IMMIGRATION REQUIREMENT.** Effective July 1, 2013, State law requires that all contracts for the physical performance of services for all labor or service contract(s) that exceed $2,499.99 (except for services performed by an individual who is licensed pursuant to Title 26, Title 43, or the State Bar of Georgia) must comply with the Illegal Immigration Reform and Enforcement Act. The City cannot enter into a contract for the physical performance of services unless the contractor has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify.

   Before a bid/proposal for any such services is considered by the City, the bid/proposal shall include a signed, notarized affidavit from the contractor attesting the affiant has registered with, is authorized to use, and uses the federal work authorization program.

5. **AMENDMENTS TO THE REQUEST PROPOSAL.** Any amendment to pricing is valid only if in writing and issued by the City.

6. **ADDENDUM.** Revision to the Request for Proposal issued by the City prior to the receipt of bids.

7. **NON-COLLUSION.** Bidder certifies that this bid/proposal is made without prior understanding, agreement or connection with any other corporation, firm or person submitting a bid for the same work, labor, or service to be done or the supplies, materials or equipment to be furnished and is in all respects fair and without collusion or fraud. Bidder further understands collusive bidding is a violation of state and federal law and can result in fines, prison sentences and civil damage awards. The bidder agrees to abide by all conditions of this bid and certifies that person signing is authorized to sign this bid or proposal for the bidder.

8. **CONFLICT OF INTEREST.** Vendor states that no City officer or employee, nor any business entity in which they have an interest: a) Has an interest in the contract awarded; b) Has been employed or retained to solicit or aid in the procuring of the resulting contract; c) Will be employed in the performance of such contract without immediate disclosure of such fact to the City.

9. **BASIS OF AWARD.** The City shall award to the overall responsible and responsive vendor complying with the provisions of the Request for Proposal. The following criteria may be considered by the City in selecting the most advantageous quote: a) Ability to perform the service required within the specified time; b) Conformance to specification; c) The quality of performance in previous contracts; d) Financial ability to perform the contract; e) Item pricing; f) vendor references. The City reserves the right to cancel the solicitation and to reject any or all quotes in whole or in part and is not bound to accept any quote if rejection of that quote is determined to be contrary to the best interest of the City.

10. **SAMPLES.** Samples of items, when required, must be furnished free of expense to the City and upon request, be returned to the Vendor at the Vendor's expense. Samples of selected items may be retained for comparison purposes.

11. **NEW.** All items bid must be new. Used, rebuilt and refurbished items will not be considered unless specifically authorized by the City in the written specifications.

12. **BRAND NAME SPECIFICATIONS AND APPROVED EQUIVALENTS.** Unless otherwise specified, manufacturer's names, trade names, brand names, information and/or catalog numbers listed in the specifications are intended only to identify the quality and characteristics desired. They are not intended to limit competition. The Vendor may offer any equivalent product which meets or exceeds the specifications. If quotations are based on equivalent products, the quote must: a) Indicate the alternate manufacturer's name and catalog number; b) Include complete descriptive literature and/or specifications; c) Include proof that the proposed equivalent will meet the specifications. The City reserves the right to be the sole judge of what is equal and acceptable to meet its needs in all respects. If Bidder fails to name a substitute, goods identical to the published standard must be furnished.

13. **INDEMNIFICATION.** Contractor/Vendor hereby agrees to release, indemnify, defend and hold harmless the City, it's Councilmembers, officers, employees, subcontractors, successors, assigns and agents from and against any and all losses (including death), claims, damages, liabilities, costs and expenses (including but not limited to all actions, proceedings, or investigations in respect thereof and any outcome of any such action, proceeding, or investigation), caused by, relating to, based upon or arising out of any act or omission by contractor, it's directors, officers, employees, subcontractors, successors, assigns or agents, or otherwise in connection with its acceptance, of the performance, or nonperformance, of it's obligations under this agreements.

14. **TAXES.** The City of Stockbridge is exempt from the State of Georgia sales tax and exemption certificate will be furnished upon request.

15. **DELIVERY.** All prices must be FOB Destination, unloaded inside and assembled unless otherwise indicated.

16. **RIGHTS AND REMEDIES OF CITY FOR DEFAULT.** If any item furnished by the Vendor fails to conform to specifications, or to the sample submitted by the Vendor, the City may reject it. Upon rejection, the Vendor must promptly reclaim and remove such item without expense to the City and shall immediately replace all such rejected items with others conforming to such specification and samples. If the Vendor fails to do so, the City has the right to purchase in the open market a corresponding quantity of any such items and to deduct from any monies due the Vendor the difference between the prices named in the purchase order and the actual cost to the City. If the Vendor fails to make prompt delivery of any item, the City has the right to purchase such item in the open market and to deduct from any monies due the Vendor the difference between the prices named in the purchase order and the actual replacement cost to the City. The rights and remedies of the City identified above are in addition to any other rights and remedies provided by law or under the purchase order or any contract or agreement with the City.

17. **INVOICES AND PAYMENT TERMS.** All invoices must include the purchase order number or master agreement number. Failure to comply may result in delayed payments. The City payment terms are Net 30 days unless a cash discount is allowed for payment within not less than twenty (20) days. The payment term shall begin on the date the merchandise is inspected, delivered, and accepted by the City and the correct invoice is received in the office specified on the purchase order.

18. **INVOICES AND PAYMENT TERMS.** All invoices must include the purchase order number or master agreement number. Failure to comply may result in delayed payments. The City payment terms are Net 30 days unless a cash discount is allowed for payment within not less than twenty (20) days. The payment term shall begin on the date the merchandise is inspected, delivered, and accepted by the City and the correct invoice is received by Accounts Payable.

Submittal of Invoices: Invoices shall be submitted as follows:

Via Mail:
City of Stockbridge
4640 N. Henry Boulevard
Stockbridge, Georgia 30281
Attn: Finance Department – Accounts Payable

OR

Via Email :
Email: accountspayable@Stockbridgega.org

At minimum, original invoices must reference all of the following information:

1) Vendor Information
    a. Vendor Name
    b. Vendor Address
    c. Vendor Code
    d. Vendor Contact Information
    e. Remittance Address

2) Invoice Details
    a. Invoice Date
    b. Invoice Number (uniquely numbered, no duplicates)
    c. Purchase Order Reference Number
    d. Date(s) of Services Performed
    e. Itemization of Services Provided/Commodity Units

3) City of Stockbridge Department Information (needed for invoice approval)
    a. Department Name
    b. Department Representative Name

19. **LEGAL REQUIREMENTS.** Federal, State, County and local ordinances, rules and regulations, and policies shall govern development, submittal and evaluation of Proposal and disputes about quotes. Lack of knowledge by any Vendor about applicable law is not a defense.

20. **ASSIGNMENT.** Any purchase order awarded shall not be assignable by the Vendor without the express written approval of the City, and shall not become an asset in any bankruptcy, receivership, or guardianship proceedings.

21. **REJECTION OF BID or PROPOSAL.** Bids/Proposals may be considered irregular and may be rejected if they show omissions, alternations of form, additions not called for, conditions, limitations, unauthorized alternate bids, or other irregularities of any kind. The City reserves the right to waive minor technicalities or irregularities of bid or proposal.

22. **TERMINATION.** In the event any of the provisions of the purchase order or contract are violated, the City may serve written notice of its intention to terminate the purchase order or contract. Such notice will state the reason(s) for such intention, and unless within ten (10) days after serving notice upon the contractor, such violation has ceased and satisfactory arrangements for correction made, the purchase order or contract shall, upon expiration of ten (10) days, be terminated. Further, the City reserves the right to terminate for its convenience any purchase order or contract in whole or in part upon giving thirty (30) days prior written notice to the other party.

23. **DEBARMENT.** If a Bidder, Proposer or Contractor is presently debarred, suspended, proposed for debarment, declared ineligible, or otherwise excluded from doing business with any government agency which prohibits your firm from participating in any procurement, the Bidder/Proposer must provide the City with that information as part of its response to this solicitation. Failure to fully and truthfully provide the information required may result in the disqualification of your bid from consideration or termination of the purchase order or contract, once awarded.

24. **RIGHT TO PROTEST.** Any actual bidder or offeror that has submitted a bid/proposal for a particular procurement and is aggrieved in connection with the solicitation or award of the contract shall protest in writing to the purchasing agent after the date that the specific bid or proposal is submitted. No protest will be accepted or considered prior to the date the specific bid or proposal is submitted; it will be considered untimely. All protests shall set forth in full detail the factual and legal bases for the protest and specific relief sought by the protestor. Protests arising from factual or legal bases that the protestor knew or should have known prior to the submission of the bid/proposal must be submitted within three business days of the submission of the bid/proposal. Protests arising from factual or legal bases that the protestor knew or should have known subsequent to the date the bid/proposal was submitted must be submitted within ten business days after the protestor knew or should have known of such bases, but in no event shall any protest be submitted more than ten business days after the award of the contract. Untimely protests will not be considered by the purchasing agent and will be simply denied as untimely. Decisions on timeliness by the purchasing agent are not appealable.

25. **BINDING AUTHORITY.** The individual submitting this Proposal must have binding authority to submit contracts on behalf of the responding company. By submitting a response, the vendor agrees that their quote is an offer to sell or provide service. All bidders shall comply with all City of Stockbridge purchasing laws, policies, and procedures, as well as relevant state and federal laws, including compliance with EEOC hiring guidelines and requirements under the Americans with Disabilities Act.

END OF SECTION

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REQUIRED
FORMS AND DOCUMENTS

CONTRACTOR AFFIDAVIT AND AGREEMENT

(Failure to submit will render Proposal non-responsive you must use this form, you must be enrolled in this program, and you must include your user ID #)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm, or corporation which is contracting with The City of Stockbridge has registered with and is participating in a federal work authorization program [Employment Eligibility Verification (EEV) / Basic Pilot Program, operated by the U.S. Citizens and Immigration Services Bureau of the U. S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA)] in accordance with O.C.G.A. § 13-10-91. Further, the undersigned contractor states affirmatively that the individual, firm, or corporation contracting with The City of Stockbridge, GA will continue to utilize and participate in the EEV federal work authorization program throughout the term of this contract.

The undersigned further agrees that, should it employ or contract with any subtractor(s) in connection with the physical performance of services pursuant to this contract with The City of Stockbridge contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. § 13-10-91 on the Subcontractor Affidavit provided in Rule 300-10-01-.08 or a substantially similar form provided by The City of Stockbridge, Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to The City of Stockbridge GA at the time the subcontractor(s) is retained to perform such service.

_____
EEV Number

_____ _____
Authorized Officer or Agent (Contractor Name) Date

_____
Title of Authorized Officer or Agent

_____
Printed Name of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE DAY OF _____, 20__.

_____
Notary Public

My Commission Expires: _____

Note: As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV/Basic Pilot Program" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security in conjunction with the Social Security Administration (SS)

REPRESENTATION AFFIDAVIT

(TO BE SUBMITTED)

This proposal is submitted to The City of Stockbridge, (City) by the undersigned who is an authorized officer of the company and said company is licensed to do business in Georgia and The City of Stockbridge. Further, the undersigned is authorized to make these representations and certify these representations are valid. The Proposer recognizes that all representations herein are binding on the Company and failure to adhere to any of these commitments, at the City's option, may result in a revocation of the granted contract.

Consent is hereby given to the City to contact any person or organization in order to make inquiries into the legal, character, technical, financial, and other qualifications of the Proposer.

The Proposer understands that, at such time as the City decides to review this proposal, additional information may be requested. Failure to supply any requested information within a reasonable time may result in the rejection of the Proposer's proposal with no re-submittal rights.

The successful Proposer understands that the City, after considering the legal, financial, technical, and character qualifications of the Proposer, as well as what in the City's judgment may best serve the public interest of its citizens and employees, may grant a contract.

The successful Proposer understands that this proposal is made without prior understanding, agreement, or connection with any corporation, firm or person submitting a proposal for the same, and is in all respects fair and without collusion or fraud. I understand that collusive action is a violation of state and federal law and can result in fines, prison sentences, and civil damage awards.

Company Name: _____

Authorized Person: _____ Signature_____

(Print/Type)

Title: _____ Date: _____

Address: _____

_____

Telephone: _____Fax: _____

Name and telephone number of person to whom inquiries should be directed:

Name: _____

Address: _____

_____

Title: _____ Telephone_____

Fax: _____ E-mail: _____

LEGAL AND CHARACTER QUALIFICATIONS

Convictions: Has the Proposer (including parent corporation, if applicable) or any principal ever been convicted in a criminal proceeding (felonies or misdemeanors) in which any of the following offenses were charged?

		Y	**N**
a	Fraud		
b	Embezzlement		
c	Tax Evasion		
d	Bribery		
e	Extortion		
f	Jury Tampering		
g	Anti-Trust Violations		
h	Obstruction of justice (or any other misconduct affecting public or judicial officers' performance of their official duties		
i	False/misleading advertising		
j	Perjury		
k	Conspiracy to commit any of the foregoing offenses		

Civil Proceedings: Has the Proposer or any principal ever been a party, or is now a party, to civil proceeding in which it was held liable for any of the following?

		Y	**N**
a	Unfair/anti-competitive business practices		
b	Consumer fraud/misrepresentation		
c	Violations of securities laws (state and federal)		
d	False/misleading advertising		
e	Violation of local government ordinance		

License Revocation:

	Y	**N**
Has the Proposer or any principal ever had a business license revoked, suspended, or the renewal thereof denied, or is a party to such a proceeding that may result in same?		

Responses: If "yes" is the response to any of the foregoing, provide Information such as date, court, sentence, fine, location, and all other specifics for each "yes" response.

_____

_____

Principals: The full names and addresses of persons or parties interested in the foregoing Proposal, as principals, are as follows:

NAME	ADDRESS

***References*:** The Proposer lists below work he has done of similar nature as this solicitation, as references that will afford the City opportunity to judge as to experience, skill, business standing, and financial ability.

Contact Person	Title	Phone Number/Email

STATEMENT OF INSURANCE COVERAGE

This is to certify that.

_____

(Insurance Company)

of

_____

(City/State) **(Insurance Co. Address)**

has issued policies of insurance, as identified by a policy number to the insured name below, and that such policies are in full force and effect at this time. Furthermore, this is to certify that these policies meet the requirements described in the General Conditions of this project; and it is agreed that the insurer will endeavor, if allowed by the policy, to provide the Owner thirty (30) calendar days' notice of nonrenewal, cancellation, or termination of the coverage. Such notice shall be delivered to:

The City of Stockbridge Georgia, Procurement Manager, 4640 N. Henry Blvd., Stockbridge, Georgia 30281.

It is further agreed that The City of Stockbridge, Georgia shall be named as an additional insured on the Contractors' policy

1. Insured:

2. Project Name**:** _____

DATE:

_____

(INSURANCE COMPANY)

ISSUED AT:

_____

(**AUTHORIZED REPRESENTATIVE)**

ADDRESS:

_____

_____

CONTRACTOR INFORMATION FORM

(This form must be completed and returned with your response)

RFP Number: _____

Full Company Legal Name: _____

Street Address: _____

City, State, Zip Code: _____

Contact Name for Solicitation: _____Title: _____

Telephone: (__)_____ Fax: (_____)_____ E-mail: _____

Company Web Site: _____State of Incorporation:_____

Taxpayer ID Number: _____Duns #: _____

Check one of the following: ☐ Independently owned and operated: ☐ An Affiliate or Division of:

Company Name: _____

Address: _____

_____

JOINT VENTURE AFFIDAVIT

(This form must be completed and returned with your response)

Primary Vendor Name: _____

If this will not be a joint venture, check this box: ☐

State of: _____

County of: _____

We, the undersigned, being duly sworn according to law, upon our respective oaths depose and say that:

1. The following named contractors/companies have entered into a joint venture for the purpose of carrying out all the provisions of the Contract for the above-named solicitation:

Joint Venture Company "A"

Company Name_____Federal ID No._____

Address: _____

City:_____ State: _____Zip: _____

Check all that apply:

☐ Sole Proprietorship
☐ Partnership
☐ Corporation
☐ N/A, other

Joint Venture Company "B"

Company Name_____Federal ID No._____

Address: _____

City:_____ State: _____Zip: _____

Check all that apply:

☐ Sole Proprietorship
☐ Partnership
☐ Corporation
☐ N/A, other

2. The contractors/companies, under whose names we have affixed our respective signatures, have duly authorized and empowered us to execute this Joint Venture Statement in the name of and on behalf of such contractors for the purpose hereinbefore stated.

   Under the provision of such Joint Venture, the assets of each of the contractors named in Paragraph 1 hereof, and in case any contractor so named above is in partnership, the assets of the individual members of such partnership, will be available for the performance of such Joint Venture and liable therefore and for all obligations incurred in connection therewith.

JOINT VENTURE AFFIDAVIT

(This form must be completed and returned with your response)

Primary Vendor Name: _____

If this will not be a joint venture, check this box: ☐
RFP Name:
RFP Number:

State of: _____

County of: _____

We, the undersigned, being duly sworn according to law, upon our respective oaths depose and say that:

1. The following named contractors/companies have entered into a joint venture for the purpose of carrying out all the provisions of the Contract for the above-named solicitation:

Joint Venture Company "A"

Company Name_____Federal ID No._____

Address: _____

City:_____ State: _____Zip: _____

Check all that apply:
☐ Sole Proprietorship
☐ Partnership
☐ Corporation
☐ N/A, other

Joint Venture Company "B"

Company Name_____Federal ID No._____

Address: _____

City:_____ State: _____Zip: _____

Check all that apply:
☐ Sole Proprietorship
☐ Partnership
☐ Corporation
☐ N/A, other

2. The contractors/companies, under whose names we have affixed our respective signatures, have duly authorized and empowered us to execute this Joint Venture Statement in the name of and on behalf of such contractors for the purpose hereinbefore stated.

   Under the provision of such Joint Venture, the assets of each of the contractors named in Paragraph 1 hereof, and in case any contractor so named above is in partnership, the assets of the individual members of such partnership, will be available for the performance of such Joint Venture and liable therefore and for all obligations incurred in connection therewith.

JOINT VENTURE AFFIDAVIT

This Joint Venture Statement is executed so that the named contractors/companies, as one organization, may under such joint venture, bid upon said contract, and be awarded the contract if they should become the successful bidder therefore, any bid, bond and agreement relating to joint venture and each and every contractor name herein, severally and jointly. Simultaneous with the execution of the contract, the contractors entering into this joint venture shall designate and appoint a project manager to act as their true and lawful agent with full power and authority to do and perform any and all acts or things necessary to carry out the work set forth in said contract.

The Joint Venture shall be known as: _____

Principal Office Address: _____

City:_____ State: _____Zip: _____

Telephone: (_____)_____ Fax: (_____)_____

3. On a separate sheet provide the following information and reference the section number:

   A. Describe the capital contributions by each joint venture and accounting therefore.
   B. Describe the financial controls of the joint venture. Will a separate cost center be established? Which joint venture company will be responsible for keeping the books? How will the expenses be reimbursed? What is the authority of each joint venture company to commit or obligate the other?
   C. Describe any ownership, options for ownership, or loans between the joint ventures. Identify terms thereof.
   D. Describe the estimated contract cash flow for each joint venture company. .
   E. How and by whom will the on-site work be supervised?
   F. How and by whom will the administrative office be supervised?
   G. Which joint venture company will be responsible for material purchases including the estimated cost thereof? How will the purchases be financed?
   H. Which joint venture company will provide equipment? What is the estimated cost thereof? How will the equipment be financed?
   I. Describe the experience and business qualifications of each joint venture company.
   J. Submit a copy of all joint venture agreements and evidence of authority to do business in the State of Georgia as well as locally, to include all necessary business licenses.

JOINT VENTURE AFFIDAVIT

In connection with any work that these firms, as a joint venture, might be authorized to perform in connection with the above captioned contract, we each do hereby authorize representatives of the City, Department of Procurement Services, to examine, from time to time, the books, records and files to the extent that such relate to this solicitation.

We bind the contractors for whom we respectively execute this Joint Venture Statement in firm agreement with the City, that each of the representations herein set forth is true.

Subscribed and sworn before me.

this _____ day of_____ 20_____.

(A) _____
Name of Contractor/Company A

My commission expires: _____ By: _____(L.S.)

_____ _____
Notary Public Print Name

Subscribed and sworn before me

this _____ day of_____ 20_____.

(B) _____
Name of Contractor/Company B

My commission expires: _____ By: _____(L.S.)

_____ _____
Notary Public Print Name

PRIMARY CONTRACTOR / SUBCONTRACTOR UTILIZATION

(This form must be completed and returned with your response)

RFP Number:

Primary Vendor Name: _____

If subcontractors will not be used check this box: ☐

List all subcontractors to be used during the performance of this contract. Submit additional forms if needed.

Company Name: _____

Street Address: _____

City, State, Zip: _____

Telephone: ( ) _____ Fax: ( ) _____

Primary Contact: _____

E-mail Address: _____

Services to be provided: _____

_____

_____

Company Name: _____

Street Address: _____

City, State, Zip: _____

Telephone: ( ) _____ Fax: ( ) _____

Primary Contact: _____

E-mail Address: _____

Services to be provided: _____

_____

_____

Company Name: _____

Street Address: _____

City, State, Zip: _____

Telephone: ( ) _____ Fax: ( ) _____

Primary Contact: _____

E-mail Address: _____

Services to be provided: _____

_____

_____

PROMISE OF NON-DISCRIMINATION

(This form must be completed and returned with your response)

In consideration of, and as condition precedent, the right and privilege to bid on construction projects and other procurement contracts of the City of Stockbridge, each potential vendor shall be required to submit to the City of Stockbridge a duly executed and attested Promise of Non-Discrimination, enforceable at law, which by agreement, affidavit or other written instrument acceptable to the General Counsel for City of Stockbridge, shall contain promises, averments and/or affirmations voluntarily made by the bidder.

"Know All Men by These Presents, that I/We,

(_____)
Authorized Company Representative Name(s)

(_____)
Authorized Company Representative Title(s)

(_____)
Name of Company
(Hereinafter "Company"), in consideration of the privilege to bid on contracts funded in whole or in part by City of Stockbridge, GA, hereby consents, covenants and agrees as follows:

(1) No person shall be excluded from participation in, denied the benefit of, or otherwise discriminated against on the basis of race, color, sex, religion, national origin, marital status, sexual orientation, age, or disability in connection with any bid submitted to City of Stockbridge, GA, or the performance of any contract resulting there from.

(2) That it is and shall be the policy of Company to provide equal opportunity to all businesspersons seeking to contract or otherwise interested in contracting with this Company, including those companies owned and controlled by racial minorities, cultural minorities and females:

(3) That the promises of non-discrimination as made and set forth herein shall be continuing in nature and shall remain in full force and effect without interruption for so long as any contract between Company City of Stockbridge remains in force and effect.

(4) That the promises of non-discrimination as made and set forth herein shall and are hereby deemed to be made a part of, and incorporated by reference into, any contract or portion thereof which the Company may hereafter obtain with City of Stockbridge; and

(5) That the failure of this company to satisfactorily discharge any of the promises of non-discrimination as

made and set forth herein shall constitute a material breach of contract entitling the City of Stockbridge to declare the contract in default and to exercise any and all applicable rights and remedies including but not limited to cancellation of the contract, termination of the contract, suspension and debarment from future contracting opportunities, and withholding and/or forfeiture of compensation due and owing on a contract.

_____ _____
Solicitation Name Solicitation Number

_____ _____
Authorized Company Representative Name Authorized Company Representative Signature

_____Date

Subcontractor Affidavit of Compliance under O.C.G.A. § 13-10-91(b) (3)

By executing this affidavit, the undersigned subcontractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract with _____ (name of contractor) on behalf of the City has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the subcontractor with the information required by O.C.G.A.§ 13-10-91(b). Additionally, the undersigned subcontractor will forward notice of the receipt of an affidavit from a sub-subcontractor to the contractor within five business days of receipt. If the undersigned subcontractor receives notice of receipt of an affidavit from any sub-subcontractor that has contracted with a sub-subcontractor to forward, within five business days of receipt, a copy of such notice to the contractor. Subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

_____

Federal Work Authorization User Identification Number

_____

Date of Authorization

_____

Name of Contractor

_____

Name of Project

_____

Name of Public Entity

I hereby declare under penalty of perjury that the foregoing is true and correct.
Executed on _____, 20____

in _____(city), _____(state).

_____

Signature of Authorized Officer or Agent

_____

Printed Name and Title of authorized Officer or Agent

Subscribed and Sworn Before Me
On This The _____ Day Of _____, 20____.

_____

Notary Public
My Commission Expires: _____

Sub-subcontractor Affidavit of Compliance under O.C.G.A. § 13-10-91(b) (4)

By executing this affidavit, the undersigned sub-subcontractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract for _____(name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract) and _____(name of contractor) on behalf of the City has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned sub-subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned sub- subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the sub-subcontractor with the information required by O.C.G.A. § 13-10-91(b). The undersigned sub-subcontractor shall submit, at the time of such contract, this affidavit to _____ (name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract). Additionally, the undersigned sub-subcontractor will forward notice of the receipt of any affidavit from a sub-subcontractor to _____ (name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract). Sub- subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

_____

Federal Work Authorization User Identification Number

_____

Date of Authorization

_____

Name of Contractor

_____

Name of Project

_____

Name of Public Entity

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, 20_____

in _____(city), _____(state).

_____

Signature of Authorized Officer or Agent

_____

Printed Name and Title of authorized Officer or Agent

Subscribed and Sworn Before Me

On This The _____ Day Of _____, 20____.

_____

Notary Public

NON-COLLUSION AFFIDAVIT

I, _____ certify that pursuant to O.C.G.A. Section 36-91-21 (d) and (e), _____ has not, by itself or with others, directly or indirectly, prevented or attempted to prevent competition in such bidding or proposals by any means whatsoever. Affiant further states that (s)he has not prevented or endeavored to prevent anyone from making a bid or offer on the project by any means whatever, nor has Affiant caused or induced another to withdraw a bid or offer for the work.

Affiant further states that the said offer of _____ is bona fide, and that no one has gone to any supplier and attempted to get such person or company to furnish the materials to the bidder only, or if furnished to any other bidder, that the material shall be at a higher price.

_____
(COMPANY NAME)

_____
(PRESIDENT/VICE PRESIDENT)

Sworn to and subscribed before me this _____ day of _____, 200__.

_____
(SECRETARY/ASSISTANT SECRETARY)
(Affix corporate seal here if a corporation)

Notary Public: _____

County: _____

Commission Expires: _____

NOTE:
IF THE OFFEROR IS A PARTNERSHIP, ALL OF THE PARTNERS AND ANY OFFICER, AGENT, OR OTHER PERSON WHO MAY HAVE REPRESENTED OR ACTED FOR THEM IN BIDDING FOR OR PROCURING THE CONTRACT SHALL ALSO MAKE THIS OATH.

IF THE OFFEROR IS A CORPORATION, ALL OFFICERS, AGENTS, OR OTHER PERSONS WHO MAY HAVE ACTED FOR OR REPRESENTED THE CORPORATION IN BIDDING FOR OR PROCURING THE CONTRACT SHALL MAKE THE OATH.

Local and Locally Owned Business Form

(This form must be completed and returned with your response)

In order to encourage and promote local and locally owned businesses with contracting opportunities with the City of Stockbridge, formal solicitation processes may give preference to proposals and bids from local and locally owned businesses based on the following:

A business shall comply with all of the following to be designated a Local Business:

a) The business shall have an office with at least one (1) employee within the City of Stockbridge.
b) The business shall not be delinquent with any payments to the City; and
c) The business shall hold a valid City of Stockbridge business license.

A business shall comply with both of the following to be designated a Locally Owned Business:

a) The business shall meet the requirements for a local business designation; and
b) At least fifty percent (50%) of the business' owners live in the City of Stockbridge.

Certification

Local and Locally Owned businesses that wish to receive preferential consideration shall submit a copy of a valid Occupational Tax Registration Certificate(s) issued by City of Stockbridge to certify qualification for the preference as part of each proposal or response.

Procedures for local and locally owned preference

Request for Proposals (RFP) – If a local and locally owned business meets the quality standards established for the RFP process, the local business shall be awarded two (2) additional percentage points in the total evaluation; the locally owned business shall be awarded six (6) additional percentage points in the total evaluation. The evaluation and scoring of all proposals shall be conducted in accordance with departmental procedures issued by the Chief Financial Officer or his/her designee.

To qualify, you must submit with your proposal a copy of your Occupational Tax Registration Certificate.

Company Name: _____

Company Qualifies for Local Business Preference: Yes ☐ No ☐

Company Qualifies for Locally Owned Business Preference: Yes ☐ No ☐

Occupational Tax Registration Certificate issued by:

City: _____

City of Stockbridge, Georgia

Technical Proposal to Provide Audit Services

Fiscal Year December 2024 through 2028

Mauldin & Jenkins Certified Public Accountants
Contact Person: Hope Pendergrass, CPA, Partner
Phone: (478) 464-8000
Email: hpendergrass@mjcpa.com
300 Mulberry Street, Suite 300
Macon, GA 31201

mjcpa.com

VISION

To be a trusted advisor, earning trust and building respect through our consistent commitment to sustainable excellence, leadership, and integrity.

Over 725 Governmental Units Served Throughout the Southeast

INSIDE public accounting

TOP 100 FIRMS 2023

Going Further.

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PART 1
TECHNICAL PROPOSAL

MAULDIN & JENKINS

CPAs & ADVISORS

TAB 1 - COVER LETTER

MAULDIN & JENKINS

CPAs & ADVISORS

Transmittal Letter

April 11, 2024

Honorable Mayor and Members of City Council
City of Stockbridge, Georgia
Attn: Drexal D. Paulk
4640 N. Henry Boulevard
Stockbridge, Ga 30281

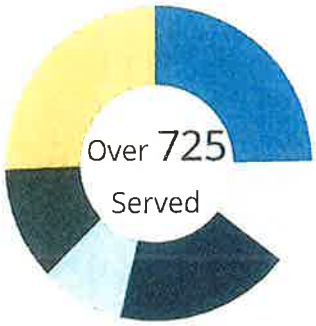
Ladies and Gentlemen:

We appreciate the opportunity to propose on providing audit services to the City of Stockbridge, Georgia (the "City"), and we are pleased to submit a qualifications package including cost estimates to provide annual financial and compliance auditing services for the City. The contract for such audit services will be for five consecutive fiscal years beginning with the fiscal year ended December 31, 2024, and ending with the fiscal year ended December 31, 2028.

We have read the Request for Proposal (RFP) and fully understand its intent and contents. We understand the time frame for performance of the annual financial audits as stipulated by the City and agree to provide the services described in the proposal. We will conduct preliminary and final fieldwork and will issue all of the deliverables and reports substantially prior to the required due dates.

As professionals serving the public sector, Mauldin & Jenkins is qualified to serve the City. We believe that **Mauldin & Jenkins is the leader in auditing state and local governments in the Southeast**. This leadership was achieved by recognizing that we are an important part of our client's success, with our objective being to ensure that accurate information is reported to the City Council, management, and its citizens. Given the complexities of the City's financial operations and the ongoing significant changes in accounting standards, we feel that it is very important that you select an auditing firm that is **focused and experienced** in the governmental industry. We differentiate ourselves from our peers via:

- **Experience with Governments.** **As auditors for more governments in the Southeast than any other firm**, our professionals are thoroughly versed in the complex governmental arena, and have consistently provided the highest quality of service to our government clients. We serve:
  - **725+ state and local governments across the Southeastern U.S.A.**
  - **175 governments awarded the GFOA's and, or ASBO's Financial Reporting Certificates.**
  - **290+ of Single Audits as required by the Uniform Guidance.**



Cities	180+
Counties	90+
School Districts & Charter Schools	125+
State Entities	65+
Utility Authorities	85+
Special Purpose	180+

Mauldin & Jenkins provides over 155,000 hours of service to over 725 governmental units in the Southeast on an annual basis utilizing over 150 professionals.

- **Responsiveness and Large Firm Resources with Small Firm Sensitivity.** We pride ourselves in responding to the needs of our clients; not only the ability to meet deadlines, but also to respond to other requests. Our ability to be responsive is enhanced by the open communications and good working relationship we have with our clients. Our resources provide for the flexibility to meet your needs and to perform our services in an efficient and effective manner.
- **Nationally Recognized.** Mauldin & Jenkins is consistently ranked in the Top 100 by various publications as one of the largest certified public accounting firms in the country. We are a regional firm, but the firm's influence is shared nationally. Our partners have volunteered to serve: as the American Institute of CPA's (AICPA's) Governmental Audit Quality Center's (GAQC) Executive Committee in 2022 (Pendergrass); the AICPA's State and Local Government Expert Panel in 2021 (Lyons); the AICPA's sole representative to Government Accounting Standards Advisory Council (GASAC); the 2015 Chairman of the board of the AICPA; and a board member of the International Federation of Accountants (IFAC) in 2016. **In 2020, our own Joel Black was appointed to serve as the Chairman of the Governmental Accounting Standards Board (GASB)**. Mauldin & Jenkins is a leader nationally.
- **On-site or Remote Audits and Suralink.** Whether management elects for a remote or on-site audit, Mauldin & Jenkins is very effective in working from a hybrid environment. We also utilize software, like Suralink, on all audits to add organization and transparency to the audit process.
- **Staff Continuity.** Our staff retention rates are considered to be among the best in the profession. We are able to not only provide consistency with the partner and manager on our engagement teams, but seniors as well. We also have enough resources at the partner, manager, and senior levels to provide for periodic rotations as requested by our clients.
- **Education.** **Mauldin & Jenkins' clients have the opportunity to register and receive approximately 30 hours of continuing education on an annual basis, free of charge**. We take our experience in serving governments, and choose timely and relevant topics to provide ongoing education to our clients, both virtually and in-person. Sessions are limited to clients only.

This proposal represents a firm offer for 90 days from the date of the proposal. As a member of Mauldin & Jenkins, Hope Pendergrass is authorized to bind, and make representations for the Firm, and she will be the ultimate party responsible for the quality of the report and working papers. We welcome the opportunity to meet with you to present our proposal and our qualifications. Please contact us at 300 Mulberry Street, Suite 300, Macon, GA, (478) 464-8000 (phone), (478) 464-8051 (fax), or via email at hpendergrass@mjcpa.com. Again, on behalf of Mauldin & Jenkins, thank you for the opportunity to serve.

Sincerely,
MAULDIN & JENKINS, LLC

Hope Pendergrass

Hope Pendergrass, Partner

TAB 2 – EXECUTIVE SUMMARY

MAULDIN & JENKINS

CPAs & ADVISORS

Project Team and Scope of Work

Proposed Project Team and Responsibilities

The proposed project team will include Hope Pendergrass (Point of Contact – Partner in Charge of the Engagement), Doug Moses or Tim Lyons (Quality Control Partners) Trey Scott (Support Partner), Demetria Fluellyn (Senior Manager), and Ashley Smith (Senior Associate). Other staff professionals and specialists will be utilized as the City's needs dictate.

Please see **Tab 6 – Company Principles** for more information on the background and experience of the individuals listed above.

Summary of Proposed Services

The overall objective in serving the City is to determine whether the financial statements present fairly the respective financial position of the governmental activities, the business-type activities, each major fund, and the aggregate remaining fund information and the respective changes in financial position and cash flows, where applicable, thereof and the respective budgetary comparison for the major governmental funds in conformity with accounting principles generally accepted in the United States of America. In addition, to determine whether the combining and individual non-major fund financial statements are fairly stated in all material respects in relation to the basic financial statements taken as a whole.

The audit will be conducted in accordance with auditing standards generally accepted in the United States of America, promulgated by the American Institute of Certified Public Accountants (AICPA) and in accordance with: *Government Auditing Standards* issued by the Comptroller General of the United States; the provisions of the Federal Single Audit Act, and the audit requirements of Title 2 U. S. *Code of Federal Regulations* Part 200 *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance) standards.

Our audit will consider the City's internal controls over financial reporting in order to determine the auditing procedures for the purpose of expressing an opinion on the financial statements and not to provide an opinion on the internal control over financial reporting.

We will perform tests of compliance with certain provisions of laws, regulations, contracts, and grants, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. Providing an opinion on compliance with these provisions is not an objective of the audits. However, the results of the tests disclosing instances of noncompliance and other matters will be reported as required under *Government Auditing Standards*.

Following the completion of the audit of the fiscal year's financial statements, we shall prepare the required audit reports (if applicable) including those required by *Government Auditing Standards* and the Single Audit:

1) A report on the fair presentation of the financial statements in conformity with Generally Accepted Accounting Principles. This report shall include Required Supplemental Schedules (RSI) as required by GASB 34.
2) A report on Internal Control over Financial Reporting and on Compliance and on Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*.

Recently, a client provided a compliment (to a large audience) describing her experience with Mauldin & Jenkins:

"They Speak Our Language"

Cynthia Wood, Director of Accounting
Charleston (SC) Water System

3) A report on Compliance for Each Major Federal Program and on Internal Control Over Compliance required by the Uniform Guidance.
4) A Schedule of Findings and Questioned Costs in accordance with the Uniform Guidance.

TAB 3 – COMPANY HISTORY

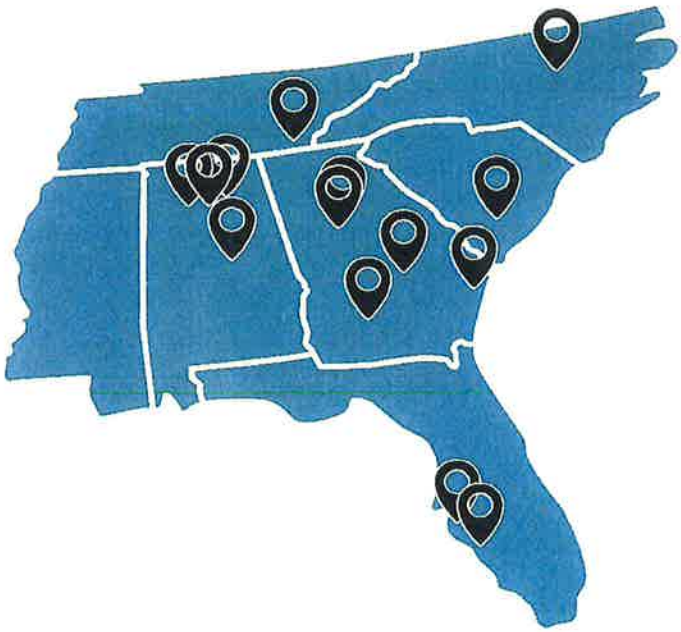
MAULDIN & JENKINS

CPAs & ADVISORS

Primary Business- Firm Qualifications and Experience

Organization and Size – Regional Firm

Mauldin & Jenkins was formed in approximately 1918 and has been actively engaged in governmental auditing since its inception. Mauldin & Jenkins is one of the largest certified public accounting firms in the Southeast and in the U.S.A., and a leading provider of audit and accounting services. Mauldin & Jenkins serves clients whose operations span the entire U.S.A. Mauldin & Jenkins is considered to be a large regional firm with offices in the following communities:



- ***Albany, GA***
- ***Alpharetta, GA***
- ***Athens, AL***
- ***Atlanta, GA***
- ***Birmingham, AL***
- ***Bradenton, FL***
- ***Chattanooga, TN***
- ***Columbia, SC***
- ***Florence, AL***
- ***Huntsville, AL***
- ***Macon, GA***
- ***Raleigh, NC***
- ***Sarasota, FL***
- ***Savannah, GA***

Our current footprint of governmental clients extends as far northeast as Gates County in North Carolina (on the Virginia line) to Corpus Christi, Texas to Islamorada, Florida in the Florida Keys.

Other key information relative to the size and experience of Mauldin & Jenkins is as follows:

- **515,000** - approx. total hours of service provided annually to clients of the Firm
- **155,000** - approx. total hours of service provided annually to governmental clients
- **55%** - percentage of governmental practice as compared to Firm's attestation practice
- **31%** - percentage of governmental practice as compared to Firm's overall practice
- **725** - approx. total governmental entities served in past three (3) years
- **515** - total number of Firm personnel
- **175** - total clients served who obtain the GFOA/ASBO Certificates
- **47** - total clients with publicly issued debts in excess of $76 million
- **77** - total number of Firm partners
- **25** - total number of full-time governmental partners & directors
- **20** - total number of full-time governmental managers
- **150** - total number of professionals with current governmental experience
- **50%** - percentage of Firm offices led by governmental partners

A Century of Service

Mauldin & Jenkins' commitment to government began when our Firm was established in 1918. Since then, we have viewed service to governments as significant to the overall success of the Firm. Today, the governmental sector is an industry that has been specifically identified for our continued growth in professional services. Accordingly, all professionals, from entry-level accountants to partners (who select the governmental sector as their focus) are trained to understand the issues and meet the needs of state and local governmental entities.

As noted previously, **Mauldin & Jenkins employs 45 partners, directors and managers who dedicate 100% of their time serving government clients**. We also have numerous additional professionals with current experience in providing services to governmental entities, many of whom spend their time exclusively on government clients.

Mauldin & Jenkins' dedicated professionals can bring a comprehensive understanding of the issues that face government entities as well as "bench strength" at all levels, allowing us to respond swiftly and effectively to your evolving needs.

The goal of our government practice is to help governments improve their financial processes and strategies so that they can in turn achieve their goal of improving the lives of their citizens. This shared commitment to the goals of our clients has resulted in a significant government clientele.

As noted in our transmittal letter, we currently serve over 725 governments in the Southeast. We know of no other regional firm that can match our governmental experience.

> ***I was apprehensive when the decision was made to go with Mauldin & Jenkins thinking our city was too small for a larger firm. I couldn't be more pleased with their helpful attitude and professionalism. The audit process is now smooth and painless.***
>
> ***Pam Herring,***
> ***City of Rockmart,***
> ***Clerk/Finance Officer***

Location of the Office from which the Work is to be Performed

The Macon office will act as the lead in providing services to the City with additional staff roles coming from our other offices as needed. We have a working relationship between all our offices that we utilize quite often in serving the governmental sector, and it works quite well for all of our clients.

The individuals mentioned in this proposal, Mrs. Hope Pendergrass, Mr. Doug Moses, Mr. Tim Lyons and Mr. Trey Scott, are known across the Southeast for their involvement with governmental entities. They have significant experience in governmental audit and accounting, and will play significant roles in providing ongoing services to the City.

The Macon office currently employs **41 professionals with current experience in providing services to governmental entities** and who will meet the continuing professional education requirements set forth in the U.S. General Accounting Office *Government Auditing Standards*.

A further profile of the Macon office and the Firm's professional staff as a whole is as follows:

Professional Staff by Level	Macon	Firm-Wide
Partners	7	70
Directors/Managers	10	120
Senior Associates	11	104
Associates	13	221
Total	41	515

Quality Control Review

External Peer Review

In the mid 70s, the Private Companies Practice Section (PCPS) was founded by the American Institute of CPAs (AICPA) to establish a voluntary quality assurance program for CPA firms. There are requirements for membership in the section, which include mandatory continuing education for each member of the professional staff and a key element is a tri-annual independent review of a firm's quality control system in its practice of public accounting. Mauldin & Jenkins has been a member of the section from inception.

The peer review aspect has evolved from being voluntary to mandatory and Mauldin & Jenkins is in full compliance with the requirements of having a tri-annual review. In the peer reviewer's latest report dated December 29, 2023, our reviewing firm gave a rating of "pass" which is the highest form of assurance they can render on the system of quality control for our accounting and audit practice.

A copy of the report on our most recent external quality control review is provided on the next page. **The quality control review included a review of specific government engagements, including compliance audits under the Single Audit Act.** No letter of comment was received as a result of this review. We are quite proud to be one of the few Southeast based firms to have undergone this review and to have received such an excellent opinion from a large reputable national firm.

PBMares
CPAs and Consultants

REPORT ON THE FIRM'S SYSTEM OF QUALITY CONTROL

December 29, 2023

To the Shareholders of Mauldin & Jenkins, LLC
and the National Peer Review Committee

We have reviewed the system of quality control for the accounting and auditing practice of Mauldin & Jenkins, LLC (the firm) applicable to engagements not subject to PCAOB permanent inspection in effect for the year ended May 31, 2023. Our peer review was conducted in accordance with the Standards for Performing and Reporting on Peer Reviews established by the Peer Review Board of the American Institute of Certified Public Accountants (Standards).

A summary of the nature, objectives, scope, limitations of, and the procedures performed in a system review as described in the Standards may be found at www.aicpa.org/prsummary. The summary also includes an explanation of how engagements identified as not performed or reported on in conformity with applicable professional standards, if any, are evaluated by a peer reviewer to determine a peer review rating.

Firm's Responsibility

The firm is responsible for designing and complying with a system of quality control to provide the firm with reasonable assurance of performing and reporting in conformity with the requirements of applicable professional standards in all material respects. The firm is also responsible for evaluating actions to promptly remediate engagements deemed as not performed or reported in conformity with professional standards, when appropriate, and for remediating weaknesses in its system of quality control, if any.

Peer Reviewer's Responsibility

Our responsibility is to express an opinion on the design of and compliance with the firm's system of quality control based on our review.

Required Selections and Considerations

Engagements selected for review included engagements performed under *Government Auditing Standards*, including compliance audits under the Single Audit Act; audits of employee benefit plans; audits performed under FDICIA; and an examination of service organizations (SOC 2 engagement).

As a part of our peer review, we considered reviews by regulatory entities as communicated by the firm, if applicable, in determining the nature and extent of our procedures.

PBMares, LLP | 725 Jackson Street, Suite 200 | Fredericksburg, VA 22401 | P 540.371.5566 | F 540.371.5568 www.PBMares.com

Opinion

In our opinion, the system of quality control for the accounting and auditing practice of Mauldin & Jenkins, LLC applicable to engagements not subject to PCAOB permanent inspection in effect for the year ended May 31, 2023, has been suitably designed and complied with to provide the firm with reasonable assurance of performing and reporting in conformity with applicable professional standards in all material respects. Firms can receive a rating of *pass*, *pass with deficiency(ies)*, or *fail*. Mauldin & Jenkins, LLC has received a peer review rating of *pass*.

PBMares, LLP

PBMares, LLP
Fredericksburg, Virginia

We chose Mauldin & Jenkins and have continued with them, because of their deep understanding and accounting knowledge of our industry and they are an invaluable resource to us. The professionals on their team are easy to work with and pay close attention to our specific concerns. They provide exceptional expertise and service, responding to questions quickly and proficiently. Without question, our decision to use Mauldin & Jenkins for the past years was a sound business decision, delivering the expected results and then some.

David Smith, Henry County (GA), Chief Financial Officer

Desk Reviews or Field Reviews

Mauldin & Jenkins audits most of the largest school districts in the State of Georgia. Based on that fact, the State of Georgia's Department of Audits & Accounts (DoAA) periodically performs a review of a sample of our local school district audits. No report has ever been formally issued, and no matters or issues have ever been noted by this annual effort.

As part of the review process, the DoAA has asked to send teams of auditors to review our workpapers in their own effort to better approach financial and compliance audits from a risk based perspective.

With the exception of the above paragraph's thoughts, Mauldin & Jenkins has not had a federal or state desk review or field review of its audits during the past three years.

Regarding one of our past Federal desk reviews or field reviews, we would like to provide the following details of that review, as we believe its results further distinguish Mauldin & Jenkins from other firms.

> ***In the six years that I've gone through internal and external audits this has been by far the best experience with auditors. Your personalities make a huge difference and we haven't regretted changing auditors.***
>
> ***Crystal Coleman, Edgefield County (SC), Former Finance Director***

> As part of the Federal Department of Education's random testing of the audits of local boards of education, a review was performed by the Federal Office of Inspector General (OIG) regarding a Single Audit engagement of a local board of education. We are quite pleased to note the examiner provided Mauldin & Jenkins a letter of high marks for the performance of the respective Single Audit and this comes at a time when Federal regulators are condemning the profession for poor performance of such Single Audits. **Unofficially and orally provided, the examiner noted this Single Audit engagement to be the best such engagement reviewed in his experience**.

We at Mauldin & Jenkins are quite proud of our Firm's governmental practice and appreciate the efforts of state and Federal inspectors and examiners, and their kind words of our doing things right and doing the right things in our attestation engagements.

No Disciplinary Actions

Mauldin & Jenkins has not had any disciplinary actions taken (nor are any pending) against the Firm during the past three years with any state or Federal regulatory bodies or professional organizations.

TAB 4 – EXPERIENCE

MAULDIN & JENKINS

CPAs & ADVISORS

Similar Engagements with Governmental Entities

Governments Served in the Past Three Years

Perhaps the greatest indicator of our reliability as a professional service provider to state and local governments is our list of governmental clients.

The following governmental client listings are provided to demonstrate Mauldin & Jenkins' vast experience serving the governmental sector, and these listings are broken down by type of governmental unit, and the respective listings represents clients we have served in the past three years (and not over a lifetime).

Cities. Cities we have served within the past three years:

Georgia

1) Albany
2) Alpharetta
3) Americus
4) Ashburn
5) Atlanta
6) Austell
7) Avondale Estates
8) Bainbridge
9) Baldwin
10) Ball Ground
11) Barnesville
12) Bloomingdale
13) Brookhaven
14) Brunswick
15) Butler
16) Byron
17) Cartersville
18) Cedartown
19) Centerville
20) Chamblee
21) Chattahoochee Hills
22) Clarkston
23) College Park
24) Colquitt
25) Conyers
26) Cordele
27) Covington
28) Dacula
29) Dalton
30) Darien
31) Decatur
32) Doraville
33) Douglasville
34) Duluth
35) Dunwoody
36) Fairburn
37) Fayetteville
38) Flovilla
39) Forest Park
40) Forsyth
41) Garden City
42) Grovetown
43) Griffin
44) Hapeville
45) Hinesville
46) Holly Springs
47) Jefferson
48) Johns Creek
49) Kennesaw
50) Kingsland
51) LaGrange
52) Lake Park
53) Lawrenceville
54) Leesburg
55) Lilburn
56) Lone Oak
57) Lyons
58) Manchester
59) Mansfield
60) Milledgeville
61) Milner
62) Milton
63) Monroe
64) Morrow
65) Nashville
66) Newton
67) Norcross
68) Oxford
69) Palmetto
70) Peachtree City
71) Peachtree Corners
72) Pearson
73) Perry
74) Pooler
75) Powder Springs
76) Port Wentworth
77) Reynolds
78) Richmond Hill
79) Riverdale
80) Rockmart
81) Rome
82) Roswell
83) Sandy Springs
84) Savannah
85) Sharpsburg
86) Social Circle
87) South Fulton
88) St. Marys
89) Stockbridge
90) Stonecrest
91) Suwanee
92) Temple
93) Thunderbolt
94) Tifton
95) Toccoa
96) Tucker
97) Turin
98) Tybee Island
99) Union City
100) Valdosta
101) Villa Rica
102) Waycross
103) West Point
104) Willacoochee

Alabama / Mississippi

105) Athens, AL
106) Huntsville, AL
107) Tuscaloosa, AL
108) Gulfport, MS
109) Meridian, MS
110) Prattville, AL
111) Sheffield, AL

Florida

112) Apopka
113) Atlantis
114) Callaway
115) Clewiston
116) Crystal River
117) Destin
118) Gulf Stream
119) Fernandina Beach
120) Ft. Myers Beach
121) Haines City
122) Hallandale Beach
123) Indiantown
124) Islamorada
125) Juno Beach
126) Jupiter Inlet Colony
127) Jupiter Island
128) LaBelle
129) Lake Placid
130) Longboat Key
131) Marco Island
132) Naples
133) New Port Richey
134) North Port
135) Palmetto
136) Plant City
137) Tarpon Springs
138) Tequesta
139) Wildwood
140) Winter Haven

North Carolina

141) Black Mountain
142) Garner
143) Hendersonville
144) Jacksonville
145) Rocky Mount
146) Selma
147) Zebulon
148) Wilkesboro

South Carolina

149) Aiken
150) Beaufort
151) Bluffton
152) Cayce
153) Chapin
154) Charleston
155) Clemson
156) Clinton
157) Clover
158) Fountain Inn
159) Hanahan
160) Hardeeville
161) Hemingway
162) Hilton Head Island
163) Hollywood
164) Georgetown
165) Greenwood
166) Goose Creek

167) Johnsonville
168) Kiawah Island
169) Mount Pleasant
170) North Augusta
171) North Charleston
172) Orangeburg
173) Pamplico
174) Rock Hill
175) Seabrook Island
176) Seneca
177) Summerville
178) Winnsboro

Tennessee
179) Bristol
180) Clarksville
181) Jackson
182) Lebanon
183) Morristown
184) Spring Hill

Counties. Counties we have served within the past three years:

Georgia
1) Athens-Clarke
2) Augusta-Richmond
3) Bacon
4) Barrow
5) Bryan
6) Butts
7) Camden
8) Charlton
9) Chatham
10) Clayton
11) Columbus-Muscogee
12) Crisp
13) DeKalb
14) Dougherty
15) Douglas
16) Emanuel
17) Floyd
18) Forsyth
19) Gwinnett
20) Henry
21) Irwin
22) Jackson
23) Jeff Davis
24) Jenkins
25) Jones
26) Lamar
27) Lee
28) Liberty
29) Long
30) Lumpkin
31) Macon
32) Macon-Bibb
33) McIntosh
34) Meriwether
35) Mitchell
36) Monroe
37) Morgan
38) Newton
39) Paulding
40) Pierce
41) Polk
42) Rockdale
43) Spalding
44) Stephens
45) Stewart
46) Sumter
47) Talbot
48) Tattnall
49) Taylor
50) Toombs
51) Troup
52) Turner
53) Walton
54) Whitfield
55) Wilkes

Florida
56) Alachua
57) Hernando
58) Union
59) Walton

North Carolina
60) Bertie
61) Buncombe
62) Columbus
63) Gates
64) Greene
65) Halifax
66) Madison
67) Montgomery
68) Moore
69) Orange
70) Wake

South Carolina
71) Aiken
72) Beaufort
73) Berkeley
74) Calhoun
75) Colleton
76) Darlington
77) Dorchester
78) Edgefield
79) Fairfield
80) Florence
81) Greenville
82) Hampton
83) Horry
84) Jasper
85) Lancaster
86) Laurens
87) Newberry
88) Oconee
89) Orangeburg
90) Richland
91) Sumter

Tennessee
92) Hamilton

Alabama
93) Jefferson

State Governmental Entities. States have many entities as part of financial reporting: agencies, departments, colleges, university foundations, and other component units that are audited. Please see the following for a listing of State governmental entities we have served in the past three years:

1) Abraham Baldwin Agri. College Foundation
2) Aiken Technical College
3) Athens State University, AL
4) Calhoun Community College
5) Central Carolina Technical College
6) College of Coastal Georgia Foundation
7) Denmark Technical College
8) Drake State Community and Technical College
9) Francis Marion University
10) Ga. Building Authority (GBA)
11) Ga. Business Success Center
12) Ga. College & State Univ. Foundation
13) Ga. Dept. of Behavioral Health
14) Ga. Dept. of Economic Development
15) Ga. Education Authority
16) Ga. Environmental Finance Auth. (GEFA)
17) Ga. Higher Education Assistance Corp.
18) Ga. Higher Education Facilities Authority
19) Ga. Highlands College Foundation
20) Ga. Lottery Corporation (LOTTO)
21) Ga. Military College Foundation
22) Ga. Ports Authority (GPA)
23) Ga. Southern Univ. Athletic Foundation
24) Ga. Southern Univ. Foundation
25) Ga. State Financing & Investment Com. (GSFIC)
26) Ga. State Univ. Athletic Foundation
27) Ga. State Univ. Foundation
28) Ga. Student Finance Authority (GSFA)
29) Ga. Superior Court Clerk's Cooperative Auth.
30) Ga. Technology Authority
31) Ga. World Congress Center Authority
32) Gadsden State Community College
33) Greenville Technical College
34) University of Chattanooga Foundation
35) Trident Technical College
36) Kennesaw State Univ. Athletic Department

37) Kennesaw State Univ. Athletic Foundation
38) Kennesaw State Univ. Research Foundation
39) Kennesaw State Univ. Foundation
40) Medical College of Georgia Foundation
41) Mississippi College of Georgia Foundation
42) New College of Florida
43) Northeast Alabama Community College
44) Northeastern Technical College
45) Northwest Florida College Foundation
46) Northwest Shoals Community College
47) Polytechnic Foundation of Kennesaw State Univ.
48) REACH Georgia (of the GSFC)
49) Snead State Community College
50) South Carolina Comptroller Generals Office
51) South Carolina Education Lottery Commission
52) South Carolina Transportation Infrastructure Bank
53) South Carolina Infrastructure Bank
54) South Carolina Insurance Reserve Fund
55) South Carolina Department of Transportation
56) South Carolina Jobs-Economic Development Auth
57) South Carolina Office of the State Auditor
58) Southern Polytechnic Applied Research Foundation
59) State College of Florida Sarasota-Manatee
60) Stone Mountain Memorial Association
61) Tri County Technical College
62) University of North Alabama
63) University of North Georgia Foundation
64) University of West Alabama
65) University of West Georgia Foundation
66) University System of Georgia
67) Williamsburg Technical College

School Systems. Boards of Education we have served within the past three years:

Georgia

1) Atlanta Independent Schools
2) Barrow County Schools
3) Bartow County Schools
4) Bibb County Schools
5) Buford City Schools
6) Butts County Schools
7) Camden County Schools
8) Carroll County Schools
9) Carrollton City Schools
10) Cartersville City Schools
11) Clayton County Schools
12) Cobb County Schools
13) Colquitt County Schools
14) Commerce City Schools
15) Coweta County Schools
16) Dawson County Schools
17) Decatur City Schools
18) DeKalb County Schools
19) Dodge County Schools
20) Dougherty County Schools
21) Douglas County Schools
22) Dublin City Schools
23) Effingham County Schools
24) Fannin County Schools
25) Fayette County Schools
26) Floyd County Schools
27) Forsyth County Schools
28) Fulton County Schools
29) Gilmer County Schools
30) Glynn County Schools
31) Gordon County Schools
32) Greene County Schools
33) Griffin-Spalding County Schools
34) Gwinnett County Schools
35) Habersham County Schools
36) Hancock County Schools
37) Henry County Schools
38) Houston County Schools
39) Jefferson City Schools
40) Laurens County Schools
41) Lumpkin County Schools
42) Marietta City Schools
43) Marion County Schools
44) Newton County Schools
45) Oconee County Schools
46) Peach County Schools
47) Pickens County Schools
48) Polk County Schools
49) Putnam County Schools
50) Rockdale County Schools
51) Rome City Schools
52) Savannah-Chatham Co. Schools
53) Stephens County Schools
54) Thomas County Schools
55) Troup County Schools
56) Twiggs County Schools
57) Union County Schools
58) Walton County Schools
59) Ware County Schools
60) White County Schools

Alabama

61) Athens City Schools
62) Sheffield City School
63) Limestone County Board of Education
64) Jackson County Board of Education

Florida

65) Hardee County Schools
66) Highland County Schools
67) Manatee County Schools
68) Lee County Schools

South Carolina

69) Beaufort County Schools
70) Berkeley County School District
71) Calhoun County Schools
72) Charleston County Schools
73) Clarendon Co. School Dist. 1
74) Colleton County Schools
75) Florence School Dist. 1
76) Florence School Dist. 3
77) Horry County Schools
78) Marlboro County Schools
79) Orangeburg County School District
80) Richland Co. School Dist. 1
81) South Carolina Public Charter School District
82) Sumter County Schools

Tennessee

83) Bristol City Schools
84) Hamilton County Schools

Charter School Systems. Charter schools we have served within the past three years:

1) Academy for Classical Education (ACE)
2) Atlanta Classical Charter Academy
3) Atlanta Heights Charter Academy
4) Brookhaven Innovation Academy
5) Coastal Empire Montessori Academy
6) Cherokee Charter Academy
7) Cirrus Academy
8) Coweta Charter Academy

9) East Point Academy of South Carolina
10) Florida School for the Deaf and Blind
11) Furlow Charter School
12) Gwinnett County BOE Charter Schools
13) Gwinnett Online Campus
14) Graduation Achievement Charter High School
15) International Charter Academy of Georgia
16) International Community School
17) Just for Girls Academy
18) Kendezi School
19) KIPP Metro Atlanta Collaborative
20) KIPP Opportunity Fund
21) KIPP South Fulton Academy
22) Lighthouse Academies
23) Manatee School of Arts & Sciences
24) Northwest Classical Charter Academy
25) NW Florida St. College – Collegiate High School
26) Pataula Charter Academy
27) Pensacola State College Charter Academy
28) Phoenix Center Community Service Board
29) Provost Academy of Georgia
30) School for Arts Infused Learning
31) Scintilla Charter Academy
32) SKY Academy Englewood
33) SKY Academy Venice
34) SLAM Academy
35) Spring Creek Charter Academy
36) SW Georgia STEM Charter School
37) St. Petersburg Collegiate High School
38) Susie King Taylor Community School
39) Troup County College & Career Academy
40) Tybee Island Maritime Academy

Business-Type Special Purpose Governments. Please see the following for a listing of business-type stand-alone special purpose business-type governments we have served in the past three years:

Water/Sewer & Electric Utility

1) Albertville Municipal Utilities Board
2) Athens Electric Utility
3) Athens Water and Sewer Utility
4) Atlanta Watershed
5) Augusta Utilities (Water/Sewer Ops)
6) Barrow County Water & Sewer Authority
7) Beaufort Jasper Water & Sewer Authority
8) Berkeley County Water & Sanitation
9) Bristol Essential Services
10) Bristol Joint Sewer System
11) Broad Creek Public Service District
12) Brunswick - Glynn Joint Water & Sewer Comm.
13) Butts County Water & Sewer Authority
14) Cape Fear Public Utility Authority
15) Catawba River Water Supply Project
16) CDE Lightband
17) Charleston Regional Resources Recovery Auth.
18) Charleston Water System
19) Chatsworth Water Works Commission
20) City of Sheffield Utilities
21) Clarksville Gas, Water & Wastewater
22) Clayton County Water Authority
23) Cobb County - Marietta Water Authority
24) Crisp County Power Commission
25) Dutton Waterworks
26) Eatonton-Putnam Water & Sewer Authority
27) Edgefield County Water & Sewer Authority
28) Electric Power Board of Chattanooga
29) Electric Power Board of Chattanooga, TN
30) Emerald Coast Utilities Authority
31) Englewood Water District
32) Gladeville Utility District
33) Grand Strand Water & Sewer Authority
34) Greenville Water System
35) Greenwood Commissioners of Public Works
36) Greer Commission of Public Works
37) Guntersville Water and Sewer Board
38) Gwinnett County Water and Sewerage Authority
39) Hamilton Co. Water & Wastewater Treatment
40) Henry County Water Authority
41) Huntsville Utilities
42) Limestone County Water and Sewer Authority
43) Lumpkin County Water & Sewerage Authority
44) Macon Water Authority
45) Middle Chattahoochee Regional Water & Sewer Authority
46) Middle Georgia Regional Water & Sewer Authority
47) Mount Pleasant Waterworks
48) Newton County Water & Sewerage Authority
49) North Charleston Sewer District
50) Onslow Water & Sewer Authority
51) Orangeburg Department of Public Utilities
52) Peace River/Manasota Reg. Water Supply Auth.
53) Peachtree City Water & Sewerage Authority
54) Polk County Water Authority
55) Renewable Water Resource
56) Seabrook Island Utility Commission
57) Seacoast Utility Authority
58) Section Waterworks
59) Sheffield Utilities
60) Susanville Sanitary District
61) Tampa Bay Water
62) Warren County Utility District
63) Waterworks & Sewer Board of the Town of Parrish

Airports

64) Atlanta Hartsfield-Jackson International Airport
65) Augusta-Richmond County Regional Airport
66) Charleston County Aviation Authority
67) Glynn County Airport Commission
68) Gwinnett Airport Authority
69) Halifax-Northampton Regional Airport Authority
70) Horry County Airport
71) Moore County (Pinehurst) Airport Authority
72) Paulding County Airport Authority
73) Walterboro-Colleton County Airport Commission

Transit

74) Chatham Area Transit Authority
75) Chattanooga Area Reg. Transportation Authority
76) Jackson Transit Authority, TN
77) Lakeland Area Mass Transit District
78) Lowcountry Regional Transit Authority
79) Macon-Bibb County Transit Authority
80) Pee Dee Regional Transit Authority
81) Santee Wateree Regional Transit Authority
82) South Florida Regional Transportation Authority
83) Waccamaw Regional Transportation Authority

Gas

84) Athens Gas Utility
85) Austell Natural Gas System
86) Natural Gas Acquisition Corp.

Other Governments. Other governmental entities we have audited within the past three years:

1) Albany - Dougherty Inner City Authority
2) Albany – Dougherty County Land Bank
3) Amelia Island Convention & Visitors Bureau
4) Amelia Island Mosquito District
5) Allendale County Hospital
6) Athens Limestone 911 District
7) Athens Limestone Hospital
8) Athens Limestone Industrial Development Board
9) Athens Limestone Landfill
10) Atlanta Firefighters Pension Plan
11) Atlanta General Employees Pension Plan
12) Atlanta Police Pension Plan
13) Atlanta Development Authority
14) Atlanta Economic Renaissance Corporation
15) Atlanta Housing Opportunity
16) Avita Community Partners
17) Bayshore Gardens Park & Recreation District
18) Berkeley County Water & Sanitation
19) Bledsoe County Nursing Home
20) Bradenton Downtown Development Authority
21) Bristol Public Library
22) Brookhaven Convention and Visitors Bureau
23) Buncombe County Tourism Development Authority
24) Camden County Joint Development Authority
25) Camden County Public Service Authority
26) Captiva Erosion Prevention District
27) Central Community Redevelopment Agency
28) Central Georgia Joint Development Authority
29) Central Midlands Council of Govts.
30) Central Savannah River Area Regional Comm.
31) Charleston Co. Parks & Recreation Authority
32) Chatham County Jail Complex
33) Chatham County Tax Commissioner
34) Chatham County-Savannah Metro Planning Comm.
35) Chattahoochee River 911 Authority
36) Chattanooga Area Regional Council of Govts.
37) Citrus County Mosquito District
38) City of Albany- Chehaw Park Authority
39) City of East Point Retirement Plan
40) City of Sandy Springs Development Authority
41) Classic Center Auth. of Clarke County
42) Clayton Center Community Service Board
43) Clayton Co. Pension Fund
44) Clayton Co. Sheriff's Office
45) Coastal Heritage Society
46) Cobb Center Community Service Board
47) Cobb County-Marietta Water Auth. Pension
48) Colleton County Commission on Drug & Alcohol Abuse
49) Columbia Development Corp.
50) Columbia Empowerment Zone
51) Columbia Housing Development Corp.
52) Columbus County Tourism Development Authority
53) Community Housing Services Agency (CHSA)
54) Convention and Visitors Bureau of Dunwoody
55) Crisp Co.- Cordele Industrial Development Authority
56) Crisp Co.- Cordele Industrial Development Council
57) Cumberland Community Improvement District
58) Decide DeKalb
59) DeKalb County Public Library
60) Dev. Auth. of City of Jeffersonville & Twiggs Co.
61) Development Authority of City of Roswell
62) Development Authority of Lumpkin County
63) Development Authority of Peachtree City
64) Development Authority of Warner Robins
65) Downtown Atlanta Revitalization
66) Downtown Chattanooga Alliance
67) East Alabama Regional Planning & Development Comm
68) Eau Development Corporation
69) E.G. Fisher Public Library
70) Ensor Forest Apartments
71) Fairfield County Library
72) Fayette County Development Authority
73) Fifth Circuit Solicitor of Richland County
74) Florida Bar
75) Florida Bar Retiree Health Plan
76) Foundation for the Mental Health Center of NC Alab
77) Forsyth County Public Library
78) Georgia Charter Educational Foundation
79) Georgia Mountains Regional Commission
80) Georgia Pines Community Service Board
81) Georgia Ports Auth. DB & OPEB Plan
82) Georgia Ports Auth. Defined Contribution Plan
83) Grand Strand W&S Auth OPEB Plan
84) Griffin Spalding County Land Bank Authority
85) Gwinnett Civic/Cultural Center Operations
86) Gwinnett Convention and Visitors Bureau
87) Gwinnett County Development Authority
88) Gwinnett County Public Facilities Authority
89) Gwinnett County Public Library
90) Gwinnett County Recreation Authority
91) Hallandale Beach CRA
92) Halifax County Tourism Development Authority
93) Hardee County Industrial Development Authority
94) Heart of Georgia Altamaha Regional Commission
95) Hospital Authority of St. Marys
96) Housing Authority of Clayton County
97) Houston County Library System
98) Islamorada,City of Islands, Florida
99) Jacksonville, NC Tourism Development Authority
100) Jefferson Co. Economic and Industrial Dev Authority
101) Keep Peachtree City Beautiful Commission
102) Kennesaw State University Athletic Department
103) Lamar County Recycling Authority
104) Lawrence County Health Care Authority
105) Lebanon Senior Center
106) Legacy Community Health Services
107) Liberty Consolidated Planning Commission
108) Liberty County Development Authority
109) Live Oak Public Library
110) Lumpkin County Hospital Authority
111) Macon-Bibb County Land Bank Authority
112) Macon-Bibb County Urban Development Authority

113) Madison Tourism Development Authority
114) Manatee County Mosquito Control Dist
115) Manatee Technical Institute
116) Manchester Development Authority
117) MARTA/ATU Local 732 Employees Retirement
118) McIntosh Trail Community Service Board
119) McMinn County Library
120) McPherson Implementing Local Redev. Authority
121) McPherson Planning Local Redevelopment Authority
122) Mental Health Center of North Central Alabama
123) Meriwether County Industrial Development Authority
124) Metropolitan Planning Commission (MPC)
125) Miami Beach Employees Retirement Plan
126) Middle Flint Regional E-911 Authority
127) Middle Georgia Community Service Board
128) Milledgeville-Baldwin County Dev. Authority
129) Moore County Convention & Visitors Bureau
130) NE Corridor, LLC
131) Newton County Industrial Development Auth
132) North Charleston District
133) North Fulton Regional Radio Authority
134) Northeast Georgia Regional Commission
135) Northwest Florida State College Foundation
136) North Port Fire Pension
137) North Port Police Pension
138) Ocean Highway and Port Auth. of Nassau County
139) Oconee Center Community Service Board
140) Orangeburg Co. Development Commission
141) Orangeburg County Library
142) Palm Bay Police & Fire Pension Plan
143) Palm Tran Amalgamated Transit Union Pension
144) Palm Beach Gardens Firefighters Pension
145) Paulding County Industrial Development Authority
146) Peace River/Manasota Regional Water Supply Authority
147) Peachtree City Convention & Visitor's Bureau
148) Phoenix Center Community Service Board
149) Pooler Chamber of Commerce
150) Port Authority of Corpus Christi & Nueces County
151) Private Colleges and Universities Authority
152) Public Bldg. Auth. of Knox Co. & City of Knoxville
153) Redevelopment Agency of Warner Robins
154) Richland County Libraries
155) Riverdale Downtown Development Authority
156) River's Edge Community Service Board
157) Saluda Nursing Center
158) Sandy Springs Hospitality Board
159) Santee-Lynches Reg. Council of Governments
160) Santee-Lynches Reg. Development Corp.
161) Sarasota General Employees Pension
162) Sarasota Firefighters Pension
163) Sarasota Police Officers Pension
164) Savannah Chatham County Land Bank Authority
165) Savannah Development & Renewal Authority
166) Seacoast Utility Authority
167) Serenity Behavioral Health Systems
168) South Carolina Centers of Economic Excellence
169) South Island Public Service District
170) SOWEGA Council on Aging
171) St. Augustine Municipal Firefighters Pension
172) Talbot County Development Authority
173) Toccoa-Stephens County Public Library
174) Trailer Estates (FL)
175) Two Notch Development Corp.
176) Tybee Island Maritime Academy
177) Vidalia Onion Committee
178) Walterboro-Colleton County Airport Commission
179) Waycross / Ware County Development Authority
180) West Jackson Fire District
181) Wilson County / Lebanon Development Board

Water & sewer operations. Below is a listing of water/sewer operations we have served within the past three years:

1. Aiken County
2. Athens-Clarke County
3. Augusta-Richmond Co.
4. Barrow County
5. Berkeley County, SC
6. Bertie County
7. Calhoun County
8. Camden County
9. Chatham County
10. City of Aiken
11. City of Albany
12. City of Americus
13. City of Arcadia
14. City of Ashburn
15. City of Bainbridge
16. City of Ball Ground
17. City of Barnesville
18. City of Bloomingdale
19. City of Bradenton
20. City of Brunswick
21. City of Butler
22. City of Byron
23. City of Callaway
24. City of Canton
25. City of Cartersville
26. City of Cayce
27. City of Cedartown
28. City of Clarksville
29. City of Clemson
30. City of Clinton
31. City of Clover
32. City of College Park
33. City of Colquitt
34. City of Conyers
35. City of Cooper City
36. City of Cordele
37. City of Covington
38. City of Crystal River
39. City of Fairburn
40. City of Fayetteville
41. City of Fernandina
42. City of Forsyth
43. City of Ft. Myers Beach
44. City of Garden City
45. City of Georgetown
46. City of Goose Creek
47. City of Griffin
48. City of Gulfport
49. City of Gulf Stream
50. City of Haines City
51. City of Hendersonville
52. City of Hinesville
53. City of Islamorada
54. City of Jackson
55. City of Jacksonville
56. City of Jefferson
57. City of Johnsonville
58. City of Kingsland
59. City of Lagrange
60. City of Lake Placid
61. City of Lawrenceville
62. City of Lebanon
63. City of Leesburg
64. City of Long Boat Key
65. City of Manchester
66. City of Mansfield
67. City of Marco Island
68. City of Milledgeville
69. City of Monroe

70. City of Morristown
71. City of Naples
72. City of North Augusta
73. City of North Port
74. City of Palmetto
75. City of Perry
76. City of Plant City
77. City of Pooler
78. City of Port Wentworth
79. City of Powder Springs
80. City of Reynolds
81. City of Richmond Hill
82. City of Rock Hill, SC
83. City of Rockmart
84. City of Rocky Mount
85. City of Rome
86. City of Roswell
87. City of Savannah
88. City of Seneca, SC
89. City of Social Circle
90. City of St. Marys
91. City of Stockbridge
92. City of Suwanee
93. City of Thomasville
94. City of Thunderbolt
95. City of Tifton
96. City of Toccoa
97. City of Tuscaloosa
98. City of Tybee Island
99. City of Union City
100. City of Valdosta
101. City of Villa Rica
102. City of Wildwood
103. Columbia Co.
104. Crisp County
105. DeKalb County
106. Floyd County
107. Forsyth County
108. Gates County
109. Greene County
110. Halifax County
111. Lee County
112. Liberty County
113. Lincoln County
114. McIntosh County
115. Mitchell County
116. Montgomery County
117. Monroe County
118. Moore County
119. Orange County
120. Orangeburg County
121. Paulding County
122. Richland County, SC
123. Rockdale County
124. Spalding County
125. Talbot County
126. Taylor County
127. Walton County
128. Town of Black Mountain
129. Town of Chapin
130. Town of Hemingway
131. Town of Pamplico
132. Town of Selma
133. Town of Wilkesboro
134. Town of Winnsboro
135. Village of Tequesta

Our project costs vary widely in range due to services desired and the unique operations of each client. Our proposed hours are normally significantly less than other firms, as by focusing on the governmental industry, we achieve efficiencies based on experience and expertise. We have included a proposed project cost for the City based on these efficiencies.

TAB 5 – CAPABILITIES

MAULDIN & JENKINS

CPAs & ADVISORS

Additional Firm Capabilities

In addition to including information on our experience with other governmental entities and related expertise, we would also like to highlight other capabilities that we feel position uniquely to serve the City.

Certificates of Achievement & Excellence in Financial Reporting

Mauldin & Jenkins has served **over 725 governments** in the past several years, and **175** governmental units who obtain the GFOA's Certificate of Achievement for Excellence in Financial Reporting (and, or the ASBO's Certificate of Excellence in Financial Reporting).

Mauldin & Jenkins' clients have never failed to obtain the Certificate! Every Annual Comprehensive Financial Report submitted has received the award. The following are current clients:

Counties:

1) Aiken, SC
2) Athens-Clarke
3) Augusta-Richmond
4) Barrow
5) Beaufort, SC
6) Buncombe, NC
7) Butts
8) Camden
9) Cartersville
10) Chatham
11) Clayton
12) Colleton, SC
13) Columbus-Muscogee
14) Dekalb
15) Douglas
16) Edgefield, SC
17) Florence, SC
18) Floyd
19) Forsyth
20) Glynn
21) Greenville, SC
22) Gwinnett
23) Halifax, NC
24) Hamilton, TN
25) Henry
26) Horry, SC
27) Jackson
28) Lancaster, SC
29) Liberty
30) Macon-Bibb
31) Morgan
32) Moore, NC
33) Newton
34) Oconee, SC
35) Orange, NC
36) Paulding
37) Polk
38) Richland, SC
39) Rockdale
40) Spalding
41) Wake, NC
42) Walton
43) Whitfield

Cities:

44) Aiken, SC
45) Albany
46) Alpharetta
47) Americus
48) Apopka, FL
49) Austell
50) Avondale Estates
51) Ball Ground
52) Beaufort, SC
53) Black Mountain, NC
54) Bluffton, SC
55) Bradenton, FL
56) Bristol, TN
57) Brookhaven
58) Brunswick
59) Callaway, FL
60) Cartersville
61) Cayce, SC
62) Chamblee
63) Charleston, SC
64) Chamblee
65) Chapin, SC
66) Clarksville, TN
67) Clemson, SC
68) College Park
69) Conyers
70) Cooper City, FL
71) Covington
72) Decatur
73) Doraville
74) Douglasville
75) Dunwoody
76) Fayetteville
77) Fairburn
78) Forest Park
79) Forsyth
80) Garden City
81) Garner, NC
82) Georgetown
83) Griffin
84) Gulfport, MS
85) Haines City, FL
86) Hallandale Bch, FL
87) Hapeville
88) Hardeeville, SC
89) Hendersonville, NC
90) Hilton Head Island, SC
91) Hinesville
92) Holly Springs
93) Huntsville, AL
94) Jacksonville, NC
95) John's Creek
96) Juno Beach, FL
97) Kennesaw
98) Kiawah Island
99) Kingsland
100) Marco Island, FL
101) Lagrange
102) Lawrenceville
103) Longboat Key, FL
104) Milledgeville
105) Milton
106) Monroe
107) Morristown, TN
108) Morrow
109) Mount Pleasant, SC
110) Naples, FL
111) N. Augusta, SC
112) N. Charleston, SC
113) North Port, FL
114) Palmetto
115) Peachtree City
116) Perry
117) Plant City, FL
118) Pooler
119) Port Wentworth
120) Powder Springs
121) Prattville
122) Richmond Hill
123) Riverdale
124) Rockhill
125) Rockmart
126) Rocky Mount, NC
127) Rome
128) Roswell
129) St. Marys
130) Sandy Springs
131) Savannah
132) Social Circle
133) Stockbridge
134) Suwanee
135) Thunderbolt
136) Tarpon Springs, FL
137) Thomasville
138) Tuscaloosa, AL
139) Union City
140) Valdosta
141) Villa Rica
142) Zebulon, NC

Boards of Education:

143) Atlanta Public Schools
144) Beaufort County Schools
145) Bibb County Schools
146) Cartersville City Schools
147) Cobb County Schools
148) Fayette County Schools
149) Fulton County Schools
150) Griffin-Spalding County Schools
151) Gwinnett County Schools
152) Horry County Schools
153) Lee County School District
154) Marietta City Schools
155) Putnam County Schools
156) Richland Co. School District One
157) Savannah-Chatham County Schools

State Governmental Entities:

158) Ga. Environ. Fin. Auth. (GEFA)
159) Ga. Ports Authority

Other Governmental Entities:

160) Beaufort Jasper Water & Sewer Authority
161) Cape Fear Public Utility Authority
162) Central Savannah River Area Regional Comm.
163) Charleston Water System
164) Clayton County Water Authority
165) Cobb County - Marietta Water Authority
166) Emerald Coast Utilities Authority
167) Greenville Technical College
168) Greenville Water System
169) Greenwood Commissioners of Public Works
170) Greer Commission of Public Works
171) Hartsfield-Jackson International Airport
172) Henry County Water Authority
173) Lowcountry Regional Transportation Authority
174) Macon Water Authority
175) Mount Pleasant Waterworks
176) North Charleston Sewer District
177) Onslow Water & Sewer Authority
178) Port of Corpus Christi Authority
179) Public Building Authority of Knox Co. & Knoxville
180) South Florida Transportation Authority
181) Tampa Bay Water Authority

Municipal Bond Experience

In case the City plans to issue and refund bonds in the coming years, we have elected to share with the City some of our experience in the municipal bond area of auditing and financial reporting.

Please see our qualifications regarding our bond program auditing experience within the past three years. Such qualifications include our auditing municipal bond programs with at least $76 million of outstanding bonded debt for which much of the debt has been issued in the past three years, and we have issued numerous consent letters and comfort letters as part of the overall service to our governmental clients during the issuance of such bonded debt. As part of such a large government client base, Mauldin & Jenkins serves 47 clients who meet the above criteria.

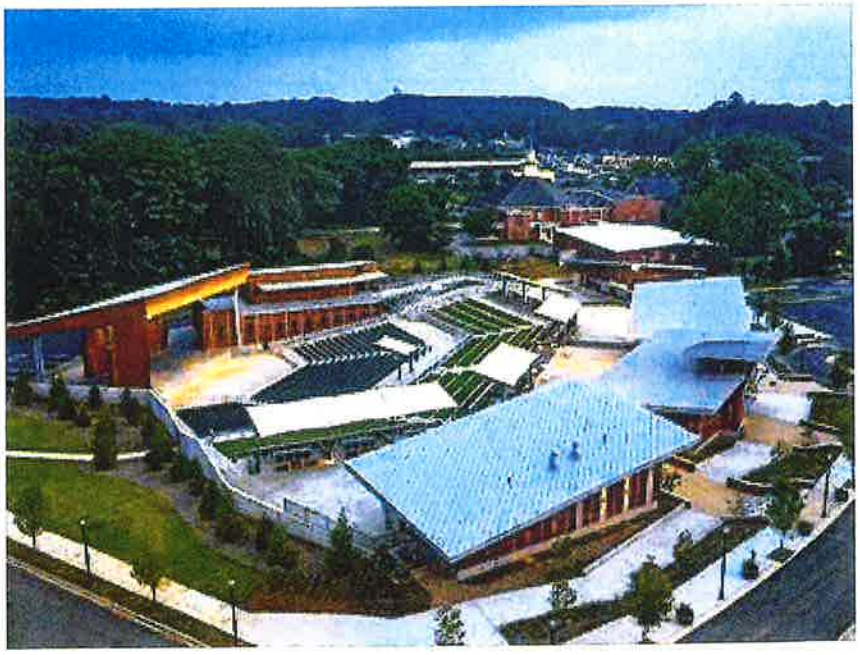
Additionally, we audit the Georgia State Finance and Investment Commission (GSFIC) who has issued several billions of general obligation bonds on behalf of the State of Georgia.

Please see the following list for a sample of clients we have performed bond procedures, and, or audited the financial statements for in the past three years whose publicly issued debts are in excess of $75,000,000.

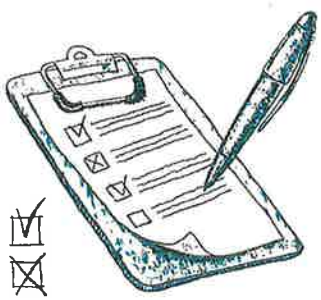
	Governmental Entity	Amount		Governmental Entity	Amount
1	Jefferson County	$ 2,512,564,000	25	City of Pensacola	173,600,000
2	South Car. Transportation Infrastructure Bank	1,408,180,000	26	City of Marco Island	173,000,000
3	Georgia Ports Authority	1,328,668,000	27	City of Sandy Springs	172,230,000
4	Gwinnett County Board of Education	1,171,193,000	28	Charleston County Airport District	172,000,000
5	DeKalb County	1,051,950,000	29	City of College Park	165,683,000
6	Tampa Bay Water	988,700,000	30	Atlanta Development Authority	164,277,000
7	City of Huntsville	738,933,000	31	City of Savannah	151,712,000
8	Gwinnett County	727,267,000	32	Henry County Water & Sewer Authority	151,021,000
9	Charleston Water System	605,734,000	33	Douglas County Board of Education	132,690,000
10	Augusta-Richmond County	549,068,000	34	Clayton County Water Authority	130,018,000
11	Richland County School District 1	408,840,000	35	City of Charleston	126,518,000
12	Forsyth County	396,049,000	36	City of Alpharetta	120,985,000
13	Emerald Coast Utilities Authority	378,200,000	37	Macon-Bibb County	111,774,000
14	Henry County Board of Education	370,827,000	38	Columbus Consolidated Government	109,870,000
15	Hamilton County, Tennessee	360,180,000	39	South Carolina Dept.of Transportation	109,839,000
16	Forsyth County Board of Education	359,256,000	40	Islamorada, Village of Islands	99,900,000
17	Richland County	342,177,000	41	Rockdale County	93,346,000
18	Paulding County	312,923,000	42	Clayton County	86,864,000
19	Electric Power Board of Chattanooga	280,000,000	43	City of Hallandale Beach	85,400,000
20	GA. Higher Education Facilities Auth. (GHEFA)	232,019,000	44	Sumter School District	80,000,000
21	Beaufort County	218,159,000	45	Orange County, North Carolina	78,429,000
22	Athens-Clarke County	214,831,000	46	Macon Water Authority	76,806,000
23	City of Decatur	179,959,000	47	Atlanta Public Schools	76,740,000
24	City of Tuscaloosa	177,068,000			$ 15,312,745,000

Capabilities and Limitations

As detailed in our proposal, M&J has a significant number of employees with current governmental experience, both in the Macon office, as well as other offices. We feel confident we can serve the City in a timely and responsive manner and anticipate ***no limitations*** in serving the City and issuing the required deliverables in a timely manner. That being said, as the auditor, M&J cannot perform services which could be construed as functioning in a management capacity. Should additional needs beyond those outlined in this proposal be needed, we will work with the City to provide additional services, while not impacting our independence and adherence to professional standards.



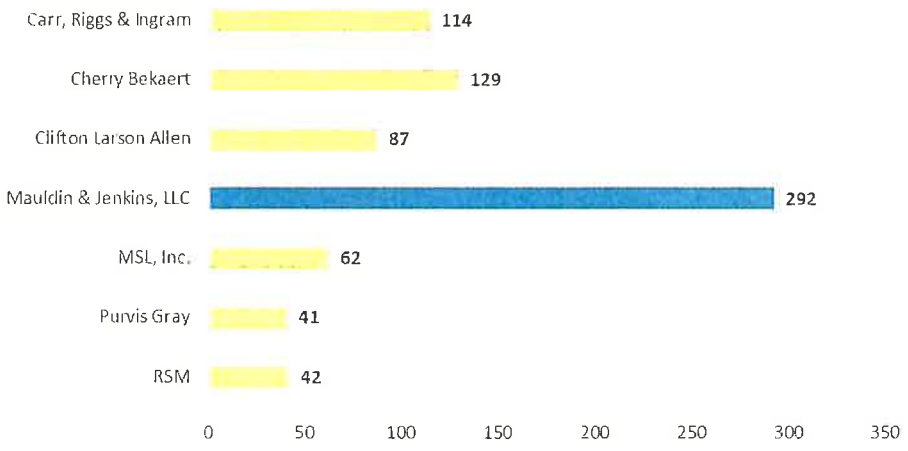
Audits of Federally Funded Programs (Single Audits)



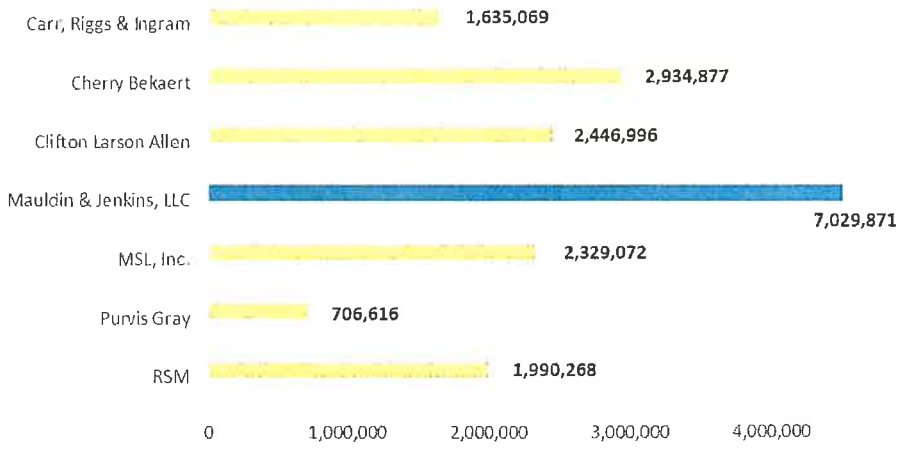
Based on the most recent data provided by the Federal Audit Clearinghouse (FAC) which is for calendar year 2022, Mauldin & Jenkins audits **292 entities** representing approximately **$7 billion in federal expenditures** for state, local government, and non-profit clients which is the:

- **Highest** among public accounting firms in the Southeast as it relates to the number of Single Audits conducted; and
- **Highest** among public accounting firms in the Southeast as it relates to total expenditures audited under the Single Audit Act.

Number of Single Audits Performed



Federal Award Dollars Audited (In Thousands)



The above information was summarized from the Federal Audit Clearinghouse for audits with fiscal year-ends in calendar year 2022 (the last year for which complete information is available) for states in which our Firm has offices.

Rotating or Not Rotating Auditors

There are proponents in the governmental sector that believe in changing auditors periodically. The belief is that changing auditors improves audit quality of an audit by providing a "fresh look".

Recognizing this proposal is a rebid of financial and compliance audit services currently provided by Mauldin & Jenkins to the City and the possibility that governing board members and evaluation team members may believe it to be prudent to rotate auditors on a periodic basis, we would like to offer the following actual headline and article which was posted on the AICPA's Center for Audit Quality website:

CENTER FOR AUDIT QUALITY

> ***Accounting Today*** reports that a new academic paper calls mandatory audit firm rotation into question. Based on a complex experiment involving students who did not even know they were playing the role of auditors, **the study concludes that mandatory rotation could inhibit professional skepticism rather than encourage skepticism**.
>
> "**Professional skepticism requirements are intended to elevate auditors' skepticism of their clients and, ultimately, audit quality**," the study says. "**This benefit disappears and even reverses when auditors rotate**. That is, rotation and a skeptical mindset interact to the detriment of audit effort and financial reporting quality."
>
> The study argues that auditors who are subject every few years to mandatory rotation feel less confident about their ability to audit a new client. "Rotating auditors, aware that they will not be in a long-term relationship, will...likely perceive themselves to be less competent in evaluating the honesty or dishonesty of the [corporate] manager relative to auditors who do not rotate." As a result, "**rotating auditors would find it difficult to garner psychological support for the probability of manager dishonesty, leading them to be less likely to choose high levels of audit effort than non-rotating auditors**."

The above conceptual thoughts as researched and issued by ***Accounting Today*** and the AICPA Audit Quality Center are considered to be relevant to all certified public accounting firms. We tend to agree with the thoughts communicated herein by the AICPA's Center for Audit Quality. **That being said, if you feel differently from the conceptual thoughts communicated above, and that a rotation of auditors is necessary, it is important to note that Mauldin & Jenkins has substantial people resources, and can accommodate a change in: 1) lead partner, 2) quality assurance partner, 3) audit staff, and 4) office, should the City believe such changes are necessary.**

TAB 6 – COMPANY PRINCIPLES

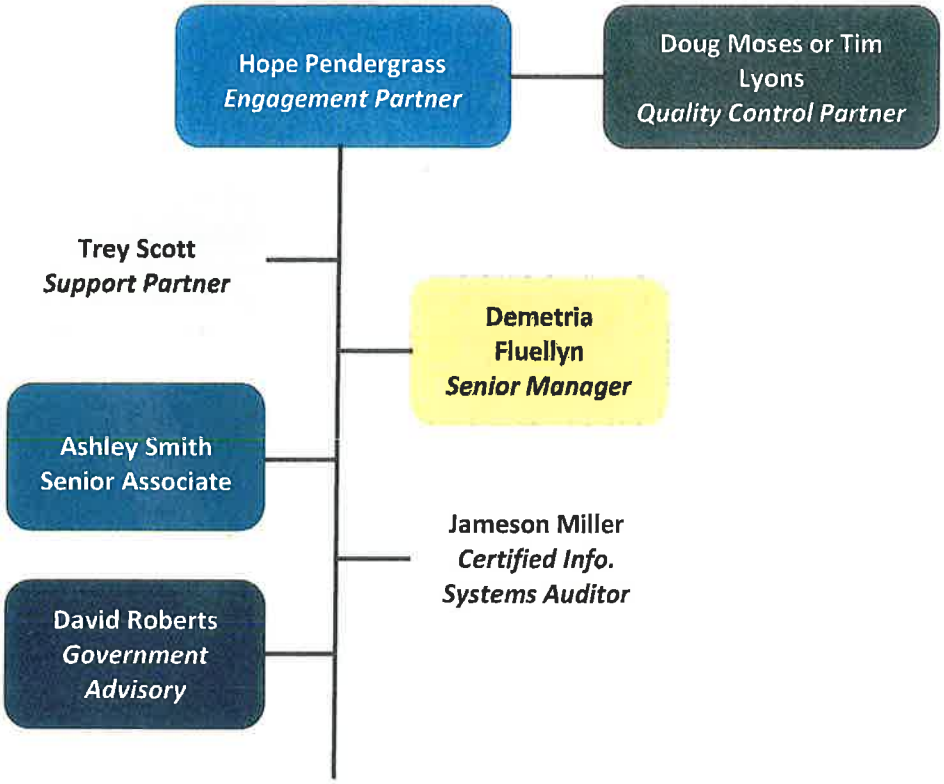
MAULDIN & JENKINS

CPAs & ADVISORS

Proposed Engagement Team

Staff

In order to provide the highest quality service in the most cost efficient manner, Mauldin & Jenkins has formed a client service team which will function as a cohesive unit, and would represent a superb assortment of talent and experience for the audit of the City. The unit would be assembled as:



Audit Engagement Team Staff

The above team dedicated to audit the City will include (at a minimum): three partners, one full-time manager, and at least two staff professionals. The manager (Demetria Fluellyn) and the staff professionals will be substantially on-site full time throughout the conduct of their role in the audit. Other governmental audit professionals will be available to assist throughout the fieldwork and the preparation of the financial reports. The engagement partner (Hope Pendergrass) will correspond with City management on financial reporting, audit, and related issues on an ongoing basis, and this individual will also be dedicated to serve the City throughout fieldwork, reporting and conclusion in all respective fiscal years. Mauldin & Jenkins has the depth of resources which allows us to provide you with significant resources of knowledgeable professionals to meet your deadlines.

Resumes

Hope Pendergrass, CPA
Partner in Charge of the Engagement

Hope Pendergrass is a partner and a certified public accountant with Mauldin & Jenkins. Her experience covers a variety of state and local governmental organizations, and non-profit organizations. Hope spends 100% of her time serving state and local governments. Hope is well respected for her knowledge of performing Single Audits relative to expenditures of Federal awards, and serves as the firm's lead compliance audit technical partner. Hope was recently appointed to the Executive Committee of the AICPA's Government Audit Quality Center ("GAQC") where she collaborates with a team of individuals from firms across the United States on issues facing firms who perform governmental audits.

Years of Professional Experience and Years with Firm

Hope has 20 years of experience in public accounting and has spent all of that time serving both large and small governmental units. She is directly involved in serving approximately 85 such governmental entities. Hope obtained her CPA certificate in 2007.

List of Governmental Clients Served in the Last Three Years

Counties:
Macon-Bibb County
Clayton County
Colleton County, SC
Dougherty County
Henry County
Macon County
Mitchell County
Monroe County
Oconee County, SC
Mitchell County
Montgomery County, NC

Cities:
Albany
Atlanta
Americus
Ashburn
Byron
Cochran
Covington
Jeffersonville
Kennesaw
Leesburg
Macon
Perry
Stockbridge
Fayetteville
Leesburg
Orangeburg, SC
Chapin, SC

Other Governmental Units:
Albany-Dougherty Landbank Authority
Central Georgia Joint Dev. Auth.
Central Savannah River Area Regional Commission
Clayton Co. Pension Plan
Eatonton-Putnam Water & Sewer Auth.
GA College & State Univ.
Georgia Ports Authority
Ga. Higher Education Assist. Corp.
Ga. Student Finance Authority
Ga. Ports Authority
Heart of GA Altamaha Regional Comm.
Houston County Library System
Macon-Bibb County Landbank Authority
Macon-Bibb County Urban Development Authority
Macon Water Authority
MARTA Retirement Plan
Milledgeville-Baldwin Dev. Auth.
Development Auth. Jeffersonville & Twiggs Co.

Boards of Education & Charter Schools:
Academy for Classical Education
Beaufort County School District
Baker County Schools
Bibb County Schools
Bleckley County Schools
Brooks County Schools
Butts County Schools
Camden County Schools
Cirrus Academy
Clarendon County School Dist. 1
Clay County Schools
Clayton County Schools
Colleton County Schools
Colquitt County Schools
Coweta County Schools
Dawson County Schools
Dodge County Schools
Dougherty County Schools
Dublin City Schools
Emanuel County Schools
Effingham County Schools
Fayette County Schools
Florence School District 1
Florence School District 3
Furlow Charter School
Gilmer County Schools
Glynn County Schools
Greene County Schools
Griffin-Spalding County Schools
Hancock County Schools
Harris County Schools
Henry County Schools
Houston County Schools

Laurens County Schools
Marion County Schools
Morgan County Schools
Newton County Schools
Pataula Charter Academy
Peach County Schools
Pickens County Schools
Putnam County Schools
Rockdale County Schools
Savannah-Chatham County Public School System
Spring Creek Charter Academy
Susie King Taylor Community School
Thomas County Schools
Twiggs County Schools
Tybee Island Maritime Academy
Ware County Schools

Degree/Certifications and Audit Training

Hope graduated from Wesleyan College in 2003 with a Bachelor of Arts in Business Administration with a concentration in Accounting. She has been a featured speaker at various workshops and at our quarterly training events.

Hope was awarded the AICPA Advanced Single Audit Certificate after passing the AICPA Advanced Single Audit Exam, which requires the ability to evaluate and analyze core concepts related to client acceptance, engagement planning & analysis, and concluding an engagement, as well as guiding principles for single audits at an advanced level as outlined in the AICPA Competency Framework: Governmental Auditing.

Hope has obtained a significant amount of continuing professional education over the last several years including:

- 2024 M&J 1st Quarter CPE – GASB & Federal Compliance Update, Internal Controls over Disbursements and P-cards (Participant & Instructor)
- 2024 AICPA – Single Audit Lightning Round
- 2023 AICPA – Year End Engagement Planning (Instructor)
- 2023 M&J – Advancing Advisory – Governmental
- 2023 GGFOA Conference – (Instructor)
- 2023 AHACPA HUD Multi-family Update
- 2023 M&J 3rd Quarter CPE – Accounting and Auditing Potpourri (Participant & Instructor)
- 2023 University System of Georgia (UGS) – Mid-Year Training – (Instructor)
- 2023 GSCPA – Governmental Conference (Instructor)
- 2023 LumiQ – 2023 Compliance Supplement Update (Instructor)
- 2023 M&J Governmental Conference (Participant & Instructor)
- 2023 M&J Single Audit Training (Instructor)
- 2023 LumiQ – Yellow Book: Auditing the SEFA (Instructor)
- 2023 Octane Conference (Instructor)
- 2023 LumiQ – GASB Updates for 2023 and Beyond
- 2023 GSCPA – Spring Government Workshop
- 2023 AICPA – Auditing the Most Common Programs Received by School Districts
- 2022 AICPA – What Federal Agencies are Finding in QCRs (Instructor)
- 2022 Florida GFOA – Grants Management and Accounting
- 2022 M&J 3rd quarter CPE – Preparing for Year End Close and the Annual Audit
- 2022 M&J Governmental Conference (Participant & Instructor)
- 2022 AICPA Annual GAQC Update

- 2022 M&J Single Audit Training (Instructor)
- 2022 Octane Conference (Instructor)
- 2022 GSCPA Spring Government Workshop
- 2022 M&J 2nd quarter CPE – GASB Update
- 2022 AICPA Audit Considerations - CSLFRF
- 2022 M&J 1st quarter CPE – ARPA-CSLFRF – The Final Rule is Here (Instructor)
- 2021 GSCPA Governmental Accounting and Auditing Conference (Instructor)
- 2021 AICPA Pandemic-Related Single Audit Issues and Other Single Audit Updates
- 2021 AICPA Single Audit Lightning Round – Compliance Supplement Update
- 2021 GGFOA Annual Conference – COVID-19 Funding and Uniform Guidance Update (Instructor)
- 2021 GGFOA Wednesday's News You Can Use – ARPA (Instructor)
- 2021 M&J 3rd quarter CPE – Let's Talk Grants – Administration & Auditing (Instructor)
- 2021 AICPA Compliance Supplement and Single Audit Update
- 2021 M&J Governmental Conference (Participant & Instructor)
- 2021 M&J Client CPE – Coronavirus State & Local Fiscal Recovery Fund – What We Know Now (Instructor)
- 2021 M&J Single Audit Training (Instructor)
- 2021 Octane Virtual Conference (Instructor and Participant)
- 2021 M&J 2nd quarter CPE – GASB Update and GASB 87, *Leases*
- 2021 AICPA Uniform Guidance Revisions: What You Need to Know
- 2021 M&J 1st quarter CPE – Achieving Excellence in Financial Reporting
- 2021 AICPA Single Audit Lightning Round
- 2021 M&J Compliance Supplement Addendum Webinar (Instructor)

Professional and Civic Activities

Hope is a member of the American Institute of Certified Public Accountants ("AICPA"), the Georgia Society of CPAs ("GSCPA"), the Government Finance Officers Association ("GFOA"), and is active in the Georgia GFOA. She also serves on GFOA's Special Review Committee and performs reviews of ACFRs as part of GFOA's Certificate of Achievement for Excellence in Financial Reporting program. Hope has been a featured speaker and instructor for various trade and professional organizations including the GGFOA, the AICPA, the GSCPA, and the University System of Georgia.

Hope also coordinates and instructs our quarterly continuing education events provided to our clients. Additionally, she coordinates and edits our e-newsletter, which are issued periodically on emerging topics of interest to state and local governmental entities throughout our governmental practice.

Hope enjoys community service work and has volunteered with various organizations in the middle Georgia area including United Way of Central Georgia, Distinguished Young Women of Monroe and Bibb Counties, Forest Hills United Methodist Church, and Wesleyan College.

Hope Pendergrass

Doug Moses, CPA
Engagement Quality Control Partner

Doug Moses is a **resident of Henry County** and a member (i.e., partner) and a certified public accountant with Mauldin & Jenkins, LLC. He specializes in serving local and state governmental entities, and is a partner who works exclusively in the governmental sector of the Firm's audit practice. Doug has a very balanced base of clientele serving cities, counties, boards of education, charter schools, state government entities and special purpose governmental entities. He is registered in Georgia. Doug is a member of the Firm's Executive Committee, which governs the actions and direction of the Firm and serves as a member of the Firm's Advisory Committee. Doug also heads up the Firm's Diversity and Inclusion Initiative Program and serves as a member of the Leadership and Career Development Committee, helping provide policy and procedural recommendations to establish and monitor a leadership, educational, and mentoring programs for the development of the Firm's human resources.

Years of Professional Experience and Years with Firm

Doug has over 24 years of experience with the Firm. Doug serves both large and small governmental units and is involved in serving over 50 such governmental entities. Doug obtained his CPA certificate in 2001.

The following is a summary of governmental clients served by Doug in the capacity of engagement partner in-charge or quality control review partner:

List of Governmental Clients Served in the Last Three (3) Years

Counties:
Athens-Clarke County
Barrow County
Cherokee County
Colquitt County
DeKalb County
Douglas County
Jackson County
Jefferson County, Alabama
Floyd County
Mitchell County
Walton County
Gwinnett County
Henry County
Hamilton County, Tennessee
Halifax County, North Carolina
Orange County, North Carolina

Cities:
Atlanta
Athens, Alabama
Alpharetta
Austell
Ball Ground
Baldwin
Chamblee
Clarkston
College Park
Cochran
Dacula
Doraville
Decatur
Douglasville
Dunwoody
Duluth
Forest Park
Fairburn
Jefferson
LaGrange
Lawrenceville
Lilburn
Grantville
Riverdale
Rome
Toccoa
Whitesburg
Bristol Tennessee
Town of Braselton
Crossville, Tennessee
Tucker
Jamestown, Tennessee
Suwannee
Stonecrest
Hapeville
Oxford
South Fulton
Morrow
Powder Springs
Town of Selma North Carolina
Town of Garner North Carolina

State Entities:
Georgia Lottery Corporation
Georgia Environmental Finance Authority
State Road and Tollway Auth.
Georgia Student Finance Auth.

Other Governmental Units:
Austell Natural Gas System
Decide DeKalb Authority
Chattanooga Area Regional Council of Govt's
Cobb County-Marietta Water Authority
Riverdale Downtown Development Authority
Bristol Tennessee Joint Sewerage System
Town Center Area Community Improvement District
Evermore Community Improvement District
Lawrenceville Tourism and Trade Association
Cherokee County Airport Authority
Barrow County Water and Sewerage Authority
Invest Atlanta (Atlanta Development Authority
McPherson Planning Local Redevelopment Auth.
McPherson Implementing Local Redevelopment Authority
Atlanta Beltline Inc.
Atlanta Housing Opportunity, Inc.
Urban Residential Finance Authority of Atlanta
Downtown Development Authority of Atlanta
Atlanta – Atlanta Station Tax Allocation District
Atlanta – Westside Tax Allocation District
Atlanta – Eastside Tax Allocation District
Atlanta – Princeton Lakes Tax Allocation District
Atlanta – Beltline Tax Allocation District
Atlanta – Perry Bolton Tax Allocation District
Electric Power Board of Chattanooga, Tennessee
Chattanooga Area Regional Council of Governments, Tennessee
City of Bristol Industrial Development Board Tennessee
Orange County Disabilities & Special Needs Board, South Carolina
Public Building Authority County of Knoxville, Tennessee
Hamilton County Water & Wastewater Treatment Authority
Bristol Public Library, Tennessee
Halifax-Northampton Regional Authority North Carolina
Halifax County Tourism Development Authority North Carolina
Halifax Airport Authority North Carolina

Boards of Education (and Charter Schools):
Atlanta Independent Schools
Fulton County Schools
DeKalb County Schools
Atlanta Heights Charter School
Gwinnett County Schools
Buford Board of Education
Fulton County Schools Employees' Pension Plan
Cobb County Schools
Decatur City Schools
Marietta City Schools
Rome City Schools
Troup County Schools
Douglas County Schools
Forsyth County Schools
Jefferson Board of Education
Murray County Board of Education
Union County Board of Education
Habersham County Board of Education
Floyd County Board of Education
Cartersville Board of Education
Paulding County Schools
Gordon County Schools
Oconee County Schools
Walton County Schools
Board of Regents of the University
Georgia Online Academy Inc.
Brighten Academy
Cherokee Charter Academy
International Charter Academy
Brookhaven Innovation Academy
Atlanta Heights Charter School
Coweta Charter Academy
SLAM Academy
Pataula Charter Academy
Georgia Charter Education Foundation
Southwest Georgia STEM Charter School
Georgia School for Innovation
East Point Academy of South Carol

Degree/Certifications and Audit Training

Doug graduated from Georgia Southern University in 1999 with a Masters of Business Administration with emphasis in accounting and from Georgia Southwestern State University in 1997 with a Bachelors of Business Administration degree with a major in accounting (Magna Cum Laude). He has been a speaker at free quarterly CPE provided to our clients and several internal conferences.

Doug has obtained and instructed a significant amount of continuing professional education over the last three (3) years including:

- 2023 M&J Annual Governmental Accounting & Auditing Conference – Participant
- 2023 OCTANE Governmental Accounting Conference –Participant
- 2023 GGFOA Governmental Conference – Participant
- 2022 M&J Free Client CPE Classes – Coronavirus State & Local Fiscal Recovery Fund – The Final Rule is Here! – Participant
- 2022 M&J Advancing Advisory Lunch & Learn- Entrepreneurial Operating System - Participant
- 2022 M&J Annual Governmental Accounting & Auditing Conference, Virtual – Participant
- 2022 OCTANE Governmental Accounting Conference – Instructor and Participant
- 2022 GGFOA Governmental Conference – Participant
- 2021 Rainmaker Training – Participant
- 2021 GASB Update and GASB 87, Leases – Participant
- 2021 M&J Annual Governmental Accounting & Auditing Conference, Virtual - Participant
- 2021 OCTANE Governmental Accounting Conference – Instructor and Participant
- 2021 M&J Achieving Excellence in Financial Reporting – Ask the Auditor – Participant and Panelist
- 2021 Highlights of the 2020 Compliance Supplement, Webinar – Participant
- 2021 Provider Relief Fund Updated Reporting Requirements - Participant
- 2021 Coronavirus State & Local Fiscal Recovery Fund – What We Know Now – Participant
- 2021 GGFOA Governmental Conference – Participant

Professional and Civic Activities

Doug is a Certified Public Accountant and a member of the American Institute of Certified Public Accountants, Georgia Society of Certified Public Accountants, Government Finance Officers Association, the National Association of Black Accountants, the Georgia Government Finance Officers Association and the Association of Government Accountants.

Doug is also an active member of the Georgia Southwestern's GSW Foundation, Inc., and the alumni board of trustees for Georgia Southwestern State University where he is the past-president of the Alumni Board, past-chair of the GSW Foundation, Executive Committee member, and current chair of the Development Committee. He has spoken at several graduation commencements which included the December 2005 Graduation Commencement at Georgia Southwestern State University in which the former President Jimmy Carter and his wife attended (the former President personally commended Doug on his speech during a private luncheon held on campus). Doug also serves on the Educational Foundation of the Ga Society of CPAs where he serves as the Chair for the College Outreach Committee and is a member of the Leadership Council of the Ga Society of CPAs.

Doug Moses

Tim Lyons, CPA
Alternate Quality Control Partner

Tim Lyons is a partner with Mauldin & Jenkins and is a certified public accountant as well as a chartered global management accountant. His experience covers a variety of clients throughout the Southeast, working mainly in North Carolina, South Carolina, and Georgia.

Tim spends 100% of his time serving clients in the governmental industry, working with all types of entities ranging from large state agencies to local counties/cities/townships, school districts, and authorities. In a leadership capacity, Tim is the partner-in-charge of the Firm's Columbia and Raleigh Offices and is also a member of the Firm's Assurance Committee, overseeing the entire audit practice of Mauldin & Jenkins, focusing on the Firm's Governmental Assurance services.

Years of Professional Experience and Years with Firm

Tim has more than fifteen years of experience in public accounting – a year and a half with a firm based out of Charleston, South Carolina and over thirteen years with Mauldin & Jenkins serving a wide variety of clients in the public services industry.

List of Governmental Clients Served in the Last Three (3) Years

Counties:
Aiken County, SC.
Buncombe County, NC.
Columbus County, NC.
Floyd County, Ga.
Forsyth County, Ga.
Gates County, NC.
Greene County, NC.
Halifax County, NC.
Jefferson County, AL.
Madison County, NC.
Montgomery County, NC.
Moore County, NC.
Orange County, NC.
Sumter County, SC.
Wake County, NC.
Walton County, Ga.

Cities and Townships:
Atlanta, Ga.
Black Mountain, NC.
Brookhaven, Ga.
Cartersville, Ga.
Cayce, SC.
College Park, Ga.
Decatur, Ga.
Douglasville, Ga.
Forest Park, Ga.
Garner, NC.
Hendersonville, NC.
Hollywood, SC
Kennesaw, Ga.
Jacksonville, NC.
Johns Creek, Ga.
LaGrange, Ga.
Loris, SC
Monroe, Ga.
Milton, Ga.
Rock Hill, SC.
Rockmart, Ga.
Rocky Mount, NC.
Rome, Ga.
Sandy Springs, Ga.
Social Circle, Ga.
Selma, NC.
Wilkesboro, NC.
Zebulon, NC.

School Districts:
Atlanta Public Schools
Beaufort County Schools
Clarendon County School District 1
Douglas County Board of Education
East Point Academy of South Carolina
Florence School District 1
Florence School District 3
Forsyth County Schools
Fulton County Board of Education
Horry County Schools
Marietta City Schools
Marlboro County School District
Montessori School of Camden
Orangeburg County School District
Richland County School District 1
South Carolina Public Charter School District
Sumter County School District

State Agencies:
Georgia Environmental Finance Authority (GEFA)
Georgia Higher Education Finance Authority (GHEFA)
Georgia Superior Court Clerks' Cooperative Authority (GSCCCA)
Georgia State Financing and Investment Commission (GSFIC)

Georgia World Congress Center Authority (GWCCA)
South Carolina Centers for Economic Excellence ("SmartState")
South Carolina Department of Transportation
South Carolina Education Lottery Commission
South Carolina Transportation Infrastructure Bank

Higher Education:
Aiken Technical College
Central Carolina Technical College
Francis Marion University
Greenville Technical College
Northeastern Technical College
Tri-County Technical College
Trident Technical College

Other Governmental Units:
Austell Natural Gas System
Buncombe County Tourism Development Authority
Cape Fear Public Utility Authority
Chatsworth Water Works Commission
Cobb County-Marietta Water Authority
Cobb County-Marietta Water Authority Retirement Plan
Columbus County Tourism Development Authority
Forsyth County Public Library
Fulton County School Employees' Pension Fund
Halifax-Northampton Regional Airport Authority
Halifax County Tourism Development Authority
Jacksonville Tourism Development Authority
Moore County Airport Authority
Moore County Convention and Tourism Bureau
Onslow Water and Sewer Authority

Degree/Certifications and Audit Training

Tim graduated in 2006 from Furman University in Greenville, South Carolina with a Bachelor of Arts in Accounting and subsequently, obtained his Masters of Science in Accountancy from the College of Charleston (South Carolina) in 2009. Tim holds active CPA licenses in both South Carolina and Georgia.

Tim has obtained and instructed a significant amount of continuing professional education over the last three years, including:

- Podcasts Hosted with LumiQ During 2023:
  - GASB Updates for 2023 and Beyond (Spring 2023)
  - Audit Considerations and Risks for Government Financing (Summer 2023)
  - GASB 94 (Fall 2023)
- 2023 Government Finance Officers of South Carolina Annual Conference – Live Conference (Hilton Head Island, SC) – Instructor ("Auditing Standards and Yellow Book Updates for 2023")
- 2023 Mauldin & Jenkins Annual Governmental Conference – Live Conference (Chattanooga, TN) – Instructor and Participant
- 2023 UNC School of Government Local Government Auditor Conference – Virtual Conference – Instructor ("Auditing Standards and Yellow Book Updates for 2023")
- 2023 Mauldin & Jenkins Government Client CPE– Virtual Conference – Instructor ("Updates in the Debt Environment for State and Local Governments")
- 2023 South Carolina Association of School Business Officials – Spring Conference Myrtle Beach, South Carolina – Instructor ("New GASB Standards and Upcoming Changes in School District Accounting")
- 2022 Mauldin & Jenkins Government Client CPE– Virtual Conference – Instructor ("Implementing GASB Statement 87")
- 2022 Mauldin & Jenkins Government Client CPE– Virtual Conference – Instructor ("GASB Update")
- 2022 Mauldin & Jenkins Annual Governmental Conference – Virtual Conference – Instructor and Participant
- 2022 UNC School of Government Local Government Auditor Conference – Virtual Conference – Instructor ("The Role of Risk Assessment in Local Government Audits")

- 2021 South Carolina Association of CPAs Fall Fest – Instructor ("Accounting for Debt in a Government")
- 2021 AICPA Webcast – Participant ("Navigating the New AICPA Ethics Interpretation: State and Local Government Client Affiliates")
- 2021 South Carolina Association of CPAs Virtual Webinar – Instructor ("Overview of the ACFR and Common Deficiencies in Seeking the GFOA Certificate")
- 2021 Mauldin & Jenkins Annual Governmental Conference – Virtual Conference – Instructor and Participant
- 2021 South Carolina Association of CPAs Spring Splash Virtual Conference – Instructor ("Reporting Issues with Component Units and Changes Brought on by GASBs 84 and 97")
- 2021 Mauldin & Jenkins Government Client CPE – Virtual Webinar – Instructor ("GASB Update and GASB 87")
- 2021 Mauldin & Jenkins Government Client CPE – Virtual Webinar – Panelist ("Ask the Auditor!")

Professional and Civic Activities

Tim is involved in a variety of organizations to both support the governmental industry and to promote the CPA profession overall. At the national level, he is a graduate of the AICPA's Leadership Academy, Class of 2012 and is a current member of the AICPA's State and Local Government Expert Panel. As a part of this fifteen member panel, Tim works on financial reporting, audit and attest matters relevant to audits of state and local government financial statements. The expert panel protects the public interest by bringing together knowledgeable parties in the state and local government industry to deliberate and come to agreement on key state and local government issues. It also plays a significant advocacy role through analysis and comment on exposure documents of the Governmental Accounting Standards Board and other proposals affecting state and local governments.

Also at the national level, Tim is a member of the Special Review Committee for the Government Finance Officers' Association (GFOA), reviewing Annual Comprehensive Financial Report submissions from all across the U.S. for governments seeking to obtain the Certificate of Achievement for Excellence in Financial Reporting.

At the state level, Tim is involved with the state GFOA organizations as a periodic presenter at the annual conferences as well as with the State CPA societies. Outside of the CPA profession, Tim is a member of the Board of Directors for Children's Trust of South Carolina whose Board is appointed by the Governor. Children's Trust is the only statewide organization whose mission is the prevention of child abuse, neglect and injury throughout South Carolina by forming partnerships with local governmental and nonprofit organizations including many counties, school districts, and other governmental agencies.

Tim Lyons

Trey Scott, CPA
Support Partner

Trey Scott is a partner and a certified public accountant with Mauldin & Jenkins specializing in serving local and state governmental entities. Trey's experience with the firm covers a variety of state and local governmental organizations in Georgia, South Carolina and Florida.

Trey spends 100% of his time serving local governments emphasizing cities, counties, school districts, business-type entities, state government entities, and special purpose entities and authorities.

Years of Professional Experience and Years with Firm

Trey has sixteen (16) years of experience in public accounting, all with Mauldin & Jenkins serving a wide range of governmental clients. Trey has specific experience with client computer systems (most commonly Tyler Munis and BS&A, among others). He is also thoroughly versed in Federal and State grant programs.

List of Audits Performed for Governments in the Last Three (3) Years

Trey serves both large and small governmental units, and is involved in serving over seventy (70) such governmental entities. The following is a current summary of governmental clients served by Trey in the capacity of engagement partner:

Cities:
Aiken, South Carolina
Bloomingdale
Bluffton, South Carolina
Brunswick
Cooper City, Florida
Covington
Conyers
Crystal River, Florida
Fayetteville
Griffin
Hallandale Beach, Florida
Hardeeville, South Carolina
Hinesville
Hilton Head Island, South Carolina
Hollywood, South Carolina
Kiawah Island, South Carolina
Kingsland
Morrow
North Charleston, South Carolina
Peachtree City
Pensacola, Florida
Savannah
St. Marys
Thunderbolt
Tybee Island
Village of Pinecrest, Florida
Union City

Counties:
Augusta-Richmond County
Beaufort County, South Carolina
Camden County
Colleton County, South Carolina
Chatham County
Charlton County
Dorchester County
Hampton County
Liberty County
Long County
Oconee County, South Carolina
Peach County
Pierce County
Rockdale County
Stephens County
Tattnall County
Toombs County

Other Governmental Units:

Beafort Jasper Water and Sewer Authority
Broad Creek Public Service District
Brunswick-Glynn Joint Water and Sewer Commission
Camden County Public Service Authority
Central Midlands Regional Transit Authority
Charleston County Park and Recreation Commission
Chatham Area Transit Authority
Clayton County Water Authority
Hardee County, FL Industrial Development Authority
Henry County Water and Sewerage Authority
Hospital Authority of St. Marys
Lakeland Area Mass Transit District
Live Oak Public Libraries
Lowcountry Regional Transportation Authority
Mount Pleasant Waterworks
Newton County Water Authority
Ocean Highway and Port Authority
Polk Transit Authority
Peachtree City Convention & Visitors Bureau
Peachtree City Development Authority
Peachtree City Water and Sewer Authority
Port of Corpus Christi Authority of Nueces County Texas
South Island Public Service District
Toccoa-Stephens County Public Library
Tampa Bay Water

State Entities:

Georgia Building Authority
Georgia State Road and Tollway Authority
Georgia Ports Authority
Georgia Student Finance Authority
South Florida Regional Transportation Authority

Degree/Certifications and Audit Training

Trey graduated from Austin College, in Sherman Texas with a Bachelor of Arts degree, majoring in Business Administration. Trey also has a Master of Public Accounting degree from the University of West Georgia in Carrollton. He is in his 16th year of public accounting and auditing, with an emphasis on state and local governments.

Trey has instructed or participated in a significant amount of continuing professional education over the last three years including:

- 2023 M&J Governmental Conference – Various Participant / Instructor
- 2023 GFOA South Carolina Conference – GASB Update – Instructor
- 2023 Ethics for CPAs in Florida
- 2023 Octane Conference – GASB Update - Instructor
- 2023 Carl Vinson Institute of Local Government ACFR class – Instructor
- 2023 M&J Quarterly Client CPE – Instructor
- 2022 GGFOA – GASB 87 Implementation - Instructor
- 2022 M&J Governmental Conference – Various topics – Instructor and Participant
- 2022 Octane Conference – Team Performance – Instructor
- 2021 FGFOA School of Governmental Finance – Presenting your Financial Report Card to Non-financial People - Instructor
- 2021 GFOASC – Governmental Financial Report Card – Instructor
- 2021 Georgia Fiscal Management Council Conference – GASB Update - Instructor
- 2021 South Carolina Association of Public Accountants – Evaluating Gov Financial Stmts Instructor
- 2021 M&J Governmental In-charge Training – Various - Instructor
- 2021 M&J Governmental Conference – Various – Participant / Instructor
- 2021 Octane Conference – Your Govts Financial Report Card – Instructor
- 2021 Carl Vinson Institute of Local Government ACFR class – Instructor

Professional and Civic Activities

Trey is a Certified Public Accountant and a member of the American Institute of Certified Public Accountants, Florida Institute of Certified Public Accountants, Georgia Society of Certified Public Accountants, the Government Finance Officers Association, the Florida Government Finance Officers Association, and the Georgia Government Finance Officers Association.

Trey Scott

Demetria Fluellyn, CPA
Senior Manager

Demetria is a Senior Manager with Mauldin & Jenkins. Her experience with the firm covers a variety of state and local governmental organizations, including cities, counties, state entities and special purpose governmental entities, but she has a definite affinity and experience in the school district/board of education sector. Demetria spends 100% of her time serving state and local governments. Demetria works with approximately 35 state and local governments in Georgia.

Years of Professional Experience and Years with the Firm

Demetria has over twelve (12) years of experience in public accounting, all with Mauldin & Jenkins, serving a wide range of clients in the public services industry.

List of Audits Performed for Governments in the Last Three (3) Years

School Systems:
Beaufort Co. School District
Bibb Co. School District
Butts County Schools
Camden Co. School District
Dougherty County Schools
Clayton Co. School District
Coweta Co. School District
Fayette Co. School District
Furlow Charter School
Glynn Co. School District
Henry Co. School District
Laurens County Schools
Pataula Charter Academy
Peach Co. School District
Rockdale Co. School District
Morgan County Schools
Houston County Schools
Griffin-Spalding County Schools
Newton County Schools
Academy for Classical Education
Twiggs County School District
Savannah-Chatham Schools
Dublin City Schools
Cirrus Academy Charter School

Counties:
Augusta-Richmond Co.
Macon-Bibb Co.
Mitchell Co.
Turner County

Cities:
Americus
Stockbridge
Leesburg
Albany

Other Governmental Entities:
Clayton Co. Housing Authority
Georgia Higher Education Assistance Corp. (GHEAC)
Georgia Infirmary Housing Corporation
Georgia Student Finance Authority (GSFA)

Degree/Certifications and Audit Training

Demetria graduated from Georgia Southern University with a B.B.A. in Accounting in 2010 and a Masters in Accounting in 2012. She is a Certified Public Accountant. Additionally, Demetria has obtained a significant amount of continuing professional education over the last three years, serving as a participant in several seminars and courses including:

- 2023 Introduction to Federal Grants
- 2023 Single Audits of Governmental and Nonprofit Entities
- 2023 Audits of State and Local Governments
- 2022 Overview of Governmental Accounting
- 2022 Grants Management
- 2022 Governmental In-Charge Training
- 2022 Coronavirus State & Local Fiscal Recovery Fund – The Final Rule Is Here!
- 2021 Single Audits Under the Uniform Guidance
- 2021 M&J IT Cybersecurity & Effectiveness in Governments
- 2021 M&J Let's Talk Grants – Administration & Auditing
- 2021 M&J 2nd Quarter CPE – GASB Update and GASB 87, *Leases*
- 2021 M&J 1st Quarter CPE – Achieving Excellence in Financial Reporting
- 2021 M&J Compliance Supplement Addendum Webinar

Professional and Civic Activities

Demetria is a Certified Public Accountant and a member of the American Institute of Certified Public Accountants and the Georgia Society of Certified Public Accountants. Demetria currently resides in Macon, Georgia with her husband, Antoine, daughter, Kyla, and son, Kobe. She is an active member of St. Phillip A.M.E. Church in Culloden, Georgia.

Ashley Smith
Senior Associate

Ashley is a Senior Associate with Mauldin & Jenkins. Her experience with the firm covers a variety of state and local governmental organizations.

Ashley joined the firm in 2018, and spends 100% of her time serving state and local governments. Her experience primarily revolves around cities, counties and school districts located in Georgia.

Years of Professional Experience and Years with the Firm

Ashley has six (6) years of experience in public accounting with Mauldin & Jenkins, serving clients in the public services industry.

List of Audits & Compilations Performed for Governments in the Past Three Years

School Systems:
Bibb County School District
Butts County School District
Clayton County School District
Dodge County School District
Glynn County School District
Harris County School District
Marion County School District
Putnam County School District
Rockdale County School District
Peach County School District
Dublin City School District
Fayette County School District

Other Governmental Entities:
Georgia Higher Education Assistance Corp.
Georgia Student Finance Authority
Macon Water Authority

Cities & Counties:
Macon-Bibb County
City of Albany
Jones County
City of Atlanta

Degree/Certifications and Audit Training

Ashley graduated from Mercer University with a B.B.A in accounting and also obtained her MBA from Mercer University. In addition, Ashley has obtained a continuing professional education over the last three years, serving as a participant in seminars and courses including:

- 2024 M&J GASB Update, Federal Compliance Update, & Internal Control over Disbursements & P-cards
- 2023 M&J Advancing Advisory – Governmental
- 2023 M&J Governmental Conference
- 2023 M&J Advancing Advisory – Nonprofit
- 2023 M&J ACFR Training
- 2023 AICPA Auditing the Most Common Programs Received by School Districts
- 2022 M&J Governmental In-Charge Training
- 2022 M&J Governmental Conference
- 2022 Thomson Reuters Tax and Accounting Professional Software & Services
- 2022 M&J ACFR Training
- 2022 M&J Coronavirus State & Local Fiscal Recovery Fund – The Final Rule Is Here!
- 2021 M&J Governmental In-Charge Training
- 2021 M&J Governmental Conference
- 2021 Thomson Reuters Audit Watch University: Experienced In-Charge Training
- 2021 M&J ACFR Training

Professional and Civic Activities

Ashley is a member of the American Institute of Certified Public Accountants, Georgia Society of Certified Public Accountants, and the National Association of Black Accountants. She attends Total Grace Baptist Church in Macon, Georgia.

Other Resources (Advisory Services &Information Technology Services)

David Roberts
Partner, Governmental Advisory Services

David Roberts has more than 22 years of experience as a consultant and trusted advisor providing operational/organizational assessments and similar transformational projects for federal, state, and local governments across the country. David's experience includes leading numerous enterprise-wide/departmental/functional assessments and transformations over his career measuring the efficiency and effectiveness of organizational structures and culture, performance management, technology systems and strategies, staffing models, service delivery models, and customer satisfaction.

David helps his clients turn visions and goals into reality. He has helped multiple clients win national government industry awards for innovation, transformation, and cost savings.

David leads our Government Advisory practice, where he focuses on helping governments and individual agencies fulfill and exceed their financial, operational, and regulatory obligations to the public.

David has completed hundreds of projects over his career. Below are representative sample management consulting projects demonstrating David's depth and breadth completed within the past 12 months:

Operational and Performance Assessment – *Walton County, Georgia*
David led a multi-department Operational and Performance Assessment for Walton County. The scope included assessing organizational structure, operational efficiency, staffing levels and resource utilization, comparison to leading practices, and observations and recommendations to assist the County in achieving the desired future state. The final report included numerous observations with associated recommendations and a detailed Roadmap/Implementation Plan.

Outsourcing Feasibility Study – *City of Rocky Mount, North Carolina*
David led a feasibility study for the City of Rocky Mount to assess its current service delivery model for providing parks maintenance and landscaping services. City operations used of a hybrid model of both internal resources and third-party contractors to provide parks maintenance and landscaping. The project evaluated the pros and cons (both financial and non-financial) of 1) maintaining the hybrid model, 2) performing all services in-house, and 3) performing all services externally.

Finance Functional Assessment – *Richland County Library, South Carolina*
David led a functional assessment of the Library's finance department. The project consisted of understanding the current state – current service provision, performance, workflow, business processes, internal controls, organizational structure, reporting, and communications. The current state was compared to leading practices and gaps were identified. An implementation roadmap was created that aligned recommendations to leaderships' vision to help the organization achieve its desired future state.

Technology Utilization Assessment – Mt. Pleasant Waterworks, South Carolina

David led an objective evaluation of the organization's system usage and governance related to the existing financial system (Microsoft Dynamics) and the existing workorder management system (Maximo). The organization wanted to maximize the efficiency and effectiveness of both systems while maintaining internal controls and system of record. The project consisted of numerous interviews, data review, system mapping, and a collaborative workshop among stakeholders to define a future state.

Grant Compliance Audit – *Decide DeKalb, Georgia*

David led a Grant Compliance Assessment of various development projects for Decide DeKalb. The project reviewed the established grant and contractual criteria to be maintained by developers and compared with tenant information related to low income occupants. The project identified areas of compliance, non-compliance, and recommendations for remediation.

Forensic Audit – *Confidential City*

David led a forensic investigation into questionable cash management activity for a City Parks and Recreation department. The project reviewed bank account activity, cancelled checks, cash withdrawals, and purchased item documentation as well as conducted interviews with account cardholders to determine the collection, handling, and use of several hundred thousand dollars collected in fees, sponsorships, and contributions made to the City. Numerous observations and corresponding recommendations were developed to enhance internal controls, written policies, and procedures to correct conflicts of interest, mishandling of funds, and misappropriation of funds.

From management consulting and identifying new opportunities, to increasing stakeholder satisfaction and implementing transformational strategies, David and our government advisory team deliver insights and techniques that help government clients leverage public resources efficiently while achieving overarching goals. Our Government Advisory Practice brings to market a team that has direct experience as government employees, change agents, and transformation consultants to help tackle the industry's toughest issues.

David Roberts

Jameson Miller, CPA, CISA, CISSP, CCSFP, CHQP
Partner in Charge, Technology Services Office, Cybersecurity Advisory Services

Jameson Miller is a partner and has been with Mauldin & Jenkins since graduation from the University of Tennessee at Chattanooga.

For over 15 years, Jameson has provided information technology consulting and attest services to public and private entities throughout the Southeast. Jameson's experience includes audits of general controls, application controls, and cybersecurity risk management programs.

Jameson has extensive experience with Sarbanes Oxley, SSAE18 System and Organization Controls (SOC) Audits, National Automated Clearinghouse Association (NACHA) Operating Rules and Guidelines, and Gramm-Leach-Bliley Act (GLBA) compliance programs. His technical expertise includes performing vulnerability assessments and penetration testing of information systems using both technical and social engineering techniques. Further, Jameson:

- Maintains current and relevant information technology and financial accounting continuing professional education credits (CPE);
- Holds the American Institute of Certified Public Accountants' (AICPA) "Cybersecurity Advisory Services" and "Blockchain for Accounting and Finance" Certificates;
- Served as a Cybersecurity panelist and speaker at the 2020 Octane Conference and GGFOA's 2019 Annual Conference;
- Presented a firm sponsored 8 hours session entitled, "All Things IT – Are You Protected?"; and,
- Has spoken at other various conferences on topics, including:
    - Managing Cybersecurity Risk Through an Effective Vendor Management Program;
    - Technologies Transforming Accounting; and,
    - Data Analytics: Balancing the Good and the Ugly

Jameson Miller

Jameson is a member of the AICPA, the Tennessee Society of Certified Public Accountants, ISACA, and ISC2. Jameson is a licensed Certified Public Accountant with the State of Tennessee, a Certified Information Systems Auditor (CISA) through ISACA, a Certified Information Systems Security Professional (CISSP) through ISC2, a Certified Cybersecurity Framework Practitioner (CCSFP) and Certified HITRUST Quality Professional (CHQP) through the HITRUST Alliance.

Considering the fact that Jameson only provides non-traditional consulting-type services to governmental entities, and he does not (and will not) provide audit and accounting services under the guidance of the Yellow Book educational standards, no such continuing education is required or provided under this proposal to provide services.

Other Staff Auditors & Accountants

Prior experience with government audits is as important for the staff as it is for management. Experience in governmental accounting and auditing minimizes the amount of time the staff will require to fully understand the complexities of the operations and financial accounting and reporting systems. Prior experience also enables the staff to recognize problems early in the engagement. This, in turn, allows the desired early consideration and resolution of problems. All staff assigned to the City's engagement will have prior experience serving government clients and/or will have substantial government audit training. All staff assigned to the City will be on-site throughout the entire engagement.

We would like to stress the fact that the majority of our governmental staff work on state and local governments 100% of their time. This reduces the "learning curve" on most all audits by reducing the amount of "on-site training" that occurs at most national accounting firms. This is very evident in our proposed hours, which are typically much less than that of other firms. Our staff knows what is required and how to get the work done efficiently and effectively. Our staff members understand the laws and regulations specifically pertinent to governmental entities. We also normally have more high-level hours of service by our partners and managers (in the conduct of fieldwork) than other firms, thereby reducing redundancy and other audit engagement inequities. We bring our experience to the field where timely decisions can be made.

Partner & Staff Continuity

We are committed to providing continuity of our engagement team members. We recognize that this is also an important factor for the City as it limits the amount of retraining that needs to be performed each year. **Our staff retention rates of approximately 85%** are considered to be among the best in the profession (and much better than national firms). We are able to not only provide consistency with the partners and managers on our engagement teams, but seniors and staff as well.

Retention > 85%

This indicates that we retain 85% of our staff for a minimum of five years.

It is also our goal to minimize disruptions to your management personnel by staffing the engagement so as to provide continuity, both during and between audits. It is the Firm's policy not to rotate key audit staff, consultants or specialists off a multi-year contracted audit engagement. Consequently, it is not anticipated that any key audit personnel will be rotated away from this annual audit. In any business, however, turnover is inevitable. When this happens, we will provide resumes of suggested replacements and any changes in key personnel would always be discussed timely with officials to their satisfaction.

Continuing Education of Partners and Staff

All members (i.e., partners) and staff of Mauldin & Jenkins receive substantial continuing education in audit and accounting – typically over 100 hours of such study per year. As soon as a staff person becomes a key ingredient to any type of niche service such as governmental audit, accounting and consulting, specific continuing education is sought. A good example includes sending our staff with over one year of governmental audit experience to various GFOA and AICPA training for audit, accounting and financial reporting courses.

All partners and staff serving in the governmental sector join together in July each year for the M&J Annual Governmental Conference in which three days' worth of audit, accounting and financial reporting training is provided. Mauldin & Jenkins also provides week long audit efficiency training via Audit Watch every June to all staff persons with less than five years of experience. Further, every July staff persons from various levels of experience are provided with four days of training relative to the conduct of Single Audits and the preparation of Annual Comprehensive Financial Reports. All staff associated with the annual audit of the City will exceed all the continuing professional education requirements contained in the Yellow Book throughout the term of the agreement.

PART 2
TECHNICAL PROPOSAL

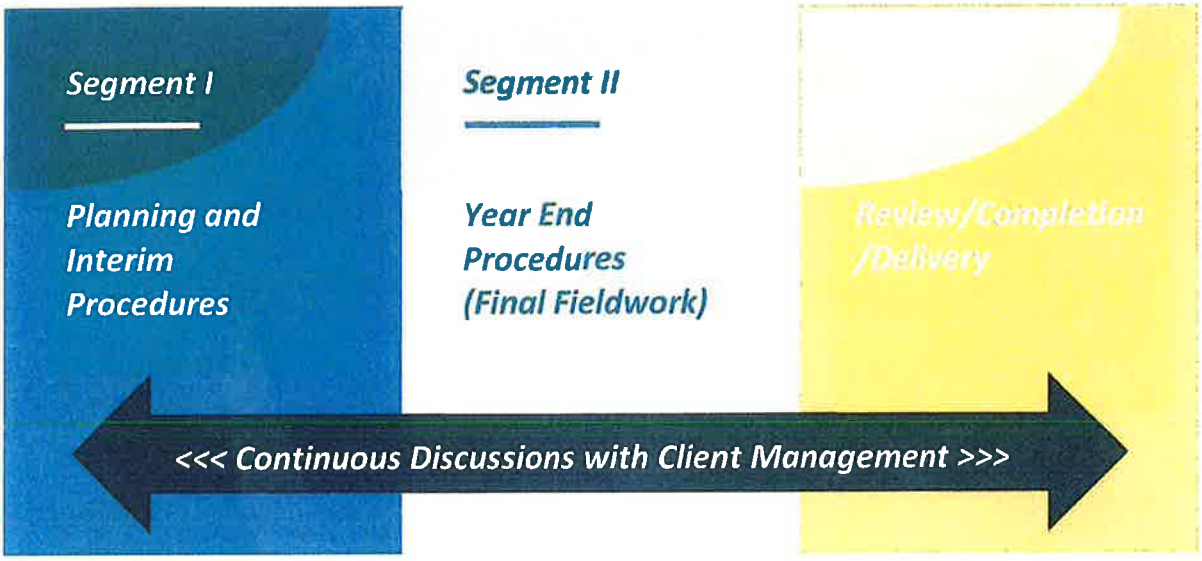
MAULDIN & JENKINS

CPAs & ADVISORS

Project Plan -Specific Audit Approach

Proposed Segmentation of Audit Engagement and Level of Staff Assigned

Our professionals, who are knowledgeable with respect to audit requirements for governmental entities, will be assigned based on their expertise with respect to each segment. Our audit is enhanced by our utilization of advanced technology tools. With those tools we continue to evolve and modernize our audit process. Our audit procedures, related documentation and quality review will be segregated by each segment as follows based on our review of the City's prior financial statements, budgets,

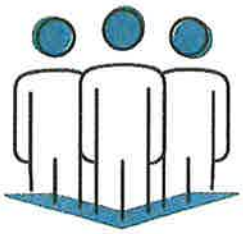


request for proposal, and other information available:

The below time frames are estimates based on our understandings with the City as to its desires. We at Mauldin & Jenkins would be flexible in the timing of certain events as requested by the City. As noted in the table below, we want to work with City personnel in an effective manner. We intend to do a great deal of planning and tailoring of our approach from our initial visits. We do not want our clients to feel that they have to reinvent the wheel every time we ask for something. However, to make this process cost the City as little as possible (both in dollars and their individual time), it is important to start only when ready and avoid auditing a moving target.

Timing of Audit Process & Procedures

Segments	Jan	Feb	March	April	May	June	July
Segment I - Planning and Interim Procedures							
Ongoing consultation on major issues & developments throughout the year, and greater discussions as year end approaches (such as new GASB standards).							
Meet management to discuss audit risks and scopes.							
Engagement team planning meetings and performance of interim audit procedures.							
Gain understanding of significant processes & key controls.							
Perform testing of key controls with goal of reducing substantive audit testing.							
Detemine nature, timing and extent of substantive tests to be performed.							
Finalize audit plan based on results to-date.							
Segment II - Final Audit Fieldwork Procedures							
Perform substantive tests (detail testing of respective general ledger/trial balance accounts, and final analytical procedures & key ratios & relationship of financial data).							
Conduct a final evaluation of risk assessments.							
Conduct of progress meetings with management as needed and as often as desired.							
Preparation of draft annual financial report (AFR) and drafting of audit reports, findings, management letter comments, and any other deliverables.							
Meeting with management to discuss draft deliverables and final completion and presentation time frames.							
Segment III - Review, Completion & Delivery Procedures							
Upon management's review, delivery of ACFR, internal control reports, and management letter to management.							
Presentation of audit deliverables to the City Council.							

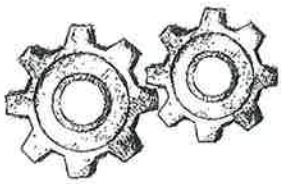


Segment I - Planning and Interim Procedures (January – March 2025):

- Obtain a signed engagement letter for the financial and compliance audit;
- Prior to our planning visit, creation of an "Interim Procedures PBC" listing in Suralink, our request list management software (more information about Suralink in the section immediately following).
- Meet with City management to discuss the scope of the audit, timing of our work, and preparation of client schedules, and to address any concerns;
- Review previously issued and interim financial reports, comment letters, monitoring reports, and other supporting workpapers;
- Familiarize ourselves with the organizational structure of the City;
- Read minutes of City meetings;
- Review the City's current year budget, as adopted and revised;
- Review debt agreements, and other various documentation;
- Gain an understanding of the City's accounting policies and procedures, including the financial and other management information systems utilized by the City;
- Obtain an in-depth knowledge of the software and systems in use;
- Obtain interim financial data from the general ledger for the purpose of performing preliminary analytics;
- Perform a preliminary evaluation of the internal control structure at the account and assertion level;
- Design and perform applicable tests of controls related to the financial statements and internal accounts;
- Make fraud inquiries and assessing the risks of material misstatement;
- Obtain a list of cash, investment, receivables, debt, and selected revenue accounts for confirmation purposes, as applicable;
- Determine audit strategies for balance sheet and operating statement accounts based on audit risk;
- Obtain a preliminary schedule of expenditures of Federal awards to initiate planning and internal control testing for the Single Audit;
- Prepare year-end audit programs;
- Meet with appropriate City personnel to discuss the results of our preliminary audit work; and,
- Finalize the "Final Fieldwork PBC Listing" and upload to Suralink.

Segment II - Final Audit Fieldwork Procedures (April -May 2025):

- Analyze the final trial balance and scan transaction for unusual transactions, data, or analytical relationships;
- Use data scanned above in various substantive analytical reviews of account balances (such as reasonableness tests, trend analysis, and predictive tests) to reduce other substantive tests of details;
- Test the valuation, restrictions and cut-offs of cash and investment balances, as applicable;
- Test receivable cut-offs and balances, including an analysis of subsequent receipts;
- Test cut-off and valuation of inventory;
- Review and testing supporting documentation for the allowance for doubtful accounts, any material prepaid items and other assets;
- Vouch capital asset additions and deletions, analyzing charges for appropriate accounting and testing depreciation;



- Test accounts payable cut-offs and balances, including an analysis of subsequent disbursements;
- Test accrued payroll, compensated absences, claims payable, and other accrued liability cut-offs and balances;
- Review actuarial methodologies, assumption, and census data and determine the appropriateness and accounting of the pension and OPEB liabilities;
- Test debt balances and debt covenant compliance;
- Test compliance with applicable laws and regulations;
- Test the classification of net position (unrestricted, restricted and net investment in capital assets) and fund balance (nonspendable, restricted, committed, assigned, unassigned);
- Perform analytical procedures and substantive testing of revenues and expenditures/expenses;
- Obtain and auditing the final schedule of expenditures of Federal awards;
- Complete compliance tests for the major programs selected for testing as required by the Uniform Guidance, as applicable;
- Review the PBC listings in Suralink for any outstanding items and hold and end of fieldwork exit conference with management.

Segment III - Review, Completion & Delivery Procedures (June 2025):

- Review workpapers to ensure quality and thoroughness of audit procedures;
- Summarize the results of audit procedures;
- Obtain attorney letters;
- Evaluate commitments, contingencies and subsequent events;
- Propose audit adjustments;
- Summarize and evaluating passed audit adjustments;
- Evaluate compliance exceptions;
- Review draft financial statements and related note disclosures;
- Perform financial condition assessment procedures;
- Prepare drafts of audit reports and management letter;
- Deliver drafts of audit reports and letters to appropriate client officials;
- Finalize all reports and management letter;
- Obtain signed representation letter and the City's approval of the final financial statements;
- Draft the Data Collection Form and obtaining the City's approval;
- Prepare and provide the City a final PDF document of the audited financial statements;
- Hold final exit conferences and presentations with appropriate City officials (June or July, as desired)

Based on the City's request for proposal, we have also prepared a schedule, including level of staff and number of hours to be assigned, to each proposed segment of the engagement, which is representative of the expected 2024 audit in the following tabular presentation:

Segmented Hours by Staff Level				
Segments	Engagement Team Members by Level			
	Partner	Manager	Senior/Staff	Total
Segment I - Planning and Interim Procedures	4	20	10	34
Segment II - Final Audit Fieldwork Procedures	22	30	160	212
Segment III - Review, Completion & Delivery Procedures	24	50	30	104
Total Engagement	**50**	**100**	**200**	**350**

Upon notification of renewal of the audit contract with the City, we would determine with City management a more detailed timetable for the audit process, and a detailed audit plan leading up to a list of all schedules to be prepared by the City. Adequate supervision and lead time will be provided by the auditor with respect to assistance needed by the City staff.

Mauldin & Jenkins believes that we are uniquely qualified to perform the audit of the City. In a time in which very significant changes continue to be implemented in the City's financial reporting model, it is imperative for the City's auditors to understand the City's financial reporting environment and processes and utilize advances technology and tools in performing your audit. The team proposed to serve you is made up of individuals who have significant experience in auditing local governments of various sizes in the Southeast.

Public Involvement Plan

Mauldin & Jenkins prides itself in developing professional relationships and rapport with clients which facilitate open and honest communication. We will present the results of the audit and all irregularities and illegal acts or indications of illegal acts of which we become aware (if any), to the following parties:

- The Mayor and City Council
- The City's Attorney
- The City's Manager
- The City's Treasurer

Understanding of Scope of Services

Our audit of the financial statements will be conducted in accordance with auditing standards generally accepted in the United States of America and will conform to the standards as set forth in the following:

- "Generally Accepted Auditing Standards" developed by the American Institute of Certified Public Accountants (AICPA)
- "*Government Auditing Standards*" issued by the Comptroller General of the United States
- "Audits of State and Local Government Units" prepared by the State and Local Government Committee and published by the AICPA

Our audit will include advanced methodologies and technology, tests of the accounting records and such other auditing procedures as we consider necessary in the circumstances, which include, but are not limited to, those procedures necessary to test compliance and to disclose non-compliance with specified laws, regulations, and contracts.

We will use Firm manuals specifically designed for governments to develop audit programs tailored to the City which incorporate the requirements set forth above. We anticipate that these procedures will enable us to express our professional opinion that the financial statements of the City present fairly, in all material respects, the financial position and results of operations of the various opinion units in conformity with accounting principles generally accepted in the United States of America. If conditions are discovered which lead to the belief that material errors, defalcations, or other irregularities exist which might prohibit us from expressing an unqualified opinion or if any other circumstances are encountered that require extended services, we will promptly advise the City. No extended services will be performed unless they are authorized in contractual agreement or in an amendment to the agreement.

Assistance Requested from the City Staff

The audit is an annual process that we know the City prepares for each year. However, we also know that the regular, on-going operations and day-to-day requirements do not stop just because the annual audit is occurring. The assistance that will be requested from the City staff will be clearly communicated by Mauldin & Jenkins during the preliminary / interim procedures to allow for maximum lead time so that our requests can be met with as little disruption to the City's operations as possible.

Our expectation for assistance from the City staff includes the following: preparation of cash, investment, debt, and other audit confirmations; provision of access to the City's system or response to requests to provide reports, reconciliations, queries, etc.; preparation of certain elements of the Annual Comprehensive Financial Report (transmittal letter, organization chart, etc.); and availability via telephone, video conference, and in-person to respond to various questions and inquiries.

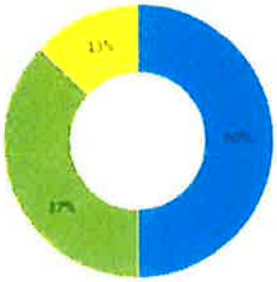
Project Team

See Technical Proposal Part 1, Tab 6 for a detail of our proposed staffing and qualifications for the City's project team.

Additional Information of Value Added Services

Our Request List Management Software – Suralink

For all of our governmental audit engagements, we use Suralink. Suralink is the leader in PBC request list management software, helping all of our audit teams stay on track throughout the engagement and improving the overall client experience.



Prior to our visit to the City's offices for interim/planning work, we will create an account for the Entity. We can add as many people to the City's account as requested – and even have the ability to limit which people can see which items in the portal for security of sensitive information.

All requests for the audit will run through Suralink which our audit team members will update throughout fieldwork. Our periodic audit status meetings will start with a review of the Suralink portal and a general discussion of the progress to date. Suralink will provide a summary status that looks similar to the diagram below, and will also include details of the specific items for each category.

Request Summary

- Outstanding - 50%
- Fulfilled - 13%
- Returned - 0%
- Accepted - 37%

Total Requests	
Accepted: 33	Returned: 0
Outstanding: 43	Fulfilled: 12

By using Suralink, we will (1) eliminate inefficient and unsecured email exchange of audit information; (2) ensure that all members of the Mauldin & Jenkins team as well as the City's team remain on the same page throughout the conduct of the audit; and (3) encourage the efficient assignment of audit tasks on both the audit team and client team for the engagement.

Remote Audit Approach As Requested

Governmental organizations are choosing remote audits with increasing frequency, and Mauldin & Jenkins is very effective in working from a remote environment. The spring of 2020 brought an increasing demand for remote audits due to the spread of COVID-19 and the inability for work to be conducted on site. However, even before the complexities brought on by the spread of COVID-19, many organizations opted for remote audits for a variety of reasons. It will be the City of Stockbridge's preference whether to conduct the audit remotely, but should you desire this service delivery option, Mauldin & Jenkins is trained to conduct remote audits while maintaining all professional standards.

Remote audit engagements offer significant advantages over those that follow a more traditional format: faster results, less disruption, and reduced stress for governmental finance personnel. Current technology allows our clients and their audit teams to stay in regular communication, securely share information, and collaborate effectively. Our staff professionals have grown accustomed to being provided read-only access to client systems to run reports, view purchase orders, invoices, reconciliations, etc. As a result, work that used to require extended on-site time can be performed anywhere, easing the burden on the audit process for both the auditor and auditee.

Though audits can still require some on-site time, reconfiguring the City of Stockbridge's audit engagement to maximize efficiency and to take advantage of technological tools can dramatically reduce the amount of time spent on-site. While the remote audit can generate far less disruption for the organization undergoing the audit, it does not necessarily reduce client contact very much – or even at all. As we leverage the technological tools at our disposal (Suralink, Zoom, LeapFile, Google Hangouts, etc.) we maintain consistent contact with our clients throughout the process and find that in many ways, communication between our teams and clients are as good, if not better, in the remote working environment than during traditional onsite engagements.

A successful audit experience requires careful planning, timely preparation and strong communication, regardless of where the work takes place. That is especially true for a remote engagement, so preparing for this type of audit sometimes helps organizations identify ways to improve their internal data management strategies – a welcome bonus! We are proud of the strong governmental practice we've built and it's upon that foundation that we can leverage these technological tools to conduct remote audits as the environment demands or the client chooses.

Upcoming GASB Statements

As has been the case for the past 10 years, GASB has issued several other new pronouncements which will be effective in future years. The following is a brief summary of the new standards for which we will utilize our continuing education trainings and governmental newsletters. Additionally, we regularly assist our clients with understanding and implementing these new standards. The standards which will be implemented in the near future:

Statement No. 100, *Accounting Changes and Error Corrections*
Statement No. 101, *Compensated Absences*
Statement No. 102, *Certain Risk Disclosures*

As noted by the numerous pronouncements issued by GASB over the past decade, the GASB continues to research various projects of interest to governmental units. Subjects of note include:

Revenue and Expense Recognition
Going Concern Uncertainty and Severe Financial Stress
Classification and Disclosure of Capital Assets

Free Continuing Education for Governmental Clients

We provide free quarterly continuing education for all of our governmental clients. Each quarter, we pick a couple of significant topics tailored to be of interest to governmental entities, and offer the sessions several times per quarter virtually and at a variety of client provided locations resulting in greater networking among our governmental clients. We normally see approximately 100-200 people per quarter. We obtain the input and services of experienced outside speakers along with our in-house professionals.

> ***"I've been a CPA for 32 years. Today's CPE class by Mauldin & Jenkins has been the best of my career". Terry Nall, CPA, City of Dunwoody (GA) Council Member***

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"They are always on top of new accounting pronouncements and provide training well before implementation deadlines. This is a very valuable resource for our organization".
Laurie Puckett, CPA, CPFO, Gwinnett County (GA), Accounting Director

Examples of subjects addressed in past quarters include:

- Accounting for Debt Issuances
- Achieving Excellence in Financial Reporting
- Best Budgeting Practices, Policies and Processes
- Budget Preparation
- Capital Asset Accounting Processes and Controls
- Coaching and Mentoring
- Closing Out and Audit Preparation
- Collateralization of Deposits and Investments
- Component Units
- Coronavirus State and Local Fiscal Recovery Funds (CSLFRF)
- Cybersecurity Risk Management
- Detecting Fraud in Revenues and Expenditures
- Evaluating Financial and Non-Financial Health of a Local Government
- Financial Report Card – Where Does Your Government Stand?
- Financial Reporting Model Improvements
- GASB No. 74 & 75, New OPEB Standards
- GASB No. 77, Tax Abatement Disclosures
- GASB No. 84, Fiduciary Activities
- GASB No. 87, Leases
- GASB No. 96, SBITAs
- GASB No. 100, Accounting and Error Corrections
- GASB No. 101, Compensated Absences
- GASB No. 102, Certain Risk Disclosures
- GASB Projects & Updates (ongoing and several sessions)
- Grants (Accounting and Auditing)
- Human Capital Management
- Information Technology (IT) Risk Management
- Internal Controls Over Accounts Payable, Payroll and Cash Disbursements
- Internal Controls Over Receivables & the Revenue Cycle
- Legal Considerations for Debt Issuances & Disclosure Requirements
- Navigating IRS Communications with Success
- Policies and Procedures Manuals
- Presenting Financial Information to Non-Financial People
- Procurement Card Red Flags
- Risk, Efficiency, & Effectiveness in Governments
- Single Audits for Auditees
- SPLOST Accounting, Reporting & Compliance
- Uniform Grant Guidance

Governmental Newsletters

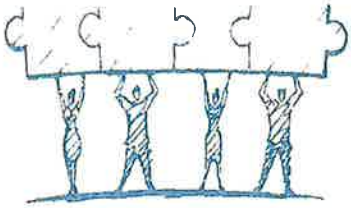
We produce quarterly newsletters tailored to meet the needs of governments. We also provide additional timely newsletters and announcements as necessary on any emerging topics to ensure governments stay informed of current developments in the government finance environment. The newsletters are authored by Mauldin & Jenkins governmental industry specialists and have addressed a variety of subjects. In the past several years, the following topics have been addressed in our newsletters:

- Are Your Government's Funds Secure?
- COVID-19 Updates (several)
- Cybersecurity Awareness
- Changes to FEMA's Disaster Recovery Grant Program
- Deposit Collateralization
- Employee vs Independent Contractor
- Escheat Laws on Unclaimed Property
- Federal Funding and Accountability Transparency Act
- Financial Data Transparency Act
- Forensic Audit or Financial Audit?
- Form PT 440
- GASB No. 72, Fair Value, It is Not Totally About Disclosure
- GASB No.'s 74 & 75, Other Post-Employment Benefits (OPEB)
- GASB No. 77, Abatements – Go Viral with GASB 77
- GASB No. 84 Fiduciary Activities (Series)
- GASB No. 87, Leases
- GASB No. 89, Accounting for Interest Cost Incurred Before the End of Construction
- GASB No. 91, Conduit Debt Obligations
- GASB No. 93, Replacement of Interbank Offered Rates
- GASB No. 100, Accounting Changes and Error Corrections
- General Data Protection Regulation (GDPR)
- GFOA announces new COA Submission Requirement
- Grants Management
- IRS Imposing ACA Penalties – Including to Governmental Entities
- OMB Compliance Supplements
- OPEB, What You Need to Know
- Public Funds and Secure Deposit Program
- Rotating or Not Rotating Auditors
- Property Tax Assessments
- Remote Auditing Best Practices
- Refunding Debt
- Sales & Use Taxes on Retail Sales of Jet Fuel
- Sales Tax Collections and Remittances by the State
- SAS Clarity Standards and Group Audits
- Single Audit, including Uniform Guidance (several)
- Social Security Administration (SSA) Incentive Payments

> ***You are the best auditors I have ever worked with over my career. It is a big difference having a group that is dedicated to governmental accounting.***
>
> ***Wesley Ropp,***
> ***Charleston Water System,***
> ***Chief Financial Officer***

- Special Purpose Local Option Sales Taxes (SPLOST) Expenditures
- Subrecipient Risk Assessment Tool
- Supplemental Social Security for Inmates
- The New Tax Cuts and Jobs Act – Impact on Bond Refunding
- Uniform Guidance & New Procurement Requirements
- What's Happening with Property Tax Assessments

Auditor's Discussion & Analysis



During the course of serving our clients, we stress the importance of timely and frequent communication. Such communication takes place throughout the audit and throughout the year, and includes proactive communications regarding new and upcoming accounting standards and auditing standards, as well as, the availability to answer questions and provide advice to the government.

We believe such communication is a key to providing timely value-added service to our clients.

At the conclusion of the audit process, Mauldin & Jenkins prepares an Auditor's Discussion & Analysis (formerly called the Audit Agenda) which provides auditor insight and summarizes the audit process, conclusions, and year-end financial analysis all under one cover.

Elements of the Auditor's Discussion & Analysis include the following:

- Information about the Firm, and the respective personnel serving the government;
- Results of the audit and other matters which should be emphasized to the governing board;
- An overview of the governments year-end financial results and auditor insights relative to key financial elements of the government;
- An understanding of the internal control/compliance audit reports and the results of our testing of internal controls and compliance with laws and regulations;
- A summary of certain audit scopes and procedures utilized by Mauldin & Jenkins during the audit process;
- Documentation of certain required communications as required by auditing standards;
- If applicable, a summary of any findings (material weaknesses and/or significant deficiencies) and management recommendations resulting from the audit;
- Practical information regarding upcoming new financial reporting and auditing standards and pronouncements affecting the government;
- A summary of the free continuing education and newsletters made available to the government during the past year.

Mauldin & Jenkins Partner Joel Black Appointed GASB Chairman

In 2020, the Financial Accounting Foundation's board of trustees appointed Joel Black, partner-in-charge of Mauldin & Jenkins audit practice, the next Chairman of the Governmental Accounting Standards Board.

"I am very excited to take on this new professional challenge. I have been immersed my entire adult life in the important, complex world of governmental accounting. I am eager to join my new colleagues in the mission to establish and improve accounting standards, and to engage with the remarkably diverse groups of stakeholders who care so much about public sector financial reporting."

"Joel Black has a longstanding and demonstrated commitment to the mission and work of the GASB and will make an excellent chair," said Financial Accounting Foundation Chairman Kathy Casey in a statement. "He brings extensive knowledge and experience to the role and has genuine appreciation for the opportunities and challenges that our stakeholders face as accounting standards change. We are pleased to welcome him to the organization and look forward to his future leadership."

Governmental Attestation Services

Other attestation services beyond financial and compliance audits which Mauldin & Jenkins currently provides to our clients include:

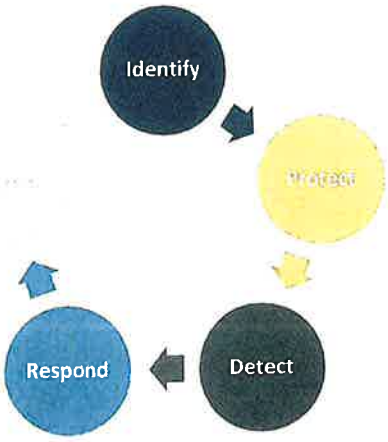
- Forensic audits
- Performance audits
- Information systems audits
- Agreed-upon procedures
- Bond issuance services
- Capital asset inventory services

Governmental IT Solutions

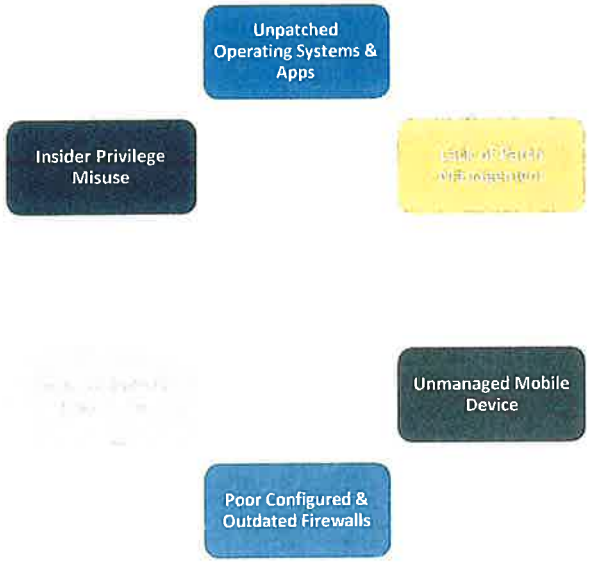
As noted above, Mauldin & Jenkins performs various IT attestation and non-attestation services. The following are three such services.

Cybersecurity Framework Engagements

With governments dealing with IT ransoms, cybersecurity is one of the top issues on the minds of nearly every government (large & small). Managing this business issue is especially challenging. A government with a highly mature cybersecurity risk management program still has a residual risk that a material cybersecurity breach could occur and not be detected in a timely manner.



Services can be provided via: 1) attestation engagements or 2) consulting engagements. The AICPA has established standards for performing attestation engagements in this arena with the issuance of the SOC for Cybersecurity as part of its suite of System and Organization Controls (SOC) reporting. Consulting services can be provided while not compromising auditor independence.



System Vulnerability Assessments Engagements

This is the process of defining, identifying, classifying and prioritizing vulnerabilities in computer systems, applications and networks infrastructures, and providing an assessment with necessary knowledge, awareness and risks to understand the threats to determine appropriate reactions. Using specialized tools and applications, we can access networks to scan with automated tools and interrogate every device connected to network with the objective of searching for misconfigurations, unsupported software, missing software updates and patches, etc.

Penetration Testing Engagements

This is the practice of testing a computer system to find security vulnerabilities that a hacker / attacker could exploit using automation or manual applications. The process involves gathering information about the target before the test, identifying possible entry points, attempting to break in – actually or virtually – and reporting back the findings. Tests come from external or internal angles of entry. Our main objective is to identify security weaknesses. Penetration testing can also be used to: test an organization's security policy; its adherence to compliance requirements; its employees' security awareness; and, the government's ability to identify and respond to security incidents.

Governmental Advisory Services

Beyond traditional audit and accounting services and IT services, we provide advisory services that are wide-ranging in nature. Our experienced government advisory team helps governments, governmental agencies and special purpose governmental organizations balance fiscal responsibility with the latest business strategies to achieve targeted and overarching objectives. Our advisory services can be summarized via the following bubbles.

Strategy

Develop & define future visions, goals, and objectives.

Transformation

Allow for the successful change from current to desired environment or outcome

Operational Efficiency & Effectiveness

Ensure business processes and service delivery are provided in a manner maximizing targeted goals.

Performance & Management

Ensure outputs & outcomes are producing desired results.

Closing

We appreciate the opportunity to serve the City of Stockbridge, Georgia. We believe Mauldin & Jenkins continues to be the "right" Firm for the City. Our experience and knowledge in the governmental sector of accounting is vast and ever-improving. We would be very pleased to continue to share our experience and understanding of governmental accounting and operations for the benefit of the City.

We would greatly appreciate your recommending us for your continued audit, accounting, and financial reporting needs. Should you or anyone at the City have any questions with regards to this proposal or about Mauldin & Jenkins, please feel free to contact us.

Appendices

MAULDIN & JENKINS

CPAs & ADVISORS

CONTRACTOR AFFIDAVIT AND AGREEMENT

(Failure to submit will render Proposal non-responsive you must use this form, you must be enrolled in this program, and you must include your user ID #)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm, or corporation which is contracting with The City of Stockbridge has registered with and is participating in a federal work authorization program [Employment Eligibility Verification (EEV) / Basic Pilot Program, operated by the U.S. Citizens and Immigration Services Bureau of the U. S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA)] in accordance with O.C.G.A. § 13-10-91. Further, the undersigned contractor states affirmatively that the individual, firm, or corporation contracting with The City of Stockbridge will continue to utilize and participate in the EEV federal work authorization program throughout the term of this contract.

The undersigned further agrees that, should it employ or contract with any subtractor(s) in connection with the physical performance of services pursuant to this contract with The City of Stockbridge contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. § 13-10-91 on the Subcontractor Affidavit provided in Rule 300-10-01-.08 or a substantially similar form provided by The City of Stockbridge, Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to The City of Stockbridge at the time the subcontractor(s) is retained to perform such service.

105410
EEV Number

Lauren Wood
Authorized Officer or Agent (Contractor Name)

March 6, 2008
Date

HR Director
Title of Authorized Officer or Agent

Lauren Wood
Printed Name of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE DAY OF March 14, 2024

Benita L Day
Notary Public

My Commission Expires: May 24, 2024

Benita L Day
My Commission Expires
Notary
Public
May 24, 2024
Houston County, Georgia

Note: As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV/Basic Pilot Program" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security in conjunction with the Social Security Administration (SS)

REPRESENTATION AFFIDAVIT

(TO BE SUBMITTED)

This proposal is submitted to The City of Stockbridge, (City) by the undersigned who is an authorized officer of the company and said company is licensed to do business in Georgia and The City of Stockbridge. Further, the undersigned is authorized to make these representations and certify these representations are valid. The Proposer recognizes that all representations herein are binding on the Company and failure to adhere to any of these commitments, at the City's option, may result in a revocation of the granted contract.

Consent is hereby given to the City to contact any person or organization in order to make inquiries into the legal, character, technical, financial, and other qualifications of the Proposer.

The Proposer understands that, at such time as the City decides to review this proposal, additional information may be requested. Failure to supply any requested information within a reasonable time may result in the rejection of the Proposer's proposal with no re-submittal rights.

The successful Proposer understands that the City, after considering the legal, financial, technical, and character qualifications of the Proposer, as well as what in the City's judgment may best serve the public interest of its citizens and employees, may grant a contract.

The successful Proposer understands that this proposal is made without prior understanding, agreement, or connection with any corporation, firm or person submitting a proposal for the same, and is in all respects fair and without collusion or fraud. I understand that collusive action is a violation of state and federal law and can result in fines, prison sentences, and civil damage awards.

Company Name: Mauldin & Jenkins, LLC

Authorized Person: Hope Pendergrass Signature Hope Pendergrass

(Print/Type)

Title: Partner Date: April 8, 2024

Address: 300 Mulberry Street, Suite 300, Macon, GA 31201

Telephone: (478) 464-8000 Fax: (478) 464-8051

Name and telephone number of person to whom inquiries should be directed:

Name: Mauldin & Jenkins, LLC

Address: 300 Mulberry Street, Suite 300, Macon, GA 31201

Title: Partner Telephone (478) 464-8000

Fax: (478) 464-8051 E-mail: hpendergrass@mjcpa.com

LEGAL AND CHARACTER QUALIFICATIONS

Convictions: Has the Proposer (including parent corporation, if applicable) or any principal ever been convicted in a criminal proceeding (felonies or misdemeanors) in which any of the following offenses were charged?

		Y	N
a	Fraud		X
b	Embezzlement		X
c	Tax Evasion		X
d	Bribery		X
e	Extortion		X
f	Jury Tampering		X
g	Anti-Trust Violations		X
h	Obstruction of justice (or any other misconduct affecting public or judicial officers' performance of their official duties		X
i	False/misleading advertising		X
j	Perjury		X
k	Conspiracy to commit any of the foregoing offenses		X

Civil Proceedings: Has the Proposer or any principal ever been a party, or is now a party, to civil proceeding in which it was held liable for any of the following?

		Y	N
a	Unfair/anti-competitive business practices		X
b	Consumer fraud/misrepresentation		X
c	Violations of securities laws (state and federal)		X
d	False/misleading advertising		X
e	Violation of local government ordinance		X

License Revocation:

	Y	N
Has the Proposer or any principal ever had a business license revoked, suspended, or the renewal thereof denied, or is a party to such a proceeding that may result in same?		X

Responses: If "yes" is the response to any of the foregoing, provide Information such as date, court, sentence, fine, location, and all other specifics for each "yes" response.

_____

_____

Principals: The full names and addresses of persons or parties interested in the foregoing Proposal, as principals, are as follows:

NAME	ADDRESS
Hope Pendergrass, Partner	300 Mulberry Street, Suite 300, Macon, GA 31201
Doug Moses, Partner	200 Galleria Dr SE # 1700, Atlanta, GA 30339
Tim Lyons, Partner	508 Hampton Street Suite 100, Columbia, SC 29201
Trey Scott, Partner	6600 Abercorn Street, Suite 200, Savannah, GA 31405

References: The Proposer lists below work he has done of similar nature as this solicitation, as references that will afford the City opportunity to judge as to experience, skill, business standing, and financial ability.

Contact Person	Title	Phone Number/Email
Althea Philord-Bradley	Finance Director	(404) 767-1537 Ext. 1101 apbradley@collegeparkga.com
Jeremi K. Patterson	Deputy Finance Director	(404) 366-4720 jpatterson@forestparkga.gov
David Smith	Chief Financial Officer	(770) 288-6529 davidsmith@co.henry.ga.us
Tiffany Sandefur	City Administrator	(478) 956-5555 tsandefur@byronga.com

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/18/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER 1-847-385-6800 Edgewood Partners Insurance Center Lemme, a division of EPIC 111 West Campbell 4th Floor Arlington Heights, IL 60005	CONTACT NAME: Nadine Friedman Daniels PHONE (A/C, No, Ext): 847-385-6800 FAX (A/C, No): E-MAIL ADDRESS: PSGCerts@lemme.com
	INSURER(S) AFFORDING COVERAGE — NAIC #
	INSURER A: MSIG Specialty Insurance USA and various
INSURED Mauldin & Jenkins, LLC 200 Galleria Parkway Suite 1700 Atlanta, GA 30339-5918	INSURER B:
	INSURER C:
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: 70450368 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO-JECT LOC OTHER:						EACH OCCURRENCE	$
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
							GENERAL AGGREGATE	$
							PRODUCTS - COMP/OP AGG	$
								$
	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	$
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION $						EACH OCCURRENCE	$
							AGGREGATE	$
								$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A					PER STATUTE OTH-ER	
							E.L. EACH ACCIDENT	$
							E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
A	Professional Liability			MSTAPL-00010	01/23/24	01/23/25	Each Claim	1,000,000
							Aggregate	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER	CANCELLATION
For Information Only	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE Nadine F. Daniels

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CONTRACTOR INFORMATION FORM

(This form must be completed and returned with your response)

RFP Number: 2024-0004

Full Company Legal Name: Maudlin & Jenkins, LLC

Street Address: 300 Mulberry Street, Suite 300

City, State, Zip Code: Macon, GA 31201

Contact Name for Solicitation: Hope Pendergrass Title: Partner

Telephone: (478) 464-8000 Fax: (478) 464-8051 E-mail: hpendergrass@mjcpa.com

Company Web Site: www.mjcpa.com State of Incorporation: GA

Taxpayer ID Number: 58-0692043 Duns #: 07-585-6542

Check one of the following: ☐ Independently owned and operated: ☒ An Affiliate or Division of:

Company Name: Mauldin & Jenkins, LLC

Address: 200 Galleria Dr SE # 1700
Atlanta, GA 30339

JOINT VENTURE AFFIDAVIT

(This form must be completed and returned with your response)

Primary Vendor Name: Mauldin and Jenkins

If this will not be a joint venture, check this box: ☒

State of: _____

County of: _____

We, the undersigned, being duly sworn according to law, upon our respective oaths depose and say that:

1. The following named contractors/companies have entered into a joint venture for the purpose of carrying out all the provisions of the Contract for the above-named solicitation:

Joint Venture Company "A"

Company Name_____Federal ID No._____

Address: _____

City:_____ State: _____Zip: _____

Check all that apply:

☐ Sole Proprietorship
☐ Partnership
☐ Corporation
☐ N/A, other

Joint Venture Company "B"

Company Name_____Federal ID No._____

Address: _____

City:_____ State: _____Zip: _____

Check all that apply:

☐ Sole Proprietorship
☐ Partnership
☐ Corporation
☐ N/A, other

2. The contractors/companies, under whose names we have affixed our respective signatures, have duly authorized and empowered us to execute this Joint Venture Statement in the name of and on behalf of such contractors for the purpose hereinbefore stated.

   Under the provision of such Joint Venture, the assets of each of the contractors named in Paragraph 1 hereof, and in case any contractor so named above is in partnership, the assets of the individual members of such partnership, will be available for the performance of such Joint Venture and liable therefore and for all obligations incurred in connection therewith.

JOINT VENTURE AFFIDAVIT

(This form must be completed and returned with your response)

Primary Vendor Name: Mauldin and Jenkins

If this will not be a joint venture, check this box: [X]
RFP Name:
RFP Number:

State of: _____

County of: _____

We, the undersigned, being duly sworn according to law, upon our respective oaths depose and say that:

1. The following named contractors/companies have entered into a joint venture for the purpose of carrying out all the provisions of the Contract for the above named solicitation:

Joint Venture Company "A"

Company Name_____Federal ID No._____

Address: _____

City:_____ State: _____Zip: _____

Check all that apply:
☐ Sole Proprietorship
☐ Partnership
☐ Corporation
☐ N/A, other

Joint Venture Company "B"

Company Name_____Federal ID No._____

Address: _____

City:_____ State: _____Zip: _____

Check all that apply:
☐ Sole Proprietorship
☐ Partnership
☐ Corporation
☐ N/A, other

2. The contractors/companies, under whose names we have affixed our respective signatures, have duly authorized and empowered us to execute this Joint Venture Statement in the name of and on behalf of such contractors for the purpose hereinbefore stated.

   Under the provision of such Joint Venture, the assets of each of the contractors named in Paragraph 1 hereof, and in case any contractor so named above is in partnership, the assets of the individual members of such partnership, will be available for the performance of such Joint Venture and liable therefore and for all obligations incurred in connection therewith.

PRIMARY CONTRACTOR / SUBCONTRACTOR UTILIZATION

(This form must be completed and returned with your response)

RFP Number: 2024-0004

Primary Vendor Name: Mauldin & Jenkins, LLC

If subcontractors will not be used check this box: ☒

List all subcontractors to be used during the performance of this contract. Submit additional forms if needed.

Company Name: _____

Street Address: _____

City, State, Zip: _____

Telephone: ( ) _____ Fax: ( ) _____

Primary Contact: _____

E-mail Address: _____

Services to be provided: _____

_____

_____

Company Name: _____

Street Address: _____

City, State, Zip: _____

Telephone: ( ) _____ Fax: ( ) _____

Primary Contact: _____

E-mail Address: _____

Services to be provided: _____

_____

_____

Company Name: _____

Street Address: _____

City, State, Zip: _____

Telephone: ( ) _____ Fax: ( ) _____

Primary Contact: _____

E-mail Address: _____

Services to be provided: _____

_____

_____

PROMISE OF NON-DISCRIMINATION

(This form must be completed and returned with your response)

In consideration of, and as condition precedent, the right and privilege to bid on construction projects and other procurement contracts of the City of Stockbridge, each potential vendor shall be required to submit to the City of Stockbridge a duly executed and attested Promise of Non-Discrimination, enforceable at law, which by agreement, affidavit or other written instrument acceptable to the General Counsel for City of Stockbridge, shall contain promises, averments and/or affirmations voluntarily made by the bidder.

"Know All Men by These Presents, that I/We,

(Hope Pendergrass)
Authorized Company Representative Name(s)

(Partner)
Authorized Company Representative Title(s)

(Maudlin & Jenkins, LLC)
Name of Company
(Hereinafter "Company"), in consideration of the privilege to bid on contracts funded in whole or in part by City of South Fulton, hereby consents, covenants and agrees as follows:

(1) No person shall be excluded from participation in, denied the benefit of, or otherwise discriminated against on the basis of race, color, sex, religion, national origin, marital status, sexual orientation, age, or disability in connection with any bid submitted to City of South Fulton, or the performance of any contract resulting there from.

(2) That it is and shall be the policy of Company to provide equal opportunity to all businesspersons seeking to contract or otherwise interested in contracting with this Company, including those companies owned and controlled by racial minorities, cultural minorities and females:

(3) That the promises of non-discrimination as made and set forth herein shall be continuing in nature and shall remain in full force and effect without interruption for so long as any contract between Company City of Stockbridge remains in force and effect.

(4) That the promises of non-discrimination as made and set forth herein shall and are hereby deemed to be made a part of, and incorporated by reference into, any contract or portion thereof which the Company may hereafter obtain with City of Stockbridge; and

(5) That the failure of this company to satisfactorily discharge any of the promises of non-discrimination as

made and set forth herein shall constitute a material breach of contract entitling the City of Stockbridge to declare the contract in default and to exercise any and all applicable rights and remedies including but not limited to cancellation of the contract, termination of the contract, suspension and debarment from future contracting opportunities, and withholding and/or forfeiture of compensation due and owing on a contract.

Request for Proposal for Financial Audit Services
Solicitation Name

2024-0004
Solicitation Number

Hope Pendergrass
Authorized Company Representative Name

Hope Pendergrass
Authorized Company Representative Signature

April 11, 2024
Date

NON-COLLUSION AFFIDAVIT

I, Hope Pendergrass certify that pursuant to O.C.G.A. Section 36-91-21 (d) and (e), Mauldin & Jenkins, LLC has not, by itself or with others, directly or indirectly, prevented or attempted to prevent competition in such bidding or proposals by any means whatsoever. Affiant further states that (s)he has not prevented or endeavored to prevent anyone from making a bid or offer on the project by any means whatever, nor has Affiant caused or induced another to withdraw a bid or offer for the work.

Affiant further states that the said offer of Mauldin & Jenkins, LLC is bona fide, and that no one has gone to any supplier and attempted to get such person or company to furnish the materials to the bidder only, or if furnished to any other bidder, that the material shall be at a higher price.

Mauldin & Jenkins, LLC
(COMPANY NAME)

Hope Pendergrass
(PARTNER)

Sworn to and subscribed before me this 11 day of April, 2024

(SECRETARY/ASSISTANT SECRETARY)
(Affix corporate seal here, if a corporation)

Notary Public: Benita L. Day

County: Houston

Commission Expires: May 24, 2024

Benita L Day
My Commission Expires
Notary
Public
May 24, 2024
Houston County, Georgia

NOTE:
IF THE OFFEROR IS A PARTNERSHIP, ALL OF THE PARTNERS AND ANY OFFICER, AGENT, OR OTHER PERSON WHO MAY HAVE REPRESENTED OR ACTED FOR THEM IN BIDDING FOR OR PROCURING THE CONTRACT SHALL ALSO MAKE THIS OATH.

IF THE OFFEROR IS A CORPORATION, ALL OFFICERS, AGENTS, OR OTHER PERSONS WHO MAY HAVE ACTED FOR OR REPRESENTED THE CORPORATION IN BIDDING FOR OR PROCURING THE CONTRACT SHALL MAKE THE OATH.

Local and Locally Owned Business Form

(This form must be completed and returned with your response)

In order to encourage and promote local and locally owned businesses with contracting opportunities with the City of Stockbridge, formal solicitation processes may give preference to proposals and bids from local and locally owned businesses based on the following:

A business shall comply with all of the following to be designated a Local Business:

a) The business shall have an office with at least one (1) employee within the City of Stockbridge.
b) The business shall not be delinquent with any payments to the City; and
c) The business shall hold a valid City of Stockbridge, business license.

A business shall comply with both of the following to be designated a Locally Owned Business:

a) The business shall meet the requirements for a local business designation; and
b) At least fifty percent (50%) of the business' owners live in the City of Stockbridge.

Certification

Local and Locally Owned businesses that wish to receive preferential consideration shall submit a copy of a valid Occupational Tax Registration Certificate(s) issued by City of Stockbridge to certify qualification for the preference as part of each proposal or response.

Procedures for local and locally owned preference

Request for Proposals (RFP) – If a local and locally owned business meets the quality standards established for the RFP process, the local business shall be awarded two (2) additional percentage points in the total evaluation; the locally owned business shall be awarded six (6) additional percentage points in the total evaluation. The evaluation and scoring of all proposals shall be conducted in accordance with departmental procedures issued by the Chief Financial Officer or his/her designee.

To qualify, you must submit with your proposal a copy of your Occupational Tax Registration Certificate.

Company Name: Mauldin & Jenkins, LLC

Company Qualifies for Local Business Preference: Yes ☐ No ☒

Company Qualifies for Locally Owned Business Preference: Yes ☐ No ☒

Occupational Tax Registration Certificate issued by:

City: _____

City of Stockbridge, Georgia

Cost Proposal to Provide Audit Services

Fiscal Year December 2024 through 2028

Mauldin & Jenkins Certified Public Accountants
Contact Person: Hope Pendergrass, CPA, Partner
Phone: (478) 464-8000
Email: hpendergrass@mjcpa.com
300 Mulberry Street, Suite 300
Macon, GA 31201

mjcpa.com

April 11, 2024

Honorable Mayor and Members of City Council
City of Stockbridge, Georgia
Attn: Drexal D. Paulk
4640 N. Henry Boulevard
Stockbridge, Ga 30281

Ladies and Gentlemen:

Mauldin & Jenkins is pleased to submit a qualifications package including cost estimates to provide annual financial and compliance auditing services for the City of Stockbridge, Georgia (the "City"). It is our understanding that the City is requesting proposals from qualified firms of certified public accountants to establish a contract for the professional services of a Certified Public Accountant (the "auditor") for financial and compliance audits. The contract for such audit services will be for the fiscal year ended December 31, 2024, with an option for each of the four subsequent fiscal years, subject to annual review and the annual availability of an appropriation for audit services by the City.

As requested by the City, we have enclosed on the following pages an all-inclusive maximum fee for the financial and compliance audit services for the fiscal years noted above. This sealed cost proposal contains all pricing information relative to the performance of the audit. The total all-inclusive maximum price for the fiscal years ending December 2024 through 2028 is as follows:

- 2024 - $62,500
- 2025 - $65,000
- 2026 - $67,500
- 2027 - $70,000
- 2028 - $72,500

As a partner at Mauldin & Jenkins, LLC, I am certified and authorized to represent Mauldin & Jenkins, empowered to submit the bid, and authorized to sign a contract with the City. Our total all-inclusive maximum price for providing annual financial auditing services to the City is contained on the following pages. We appreciate the opportunity to propose and we look forward to hearing from you.

Sincerely,

MAULDIN & JENKINS, LLC

Hope Pendergrass

Hope Pendergrass, CPA
Partner

SCHEDULE OF PROFESSIONAL FEES AND EXPENSES

FOR THE AUDIT OF THE 2024 FINANCIAL STATEMENTS

	Hours	Hourly Rate	Total
Partners	50	$275	$ 13,750
Managers	100	215	21,500
Professional Staff	200	165	33,000
Total for Services Described in RFP	350		**68,250**
Out-of-pocket expenses:			
Meals and lodging			500
Transportation			2,000
Mauldin & Jenkins discount from standard fees and expenses			**(8,250)**
Total all inclusive not to exceed price for 2024 audit			**$ 62,500**

SCHEDULE OF PROFESSIONAL FEES AND EXPENSES

FOR THE AUDIT OF THE 2025 FINANCIAL STATEMENTS

	Hours	Hourly Rate	Total
Partners	50	$280	$ 14,000
Managers	100	220	22,000
Professional Staff	200	170	34,000
Total for Services Described in RFP	350		**70,000**
Out-of-pocket expenses:			
Meals and lodging			500
Transportation			2,000
Mauldin & Jenkins discount from standard fees and expenses			**(7,500)**
Total all inclusive not to exceed price for 2025 audit			**$ 65,000**

SCHEDULE OF PROFESSIONAL FEES AND EXPENSES

FOR THE AUDIT OF THE 2026 FINANCIAL STATEMENTS

	Hours	Hourly Rate	Total
Partners	50	$285	$ 14,250
Managers	100	225	22,500
Professional Staff	200	175	35,000
Total for Services Described in RFP	350		**71,750**
Out-of-pocket expenses:			
Meals and lodging			500
Transportation			2,000
Mauldin & Jenkins discount from standard fees and expenses			**(6,750)**
Total all inclusive not to exceed price for 2026 audit			**$ 67,500**

SCHEDULE OF PROFESSIONAL FEES AND EXPENSES

FOR THE AUDIT OF THE 2027 FINANCIAL STATEMENTS

	Hours	Hourly Rate	Total
Partners	50	$290	$ 14,500
Managers	100	230	23,000
Professsional Staff	200	180	36,000
Total for Services Described in RFP	350		**73,500**
Out-of-pocket expenses:			
Meals and lodging			500
Transportation			2,000
Mauldin & Jenkins discount from standard fees and expenses			**(6,000)**
Total all inclusive not to exceed price for 2027 audit			**$ 70,000**

SCHEDULE OF PROFESSIONAL FEES AND EXPENSES

FOR THE AUDIT OF THE 2028 FINANCIAL STATEMENTS

	Hours	Hourly Rate	Total
Partners	50	$295	$ 14,750
Managers	100	235	23,500
Professional Staff	200	185	37,000
Total for Services Described in RFP	350		**75,250**
Out-of-pocket expenses:			
Meals and lodging			500
Transportation			2,000
Mauldin & Jenkins discount from standard fees and expenses			**(5,250)**
Total all inclusive not to exceed price for 2028 audit			**$ 72,500**

Important Notes to be Considered:

Note (1) – Unlimited Correspondence: It is Mauldin & Jenkins' policy to not charge for simple discussions and conversations that occur between the governmental entity and Mauldin & Jenkins that are only simple discussions (i.e., a phone call to ask certain questions that do not require additional research).

Note (2) – Free Periodic/Quarterly Continuing Education: As noted in our technical proposal, we provide free quarterly continuing education classes to our clients. This could amount to approximately $3,500 of annual savings for the City's estimated finance department per person.

Note (3) – Additional Services: If it should become necessary for the City to request Mauldin & Jenkins to provide any additional services (such as bond issurances, etc.), then such additional work shall be performed only if set forth in an addendum to the contract between the City and Mauldin & Jenkins.

Note (4) – No Hidden Fees or Costs: The pricing schedules contain all pricing information relative to performance of the audit as required by the City including all reimbursement for travel, lodging, communications, etc. Our estimated number of hours and the associated fee estimate indicated are based on our professional judgment and experience with similar governmental entities. So long as there are no significant changes in the operations or the number of major programs of the City and or the scope of services requested or significant problems requiring additional time, our quoted fees will not change.

Note (5) – Single Audit: The amounts above include provision of a Single Audit of 1 major program. Due to the uniqueness and variety of Federal grant programs, should an additional major program be identified, we will address such a need at that time.

MAULDIN & JENKINS

CPAs & ADVISORS

478-464-8000

www.mjcpa.com

City of Stockbridge

AGENDA ITEM

MEETING DATE

- [ ] RESOLUTION
- [ ] ORDINANCE
- [ ] CONTRACT APPROVAL/ RENEWAL
- [ ] PUBLIC HEARING
- [x] PRESENTATION
- [ ] BID/SOLICITATION AWARD
- [ ] TASK ORDER
- [ ] CHANGE ORDER
- [ ] BUDGET AMENDMENT
- [ ] BUDGET TRANSFER
- [ ] PAYMENT APPROVAL
- [ ] OTHER

- [ ] GENERAL FUNDS
- [ ] FUND BALANCE
- [ ] SPLOST OR TSPOST
- [ ] ARPA
- [ ] GRANT
- [ ] HOTEL/MOTEL
- [ ] TOURISM
- [ ] COUNCIL INITIATIVE
- [ ] PARTNER/SPONSOR
- [ ] DEPARTMENT FUND
- [ ] BALANCE

PRESENTER: Lakeisha Gaines

DEPARTMENT: Finance

ACCOUNT TRANSFER FROM:

ACCOUNT TRANSFER TO:

ITEM/PROJECT/EVENT:

FY 24 Mid-Year Review

BACKGROUND INFORMATION:

Presentation of the Mid-Year Review to show the expenses and revenues for the first half of the fiscal year 2024.

BACKGROUND INFORMATION:

The adopted budget for fiscal year 2024 for the general fund is $26,711,635.92.

STAFF RECOMMENDATION:

APPROVALS:

CITY MANAGER_____

CITY TREASURER Lakeisha Gaines

CITY ATTORNEY_____

DEPARTMENT HEAD _____*Lakeisha Gaines*_____

☐ FINANCIAL IMPACT ■ N/A

AMOUNT $

ATTACHMENTS: [X]

2024 MID YEAR REVIEW

Stockbridge

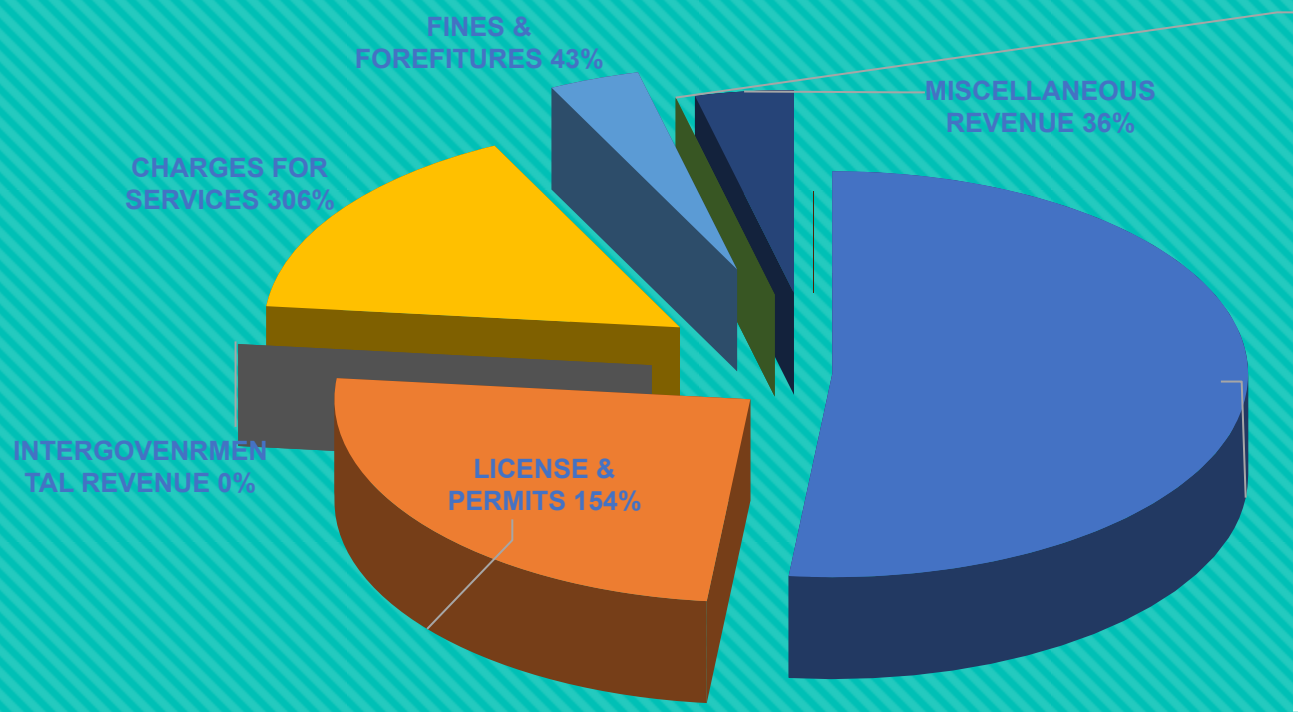
Where Community Connects

FINANCE DEPARTMENT

Finance Summary

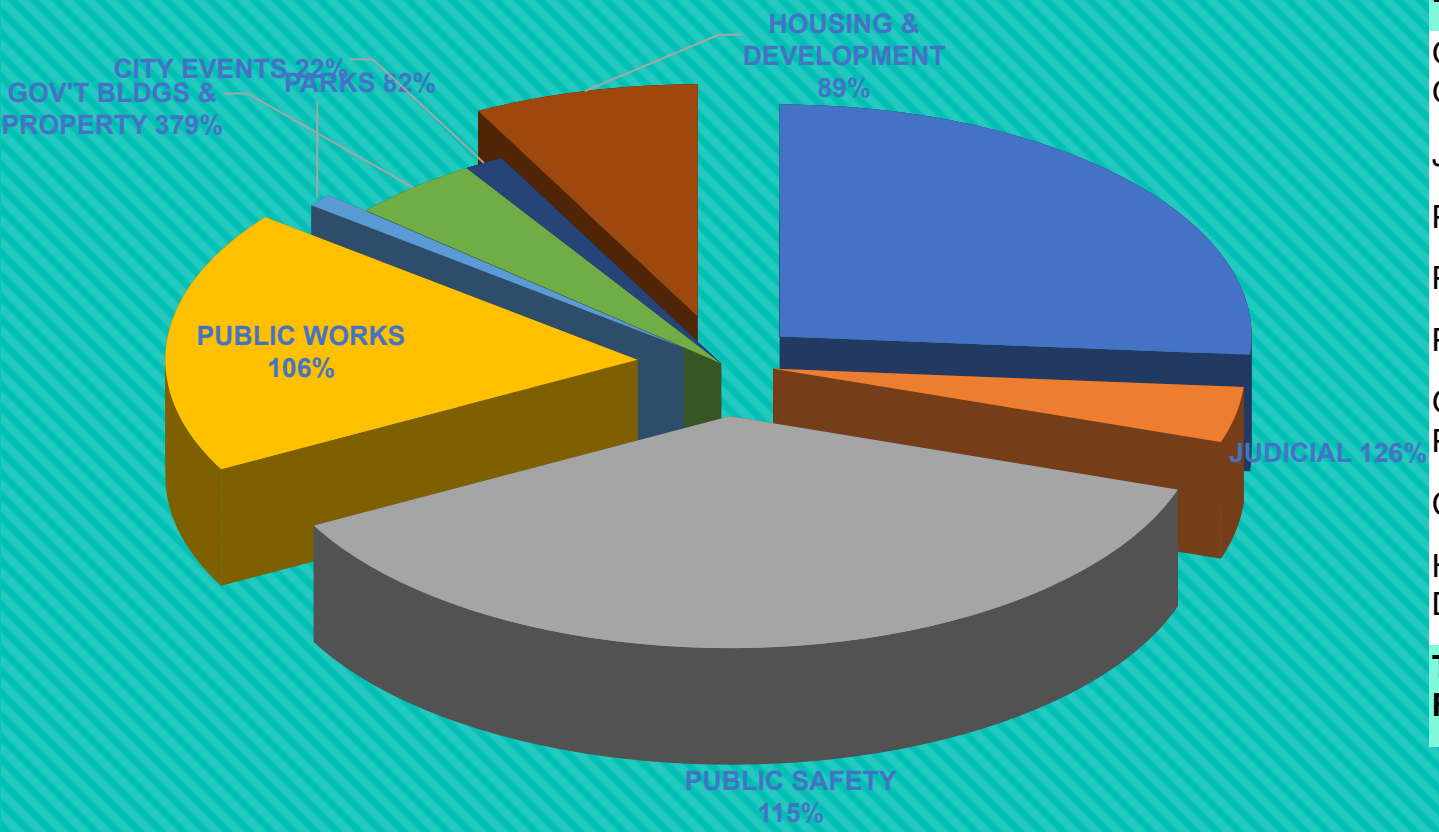
- **<u>Mission</u>:** The Finance Department provides professional oversight and consultation to City programs and services regarding financial, accounting, and budgetary practices. Our focus is to ensure compliance to all relevant financial and budgetary regulations, including Georgia Budget Law and state statutes governing financial information.
- **<u>Department Description</u>:** The Finance Department provides financial management services to City departments, and the City Council. The department oversees the preparation and monitoring of the City's annual budget, cash management and investments, and prepares the City's Long Range Financial Forecast.

ACCOUNT DESCRIPTION	Jun-24 CURRENT MONTH ACTUALS	Jun-23 PRIOR MONTH ACTUALS	FY 2024 CURRENT YTD ACTUALS	FY 2024 CURRENT BUDGET	BUDGET TO ACTUAL VARIANCE CURRENT YEAR	FY 2023 PRIOR YTD ACTUAL	FY 2023 PRIOR BUDGET
GENERAL FUND	1,401,640.52	1,602,713.10	9,715,227.89	26,577,555.92	16,862,328.03	8,533,228.30	24,882,563.22
CONFISCATED ASSETS FUND	-	-	-	-	-	-	-
PROPERTY AND EVIDENCE FUND	-	-	-	-	-	-	-
ARPA - LOCAL FISCAL RECOVERY FUND	-	-	-	-	-	-	-
GRANT FUND	-	(174.96)	422,894.20	1,541,223.95	1,118,329.75	21,123.04	1,000,000.00
HOTEL/MOTEL	96,084.99	68,744.32	474,628.40	914,323.74	439,695.34	418,242.61	411,226.53
CARES ACT FUND	-	-	-	-	-	-	-
CAPITAL PROJECT GRANTS	-	-	-	-	-	-	-
SPLOST III FUND	-	-	-	-	-	-	-
SPLOST IV FUND	-	-	-	-	-	-	-
SPLOST V FUND	-	126.43	4,318,010.37	6,229,596.86	1,911,586.49	1,275,080.78	-
TSPLOST I	574,863.05	-	3,609,989.74	6,276,928.84	2,666,939.10	1,203,045.99	-
URA	-	-	31,000.00	1,204,764.50	1,173,764.50	1,023,624.00	1,208,358.50
CAPITAL CITYWIDE	-	-	-	-	-	-	13,539,688.00
DDA	-	-	-	45,000.00	45,000.00	-	45,000.00
CITYWIDE DEVELOPMENT AUTHORITY	-	-	-	45,000.00	45,000.00	-	45,000.00
PFA PROJECT FUND	-	-	-	2,946,323.50	2,946,323.50	-	2,943,804.26
IMPACT FEE FUND	55,728.00	-	55,728.00	2,370.00	(53,358.00)	2,370.00	-
CEMETERY	200.00	-	200.00	10,000.00	9,800.00	-	10,000.00
WS	-	-	-	-	-	-	127,240.20
WATER	179,474.20	174,048.28	1,101,034.01	2,507,256.70	1,406,222.69	964,171.93	2,190,087.19
SEWER	139,715.77	145,189.24	911,168.02	2,085,145.51	1,173,977.49	751,709.12	1,920,645.51
STORMWATER	733.34	578.61	35,272.76	1,521,463.48	1,486,190.72	41,941.82	1,038,517.79
SANITATION	13,514.70	152,348.44	113,817.89	2,860,309.84	2,746,491.95	929,493.88	1,922,192.23
MMCC	800.00	12,917.50	33,806.00	739,157.18	705,351.18	103,061.53	735,607.18
TSCC	-	-	-	-	-	-	-
AMPHITHEATER COMPLEX*	1,523.40	97,993.45	1,523.40	2,000,000.00	1,998,476.60	904,530.85	1,775,000.00
REVENUE	**2,464,277.97**	**2,254,484.41**	**20,824,300.68**	**57,506,420.02**	**36,682,119.34**	**16,171,623.85**	**53,794,930.61**



Revenue	CATEGORY	Budget	Month	YTD ACTUAL	BALANCE
31	Taxes	$22,721,810	$1,098,693	$6,485,763	$16,236,047
32	Licenses and Permits	$1,187,000	$115,539	$1,393,199	-$206,199
33	Intergovernmental Revenues	$288,000	$0	$0	$288,000
34	Charges for Services	$343,600	$173,021	$1,215,454	-$871,854
35	Fines and Forfeitures	$910,000	$0	$195,154	$714,847
36	Investment Income	$1,800	$1	$130	$1,670
38	Miscellaneous Revenue	$110,346	$14,385	$425,529	-$315,183
39	Other Financing Sources	$1,015,000	$0	$0	$1,015,000
REVENUE TOTAL		**$26,577,556**	**$1,401,640**	**$9,715,228**	**$16,862,328**

General Fund Revenues Changes Compared to 2024

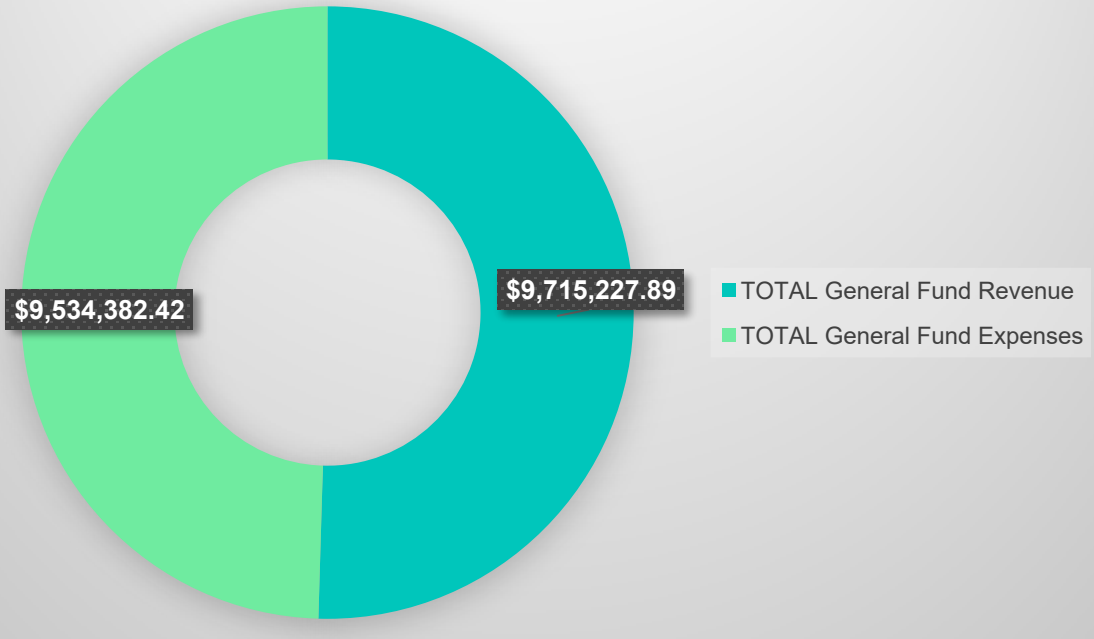


EXEPENDITURES	FY24	FY23	Difference	Change
GENERAL GOVERNMENT	$2,503,768	$2,445,888	$57,880	102%
JUDICIAL	$368,846	$293,305	$75,540	126%
PUBLIC SAFETY	$3,532,758	$3,331,728	$201,029	106%
PUBLIC WORKS	$1,750,813	$1,528,646	$222,167	115%
PARKS	$86,893	$106,079	-$19,186	82%
GOV'T BLDGS & PROPERTY	$427,310	$112,828	$314,482	379%
CITY EVENTS	$129,861	$588,824	-$458,963	22%
HOUSING & DEVELOPMENT	$734,134	$825,615	-$91,481	89%
TOTAL GENERAL FUNDS	**$9,534,382**	**$9,232,914**	**$301,469**	**128%**

General Fund Expenditure Changes

City of Stockbridge - June 2024 - Unaudited
Summary Financial Statement as of June 30, 2024

REVENUES	
Taxes	6,485,762.92
Licenses & Permits	1,393,199.37
Intergovernmental Revenues	-
Charges for Services	1,215,453.85
Fines & Forfeitures	195,153.50
Investment Income	129.52
Miscellaneous Revenue	425,528.73
TOTAL General Fund Revenue	9,715,227.89
EXPENSES	
Governing Body	298,127.10
Clerk's Office	168,789.93
Executive	389,529.48
Finance	534,173.78
Non-Departmental	300,356.17
Business Services	112,019.45
Information Technology	295,245.85
Human Resources	405,526.37
Government Bldgs & Property	427,309.95
Judicial	368,845.65
Police Department	3,532,757.55
Public Works	1,750,813.35
City Events	129,861.22
Parks	86,892.70
Permitting Development	248,160.11
Planning and Zoning	234,840.03
Economic Development	105,672.12
Main Street Program	91,442.11
GIS Planning	54,019.50
TOTAL General Fund Expenses	9,534,382.42



City of Stockbridge - June 2024 - Unaudited
Summary Financial Statement as of June 30, 2024

GF 100	EXPENDITURES	Jun-24 CURRENT MONTH ACTUALS	Jun-23 PRIOR MONTH ACTUALS	FY 2024 CURRENT YTD ACTUALS	FY 2024 CURRENT BUDGET	BUDGET TO ACTUAL VARIANCE CURRENT YEAR	FY 2023 PRIOR YTD ACTUAL	FY 2023 PRIOR BUDGET
11100	GOVERNING BODY	35,364.05	19,353.86	298,127.10	611,928.48	313,801.38	260,233.00	483,620.72
11300	CITY CLERK	26,048.97	35,923.86	168,789.93	368,273.56	199,483.63	154,672.16	382,084.31
13000	EXECUTIVE	49,696.99	103,070.63	389,529.48	781,148.00	391,618.52	463,825.63	792,726.16
15100	FINANCIAL ADMINISTRATION	94,959.23	122,671.42	534,173.78	1,084,913.59	550,739.81	498,658.84	957,783.62
15110	NON-DEPARTMEMTAL	44,256.29	52,767.78	300,356.17	743,693.25	443,337.08	234,287.27	443,200.00
15160	BUSINESS SERVICES	18,651.70	26,298.66	112,019.45	242,673.39	130,653.94	134,961.00	238,331.30
15350	INFORMATION TECHNOLOGY	44,008.00	65,818.31	295,245.85	671,419.07	376,173.22	529,998.10	1,023,309.07
15400	HUMAN RESOURCES	19,066.36	47,476.90	405,526.37	588,858.28	183,331.91	269,282.16	576,315.46
15650	GOVERNMENT BLDG / PROPERTY	47,700.37	101,573.25	427,309.95	1,054,529.95	627,220.00	546,032.08	896,360.25
25000	MUNICIPAL COURT	37,535.79	69,066.97	368,845.65	637,233.07	268,387.42	293,305.40	416,566.81
32100	POLICE ADMINISTRATION	521,415.64	652,498.25	3,532,757.55	8,327,872.66	4,795,115.11	3,331,728.17	6,139,876.32
42200	PUBLIC WORKS	292,458.15	322,126.22	1,750,813.35	4,569,855.33	2,819,041.98	1,528,646.20	3,104,411.36
61900	CITY EVENTS	19,877.50	70,413.69	129,861.22	570,000.00	440,138.78	112,828.25	284,500.00
62200	PARKS	2,455.06	22,403.27	86,892.70	181,000.00	94,107.30	106,078.88	187,499.99
72000	PERMITTING DEVELOPMENT	39,277.62	116,010.16	248,160.11	884,575.39	636,415.28	204,558.57	703,590.25
74100	PLANNING & ZONING	42,821.67	86,046.33	234,840.03	614,199.92	379,359.89	287,273.00	621,411.16
74500	CODE ENFORCEMENT	-	22,857.35	-	-	-	92,783.88	243,543.53
75100	ECONOMIC DEVELOPMENT	7,952.02	21,823.16	105,672.12	350,489.19	244,817.07	86,360.82	161,219.69
75500	MAIN STREET PROGRAM	13,089.68	24,012.14	91,442.11	238,612.89	147,170.78	106,980.82	214,303.89
75700	GIS/PLANNING	11,000.91	13,295.53	54,019.50	116,512.69	62,493.19	47,657.48	105,593.22
90000	OTHER FINANCING USES	-	(1,000,000.00)	1,039,731.50	4,248,601.16	3,208,869.66	23,624.00	4,252,159.76
GENERAL FUND		**1,367,636.00**	**995,507.74**	**10,574,113.92**	**26,886,389.87**	**16,312,275.95**	**9,313,775.71**	**22,228,406.87**

City of Stockbridge - June 2024 - Unaudited

Summary Financial Statement as of June 30, 2024

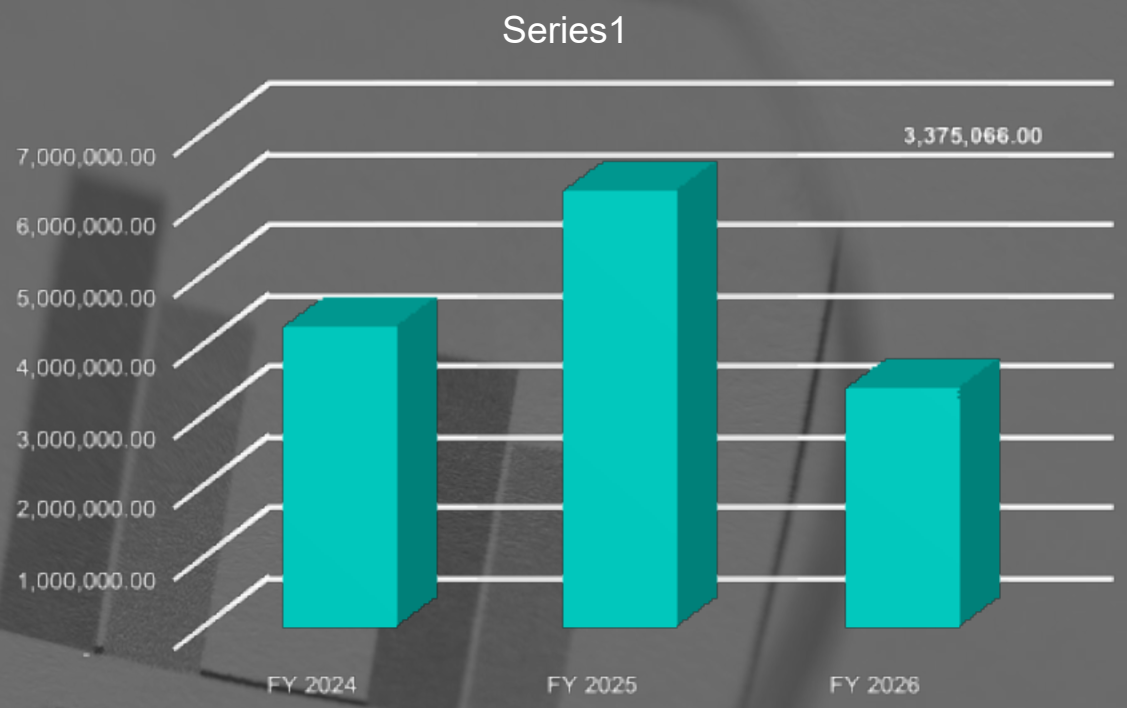
Revenue	CATEGORY	Budget	Month	YTD ACTUAL	BALANCE
31	Taxes	$22,721,810	$1,098,693	$6,485,763	$16,236,047
32	Licenses and Permits	$1,187,000	$115,539	$1,393,199	-$206,199
33	Intergovernmental Revenues	$288,000	$0	$0	$288,000
34	Charges for Services	$343,600	$173,021	$1,215,454	-$871,854
35	Fines and Forfeitures	$910,000	$0	$195,154	$714,847
36	Investment Income	$1,800	$1	$130	$1,670
38	Miscellaneous Revenue	$110,346	$14,385	$425,529	-$315,183
39	Other Financing Sources	$1,015,000	$0	$0	$1,015,000
REVENUE TOTAL		**$26,577,556**	**$1,401,640**	**$9,715,228**	**$16,862,328**

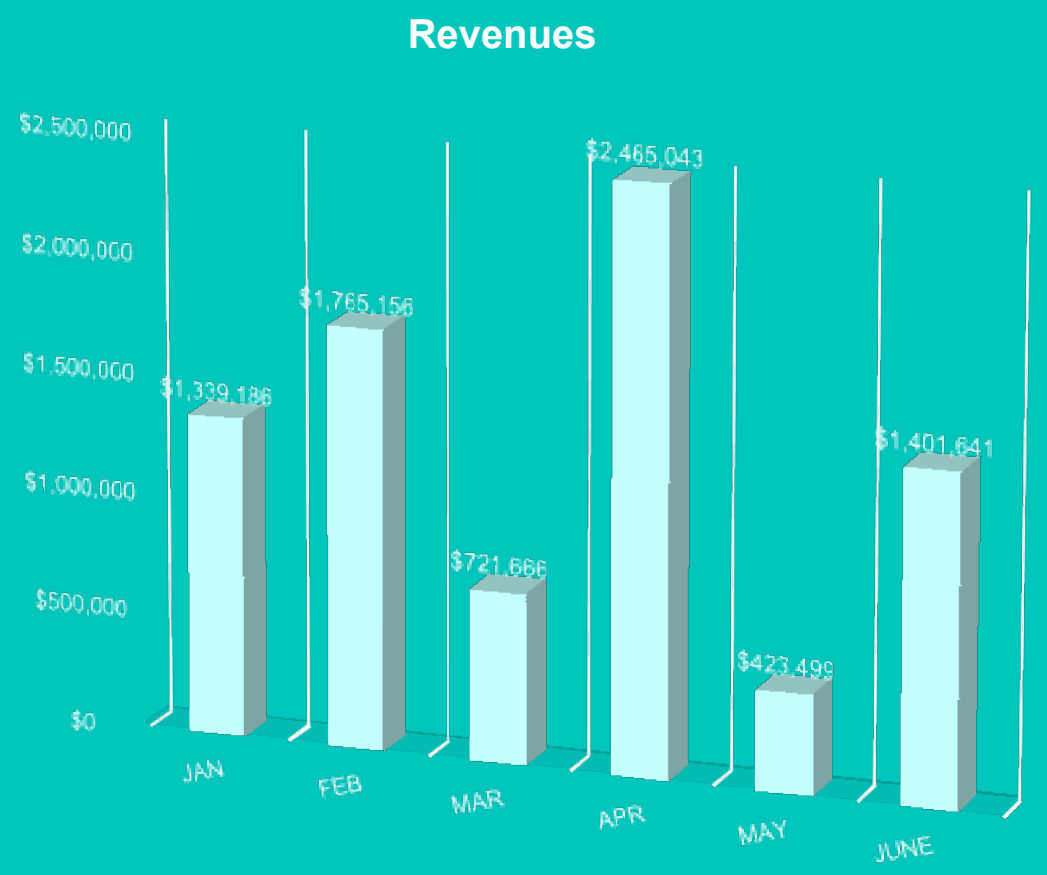
Expenses	CATEGORY	Budget	Month	YTD ACTUAL	BALANCE
51	Personal Services	$13,956,992	$1,051,170	$6,174,828	$7,782,164
52	Purchased/Contracted Services	$4,256,332	$133,339	$1,689,323	$2,567,009
53	Supplies	$2,191,465	$46,047	$946,205	$1,245,260
54	Capital Outlay	$1,810,579	$136,505	$566,454	$1,244,125
57	Other Costs	$247,667	$575	$157,573	$90,094
61	Other Financing Uses	$4,248,601	$0	$1,039,732	$3,208,870
EXPENSE TOTAL		**$26,711,636**	**$1,367,636**	**$10,574,114**	**$16,137,522**

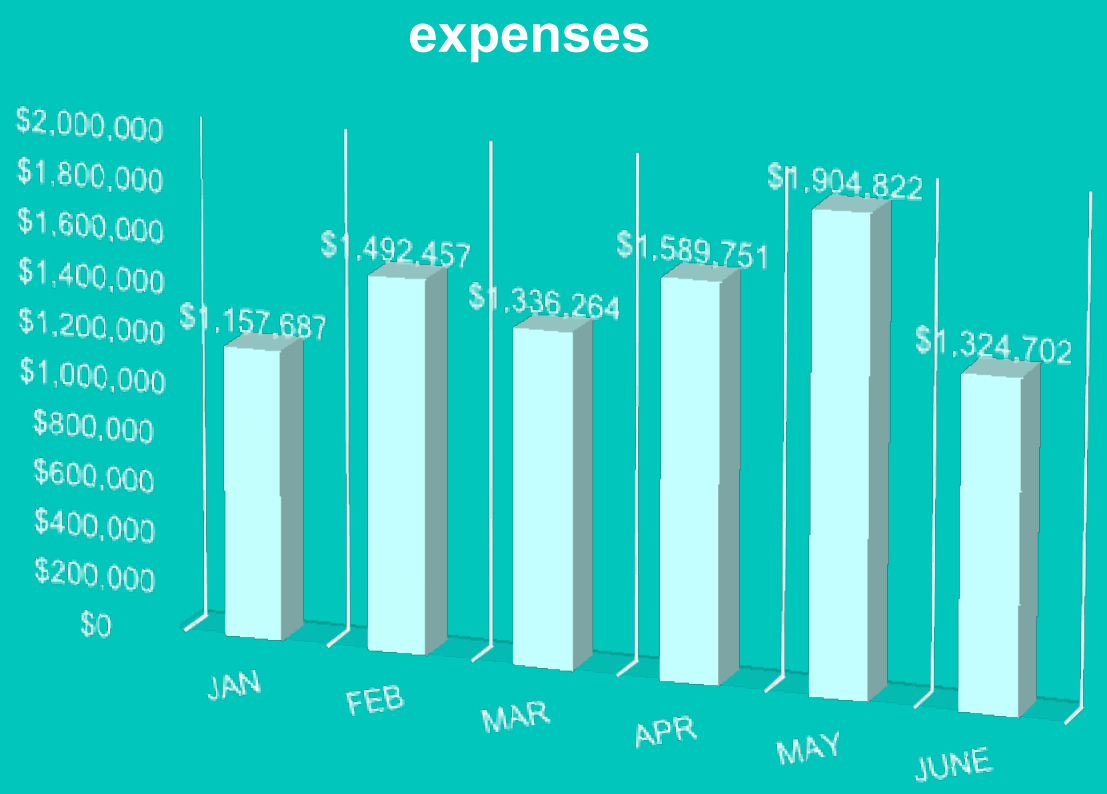
Debt Obligations

- Public Facilities Authority –
  - Series A - $9,910,000 – Amphitheater Project Fund – Maturity Date is August of 2025
  - Series B - $1,030,000 – Trails Project – Maturity Date is August of 2025

  - That is a total of $2,785,000 that the city has to allocate to future projects in 2026. A decrease of 45% of debt services.







General Fund Revenues & Expenses Trends

Amphitheater Updates

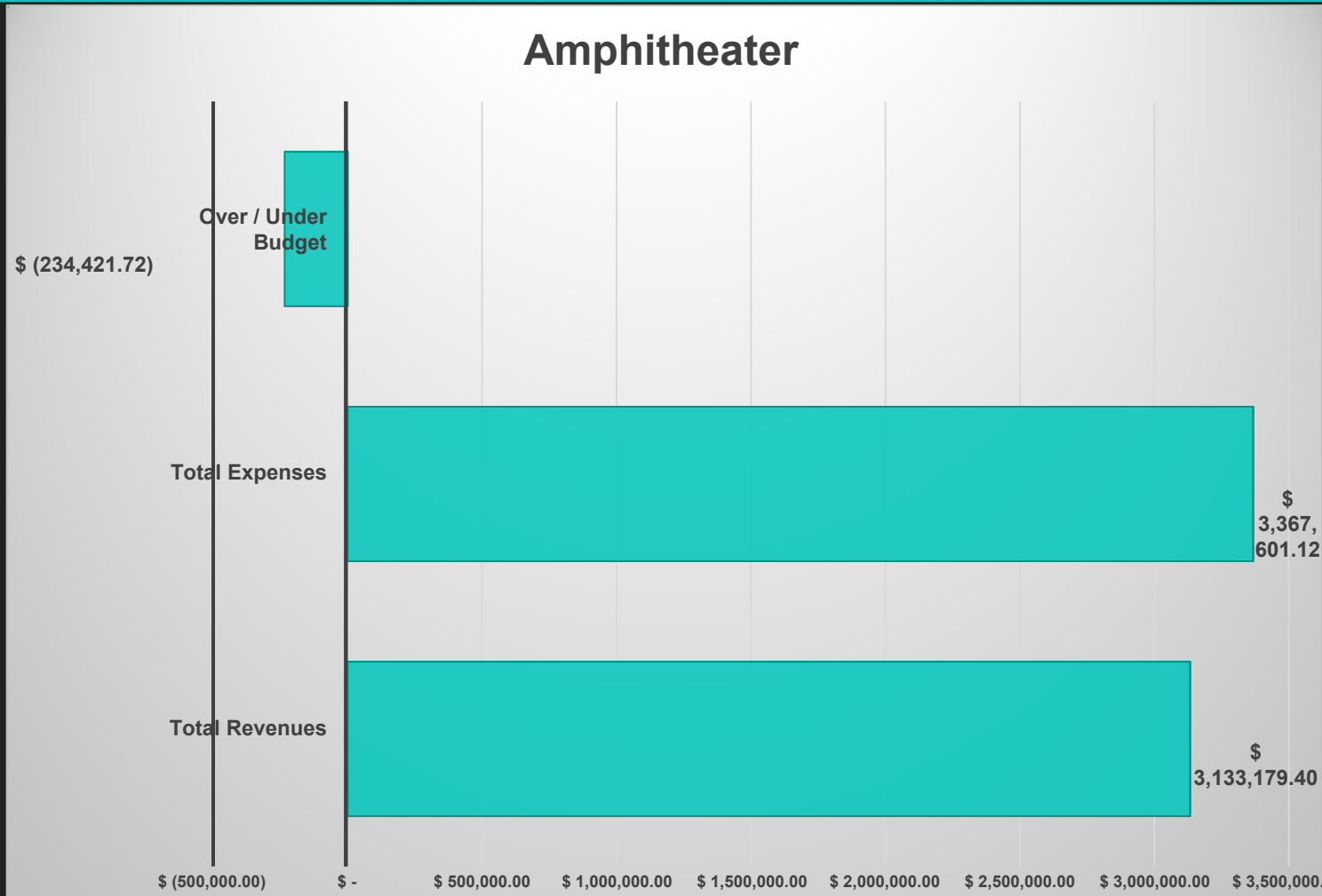
- May 11– Tyrese and Eric Benet

  2,434 tickets sold - $160,546.60
- May 25 – Zapp, Rose Royce, Stone City and Evelyn Champagne King

  2,161 tickets sold - $80,671.80
- June 8 – TLC, Brownstone and Goodie Mob

  2,384 tickets sold - $116,612.60
- June 29 – Gospel Show – Pastor Mike Jr, Deitrich Haddon, Bri Babineaux and Antony Brown
- 2,847 tickets sold - $3,805.00

  There are 11 remaining shows for the season



QUESTIONS

City of Stockbridge

Budget Report
Account Summary
For Fiscal: 2024 Period Ending: 06/30/2024

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
Fund: 100 - GENERAL FUND								
Revenue								
Class: 31 - TAXES								
100-00000-311500	INTANGIBLE RECORDING TAX	100,000.00	100,000.00	13,339.79	46,755.73	0.00	-53,244.27	53.24 %
100-00000-311600	REAL ESTATE TRANSFER	55,000.00	55,000.00	5,269.97	15,324.81	0.00	-39,675.19	72.14 %
100-00000-311710	FRANCHISE TAX-ELECTRIC	1,200,000.00	1,200,000.00	0.00	0.00	0.00	-1,200,000.00	100.00 %
100-00000-311715	FRANCHISE TAX - EMC	1,500.00	1,500.00	0.00	0.00	0.00	-1,500.00	100.00 %
100-00000-311720	FRANCHISE TAX-COLLEGE PK.	5,800.00	5,800.00	0.00	6,587.31	0.00	787.31	113.57 %
100-00000-311730	FRANCHISE TAX-GAS	150,000.00	150,000.00	53,098.50	53,098.50	0.00	-96,901.50	64.60 %
100-00000-311750	FRANCHISE TAX-TELV CABLE	150,000.00	150,000.00	104.98	29,612.70	0.00	-120,387.30	80.26 %
100-00000-311760	FRANCHISE TAX-TELEPHONE	30,000.00	30,000.00	0.00	6,972.22	0.00	-23,027.78	76.76 %
100-00000-311790	FRANCHISE TAX-OTHER	1,000.00	1,000.00	146.02	852.87	0.00	-147.13	14.71 %
100-00000-313100	LOCAL OPTION SALES/USE TX	8,907,511.92	8,907,511.92	750,055.15	3,634,908.25	0.00	-5,272,603.67	59.19 %
100-00000-313110	HCTC - AVT TAX	718,000.00	718,000.00	176,098.01	449,594.79	0.00	-268,405.21	37.38 %
100-00000-314201	BEER TAX	340,000.00	340,000.00	36,216.75	137,894.67	0.00	-202,105.33	59.44 %
100-00000-314202	LIQUOR TAX-PACKAGE SALES	300,000.00	300,000.00	22,395.96	103,381.20	0.00	-196,618.80	65.54 %
100-00000-314203	WINE TAX	180,000.00	180,000.00	11,141.97	49,922.63	0.00	-130,077.37	72.27 %
100-00000-314204	CONSUMPTION TAX - LIQUOR	100,000.00	100,000.00	10,754.77	56,743.56	0.00	-43,256.44	43.26 %
100-00000-316100	OCCUPATIONAL TAX	1,200,000.00	1,200,000.00	5,015.82	1,485,431.62	0.00	285,431.62	123.79 %
100-00000-316112	GA MUNICIPAL LICENSE FEE	60,000.00	60,000.00	0.00	49,740.00	0.00	-10,260.00	17.10 %
100-00000-316113	MISC BUSINESS TAX	20,000.00	20,000.00	7,786.92	13,671.92	0.00	-6,328.08	31.64 %
100-00000-316150	OCCUPATIONAL TAX ADMIN.	110,000.00	110,000.00	1,610.00	46,495.00	0.00	-63,505.00	57.73 %
100-00000-316200	INSURANCE PREMIUM TAX	2,225,000.00	2,225,000.00	0.00	0.00	0.00	-2,225,000.00	100.00 %
100-00000-316300	Financial Institution Taxes	105,000.00	105,000.00	0.00	127,734.00	0.00	22,734.00	121.65 %
100-00000-318000	CITY PROPERTY TAX	6,760,998.00	6,760,998.00	4,947.24	155,267.09	0.00	-6,605,730.91	97.70 %
100-00000-318001	CITY MOBILE HOME TAX	0.00	0.00	148.28	7,157.74	0.00	7,157.74	0.00 %
100-00000-318002	CITY PROPERTY TAX N.O.D.	0.00	0.00	71.09	569.45	0.00	569.45	0.00 %
100-00000-318003	MOBILE HOME PENALTY	0.00	0.00	19.58	384.78	0.00	384.78	0.00 %
100-00000-319110	PEN & INT-REAL PROP	0.00	0.00	372.42	7,162.08	0.00	7,162.08	0.00 %
100-00000-319111	FORECLOSED/VACANT-REG FEE	2,000.00	2,000.00	100.00	500.00	0.00	-1,500.00	75.00 %
	Class: 31 - TAXES Total:	**22,721,809.92**	**22,721,809.92**	**1,098,693.22**	**6,485,762.92**	**0.00**	**-16,236,047.00**	**71.46%**
Class: 32 - LICENSES AND PERMITS								
100-00000-321110	OT ALCOHOLIC BEV-BEER	42,000.00	42,000.00	750.00	55,875.00	0.00	13,875.00	133.04 %
100-00000-321120	OT ALCOHOLIC BEV-WINE	50,000.00	50,000.00	750.00	52,125.00	0.00	2,125.00	104.25 %
100-00000-321130	OT ALCOHOLIC BEV-LIQUOR	120,000.00	120,000.00	0.00	147,500.00	0.00	27,500.00	122.92 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-00000-321140	ALCOHOLIC BEV-SPEC. EVENT	5,000.00	5,000.00	0.00	249.97	0.00	-4,750.03	95.00 %
100-00000-321200	OT REGULATORY FEE	22,000.00	22,000.00	1,110.00	49,095.00	0.00	27,095.00	223.16 %
100-00000-322200	BSD - BUILDING PERMIT FEES - COMMERCIAL	405,000.00	405,000.00	92,018.17	799,994.22	0.00	394,994.22	197.53 %
100-00000-322201	BSD - MECH, ELEC, PLUMBING PERMIT FEES - COMMER	50,000.00	50,000.00	450.00	7,077.00	0.00	-42,923.00	85.85 %
100-00000-322203	BSD - OTHER PERMIT FEES - COMMERCIAL	5,000.00	5,000.00	100.00	91,762.69	0.00	86,762.69	1,835.25 %
100-00000-322204	BSD - BUILDING PERMIT FEES RESIDENTIAL	290,000.00	290,000.00	11,574.08	71,064.03	0.00	-218,935.97	75.50 %
100-00000-322205	BSD - MECH,ELEC,PLUMBING - PERMIT FEES RESIDENT.	70,000.00	70,000.00	720.00	2,090.00	0.00	-67,910.00	97.01 %
100-00000-322207	BSD - OTHER PERMIT FEES RESIDENTIAL	5,000.00	5,000.00	0.00	3,000.00	0.00	-2,000.00	40.00 %
100-00000-322215	ZONING VERIFICATION FEES	14,000.00	14,000.00	1,600.00	12,940.00	0.00	-1,060.00	7.57 %
100-00000-322990	FILM REVENUE	5,000.00	5,000.00	0.00	13,000.00	0.00	8,000.00	260.00 %
100-00000-323100	OCCUPATIONAL TAX PENALTY	45,000.00	45,000.00	671.85	74,031.46	0.00	29,031.46	164.51 %
100-00000-323101	ENG - PERMITS	30,000.00	30,000.00	1,825.00	6,832.50	0.00	-23,167.50	77.23 %
100-00000-323902	ENG - PLAN REVIEW	21,000.00	21,000.00	3,670.00	5,462.50	0.00	-15,537.50	73.99 %
100-00000-323904	ESPC - INSPECTIONS	7,000.00	7,000.00	0.00	0.00	0.00	-7,000.00	100.00 %
100-00000-324210	BSD PENALTY	1,000.00	1,000.00	300.00	1,100.00	0.00	100.00	110.00 %
	Class: 32 - LICENSES AND PERMITS Total:	**1,187,000.00**	**1,187,000.00**	**115,539.10**	**1,393,199.37**	**0.00**	**206,199.37**	**17.37%**
Class: 33 - INTERGOVERNMENTAL REVENUES								
100-00000-334311	GRANTS FOR STREETS	288,000.00	288,000.00	0.00	0.00	0.00	-288,000.00	100.00 %
	Class: 33 - INTERGOVERNMENTAL REVENUES Total:	**288,000.00**	**288,000.00**	**0.00**	**0.00**	**0.00**	**-288,000.00**	**100.00%**
Class: 34 - CHARGES FOR SERVICES								
100-00000-341300	BSD - PLAN CHECK FEES - COMMERCIAL	100,000.00	100,000.00	45,409.72	397,834.27	0.00	297,834.27	397.83 %
100-00000-341301	BSD - PLAN CHECK FEES - RESIDENTIAL	30,000.00	30,000.00	3,158.52	30,036.11	0.00	36.11	100.12 %
100-00000-341302	PZ - REZONING APP FEE - SINGLE FAMILY RES	5,000.00	5,000.00	14,525.52	171,885.32	0.00	166,885.32	3,437.71 %
100-00000-341304	PZ - REZONING APP FEE - COMMERCIAL INDUSTRIAL	500.00	500.00	2,050.00	8,550.00	0.00	8,050.00	1,710.00 %
100-00000-341305	PZ - REZONING APP FEE - DRI	1,000.00	1,000.00	1,346.00	7,275.18	0.00	6,275.18	727.52 %
100-00000-341306	PZ - ZONING CERTIFICATION FEE	500.00	500.00	0.00	250.00	0.00	-250.00	50.00 %
100-00000-341400	PRINTING & DUPLICAT SRVCS	100.00	100.00	645.40	827.68	0.00	727.68	827.68 %
100-00000-342120	REPORTS - POLICE DEPT	3,000.00	3,000.00	355.22	2,242.12	0.00	-757.88	25.26 %
100-00000-342201	FIRE - OPERATIONAL PERMITS	5,000.00	5,000.00	75.00	425.00	0.00	-4,575.00	91.50 %
100-00000-342202	FIRE - CONSTRUCTION PERMITS	20,000.00	20,000.00	575.00	5,125.00	0.00	-14,875.00	74.38 %
100-00000-342203	FIRE - INSPECTION FEES	20,000.00	20,000.00	1,469.25	16,294.25	0.00	-3,705.75	18.53 %
100-00000-342900	OTHER SERVICE FEES	150,000.00	150,000.00	0.00	0.00	0.00	-150,000.00	100.00 %
100-00000-342950	TRAFFIC CAMERAS	0.00	0.00	103,411.75	569,413.00	0.00	569,413.00	0.00 %
100-00000-343400	RIGHT OF WAY PERMIT FEE	3,000.00	3,000.00	0.00	0.00	0.00	-3,000.00	100.00 %
100-00000-349300	BAD CHECK FEES	500.00	500.00	0.00	200.00	0.00	-300.00	60.00 %
100-00000-349400	OPENEDGE MERCHANT FEE	5,000.00	5,000.00	0.00	5,095.92	0.00	95.92	101.92 %
	Class: 34 - CHARGES FOR SERVICES Total:	**343,600.00**	**343,600.00**	**173,021.38**	**1,215,453.85**	**0.00**	**871,853.85**	**253.74%**
Class: 35 - FINES AND FORFEITURES								
100-00000-351140	FINES & FORFEITURES	900,000.00	900,000.00	0.00	195,153.50	0.00	-704,846.50	78.32 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-00000-351145	CODE ENFORCEMENT FINES	10,000.00	10,000.00	0.00	0.00	0.00	-10,000.00	100.00 %
	Class: 35 - FINES AND FORFEITURES Total:	**910,000.00**	**910,000.00**	**0.00**	**195,153.50**	**0.00**	**-714,846.50**	**78.55%**
Class: 36 - INVESTMENT INCOME								
100-00000-361000	INTEREST REVENUES	1,800.00	1,800.00	1.44	129.52	0.00	-1,670.48	92.80 %
	Class: 36 - INVESTMENT INCOME Total:	**1,800.00**	**1,800.00**	**1.44**	**129.52**	**0.00**	**-1,670.48**	**92.80%**
Class: 38 - MISCELLANEOUS REVENUE								
100-00000-381100	SPRINT COM - RENT	45,000.00	45,000.00	0.00	0.00	0.00	-45,000.00	100.00 %
100-00000-381200	PARK PAVILION RENTAL	22,000.00	22,000.00	5,300.00	28,150.00	0.00	6,150.00	127.95 %
100-00000-381300	T-MOBILE TOWER LEASE	54,000.00	54,000.00	8,920.38	53,317.45	0.00	-682.55	1.26 %
100-00000-383000	INS.REIM.DAM./STOLEN PROP	10,000.00	-107,280.00	150.00	50,046.97	0.00	157,326.97	46.65 %
100-00000-389011	Misc Revenue	1,000.00	1,000.00	0.00	0.00	0.00	-1,000.00	100.00 %
100-00000-389012	YOUTH COUNCIL FUNDRAISER	800.00	800.00	0.00	0.00	0.00	-800.00	100.00 %
100-00000-389013	CITY EVENTS REVENUE	14,000.00	14,000.00	0.00	480.00	0.00	-13,520.00	96.57 %
100-00000-389014	BRIDGEFEST SPONSORSHIP	2,400.00	2,400.00	0.00	100.00	0.00	-2,300.00	95.83 %
100-00000-389015	TASTY TUESDAY/FOOD TRUCK SPONSORSHIP	7,000.00	7,000.00	0.00	780.00	0.00	-6,220.00	88.86 %
100-00000-389018	HOLIDAY FESTIVAL SPONSORSHIP	800.00	800.00	0.00	0.00	0.00	-800.00	100.00 %
100-00000-389019	VETERAN'S DAY SPONSORSHIP	1,000.00	1,000.00	0.00	0.00	0.00	-1,000.00	100.00 %
100-00000-389020	PRETTY IN PINK SPONSORSHIP	1,000.00	1,000.00	0.00	0.00	0.00	-1,000.00	100.00 %
100-00000-389022	MEMORIAL DAY MARCH SPONSORSHIP	1,230.00	1,230.00	0.00	0.00	0.00	-1,230.00	100.00 %
100-00000-389025	COMMUNITY DONATIONS - POLICE	20,000.00	20,000.00	0.00	0.00	0.00	-20,000.00	100.00 %
100-00000-389027	DISTRICT 2 SPONSORSHIP	0.00	-5,050.00	0.00	5,200.00	0.00	10,250.00	102.97 %
100-00000-389030	MISCELLANEOUS	61,696.00	61,696.00	15.00	275,704.31	0.00	214,008.31	446.88 %
100-00000-389031	DISTRICT 5 SPONSORSHIP	0.00	-11,750.00	0.00	11,750.00	0.00	23,500.00	100.00 %
100-00000-389038	MAIN STREET/ECONOMIC DEV SPONSORS	2,500.00	2,500.00	0.00	0.00	0.00	-2,500.00	100.00 %
	Class: 38 - MISCELLANEOUS REVENUE Total:	**244,426.00**	**110,346.00**	**14,385.38**	**425,528.73**	**0.00**	**315,182.73**	**285.63%**
Class: 39 - OTHER FINANCING SOURCES								
100-00000-391100	OPERATING TRANSFER IN	215,000.00	215,000.00	0.00	0.00	0.00	-215,000.00	100.00 %
100-00000-392100	SALE OF GEN FIXED ASSETS	50,000.00	50,000.00	0.00	0.00	0.00	-50,000.00	100.00 %
100-00000-392200	PROPERTY SALE	750,000.00	750,000.00	0.00	0.00	0.00	-750,000.00	100.00 %
	Class: 39 - OTHER FINANCING SOURCES Total:	**1,015,000.00**	**1,015,000.00**	**0.00**	**0.00**	**0.00**	**-1,015,000.00**	**100.00%**
	Revenue Total:	**26,711,635.92**	**26,577,555.92**	**1,401,640.52**	**9,715,227.89**	**0.00**	**-16,862,328.03**	**63.45%**
	Fund: 100 - GENERAL FUND Total:	**26,711,635.92**	**26,577,555.92**	**1,401,640.52**	**9,715,227.89**	**0.00**	**-16,862,328.03**	**63.45%**
	Report Total:	**26,711,635.92**	**26,577,555.92**	**1,401,640.52**	**9,715,227.89**	**0.00**	**-16,862,328.03**	**63.45%**

Group Summary

Clas...	Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
Fund: 100 - GENERAL FUND							
Revenue							
31 - TAXES	22,721,809.92	22,721,809.92	1,098,693.22	6,485,762.92	0.00	-16,236,047.00	71.46%
32 - LICENSES AND PERMITS	1,187,000.00	1,187,000.00	115,539.10	1,393,199.37	0.00	206,199.37	17.37%
33 - INTERGOVERNMENTAL REVENUES	288,000.00	288,000.00	0.00	0.00	0.00	-288,000.00	100.00%
34 - CHARGES FOR SERVICES	343,600.00	343,600.00	173,021.38	1,215,453.85	0.00	871,853.85	253.74%
35 - FINES AND FORFEITURES	910,000.00	910,000.00	0.00	195,153.50	0.00	-714,846.50	78.55%
36 - INVESTMENT INCOME	1,800.00	1,800.00	1.44	129.52	0.00	-1,670.48	92.80%
38 - MISCELLANEOUS REVENUE	244,426.00	110,346.00	14,385.38	425,528.73	0.00	315,182.73	285.63%
39 - OTHER FINANCING SOURCES	1,015,000.00	1,015,000.00	0.00	0.00	0.00	-1,015,000.00	100.00%
Revenue Total:	**26,711,635.92**	**26,577,555.92**	**1,401,640.52**	**9,715,227.89**	**0.00**	**-16,862,328.03**	**63.45%**
Fund: 100 - GENERAL FUND Total:	**26,711,635.92**	**26,577,555.92**	**1,401,640.52**	**9,715,227.89**	**0.00**	**-16,862,328.03**	**63.45%**
Report Total:	**26,711,635.92**	**26,577,555.92**	**1,401,640.52**	**9,715,227.89**	**0.00**	**-16,862,328.03**	**63.45%**

Fund Summary

Fund	Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100 - GENERAL FUND	26,711,635.92	26,577,555.92	1,401,640.52	9,715,227.89	0.00	-16,862,328.03	63.45%
Report Total:	**26,711,635.92**	**26,577,555.92**	**1,401,640.52**	**9,715,227.89**	**0.00**	**-16,862,328.03**	**63.45%**

City of Stockbridge

Budget Report
Account Summary
For Fiscal: 2024 Period Ending: 06/30/2024

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
Expense								
Expense								
Class: 51 - PERSONAL SERVICES AND EMPLOYEE BENEFITS								
100-11100-511100	REGULAR EMPLOYEE SALARIES	116,920.96	116,920.96	9,129.44	57,211.30	0.00	59,709.66	51.07 %
100-11100-511120	MAYOR	24,000.00	24,000.00	1,866.67	11,200.02	0.00	12,799.98	53.33 %
100-11100-511121	COUNCIL	100,000.00	100,000.00	8,333.35	50,000.10	0.00	49,999.90	50.00 %
100-11100-511300	OVERTIME	800.00	800.00	186.73	1,547.22	0.00	-747.22	-93.40 %
100-11100-512100	GRP INSRNC MEDICAL/DENTAL	107,757.52	107,757.52	10,055.27	67,221.04	0.00	40,536.48	37.62 %
100-11100-512110	GROUP INSURANCE LIFE	1,000.00	1,000.00	77.55	501.99	0.00	498.01	49.80 %
100-11100-512111	GROUP INSURANCE VISION	1,000.00	1,000.00	51.84	346.09	0.00	653.91	65.39 %
100-11100-512200	MEDICARE 1.45%	1,200.00	1,200.00	282.16	1,734.03	0.00	-534.03	-44.50 %
100-11100-512400	PENSION	34,000.00	34,000.00	2,766.68	16,600.08	0.00	17,399.92	51.18 %
100-11100-512700	WORKER'S COMPENSATION	2,300.00	2,300.00	81.25	672.82	0.00	1,627.18	70.75 %
100-11100-512851	HRA DEDUCTIBLE	4,000.00	4,000.00	0.00	0.00	0.00	4,000.00	100.00 %
100-11300-511100	REGULAR EMPL. SALARIES	221,089.49	221,089.49	16,664.72	97,999.54	0.00	123,089.95	55.67 %
100-11300-512100	GRP INSRNC MEDICAL/DENTAL	40,409.07	40,409.07	5,648.99	35,294.41	0.00	5,114.66	12.66 %
100-11300-512101	FEES GRP INS	1,500.00	1,500.00	0.00	0.00	0.00	1,500.00	100.00 %
100-11300-512110	GROUP INSURANCE LIFE	900.00	900.00	57.63	374.97	0.00	525.03	58.34 %
100-11300-512111	GROUP INSURANCE VISION	1,000.00	1,000.00	27.85	173.01	0.00	826.99	82.70 %
100-11300-512200	MEDICARE 1.45%	3,000.00	3,000.00	237.08	1,395.36	0.00	1,604.64	53.49 %
100-11300-512400	PENSION	32,000.00	32,000.00	2,603.94	15,623.64	0.00	16,376.36	51.18 %
100-11300-512600	UNEMPLOYMENT INSURANCE	2,000.00	2,000.00	0.00	0.00	0.00	2,000.00	100.00 %
100-11300-512700	WORKER'S COMPENSATION	2,000.00	2,000.00	70.65	585.05	0.00	1,414.95	70.75 %
100-11300-512800	EMPLOYEE ASSISTANCE PROG.	500.00	500.00	0.00	0.00	0.00	500.00	100.00 %
100-11300-512851	HRA DEDUCTIBLE	6,000.00	6,000.00	0.00	0.00	0.00	6,000.00	100.00 %
100-13000-511100	REGULAR EMPL. SALARIES	530,170.83	530,170.83	33,968.10	219,133.89	0.00	311,036.94	58.67 %
100-13000-511113	VEHICLE ALLOWANCE	0.00	12,000.00	1,000.00	6,000.00	0.00	6,000.00	50.00 %
100-13000-511300	OVERTIME	500.00	500.00	0.00	222.33	0.00	277.67	55.53 %
100-13000-512100	GRP INSRNC MEDICAL/DENTAL	80,818.14	80,818.14	11,078.74	73,294.98	0.00	7,523.16	9.31 %
100-13000-512110	GROUP INSURANCE LIFE	3,000.00	3,000.00	117.34	744.13	0.00	2,255.87	75.20 %
100-13000-512111	GROUP INSURANCE VISION	1,000.00	1,000.00	56.79	370.91	0.00	629.09	62.91 %
100-13000-512200	MEDICARE 1.45%	6,000.00	6,000.00	522.62	3,229.75	0.00	2,770.25	46.17 %
100-13000-512400	PENSION	4,200.00	4,200.00	341.77	2,050.62	0.00	2,149.38	51.18 %
100-13000-512401	RETIREMENT CONTRIBUTION	40,000.00	40,000.00	0.00	5,748.83	0.00	34,251.17	85.63 %
100-13000-512600	UNEMPLOYMENT INSURANCE	2,500.00	2,500.00	0.00	0.00	0.00	2,500.00	100.00 %
100-13000-512700	WORKER'S COMPENSATION	3,000.00	3,000.00	105.98	877.60	0.00	2,122.40	70.75 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-13000-512800	EMPLOYEE ASSISTANCE PROG.	500.00	500.00	0.00	0.00	0.00	500.00	100.00 %
100-13000-512850	HRA REIMBURSEMENT	8,000.00	8,000.00	0.00	421.86	0.00	7,578.14	94.73 %
100-15100-511100	REGULAR EMPL. SALARIES	575,778.65	575,778.65	35,475.23	191,553.71	0.00	384,224.94	66.73 %
100-15100-511300	OVERTIME	200.00	200.00	83.44	459.02	0.00	-259.02	-129.51 %
100-15100-512100	GRP INSRNC MEDICAL/DENTAL	134,696.90	134,696.90	16,792.68	78,428.80	0.00	56,268.10	41.77 %
100-15100-512101	FEES GRP INS	2,500.00	2,500.00	0.00	1,296.00	0.00	1,204.00	48.16 %
100-15100-512110	GROUP INSURANCE LIFE	1,875.00	1,875.00	165.96	805.72	0.00	1,069.28	57.03 %
100-15100-512111	GROUP INSURANCE VISION	1,250.00	1,250.00	68.52	328.20	0.00	921.80	73.74 %
100-15100-512200	MEDICARE 1.45%	7,500.00	7,500.00	520.38	2,750.44	0.00	4,749.56	63.33 %
100-15100-512400	PENSION	59,000.00	59,000.00	4,801.01	28,806.06	0.00	30,193.94	51.18 %
100-15100-512600	UNEMPLOYMENT INSURANCE	5,250.00	5,250.00	0.00	3,285.00	0.00	1,965.00	37.43 %
100-15100-512700	WORKER'S COMPENSATION	5,000.00	5,000.00	176.63	1,462.65	0.00	3,537.35	70.75 %
100-15100-512800	EMPLOYEE ASSISTANCE PROG.	1,625.00	1,625.00	196.65	1,232.80	0.00	392.20	24.14 %
100-15100-512851	HRA DEDUCTIBLE	24,000.00	24,000.00	0.00	0.00	0.00	24,000.00	100.00 %
100-15160-511100	REGULAR SALARIES	155,014.32	155,014.32	11,685.17	63,507.54	0.00	91,506.78	59.03 %
100-15160-511300	OVERTIME	0.00	0.00	0.00	33.98	0.00	-33.98	0.00 %
100-15160-512100	GRP INSRNC MEDICAL/DENTAL	40,409.07	40,409.07	4,669.62	29,870.88	0.00	10,538.19	26.08 %
100-15160-512110	GROUP INSURANCE LIFE	850.00	850.00	48.73	296.47	0.00	553.53	65.12 %
100-15160-512111	GROUP INSURANCE VISION	1,000.00	1,000.00	28.83	168.23	0.00	831.77	83.18 %
100-15160-512200	MEDICARE 1.45%	1,800.00	1,800.00	152.35	850.85	0.00	949.15	52.73 %
100-15160-512400	PENSION	18,750.00	18,750.00	1,525.74	9,154.44	0.00	9,595.56	51.18 %
100-15160-512600	UNEMPLOYMENT INSURANCE	2,000.00	2,000.00	0.00	0.00	0.00	2,000.00	100.00 %
100-15160-512700	WORKER'S COMPENSATION	3,000.00	3,000.00	105.98	877.60	0.00	2,122.40	70.75 %
100-15160-512851	HRA DEDUCTIBLE	6,000.00	6,000.00	0.00	2,000.00	0.00	4,000.00	66.67 %
100-15350-511100	REGULAR EMPL. SALARIES	220,560.00	220,560.00	17,151.20	84,484.32	0.00	136,075.68	61.70 %
100-15350-511300	OVERTIME	0.00	0.00	9.56	1,041.53	0.00	-1,041.53	0.00 %
100-15350-512100	GRP INSRNC MEDICAL/DENTAL	40,409.07	40,409.07	6,674.90	46,784.30	0.00	-6,375.23	-15.78 %
100-15350-512101	FEES GRP INS	1,500.00	1,500.00	0.00	0.00	0.00	1,500.00	100.00 %
100-15350-512110	GROUP INSURANCE LIFE	6,000.00	6,000.00	66.87	468.09	0.00	5,531.91	92.20 %
100-15350-512111	GROUP INSURANCE VISION	3,000.00	3,000.00	21.83	152.81	0.00	2,847.19	94.91 %
100-15350-512200	MEDICARE 1.45%	6,000.00	6,000.00	240.66	1,165.09	0.00	4,834.91	80.58 %
100-15350-512400	PENSION	30,000.00	30,000.00	2,441.19	14,647.14	0.00	15,352.86	51.18 %
100-15350-512600	UNEMPLOYMENT INSURANCE	3,000.00	3,000.00	0.00	0.00	0.00	3,000.00	100.00 %
100-15350-512700	WORKER'S COMPENSATION	4,500.00	4,500.00	158.97	1,316.40	0.00	3,183.60	70.75 %
100-15350-512800	EMPLOYEE ASSISTANCE PROG.	1,500.00	1,500.00	0.00	0.00	0.00	1,500.00	100.00 %
100-15350-512851	HRA DEDUCTIBLE	6,000.00	6,000.00	0.00	0.00	0.00	6,000.00	100.00 %
100-15400-511100	REGULAR EMPL. SALARIES	159,205.81	159,205.81	12,246.60	75,398.87	0.00	83,806.94	52.64 %
100-15400-512100	GRP INSRNC MEDICAL/DENTAL	35,919.17	35,919.17	2,253.58	15,815.06	0.00	20,104.11	55.97 %
100-15400-512110	GROUP INSURANCE LIFE	466.64	466.64	43.08	300.78	0.00	165.86	35.54 %
100-15400-512111	GROUP INSURANCE VISION	1,333.33	1,333.33	12.04	84.28	0.00	1,249.05	93.68 %
100-15400-512200	MEDICARE 1.45%	2,133.33	2,133.33	190.94	1,174.96	0.00	958.37	44.92 %
100-15400-512400	PENSION	30,666.67	30,666.67	2,495.44	14,972.64	0.00	15,694.03	51.18 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-15400-512600	UNEMPLOYMENT INSURANCE	1,600.00	1,600.00	0.00	0.00	0.00	1,600.00	100.00 %
100-15400-512700	WORKER'S COMPENSATION	1,333.33	1,333.33	47.10	415.03	0.00	918.30	68.87 %
100-15400-512851	HRA	4,000.00	4,000.00	0.00	0.00	0.00	4,000.00	100.00 %
100-15650-511100	REGULAR EMPL. SALARIES	179,588.88	179,588.88	14,895.70	74,060.18	0.00	105,528.70	58.76 %
100-15650-511300	OVERTIME	15,000.00	15,000.00	1,312.25	4,789.68	0.00	10,210.32	68.07 %
100-15650-512100	GRP INSRNC MEDICAL/DENTAL	40,409.07	40,409.07	557.75	33,886.41	0.00	6,522.66	16.14 %
100-15650-512110	GROUP INSURANCE LIFE	1,500.00	1,500.00	42.57	295.36	0.00	1,204.64	80.31 %
100-15650-512111	GROUP INSURANCE VISION	1,000.00	1,000.00	4.48	171.04	0.00	828.96	82.90 %
100-15650-512200	MEDICARE 1.45%	2,200.00	2,200.00	232.53	1,122.15	0.00	1,077.85	48.99 %
100-15650-512400	PENSION	30,000.00	30,000.00	2,441.19	14,647.14	0.00	15,352.86	51.18 %
100-15650-512700	WORKER'S COMPENSATION	2,500.00	2,500.00	88.32	731.35	0.00	1,768.65	70.75 %
100-15650-512851	HRA, DEDUCTIBLE	6,000.00	6,000.00	0.00	0.00	0.00	6,000.00	100.00 %
100-25000-511140	JUDGE	68,200.00	68,200.00	5,416.67	32,500.02	0.00	35,699.98	52.35 %
100-25000-511141	SOLICITOR	30,000.00	30,000.00	0.00	0.00	0.00	30,000.00	100.00 %
100-25000-511142	COURT CLERK & ASSISTANTS	160,430.00	160,430.00	12,469.50	77,021.75	0.00	83,408.25	51.99 %
100-25000-511300	OVERTIME	0.00	0.00	90.45	143.21	0.00	-143.21	0.00 %
100-25000-512100	GRP INSRNC MEDICAL/DENTAL	40,409.07	40,409.07	15,023.46	75,905.92	0.00	-35,496.85	-87.84 %
100-25000-512110	GROUP INSURANCE LIFE	2,000.00	2,000.00	49.08	343.56	0.00	1,656.44	82.82 %
100-25000-512111	GROUP INSURANCE VISION	1,000.00	1,000.00	55.52	388.64	0.00	611.36	61.14 %
100-25000-512200	MEDICARE 1.45%	3,000.00	3,000.00	269.19	1,546.26	0.00	1,453.74	48.46 %
100-25000-512400	PENSION	23,000.00	23,000.00	1,871.58	11,229.48	0.00	11,770.52	51.18 %
100-25000-512600	UNEMPLOYMENT INSURANCE	2,000.00	2,000.00	0.00	0.00	0.00	2,000.00	100.00 %
100-25000-512700	WORKER'S COMPENSATION	6,000.00	6,000.00	211.96	1,755.20	0.00	4,244.80	70.75 %
100-25000-512851	HRA, DEDUCTIBLE	3,000.00	3,000.00	0.00	0.00	0.00	3,000.00	100.00 %
100-32100-511100	REGULAR EMPL. SALARIES	4,876,012.03	4,876,012.03	366,903.18	2,034,378.83	0.00	2,841,633.20	58.28 %
100-32100-511200	TEMPORARY EMPLOYEES	91,000.00	91,000.00	3,905.75	12,461.64	0.00	78,538.36	86.31 %
100-32100-511300	OVERTIME	140,000.00	140,000.00	17,199.79	134,560.91	0.00	5,439.09	3.89 %
100-32100-511305	HIDTA OVERTIME	0.00	0.00	88.99	2,180.23	0.00	-2,180.23	0.00 %
100-32100-512100	GRP INSRNC MEDICAL/DENTAL	1,442,650.00	1,442,650.00	103,647.64	692,936.94	0.00	749,713.06	51.97 %
100-32100-512110	GROUP INSURANCE LIFE	18,150.00	18,150.00	1,188.27	7,802.92	0.00	10,347.08	57.01 %
100-32100-512111	GROUP INSURANCE VISION	7,800.00	7,800.00	473.10	3,170.47	0.00	4,629.53	59.35 %
100-32100-512200	MEDICARE 1.45%	62,000.00	62,000.00	5,526.17	31,201.91	0.00	30,798.09	49.67 %
100-32100-512400	PENSION	111,500.00	111,500.00	9,073.09	54,438.54	0.00	57,061.46	51.18 %
100-32100-512700	WORKER'S COMPENSATION	73,700.00	73,700.00	2,603.58	22,496.10	0.00	51,203.90	69.48 %
100-42200-511100	REGULAR EMPL. SALARIES	1,166,892.33	1,166,892.33	82,965.31	482,548.84	0.00	684,343.49	58.65 %
100-42200-511300	OVERTIME	35,000.00	35,000.00	2,263.38	12,241.40	0.00	22,758.60	65.02 %
100-42200-512100	GRP INSRNC MEDICAL/DENTAL	332,863.00	332,863.00	41,549.63	240,977.86	0.00	91,885.14	27.60 %
100-42200-512110	GROUP INSURANCE LIFE	13,500.00	13,500.00	418.00	2,240.27	0.00	11,259.73	83.41 %
100-42200-512111	GROUP INSURANCE VISION	4,500.00	4,500.00	177.33	1,114.89	0.00	3,385.11	75.22 %
100-42200-512200	MEDICARE 1.45%	20,400.00	20,400.00	1,218.91	7,069.59	0.00	13,330.41	65.35 %
100-42200-512400	PENSION	300,000.00	300,000.00	24,411.91	146,471.46	0.00	153,528.54	51.18 %
100-42200-512600	UNEMPLOYMENT INSURANCE	15,000.00	15,000.00	0.00	0.00	0.00	15,000.00	100.00 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-42200-512700	WORKER'S COMPENSATION	62,000.00	62,000.00	2,190.24	18,237.01	0.00	43,762.99	70.59 %
100-42200-512851	HRA, DEDUCTIBLE	40,000.00	40,000.00	0.00	3,128.77	0.00	36,871.23	92.18 %
100-72000-511100	REGULAR EMPL. SALARIES	402,686.01	402,686.01	23,837.00	109,169.21	0.00	293,516.80	72.89 %
100-72000-511300	OVERTIME	0.00	0.00	16.95	144.05	0.00	-144.05	0.00 %
100-72000-512100	GRP INSRNC MEDICAL/DENTAL	26,939.38	26,939.38	11,302.86	54,580.40	0.00	-27,641.02	-102.60 %
100-72000-512110	GROUP INSURANCE LIFE	550.00	550.00	108.47	454.81	0.00	95.19	17.31 %
100-72000-512111	GROUP INSURANCE VISION	1,000.00	1,000.00	51.73	220.17	0.00	779.83	77.98 %
100-72000-512200	MEDICARE 1.45%	1,000.00	1,000.00	362.50	1,552.44	0.00	-552.44	-55.24 %
100-72000-512400	PENSION	20,000.00	20,000.00	1,627.46	9,764.76	0.00	10,235.24	51.18 %
100-72000-512600	UNEMPLOYMENT INSURANCE	2,000.00	2,000.00	0.00	0.00	0.00	2,000.00	100.00 %
100-72000-512700	WORKER'S COMPENSATION	2,000.00	2,000.00	70.65	585.05	0.00	1,414.95	70.75 %
100-72000-512851	HRA DEDUCTIBLE	3,000.00	3,000.00	0.00	0.00	0.00	3,000.00	100.00 %
100-74100-511100	REGULAR SALARIES	386,526.47	386,526.47	28,263.61	149,939.28	0.00	236,587.19	61.21 %
100-74100-512100	GRP INSRNC MEDICAL/DENTAL	67,348.45	67,348.45	6,671.11	20,934.65	0.00	46,413.80	68.92 %
100-74100-512110	GROUP INSURANCE LIFE	3,300.00	3,300.00	102.64	402.28	0.00	2,897.72	87.81 %
100-74100-512111	GROUP INSURANCE VISION	1,000.00	1,000.00	44.84	182.24	0.00	817.76	81.78 %
100-74100-512200	MEDICARE 1.45%	3,600.00	3,600.00	398.74	2,108.62	0.00	1,491.38	41.43 %
100-74100-512400	PENSION	61,800.00	61,800.00	5,028.85	30,173.10	0.00	31,626.90	51.18 %
100-74100-512600	UNEMPLOYMENT INSURANCE	12,000.00	12,000.00	0.00	0.00	0.00	12,000.00	100.00 %
100-74100-512700	WORKER'S COMPENSATION	12,000.00	12,000.00	423.92	3,510.40	0.00	8,489.60	70.75 %
100-74100-512851	HRA DEDUCTIBLE	10,000.00	10,000.00	0.00	0.00	0.00	10,000.00	100.00 %
100-75100-511100	REGULAR SALARIES	146,280.12	146,280.12	3,927.67	53,414.22	0.00	92,865.90	63.48 %
100-75100-511300	OVERTIME	0.00	0.00	92.20	516.32	0.00	-516.32	0.00 %
100-75100-512100	GRP INSRNC MEDICAL/DENTAL	40,409.07	40,409.07	1,126.79	17,423.29	0.00	22,985.78	56.88 %
100-75100-512110	GROUP INSURANCE LIFE	1,650.00	1,650.00	16.23	203.86	0.00	1,446.14	87.64 %
100-75100-512111	GROUP INSURANCE VISION	3,000.00	3,000.00	6.02	85.58	0.00	2,914.42	97.15 %
100-75100-512200	MEDICARE 1.45%	3,300.00	3,300.00	56.72	779.68	0.00	2,520.32	76.37 %
100-75100-512400	PENSION	30,900.00	30,900.00	2,514.43	15,086.58	0.00	15,813.42	51.18 %
100-75100-512600	UNEMPLOYMENT INSURANCE	6,000.00	6,000.00	0.00	0.00	0.00	6,000.00	100.00 %
100-75100-512700	WORKER'S COMPENSATION	6,000.00	6,000.00	211.96	1,755.20	0.00	4,244.80	70.75 %
100-75100-512851	HRA DEDUCTIBLE	6,000.00	6,000.00	0.00	0.00	0.00	6,000.00	100.00 %
100-75500-511100	REGULAR SALARIES	127,083.51	127,083.51	8,153.86	45,083.76	0.00	81,999.75	64.52 %
100-75500-512100	GRP INSRNC MEDICAL/DENTAL	26,939.38	26,939.38	1,126.79	14,370.31	0.00	12,569.07	46.66 %
100-75500-512110	GROUP INSURANCE LIFE	620.00	620.00	14.80	173.68	0.00	446.32	71.99 %
100-75500-512111	GROUP INSURANCE VISION	1,000.00	1,000.00	6.02	75.05	0.00	924.95	92.50 %
100-75500-512200	MEDICARE 1.45%	1,500.00	1,500.00	115.16	692.20	0.00	807.80	53.85 %
100-75500-512400	PENSION	20,000.00	20,000.00	1,627.46	9,764.76	0.00	10,235.24	51.18 %
100-75500-512600	UNEMPLOYMENT INSURANCE	600.00	600.00	0.00	0.00	0.00	600.00	100.00 %
100-75500-512700	WORKER'S COMPENSATION	1,200.00	1,200.00	42.39	351.02	0.00	848.98	70.75 %
100-75500-512851	HRA, DEDUCTIBLE	4,000.00	4,000.00	0.00	0.00	0.00	4,000.00	100.00 %
100-75700-511100	REGULAR EMPLOYEE SALARIES	68,393.00	68,393.00	5,261.01	32,881.31	0.00	35,511.69	51.92 %
100-75700-512100	GRP INSUR MEDICAL / DENTAL	13,469.69	13,469.69	1,162.78	8,123.47	0.00	5,346.22	39.69 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-75700-512110	GROUP INSURANCE LIFE	300.00	300.00	48.35	337.97	0.00	-37.97	-12.66 %
100-75700-512111	GROUP INSURANCE VISION	1,000.00	1,000.00	6.02	36.12	0.00	963.88	96.39 %
100-75700-512200	MEDICARE 1.45%	1,000.00	1,000.00	75.38	470.90	0.00	529.10	52.91 %
100-75700-512400	PENSION	6,500.00	6,500.00	528.92	3,173.52	0.00	3,326.48	51.18 %
100-75700-512600	UNEMPLOYMENT INSURANCE	700.00	700.00	0.00	0.00	0.00	700.00	100.00 %
100-75700-512700	WORKERS' COMPENSATION	500.00	500.00	17.66	146.25	0.00	353.75	70.75 %
100-75700-512851	HRA DEDUCTABLE	2,000.00	2,000.00	0.00	0.00	0.00	2,000.00	100.00 %
	Class: 51 - PERSONAL SERVICES AND EMPLOYEE BENEFITS Total:	**13,956,991.76**	**13,968,991.76**	**1,051,170.44**	**6,174,827.70**	**0.00**	**7,794,164.06**	**55.80%**
Class: 52 - PURCHASED / CONTRACTED SERVICES								
100-11100-521101	OFFICIAL/ADMINISTRATIVE	14,000.00	14,000.00	0.00	8,720.36	0.00	5,279.64	37.71 %
100-11100-522341	COPIER RENTAL	650.00	650.00	50.65	303.90	306.10	40.00	6.15 %
100-11100-523400	PRINTING & BINDING	4,000.00	4,000.00	0.00	705.98	138.00	3,156.02	78.90 %
100-11100-523500	TRAVEL	2,000.00	2,000.00	0.00	39.00	0.00	1,961.00	98.05 %
100-11100-523502	TRAVEL MAYOR	10,000.00	10,000.00	521.46	2,204.85	0.00	7,795.15	77.95 %
100-11100-523503	TRAVEL DISTRICT 5	10,000.00	10,000.00	215.00	3,807.83	0.00	6,192.17	61.92 %
100-11100-523504	TRAVEL DISTRICT 3	10,000.00	10,000.00	215.00	1,895.52	0.00	8,104.48	81.04 %
100-11100-523505	TRAVEL DISTRICT 1	10,000.00	10,000.00	215.00	2,220.55	0.00	7,779.45	77.79 %
100-11100-523506	TRAVEL DISTRICT 4	10,000.00	7,000.00	215.00	1,860.80	0.00	5,139.20	73.42 %
100-11100-523507	TRAVEL DISTRICT 2	10,000.00	10,000.00	215.00	2,008.80	0.00	7,991.20	79.91 %
100-11100-523600	DUES & FEES	100.00	100.00	0.00	0.00	0.00	100.00	100.00 %
100-11100-523601	DUES & FEES MAYOR	100.00	100.00	0.00	0.00	0.00	100.00	100.00 %
100-11100-523602	DUES & FEES DISTRICT 5	100.00	100.00	0.00	0.00	0.00	100.00	100.00 %
100-11100-523603	DUES & FEES DISTRICT 3	100.00	100.00	0.00	0.00	0.00	100.00	100.00 %
100-11100-523604	DUES & FEES DISTRICT 1	100.00	100.00	0.00	0.00	0.00	100.00	100.00 %
100-11100-523605	DUES & FEES DISTRICT 4	100.00	100.00	0.00	0.00	0.00	100.00	100.00 %
100-11100-523606	DUES & FEES DISTRICT 2	100.00	100.00	0.00	0.00	0.00	100.00	100.00 %
100-11100-523700	EDUCATION & TRAINING	2,000.00	2,000.00	0.00	0.00	0.00	2,000.00	100.00 %
100-11100-523702	EDUCATION & TRAINING MAYOR	6,000.00	6,000.00	0.00	815.00	0.00	5,185.00	86.42 %
100-11100-523703	EDUCATION & TRAINING DISTRICT 5	6,000.00	6,000.00	0.00	795.00	0.00	5,205.00	86.75 %
100-11100-523704	EDUCATION & TRAINING DISTRICT 3	6,000.00	6,000.00	0.00	1,220.00	0.00	4,780.00	79.67 %
100-11100-523705	EDUCATION & TRAINING DISTRICT 1	6,000.00	6,000.00	0.00	1,184.00	0.00	4,816.00	80.27 %
100-11100-523706	EDUCATION & TRAINING DISTRICT 4	6,000.00	5,098.00	0.00	920.00	0.00	4,178.00	81.95 %
100-11100-523707	EDUCATION & TRAINING DISTRICT 2	6,000.00	6,000.00	0.00	1,405.00	0.00	4,595.00	76.58 %
100-11100-523911	COUNCIL INTIATIVES MAYOR	5,000.00	5,000.00	0.00	1,611.65	0.00	3,388.35	67.77 %
100-11100-523912	COUNCIL INTIATIVES DISTRICT 5	5,000.00	16,750.00	0.00	16,284.05	0.00	465.95	2.78 %
100-11100-523913	COUNCIL INTIATIVES DISTRICT 3	5,000.00	5,000.00	0.00	1,802.56	0.00	3,197.44	63.95 %
100-11100-523914	COUNCIL INTIATIVES DISTRICT 1	5,000.00	5,000.00	0.00	291.12	65.96	4,642.92	92.86 %
100-11100-523915	COUNCIL INTIATIVES DISTRICT 4	5,000.00	8,902.00	750.00	8,902.00	0.00	0.00	0.00 %
100-11100-523916	COUNCIL INTIATIVES DISTRICT 2	5,000.00	10,050.00	100.00	13,530.52	0.00	-3,480.52	-34.63 %
100-11300-521301	CODIFICATION	10,000.00	10,000.00	0.00	0.00	0.00	10,000.00	100.00 %
100-11300-522341	COPIER RENTAL	1,625.00	1,625.00	50.65	303.90	306.10	1,015.00	62.46 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-11300-523310	PUBLIC NOTICES	5,000.00	5,000.00	0.00	927.00	0.00	4,073.00	81.46 %
100-11300-523400	PRINTING & BINDING	1,000.00	1,000.00	0.00	706.72	0.00	293.28	29.33 %
100-11300-523500	TRAVEL	9,000.00	9,000.00	687.46	3,048.27	0.00	5,951.73	66.13 %
100-11300-523600	DUES & FEES	1,500.00	1,500.00	0.00	90.00	0.00	1,410.00	94.00 %
100-11300-523700	EDUCATION & TRAINING	6,500.00	6,500.00	0.00	731.65	0.00	5,768.35	88.74 %
100-11300-523940	POSTAGE	500.00	500.00	0.00	80.00	0.00	420.00	84.00 %
100-13000-521201	PROFESSIONAL SERVICES	10,000.00	10,000.00	0.00	38,298.60	20,400.00	-48,698.60	-486.99 %
100-13000-522341	COPIER RENTAL	1,100.00	1,100.00	50.65	303.90	306.10	490.00	44.55 %
100-13000-523400	PRINTING & BINDING	500.00	500.00	0.00	705.98	0.00	-205.98	-41.20 %
100-13000-523500	TRAVEL	7,000.00	7,000.00	0.00	5,406.11	0.00	1,593.89	22.77 %
100-13000-523600	DUES & FEES	7,000.00	7,000.00	0.00	1,836.67	0.00	5,163.33	73.76 %
100-13000-523700	EDUCATION & TRAINING	7,000.00	7,000.00	0.00	4,103.00	0.00	2,897.00	41.39 %
100-13000-523851	INTERN HELP	0.00	0.00	1,584.00	1,584.00	0.00	-1,584.00	0.00 %
100-15100-521100	CONSULTANT FEES	20,000.00	20,000.00	0.00	1,000.00	0.00	19,000.00	95.00 %
100-15100-521210	ACCOUNTING,ANNUAL AUDIT	50,000.00	50,000.00	0.00	45,000.00	0.00	5,000.00	10.00 %
100-15100-521223	PAYROLL FEES	10,000.00	10,000.00	0.00	7,528.12	9,915.68	-7,443.80	-74.44 %
100-15100-522210	MAINTENANCE AGREEMENTS	48,000.00	48,000.00	30,102.96	30,102.96	0.00	17,897.04	37.29 %
100-15100-522250	AUTO & TRUCK REPAIR	0.00	0.00	0.00	373.31	0.00	-373.31	0.00 %
100-15100-522320	RENTAL OF EQUIP & VEHICLE	400.00	400.00	0.00	0.00	0.00	400.00	100.00 %
100-15100-522341	COPIER RENTAL	4,000.00	4,000.00	185.93	1,115.58	1,116.42	1,768.00	44.20 %
100-15100-523240	AT&T CLUB SERVICE	10,000.00	10,000.00	0.00	11,074.69	0.00	-1,074.69	-10.75 %
100-15100-523246	TELECOMMUNICATION	22,000.00	22,000.00	1,802.46	10,576.24	0.00	11,423.76	51.93 %
100-15100-523400	PRINTING & BINDING	500.00	500.00	0.00	958.44	0.00	-458.44	-91.69 %
100-15100-523500	TRAVEL	10,000.00	10,000.00	0.00	0.00	0.00	10,000.00	100.00 %
100-15100-523600	DUES & FEES	2,000.00	2,000.00	0.00	889.00	480.00	631.00	31.55 %
100-15100-523700	EDUCATION & TRAINING	10,000.00	8,000.00	0.00	0.00	480.00	7,520.00	94.00 %
100-15100-523850	PERSONNEL SERVICE	0.00	10,588.04	3,348.00	89,161.43	950.61	-79,524.00	-751.07 %
100-15100-523851	INTERN HELP	0.00	0.00	1,156.00	1,156.00	0.00	-1,156.00	0.00 %
100-15100-523901	BANK CHARGES	5,000.00	5,000.00	0.00	501.21	0.00	4,498.79	89.98 %
100-15100-523905	COLLECTION FEE HENRY COUNTY	0.00	0.00	83.38	2,558.11	0.00	-2,558.11	0.00 %
100-15100-523909	CREDIT CARD EXPENSES	15,000.00	15,000.00	0.00	17,235.04	210.00	-2,445.04	-16.30 %
100-15100-523940	POSTAGE	2,500.00	2,500.00	0.00	779.69	0.00	1,720.31	68.81 %
100-15110-521100	CONSULTANT FEES	80,000.00	80,000.00	0.00	0.00	0.00	80,000.00	100.00 %
100-15110-521217	LEGAL	350,000.00	350,000.00	38,500.00	174,567.50	0.00	175,432.50	50.12 %
100-15110-521218	LEGAL, OTHER	150,000.00	150,000.00	0.00	32,181.50	0.00	117,818.50	78.55 %
100-15110-521335	SHREDING	2,000.00	2,000.00	0.00	844.49	0.00	1,155.51	57.78 %
100-15110-522250	AUTO & TRUCK REPAIR (ADMIN. VEHICLES)	3,000.00	3,000.00	0.00	653.10	246.06	2,100.84	70.03 %
100-15110-522320	RENTAL OF EQUIP & VEHICLE	0.00	7,493.25	0.00	680.85	7,262.40	-450.00	-6.01 %
100-15110-523300	ADVERTISEMENT	200.00	200.00	0.00	105.00	0.00	95.00	47.50 %
100-15110-523600	DUES & FEES (GMA DUES)	15,000.00	15,000.00	0.00	12,122.17	10,122.17	-7,244.34	-48.30 %
100-15110-523945	WEBSITE	15,000.00	15,000.00	0.00	24,985.00	0.00	-9,985.00	-66.57 %
100-15110-523946	SEE CLICK FIX SOFTWARE	3,000.00	3,000.00	0.00	0.00	0.00	3,000.00	100.00 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-15160-521310	SOFTWARE	0.00	2,700.00	0.00	2,700.52	127.64	-128.16	-4.75 %
100-15160-522210	MAINTENANCE AGREEMENT	2,700.00	0.00	0.00	0.00	0.00	0.00	0.00 %
100-15160-522341	COPIER RENTAL	1,800.00	1,800.00	137.28	823.68	826.32	150.00	8.33 %
100-15160-523400	PRINTING & BINDING	1,500.00	1,500.00	298.00	546.78	0.00	953.22	63.55 %
100-15160-523500	TRAVEL	1,700.00	1,700.00	0.00	228.24	0.00	1,471.76	86.57 %
100-15160-523600	DUES & FEES	150.00	150.00	0.00	25.00	0.00	125.00	83.33 %
100-15160-523700	EDUCATION & TRAINING	1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00 %
100-15160-523940	POSTAGE	1,800.00	1,800.00	0.00	476.18	0.00	1,323.82	73.55 %
100-15350-521351	IT SERVICES (CONTRACTED)	43,250.00	43,250.00	2,970.31	2,970.31	0.00	40,279.69	93.13 %
100-15350-521352	IT SERVICES FOR PHONE SYSTEM	84,000.00	84,000.00	8,495.83	116,136.62	24,972.12	-57,108.74	-67.99 %
100-15350-521353	IT SERVICES FOR INTERNET SERVICES	10,000.00	10,000.00	282.46	2,018.40	2,515.08	5,466.52	54.67 %
100-15350-522210	MAINTENANCE AGREEMENTS	5,000.00	5,000.00	0.00	0.00	0.00	5,000.00	100.00 %
100-15350-522341	COPIER RENTAL	1,500.00	1,500.00	0.00	0.00	0.00	1,500.00	100.00 %
100-15350-523500	TRAVEL	3,500.00	3,500.00	0.00	0.00	0.00	3,500.00	100.00 %
100-15350-523600	DUES & FEES	1,500.00	1,500.00	0.00	0.00	0.00	1,500.00	100.00 %
100-15350-523700	EDUCATION & TRAINING	3,700.00	3,700.00	0.00	0.00	0.00	3,700.00	100.00 %
100-15350-523851	INTERN HELP	0.00	0.00	320.00	320.00	0.00	-320.00	0.00 %
100-15400-521100	CONSULTANT FEES	12,000.00	24,000.00	0.00	4,691.20	7,308.80	12,000.00	50.00 %
100-15400-522210	MAINTENANCE AGEEMENTS	500.00	500.00	0.00	0.00	0.00	500.00	100.00 %
100-15400-522320	RENTAL OF EQUIP & VEHICLE	6,400.00	6,400.00	0.00	6,000.00	0.00	400.00	6.25 %
100-15400-522341	COPIER RENTAL	700.00	700.00	50.65	303.90	306.10	90.00	12.86 %
100-15400-523110	INSURANCE GEN. LIABILITY	185,800.00	185,800.00	0.00	222,711.20	0.00	-36,911.20	-19.87 %
100-15400-523300	ADVERTISING	5,000.00	5,000.00	0.00	1,364.68	0.00	3,635.32	72.71 %
100-15400-523400	PRINTING & BINDING	500.00	500.00	0.00	705.99	0.00	-205.99	-41.20 %
100-15400-523500	TRAVEL	3,500.00	3,500.00	570.93	969.93	0.00	2,530.07	72.29 %
100-15400-523600	DUES & FEES	700.00	700.00	0.00	130.00	0.00	570.00	81.43 %
100-15400-523700	EDUCATION & TRAINING	3,000.00	3,000.00	0.00	0.00	0.00	3,000.00	100.00 %
100-15400-523708	TRAINING & DEVELOPMENT	30,000.00	30,000.00	0.00	3,500.00	0.00	26,500.00	88.33 %
100-15400-523850	PERSONNEL SERVICE	15,000.00	15,000.00	0.00	7,734.41	5,766.80	1,498.79	9.99 %
100-15400-523851	INTERN HELP	10,000.00	10,000.00	1,156.00	1,156.00	0.00	8,844.00	88.44 %
100-15400-523855	CONTRACT SERVICES	2,500.00	2,500.00	0.00	1,140.00	0.00	1,360.00	54.40 %
100-15400-523909	CREDIT CARD EXPENSES	1,500.00	1,500.00	0.00	0.00	0.00	1,500.00	100.00 %
100-15400-523930	DRUG TESTING, VACCINES	1,500.00	1,500.00	0.00	1,199.00	301.00	0.00	0.00 %
100-15400-523936	HR EXPENSES	1,500.00	1,500.00	0.00	1,827.43	0.00	-327.43	-21.83 %
100-15400-523937	HEALTH & WELLNESS	55,000.00	55,000.00	0.00	43,533.50	6,074.60	5,391.90	9.80 %
100-15400-523940	POSTAGE	250.00	250.00	0.00	231.09	0.00	18.91	7.56 %
100-15650-521200	PROFESSIONAL FEES	10,000.00	5,000.00	0.00	0.00	0.00	5,000.00	100.00 %
100-15650-521230	ENGINEERING FEES	5,000.00	5,000.00	0.00	0.00	-784.00	5,784.00	115.68 %
100-15650-522210	MAINTENANCE AGREEMENTS	50,000.00	45,000.00	319.16	11,143.71	31,546.24	2,310.05	5.13 %
100-15650-522219	LANDSCAPING	330,000.00	330,000.00	21,058.00	134,670.59	126,648.00	68,681.41	20.81 %
100-15650-522220	MAINTENANCE & CLEANING	5,000.00	5,000.00	0.00	1,827.93	2,572.07	600.00	12.00 %
100-15650-522224	FOUNTAIN MAINTENANCE	7,500.00	1,800.00	0.00	0.00	0.00	1,800.00	100.00 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-15650-522230	EQUIPMENT REPAIRS	10,000.00	8,000.00	89.30	286.92	0.00	7,713.08	96.41 %
100-15650-522250	AUTO & TRUCK REPAIR	1,000.00	1,000.00	0.00	120.00	0.00	880.00	88.00 %
100-15650-522310	Rental of Land and Building	1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00 %
100-15650-522318	FACILITY CLEANING POLICE DEPT	25,200.00	25,200.00	0.00	10,500.00	14,700.00	0.00	0.00 %
100-15650-522319	FACILITY CLEANING PW ADMIN	8,520.00	8,520.00	0.00	3,550.00	4,970.00	0.00	0.00 %
100-15650-522320	RENTAL OF EQUIP & VEHICLE	1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00 %
100-15650-522321	FACILITY CLEANING CITY HALL	30,240.00	30,240.00	0.00	16,100.00	17,640.00	-3,500.00	-11.57 %
100-15650-522322	FACILITY CLEANING MMCC	37,200.00	42,900.00	0.00	17,875.00	25,025.00	0.00	0.00 %
100-15650-522323	FACILITY CLEANING TSCC	8,520.00	8,520.00	0.00	3,550.00	4,970.00	0.00	0.00 %
100-15650-522324	FACILITY CLEANING MUNICIPAL COURT	10,692.00	10,692.00	0.00	4,455.00	6,237.00	0.00	0.00 %
100-15650-522325	FACILITY CLEANING MAINTENANCE SHOP	7,680.00	7,680.00	0.00	3,200.00	4,480.00	0.00	0.00 %
100-15650-522326	FACILITY CLEANING WWTP	7,680.00	7,680.00	0.00	3,200.00	4,480.00	0.00	0.00 %
100-15650-522333	EQUIPMENT REPAIRS CITY HALL	10,000.00	10,000.00	0.00	4,292.96	1,960.00	3,747.04	37.47 %
100-15650-522334	EQUIPMENT REPAIRS MMCC	5,000.00	5,000.00	0.00	1,553.45	2,546.80	899.75	18.00 %
100-15650-522335	EQUIPMENT REPAIRS TSCC	3,000.00	3,000.00	0.00	755.00	0.00	2,245.00	74.83 %
100-15650-522336	EQUIPMENT REPAIRS MUNICIPAL COURT	10,000.00	10,000.00	0.00	0.00	0.00	10,000.00	100.00 %
100-15650-522337	EQUIPMENT REPAIRS MAINTENANCE SHOP	5,000.00	10,000.00	0.00	160.00	7,795.80	2,044.20	20.44 %
100-15650-522338	EQUIPMENT REPAIRS WWTP	1,000.00	1,000.00	0.00	0.00	113.50	886.50	88.65 %
100-15650-522339	EQUIPMENT REPAIRS PW ADMIN	5,000.00	5,000.00	0.00	200.00	0.00	4,800.00	96.00 %
100-15650-522340	EQUIPMENT REPAIRS POLICE DEPARTMENT	5,500.00	5,500.00	0.00	2,203.49	0.00	3,296.51	59.94 %
100-15650-523231	CELL PHONES	2,000.00	2,000.00	0.00	0.00	0.00	2,000.00	100.00 %
100-15650-523310	PUBLIC NOTICES	100.00	100.00	0.00	105.00	0.00	-5.00	-5.00 %
100-15650-523500	TRAVEL	2,500.00	2,500.00	0.00	850.47	0.00	1,649.53	65.98 %
100-15650-523700	EDUCATION & TRAINING	3,500.00	3,500.00	0.00	994.16	837.50	1,668.34	47.67 %
100-25000-521225	INTERPRETER	1,000.00	2,000.00	0.00	818.60	181.40	1,000.00	50.00 %
100-25000-521310	COURT SOFTWARE	26,000.00	20,685.00	0.00	19,072.57	0.00	1,612.43	7.80 %
100-25000-521335	SHREDING	900.00	900.00	0.00	570.55	0.00	329.45	36.61 %
100-25000-522341	COPIER RENTAL	3,000.00	3,000.00	270.57	1,623.42	1,625.58	-249.00	-8.30 %
100-25000-523220	GEORGIA TECHNOLOGY AUTH.	0.00	150.00	0.00	55.65	94.35	0.00	0.00 %
100-25000-523245	TELECOMMUNICATIONS	0.00	375.00	0.00	0.00	0.00	375.00	100.00 %
100-25000-523400	PRINTING & BINDING	2,700.00	3,450.00	0.00	552.00	160.65	2,737.35	79.34 %
100-25000-523500	TRAVEL	1,700.00	1,700.00	-498.00	632.00	0.00	1,068.00	62.82 %
100-25000-523600	DUES & FEES	0.00	1,040.00	0.00	413.04	0.00	626.96	60.28 %
100-25000-523700	EDUCATION & TRAINING	2,000.00	2,000.00	0.00	0.00	0.00	2,000.00	100.00 %
100-25000-523850	PERSONNEL SERVICE	0.00	0.00	900.00	1,800.00	0.00	-1,800.00	0.00 %
100-25000-523851	INTERN HELP	0.00	0.00	1,308.00	1,308.00	0.00	-1,308.00	0.00 %
100-25000-523940	POSTAGE	1,500.00	1,500.00	0.00	1,016.78	0.00	483.22	32.21 %
100-32100-521201	PROFESSIONAL SERVICES	4,500.00	4,500.00	0.00	650.00	0.00	3,850.00	85.56 %
100-32100-521335	SHREDING	0.00	0.00	0.00	572.17	0.00	-572.17	0.00 %
100-32100-522200	REPAIRS & MAINTENANCE	12,500.00	12,500.00	2,169.82	3,996.57	0.00	8,503.43	68.03 %
100-32100-522210	MAINTENANCE AGREEMENTS	41,000.00	41,000.00	0.00	0.00	8,689.92	32,310.08	78.81 %
100-32100-522250	AUTO & TRUCK REPAIR	43,000.00	43,000.00	0.00	2,381.54	31,353.46	9,265.00	21.55 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-32100-522320	RENTAL OF EQUIP & VEHICLE	4,000.00	14,592.66	0.00	657.96	4,934.70	9,000.00	61.67 %
100-32100-522341	COPIER RENTAL	5,100.00	5,100.00	417.54	2,505.24	2,505.76	89.00	1.75 %
100-32100-523110	LIABILITY INSURANCE	15,000.00	15,000.00	0.00	0.00	0.00	15,000.00	100.00 %
100-32100-523220	GEORGIA TECHNOLOGY AUTH.	325.00	325.00	0.00	222.60	327.40	-225.00	-69.23 %
100-32100-523400	PRINTING & BINDING	550.00	550.00	0.00	1,406.16	0.00	-856.16	-155.67 %
100-32100-523500	TRAVEL	30,750.00	30,750.00	166.00	3,441.21	0.00	27,308.79	88.81 %
100-32100-523600	DUES & FEES	6,500.00	6,500.00	0.00	2,604.21	0.00	3,895.79	59.94 %
100-32100-523700	EDUCATION & TRAINING	85,000.00	85,000.00	0.00	17,227.00	5,000.00	62,773.00	73.85 %
100-32100-523800	LICENSES	2,500.00	2,500.00	0.00	0.00	0.00	2,500.00	100.00 %
100-32100-523855	CONTRACT SERVICES	10,000.00	10,000.00	0.00	10,000.00	0.00	0.00	0.00 %
100-32100-523860	P O SALARIES - EXTRA DUTY	68,000.00	40,000.00	0.00	0.00	0.00	40,000.00	100.00 %
100-32100-523929	PRE-EMPLOYMENT SCREENING	7,000.00	20,000.00	600.00	10,476.16	8,900.00	623.84	3.12 %
100-32100-523930	DRUG TESTING, VACCINES	4,000.00	4,000.00	0.00	2,910.00	1,090.00	0.00	0.00 %
100-32100-523940	POSTAGE	1,000.00	1,000.00	0.00	67.30	0.00	932.70	93.27 %
100-42200-521201	PROFESSIONAL	25,000.00	25,000.00	0.00	3,190.00	19,310.00	2,500.00	10.00 %
100-42200-521230	ENGINEERING FEES	25,000.00	25,000.00	0.00	216.00	22,284.00	2,500.00	10.00 %
100-42200-522000	ROW LANDSCAPING	400,000.00	358,000.00	0.00	120,949.20	185,002.30	52,048.50	14.54 %
100-42200-522150	SURVEILLANCE CAMERAS	13,500.00	10,000.00	0.00	0.00	0.00	10,000.00	100.00 %
100-42200-522210	MAINTENANCE AGREEMENTS	5,000.00	5,000.00	0.00	0.00	1,232.00	3,768.00	75.36 %
100-42200-522220	MAINTENANCE & CLEANING	3,000.00	3,000.00	280.10	1,696.40	1,303.60	0.00	0.00 %
100-42200-522230	EQUIPMENT REPAIRS	35,000.00	35,000.00	0.00	24,091.59	3,923.20	6,985.21	19.96 %
100-42200-522241	LMIG S013642-PRC,3 STRTS	288,000.00	288,000.00	0.00	3,186.00	32,918.00	251,896.00	87.46 %
100-42200-522242	STREET/TRACK MAIN. & REP.	20,000.00	20,000.00	0.00	7,914.75	16.43	12,068.82	60.34 %
100-42200-522250	AUTO & TRUCK REPAIR	15,000.00	15,000.00	0.00	6,585.55	-977.80	9,392.25	62.62 %
100-42200-522253	DAMAGE TO CITIZEN VEHICLE	2,500.00	2,500.00	0.00	10,361.70	0.00	-7,861.70	-314.47 %
100-42200-522320	RENTAL OF EQUIP & VEHICLE	5,000.00	5,000.00	0.00	0.00	0.00	5,000.00	100.00 %
100-42200-522341	COPIER RENTAL	5,000.00	5,000.00	240.01	1,440.06	1,440.94	2,119.00	42.38 %
100-42200-523245	TELECOMMUNICATIONS	5,000.00	5,000.00	1,102.53	6,517.00	0.00	-1,517.00	-30.34 %
100-42200-523310	PUBLIC NOTICES	100.00	100.00	0.00	0.00	0.00	100.00	100.00 %
100-42200-523400	PRINTING & BINDING	100.00	100.00	0.00	224.08	0.00	-124.08	-124.08 %
100-42200-523500	TRAVEL	3,500.00	3,500.00	368.00	2,675.92	0.00	824.08	23.55 %
100-42200-523600	DUES & FEES	1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00 %
100-42200-523700	EDUCATION & TRAINING	7,500.00	7,500.00	0.00	1,584.20	837.50	5,078.30	67.71 %
100-42200-523850	PERSONNEL SERVICE	80,000.00	80,000.00	0.00	31,767.43	48,232.57	0.00	0.00 %
100-42200-523851	UTILITY PROTECTION SERV.	5,000.00	5,000.00	0.00	0.00	0.00	5,000.00	100.00 %
100-42200-523930	DRUG TESTING, VACCINES	1,000.00	1,000.00	0.00	123.00	877.00	0.00	0.00 %
100-42200-523960	REIMBURSEMENT/REPAIRS	2,500.00	2,500.00	0.00	0.00	0.00	2,500.00	100.00 %
100-61900-523300	ADVERTISING	30,000.00	30,000.00	0.00	0.00	0.00	30,000.00	100.00 %
100-62200-522151	SURVEILLANCE CAMERAS-REEVES CREEK TRAIL	5,500.00	5,500.00	0.00	0.00	0.00	5,500.00	100.00 %
100-62200-522152	SURVEILLANCE CAMERAS-MEMORIAL PARK	37,500.00	37,500.00	0.00	0.00	0.00	37,500.00	100.00 %
100-62200-522153	SURVEILLANCE CAMERAS-CLARK PARK	37,500.00	37,500.00	0.00	0.00	0.00	37,500.00	100.00 %
100-62200-522154	SURVEILLANCE CAMERAS-GARDNER PARK	27,500.00	27,500.00	0.00	0.00	0.00	27,500.00	100.00 %

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100-62200-522224	FOUNTAIN MAINTENANCE	15,000.00	15,000.00	968.80	1,935.32	0.00	13,064.68	87.10 %
100-62200-522225	BRIDGE MAINTENANCE	5,000.00	5,000.00	0.00	0.00	0.00	5,000.00	100.00 %
100-62200-522230	EQUIPMENT REPAIRS	0.00	6,000.00	1,486.26	4,256.22	0.00	1,743.78	29.06 %
100-62200-523220	GEORGIA TECHNOLOGY AUTH.	0.00	600.00	0.00	120.75	179.25	300.00	50.00 %
100-62200-523240	AT&T CLUB SERVICE	4,500.00	4,500.00	0.00	5,901.86	0.00	-1,401.86	-31.15 %
100-72000-521200	PROFESSIONAL FEES	10,000.00	10,000.00	0.00	0.00	0.00	10,000.00	100.00 %
100-72000-521202	CONSULTING SERVICES - BSD	346,000.00	294,300.00	0.00	18,811.01	180,022.34	95,466.65	32.44 %
100-72000-521203	CONSULTING SERVICES - ENGINEERING	54,000.00	54,000.00	0.00	19,000.00	14,250.00	20,750.00	38.43 %
100-72000-521310	SOFTWARE	0.00	17,600.00	0.00	17,547.35	0.00	52.65	0.30 %
100-72000-522210	MAINTENANCE AGREEMENT	5,000.00	-51,500.00	0.00	0.00	0.00	-51,500.00	100.00 %
100-72000-522250	AUTO & TRUCK REPAIR	1,000.00	1,000.00	0.00	878.84	0.00	121.16	12.12 %
100-72000-522341	COPIER RENTAL	600.00	600.00	0.00	0.00	0.00	600.00	100.00 %
100-72000-523400	PRINTING & BINDING	500.00	500.00	0.00	169.24	0.00	330.76	66.15 %
100-72000-523500	TRAVEL	1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00 %
100-72000-523600	DUES & FEES	500.00	500.00	0.00	0.00	0.00	500.00	100.00 %
100-72000-523700	EDUCATION & TRAINING	1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00 %
100-72000-523850	PERSONNEL SERVICES	0.00	34,300.00	0.00	6,184.53	3,000.00	25,115.47	73.22 %
100-72000-523851	INTERN HELP	0.00	0.00	1,900.00	1,900.00	0.00	-1,900.00	0.00 %
100-72000-523940	POSTAGE	100.00	100.00	0.00	0.00	0.00	100.00	100.00 %
100-74100-521150	ZONING BOARD STIPEND	4,100.00	4,100.00	0.00	675.00	0.00	3,425.00	83.54 %
100-74100-521200	PROFESSIONAL SERVICES	15,000.00	11,034.07	0.00	2,067.98	-15,350.40	24,316.49	220.38 %
100-74100-521300	TECHNICAL SERVICES	5,500.00	2,695.93	1,365.00	1,365.00	0.00	1,330.93	49.37 %
100-74100-521310	SOFTWARE	7,000.00	13,770.00	0.00	12,272.34	143.16	1,354.50	9.84 %
100-74100-522250	AUTO & TRUCK REPAIR	400.00	400.00	0.00	0.00	0.00	400.00	100.00 %
100-74100-522341	COPIER RENTAL	1,000.00	1,000.00	348.84	2,093.04	2,638.16	-3,731.20	-373.12 %
100-74100-523300	ADVERTISEMENT	4,000.00	4,000.00	0.00	421.00	0.00	3,579.00	89.48 %
100-74100-523400	PRINTING & BINDING	4,000.00	4,000.00	109.00	2,440.90	0.00	1,559.10	38.98 %
100-74100-523500	TRAVEL	4,500.00	4,500.00	0.00	0.00	0.00	4,500.00	100.00 %
100-74100-523600	DUES & FEES	775.00	775.00	0.00	0.00	0.00	775.00	100.00 %
100-74100-523700	EDUCATION & TRAINING	3,500.00	3,500.00	0.00	3,695.00	0.00	-195.00	-5.57 %
100-74100-523701	ZONING ADVISORY BD ED & TRAINING	400.00	400.00	0.00	0.00	0.00	400.00	100.00 %
100-74100-523940	POSTAGE	500.00	500.00	0.00	0.00	0.00	500.00	100.00 %
100-75100-521200	PROFESSIONAL SERVICES	20,000.00	20,000.00	0.00	9,676.00	13,128.00	-2,804.00	-14.02 %
100-75100-522210	MAINTENANCE AGREEMENTS	2,500.00	0.00	0.00	0.00	0.00	0.00	0.00 %
100-75100-522341	Copier Rental	1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00 %
100-75100-523240	AT&T Club Service	3,000.00	3,000.00	0.00	0.00	0.00	3,000.00	100.00 %
100-75100-523400	PRINTING & BINDING	1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00 %
100-75100-523500	TRAVEL	5,000.00	5,000.00	0.00	47.03	0.00	4,952.97	99.06 %
100-75100-523600	DUES & FEES	2,000.00	2,000.00	0.00	780.00	500.00	720.00	36.00 %
100-75100-523700	EDUCATION & TRAINING	5,000.00	5,000.00	0.00	0.00	0.00	5,000.00	100.00 %
100-75100-523708	Ed Incentives	50,000.00	50,000.00	0.00	0.00	0.00	50,000.00	100.00 %
100-75100-523851	INTERN HELP	2,000.00	4,500.00	0.00	2,081.25	0.00	2,418.75	53.75 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-75100-523940	POSTAGE	500.00	500.00	0.00	0.00	0.00	500.00	100.00 %
100-75500-521200	PROFESSIONAL FEES	5,000.00	5,000.00	0.00	2,168.89	0.00	2,831.11	56.62 %
100-75500-522341	COPIER RENTAL	1,700.00	1,700.00	139.20	835.20	835.80	29.00	1.71 %
100-75500-523240	AT&T CLUB SERVICE	3,000.00	3,000.00	0.00	3,187.92	0.00	-187.92	-6.26 %
100-75500-523400	PRINTING & BINDING	2,500.00	2,500.00	0.00	493.46	0.00	2,006.54	80.26 %
100-75500-523500	TRAVEL	5,000.00	5,000.00	0.00	427.75	0.00	4,572.25	91.45 %
100-75500-523520	MAIN STREET BOARD TRAVEL	3,500.00	3,500.00	0.00	309.00	0.00	3,191.00	91.17 %
100-75500-523600	DUES & FEES	1,300.00	1,300.00	0.00	750.00	0.00	550.00	42.31 %
100-75500-523700	EDUCATION & TRAINING	3,050.00	3,050.00	0.00	680.00	0.00	2,370.00	77.70 %
100-75500-523720	MAIN STREET BOARD EDUCATION & TRAINING	3,575.00	3,575.00	0.00	605.00	0.00	2,970.00	83.08 %
100-75500-523851	INTERN HELP	2,000.00	2,000.00	0.00	4,856.25	0.00	-2,856.25	-142.81 %
100-75500-523940	POSTAGE	200.00	200.00	0.00	0.00	0.00	200.00	100.00 %
100-75500-523945	WEB SITE	4,000.00	4,000.00	0.00	495.00	693.00	2,812.00	70.30 %
100-75700-521200	PROFESSIONAL SERVICES	2,000.00	0.00	0.00	0.00	0.00	0.00	0.00 %
100-75700-521300	Technical Services	5,600.00	5,700.00	3,766.67	3,766.67	0.00	1,933.33	33.92 %
100-75700-521310	SOFTWARE	1,500.00	4,235.00	0.00	4,235.81	0.00	-0.81	-0.02 %
100-75700-522210	MAINTENANCE AGREEMENTS	4,000.00	3,165.00	0.00	0.00	0.00	3,165.00	100.00 %
100-75700-522341	COPIER RENTAL	1,700.00	1,700.00	134.12	804.72	805.28	90.00	5.29 %
100-75700-523400	PRINTING & BINDING	2,000.00	2,000.00	0.00	42.76	0.00	1,957.24	97.86 %
100-75700-523500	TRAVEL	1,200.00	1,200.00	0.00	0.00	0.00	1,200.00	100.00 %
100-75700-523600	DUES & FEES	250.00	250.00	0.00	0.00	0.00	250.00	100.00 %
100-75700-523700	EDUCATION & TRAINING	1,200.00	1,200.00	0.00	0.00	0.00	1,200.00	100.00 %
	Class: 52 - PURCHASED / CONTRACTED SERVICES Total:	**4,258,332.00**	**4,194,605.95**	**133,338.98**	**1,689,323.16**	**938,349.52**	**1,566,933.27**	**37.36%**
Class: 53 - SUPPLIES								
100-11100-531130	OFFICE SUPPLIES	2,500.00	2,500.00	0.00	503.16	61.47	1,935.37	77.41 %
100-11100-531700	MISCELLANEOUS EXPENSE	4,000.00	4,000.00	0.00	711.09	0.00	3,288.91	82.22 %
100-11100-531701	HOSPITALITY/FOOD/BEVERAGE	7,000.00	7,000.00	36.00	2,217.10	0.00	4,782.90	68.33 %
100-11100-531747	CIVIC EVENTS	15,000.00	15,000.00	0.00	5,495.30	89.12	9,415.58	62.77 %
100-11100-531748	YOUTH ADVISORY COUNCIL	21,500.00	21,500.00	0.00	8,154.57	0.00	13,345.43	62.07 %
100-11100-531750	UNIFORMS	400.00	400.00	0.00	0.00	0.00	400.00	100.00 %
100-11100-531751	UNIFORMS MAYOR	400.00	400.00	0.00	0.00	0.00	400.00	100.00 %
100-11100-531752	UNIFORMS DISTRICT 5	400.00	400.00	0.00	1,147.70	0.00	-747.70	-186.93 %
100-11100-531753	UNIFORMS DISTRICT 3	400.00	400.00	0.00	335.00	0.00	65.00	16.25 %
100-11100-531754	UNIFORMS DISTRICT 1	400.00	400.00	0.00	0.00	0.00	400.00	100.00 %
100-11100-531755	UNIFORMS DISTRICT 4	400.00	400.00	0.00	0.00	0.00	400.00	100.00 %
100-11100-531756	UNIFORMS DISTRICT 2	400.00	400.00	0.00	0.00	0.00	400.00	100.00 %
100-11300-531120	ELECTION EXPENSE	6,000.00	6,000.00	0.00	7,462.30	0.00	-1,462.30	-24.37 %
100-11300-531130	OFFICE SUPPLIES	2,500.00	2,500.00	0.00	104.61	110.97	2,284.42	91.38 %
100-11300-531140	SUPPLIES & MATERIALS	2,500.00	2,500.00	0.00	179.83	253.99	2,066.18	82.65 %
100-11300-531600	SMALL EQUIPMENT - NON CAPITAL	1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00 %
100-11300-531701	HOSPITALITY/FOOD/BEVERAGE	0.00	0.00	0.00	828.28	0.00	-828.28	0.00 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-11300-531725	PROMOTIONAL ITEMS	3,000.00	3,000.00	0.00	0.00	0.00	3,000.00	100.00 %
100-11300-531750	UNIFORMS	750.00	750.00	0.00	381.39	80.00	288.61	38.48 %
100-13000-531130	OFFICE SUPPLIES	2,500.00	2,500.00	0.00	585.55	667.67	1,246.78	49.87 %
100-13000-531700	MISCELLANEOUS EXPENSE	5,000.00	5,000.00	0.00	2,438.42	0.00	2,561.58	51.23 %
100-13000-531701	HOSPITALITY/FOOD/BEVERAGE	5,000.00	5,000.00	0.00	169.11	0.00	4,830.89	96.62 %
100-13000-531750	UNIFORMS	1,000.00	1,000.00	296.00	296.00	0.00	704.00	70.40 %
100-15100-531130	OFFICE SUPPLIES	3,000.00	5,000.00	0.00	2,577.57	1,756.13	666.30	13.33 %
100-15100-531140	SUPPLIES & MATERIALS	500.00	500.00	0.00	363.19	0.00	136.81	27.36 %
100-15100-531700	MISCELLANEOUS EXPENSE	500.00	500.00	0.00	171.58	0.00	328.42	65.68 %
100-15100-531701	HOSPITALITY/FOOD/BEVERAGE	750.00	750.00	0.00	301.22	0.00	448.78	59.84 %
100-15100-531750	UNIFORMS	500.00	500.00	0.00	0.00	0.00	500.00	100.00 %
100-15110-531140	SUPPLIES & MATERIALS (CITY HALL)	10,000.00	10,000.00	0.00	2,812.92	105.27	7,081.81	70.82 %
100-15160-531140	SUPPLIES & MATERIALS	2,000.00	2,000.00	0.00	459.06	0.00	1,540.94	77.05 %
100-15160-531600	SMALL EQUIPMENT - NON CAPITAL	900.00	900.00	0.00	0.00	0.00	900.00	100.00 %
100-15160-531750	UNIFORMS	300.00	300.00	0.00	0.00	0.00	300.00	100.00 %
100-15350-531110	COMPUTER EXPENSE	45,000.00	45,000.00	5,175.06	10,472.20	0.00	34,527.80	76.73 %
100-15350-531130	OFFICE SUPPLIES	1,500.00	2,500.00	0.00	23.24	1,970.96	505.80	20.23 %
100-15350-531140	SUPPLIES & MATERIALS	2,500.00	2,500.00	0.00	0.00	269.00	2,231.00	89.24 %
100-15350-531142	HAND TOOLS & SMALL EQUIP	2,000.00	2,000.00	0.00	0.00	0.00	2,000.00	100.00 %
100-15350-531750	UNIFORMS	500.00	500.00	0.00	393.74	0.00	106.26	21.25 %
100-15400-531110	COMPUTER EXPENSE	0.00	0.00	0.00	166.42	0.00	-166.42	0.00 %
100-15400-531130	OFFICE SUPPLIES	500.00	500.00	0.00	0.00	0.00	500.00	100.00 %
100-15400-531700	MISCELLANEOUS EXPENSE	1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00 %
100-15400-531701	HOSPITALITY/FOOD/BEVERAGE	3,000.00	3,000.00	0.00	0.00	0.00	3,000.00	100.00 %
100-15400-531710	CHRISTMAS DECORATIONS	250.00	250.00	0.00	0.00	0.00	250.00	100.00 %
100-15400-531750	UNIFORM	100.00	100.00	0.00	0.00	0.00	100.00	100.00 %
100-15650-531130	OFFICE SUPPLIES	500.00	500.00	0.00	0.00	42.98	457.02	91.40 %
100-15650-531140	SUPPLIES & MATERIALS	1,000.00	3,000.00	0.00	631.23	1,021.06	1,347.71	44.92 %
100-15650-531142	HAND TOOLS & SMALL EQUIP.	2,500.00	2,500.00	0.00	1,070.94	0.00	1,429.06	57.16 %
100-15650-531143	SECURITY UPGRADE	25,000.00	72,000.00	6,459.12	14,881.81	53,927.20	3,190.99	4.43 %
100-15650-531224	GA PWR,LIGHTS,TAG OFFICE	3,000.00	3,000.00	0.00	7,851.61	0.00	-4,851.61	-161.72 %
100-15650-531225	GA PWR,4640 CITY HALL	78,000.00	78,000.00	0.00	44,067.00	0.00	33,933.00	43.50 %
100-15650-531271	Admin Vehicles	0.00	0.00	0.00	898.85	0.00	-898.85	0.00 %
100-15650-531280	Cable	1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00 %
100-15650-531700	MISCELLANEOUS EXPENSE	1,500.00	1,500.00	0.00	175.24	420.00	904.76	60.32 %
100-15650-531720	SIGNS	500.00	500.00	0.00	0.00	0.00	500.00	100.00 %
100-15650-531740	TIRE EXPENSE	1,000.00	1,000.00	0.00	519.56	0.00	480.44	48.04 %
100-15650-531750	UNIFORMS	1,500.00	1,500.00	200.00	916.72	583.28	0.00	0.00 %
100-25000-531130	OFFICE SUPPLIES	0.00	2,000.00	0.00	830.50	207.63	961.87	48.09 %
100-25000-531211	NTRL GAS,4545 MUNI COURT	2,700.00	2,700.00	97.81	811.48	0.00	1,888.52	69.95 %
100-25000-531227	GA PWR,4602 MUNICIPAL CRT	5,550.00	5,550.00	0.00	5,188.90	0.00	361.10	6.51 %
100-25000-531750	UNIFORMS	300.00	300.00	0.00	0.00	0.00	300.00	100.00 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-32100-531130	OFFICE SUPPLIES	10,000.00	10,000.00	0.00	2,599.42	1,016.28	6,384.30	63.84 %
100-32100-531140	SUPPLIES & MATERIALS	42,000.00	42,000.00	1,060.00	30,544.73	9,713.28	1,741.99	4.15 %
100-32100-531211	NTRL GAS, 4545 MUNI COURT	3,900.00	3,900.00	268.90	2,488.13	0.00	1,411.87	36.20 %
100-32100-531222	GA POWER ELECTRICITY	12,300.00	12,300.00	0.00	11,764.94	0.00	535.06	4.35 %
100-32100-531270	ENERGY-GASOLINE/DIESEL	175,000.00	175,000.00	0.00	95,905.50	0.00	79,094.50	45.20 %
100-32100-531290	CABLE	1,920.00	1,920.00	0.00	0.00	0.00	1,920.00	100.00 %
100-32100-531600	SMALL EQUIPMENT	45,000.00	40,000.00	0.00	698.24	1,106.99	38,194.77	95.49 %
100-32100-531700	MISCELLANEOUS EXPENSE	15,000.00	15,000.00	996.03	3,114.57	2,895.59	8,989.84	59.93 %
100-32100-531701	HOSPITAL/FOOD/BEVERAGE	6,000.00	6,000.00	0.00	1,922.14	0.00	4,077.86	67.96 %
100-32100-531725	PROMOTIONAL ITEMS	10,000.00	10,000.00	0.00	1,205.00	0.00	8,795.00	87.95 %
100-32100-531740	TIRE EXPENSE	6,000.00	6,000.00	0.00	0.00	6,000.00	0.00	0.00 %
100-32100-531750	UNIFORMS	50,000.00	70,000.00	5,127.79	29,772.25	35,927.74	4,300.01	6.14 %
100-32100-531780	COMMUNITY DONATIONS - POLICE	0.00	0.00	0.00	7,553.83	0.00	-7,553.83	0.00 %
100-42200-531130	OFFICE SUPPLIES	1,000.00	1,000.00	0.00	226.85	455.55	317.60	31.76 %
100-42200-531140	SUPPLIES & MATERIALS	15,000.00	15,000.00	0.00	9,911.81	1,760.48	3,327.71	22.18 %
100-42200-531142	HAND TOOLS & SMALL EQUIP.	15,000.00	15,000.00	0.00	12,785.36	0.00	2,214.64	14.76 %
100-42200-531145	MOSQUITO SPRAYING	1,500.00	1,500.00	0.00	0.00	625.00	875.00	58.33 %
100-42200-531211	NTRL GAS,4545 MUNI COURT	9,000.00	9,000.00	476.60	3,736.94	0.00	5,263.06	58.48 %
100-42200-531222	GA POWER ELECTRICITY	21,000.00	21,000.00	0.00	15,780.82	0.00	5,219.18	24.85 %
100-42200-531233	STREET LIGHTS, OUTSIDE	750,000.00	750,000.00	1,215.00	336,971.16	0.00	413,028.84	55.07 %
100-42200-531270	ENERGY-GASOLINE/DIESEL	45,000.00	45,000.00	0.00	25,644.10	0.00	19,355.90	43.01 %
100-42200-531700	MISCELLANEOUS EXPENSE	2,500.00	1,500.00	0.00	0.00	0.00	1,500.00	100.00 %
100-42200-531710	CHRISTMAS DECORATIONS	15,000.00	15,000.00	0.00	0.00	0.00	15,000.00	100.00 %
100-42200-531720	SIGNS	10,000.00	10,000.00	0.00	3,955.96	0.00	6,044.04	60.44 %
100-42200-531740	TIRE EXPENSE	7,500.00	5,500.00	235.00	235.00	0.00	5,265.00	95.73 %
100-42200-531750	UNIFORMS	11,000.00	17,500.00	2,597.40	7,997.11	7,980.26	1,522.63	8.70 %
100-61900-531701	HOSPITALITY	1,500.00	1,500.00	0.00	636.00	0.00	864.00	57.60 %
100-61900-531705	HOLIDAY FEST/TREE LIGHTING	40,000.00	40,000.00	0.00	1,289.81	7,425.67	31,284.52	78.21 %
100-61900-531710	CHRISTMAS DECORATIONS	10,000.00	10,000.00	0.00	0.00	0.00	10,000.00	100.00 %
100-61900-531720	SIGNS	3,000.00	3,000.00	0.00	0.00	0.00	3,000.00	100.00 %
100-61900-531727	MEMORIAL DAY MARCH	4,000.00	4,000.00	2,082.50	3,312.50	75.15	612.35	15.31 %
100-61900-531731	PRETTY IN PINK	25,000.00	25,000.00	0.00	4,950.00	11,225.00	8,825.00	35.30 %
100-61900-531732	CAREER FAIRS	1,500.00	1,500.00	0.00	58.93	0.00	1,441.07	96.07 %
100-61900-531733	9/11 CEREMONY	0.00	0.00	0.00	0.00	360.00	-360.00	0.00 %
100-61900-531734	BRIDGEFEST	120,000.00	120,000.00	0.00	24,550.00	55,380.02	40,069.98	33.39 %
100-61900-531736	FOOD TRUCKS	40,000.00	40,000.00	900.00	12,876.12	17,470.01	9,653.87	24.13 %
100-61900-531737	VETERAN'S DAY PARADE	10,000.00	10,000.00	0.00	0.00	0.00	10,000.00	100.00 %
100-61900-531757	BACK TO SCHOOL	13,000.00	13,000.00	0.00	0.00	4,108.00	8,892.00	68.40 %
100-61900-531758	JULY 4TH EVENT	140,000.00	140,000.00	8,900.00	41,400.00	11,490.00	87,110.00	62.22 %
100-61900-531759	JUNETEENTH EVENT	120,000.00	120,000.00	7,995.00	39,645.00	9,964.40	70,390.60	58.66 %
100-61900-531760	VOLUNTEER GALA	12,000.00	12,000.00	0.00	1,142.86	300.00	10,557.14	87.98 %
100-62200-531140	SUPPLIES & MATERIALS	20,000.00	13,400.00	0.00	5,865.33	27.88	7,506.79	56.02 %

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100-62200-531142	HAND TOOLS & SMALL EQUIP.	3,500.00	3,500.00	0.00	0.00	0.00	3,500.00	100.00 %
100-62200-531222	GA POWER ELECTRICITY	25,000.00	25,000.00	0.00	67,169.22	0.00	-42,169.22	-168.68 %
100-62200-531700	MISCELLANEOUS EXPENSE	0.00	0.00	0.00	1,325.00	0.00	-1,325.00	0.00 %
100-72000-531100	GEN SUPPLIES & MAT	500.00	500.00	0.00	0.00	0.00	500.00	100.00 %
100-72000-531140	OFFICE SUPPLIES	500.00	500.00	0.00	182.50	0.00	317.50	63.50 %
100-72000-531270	ENERGY-GASOLINE/DIESEL	3,000.00	3,000.00	0.00	916.91	0.00	2,083.09	69.44 %
100-72000-531750	UNIFORMS	700.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00 %
100-74100-531100	SUPPLIES & MATERIALS	3,500.00	2,500.00	0.00	1,353.49	0.00	1,146.51	45.86 %
100-74100-531270	ENERGY-GASOLINE/DIESEL	1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00 %
100-74100-531600	SMALL EQUIPMENT - NON-CAPITAL	750.00	750.00	0.00	0.00	0.00	750.00	100.00 %
100-74100-531701	HOSPITALITY/FOOD/BEVERAGE	300.00	1,300.00	0.00	1,140.59	0.00	159.41	12.26 %
100-74100-531750	UNIFORMS	400.00	400.00	65.12	65.12	24.00	310.88	77.72 %
100-75100-531140	SUPPLIES & MATERIALS	1,500.00	1,500.00	0.00	225.15	75.41	1,199.44	79.96 %
100-75100-531701	HOSPITALITY/FOOD/BEVERAGE	3,000.00	3,000.00	0.00	569.46	0.00	2,430.54	81.02 %
100-75100-531750	UNIFORMS	250.00	250.00	0.00	0.00	0.00	250.00	100.00 %
100-75500-531140	SUPPLIES & MATERIALS	2,000.00	2,000.00	0.00	381.73	0.00	1,618.27	80.91 %
100-75500-531227	GA PWR, MAIN STREET	5,000.00	5,000.00	0.00	3,006.75	0.00	1,993.25	39.87 %
100-75500-531701	HOSPITALITY/FOOD/BEVERAGE	3,500.00	3,500.00	0.00	517.54	0.00	2,982.46	85.21 %
100-75500-531707	ENTERTAINMENT	5,000.00	5,000.00	1,864.00	1,917.53	0.00	3,082.47	61.65 %
100-75500-531724	DOWNTOWN BEAUTIFICATION	2,000.00	2,000.00	0.00	0.00	0.00	2,000.00	100.00 %
100-75500-531725	PROMOTIONAL SUPPLIES	2,500.00	2,500.00	0.00	299.31	0.00	2,200.69	88.03 %
100-75500-531750	Uniforms	845.00	845.00	0.00	0.00	0.00	845.00	100.00 %
100-75700-531140	SUPPLIES & MATERIALS	3,000.00	3,000.00	0.00	0.00	0.00	3,000.00	100.00 %
100-75700-531750	UNIFORMS	200.00	200.00	0.00	0.00	0.00	200.00	100.00 %
	Class: 53 - SUPPLIES Total:	**2,189,465.00**	**2,255,665.00**	**46,047.33**	**946,205.10**	**246,973.44**	**1,062,486.46**	**47.10%**
Class: 54 - CAPITAL OUTLAY								
100-11300-542400	COMPUTER SOFTWARE	7,000.00	7,000.00	0.00	2,500.00	0.00	4,500.00	64.29 %
100-15100-541406	STORM WATER/PROPERTY TAX	20,000.00	20,000.00	0.00	0.00	0.00	20,000.00	100.00 %
100-15100-542300	FURNITURE & FIXTURES	500.00	500.00	0.00	0.00	0.00	500.00	100.00 %
100-15100-542400	COMPUTER SOFTWARE	20,000.00	20,000.00	0.00	342.00	-342.00	20,000.00	100.00 %
100-15100-542500	EQUIPMENT	500.00	500.00	0.00	0.00	0.00	500.00	100.00 %
100-15110-542402	AGENDA SOFTWARE	8,000.00	8,000.00	5,756.29	12,790.29	0.00	-4,790.29	-59.88 %
100-15110-542403	CITY-WIDE DIGITAL SOFTWARE CONVERSION	25,000.00	25,000.00	0.00	8,084.17	284.93	16,630.90	66.52 %
100-15110-542404	APP SOFTWARE	10,000.00	10,000.00	0.00	0.00	0.00	10,000.00	100.00 %
100-15110-542526	OPENGOV	50,000.00	50,000.00	0.00	30,529.18	0.00	19,470.82	38.94 %
100-15350-541400	Computer NETWORK INFRASTRUCTURE	45,000.00	45,000.00	0.00	2,685.63	788.40	41,525.97	92.28 %
100-15350-542400	COMPUTER SOFTWARE	60,000.00	60,000.00	0.00	10,166.03	28,515.88	21,318.09	35.53 %
100-15350-542500	EQUIPMENT	40,000.00	39,000.00	0.00	0.00	0.00	39,000.00	100.00 %
100-15650-542400	COMPUTER SOFTWARE	5,000.00	5,000.00	0.00	5,000.00	0.00	0.00	0.00 %
100-15650-542500	Equipment	5,000.00	5,000.00	0.00	0.00	0.00	5,000.00	100.00 %
100-25000-541200	Site Improvements	94,736.00	94,736.00	0.00	7,317.00	0.00	87,419.00	92.28 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-25000-542400	COMPUTER SOFTWARE	1,500.00	1,500.00	0.00	0.00	0.00	1,500.00	100.00 %
100-25000-542500	EQUIPMENT	300.00	300.00	0.00	0.00	0.00	300.00	100.00 %
100-32100-542200	VEHICLES	125,000.00	283,280.00	0.00	216,718.00	0.00	66,562.00	23.50 %
100-32100-542300	FURNITURE & FIXTURES	5,000.00	5,000.00	0.00	188.15	0.00	4,811.85	96.24 %
100-32100-542400	COMPUTER SOFTWARE	131,342.97	131,342.97	0.00	63,671.54	36,228.13	31,443.30	23.94 %
100-32100-542500	EQUIPMENT	375,000.00	334,000.00	0.00	0.00	29,066.28	304,933.72	91.30 %
100-42200-541403	PAVING	25,000.00	25,000.00	0.00	0.00	0.00	25,000.00	100.00 %
100-42200-541404	SIDEWALKS	300,000.00	300,000.00	0.00	5,270.00	291,855.00	2,875.00	0.96 %
100-42200-542200	VEHICLES	240,000.00	240,000.00	0.00	0.00	0.00	240,000.00	100.00 %
100-42200-542400	COMPUTER SOFTWARE	5,500.00	5,500.00	0.00	5,111.21	0.00	388.79	7.07 %
100-42200-542500	EQUIPMENT	200,000.00	200,000.00	130,748.80	186,634.06	7,773.00	5,592.94	2.80 %
100-62200-541209	IMPROVEMENTS	0.00	0.00	0.00	319.00	-319.00	0.00	0.00 %
100-72000-542200	VEHICLES	0.00	50,000.00	0.00	0.00	48,096.00	1,904.00	3.81 %
100-72000-542300	FURNITURE & FIXTURES	1,000.00	7,000.00	0.00	6,098.84	0.00	901.16	12.87 %
100-75100-542400	Computer Software	10,200.00	10,200.00	0.00	3,028.50	2,227.50	4,944.00	48.47 %
	Class: 54 - CAPITAL OUTLAY Total:	**1,810,578.97**	**1,982,858.97**	**136,505.09**	**566,453.60**	**444,174.12**	**972,231.25**	**49.03%**
Class: 57 - OTHER COSTS								
100-13000-579000	CONTINGENCIES	55,359.03	43,359.03	575.00	21,707.24	-5,875.55	27,527.34	63.49 %
100-15110-571000	ABATEMENT PROGRAM	15,000.00	15,000.00	0.00	0.00	0.00	15,000.00	100.00 %
100-25000-573001	BRAIN & SPINAL INJURY	1,000.00	1,000.00	0.00	342.85	0.00	657.15	65.72 %
100-25000-573002	STATE PROBATION SYS FUND	200.00	200.00	0.00	50.00	0.00	150.00	75.00 %
100-25000-573003	FINES 10% JAIL	32,000.00	32,000.00	0.00	26,251.56	0.00	5,748.44	17.96 %
100-25000-573004	VICTIMS ASSIST. FUND	16,000.00	16,000.00	0.00	12,934.44	0.00	3,065.56	19.16 %
100-25000-573006	GA CRIME VICTIM'S FUND	208.00	208.00	0.00	78.00	0.00	130.00	62.50 %
100-25000-573007	CTY DRUG ABUSE TR AND EDU	2,900.00	2,900.00	0.00	1,222.15	0.00	1,677.85	57.86 %
100-25000-573008	P. O. A&B FUND	40,000.00	40,000.00	0.00	28,210.60	0.00	11,789.40	29.47 %
100-25000-573009	P. O. TRAINING FUND	32,000.00	32,000.00	0.00	25,661.30	0.00	6,338.70	19.81 %
100-25000-573010	INDIGENT DEFENSE FUND	30,000.00	30,000.00	0.00	25,829.10	0.00	4,170.90	13.90 %
100-25000-573011	DRIVERS ED/TRAINING FUND	0.00	0.00	0.00	5,421.12	0.00	-5,421.12	0.00 %
100-32100-573008	P. O. A&B FUND	16,000.00	16,000.00	0.00	3,600.00	0.00	12,400.00	77.50 %
100-32100-573013	LEGAL DEFENSE FUND	7,000.00	7,000.00	0.00	6,264.50	0.00	735.50	10.51 %
	Class: 57 - OTHER COSTS Total:	**247,667.03**	**235,667.03**	**575.00**	**157,572.86**	**-5,875.55**	**83,969.72**	**35.63%**
Class: 61 - OTHER FINANCING USES								
100-90000-611276	TRANSFER GF AND CEMETERY	10,000.00	10,000.00	0.00	0.00	0.00	10,000.00	100.00 %
100-90000-611300	TRANSFER GF AND SDDA	90,000.00	90,000.00	0.00	0.00	0.00	90,000.00	100.00 %
100-90000-611650	TRANSFER TO/FROM URA	1,204,764.50	1,204,764.50	0.00	1,039,731.50	0.00	165,033.00	13.70 %

		Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100-90000-612020	TRANSFER TO/FROM PFA FUND	2,943,836.66	2,943,836.66	0.00	0.00	0.00	2,943,836.66	100.00 %
	Class: 61 - OTHER FINANCING USES Total:	**4,248,601.16**	**4,248,601.16**	**0.00**	**1,039,731.50**	**0.00**	**3,208,869.66**	**75.53%**
	Expense Total:	**26,711,635.92**	**26,886,389.87**	**1,367,636.84**	**10,574,113.92**	**1,623,621.53**	**14,688,654.42**	**54.63%**
	Expense Total:	**26,711,635.92**	**26,886,389.87**	**1,367,636.84**	**10,574,113.92**	**1,623,621.53**	**14,688,654.42**	**54.63%**
	Report Total:	**26,711,635.92**	**26,886,389.87**	**1,367,636.84**	**10,574,113.92**	**1,623,621.53**	**14,688,654.42**	**54.63%**

Group Summary

Clas...	Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
Expense							
Expense							
51 - PERSONAL SERVICES AND EMPLOYEE BENEFITS	13,956,991.76	13,968,991.76	1,051,170.44	6,174,827.70	0.00	7,794,164.06	55.80%
52 - PURCHASED / CONTRACTED SERVICES	4,258,332.00	4,194,605.95	133,338.98	1,689,323.16	938,349.52	1,566,933.27	37.36%
53 - SUPPLIES	2,189,465.00	2,255,665.00	46,047.33	946,205.10	246,973.44	1,062,486.46	47.10%
54 - CAPITAL OUTLAY	1,810,578.97	1,982,858.97	136,505.09	566,453.60	444,174.12	972,231.25	49.03%
57 - OTHER COSTS	247,667.03	235,667.03	575.00	157,572.86	-5,875.55	83,969.72	35.63%
61 - OTHER FINANCING USES	4,248,601.16	4,248,601.16	0.00	1,039,731.50	0.00	3,208,869.66	75.53%
Expense Total:	**26,711,635.92**	**26,886,389.87**	**1,367,636.84**	**10,574,113.92**	**1,623,621.53**	**14,688,654.42**	**54.63%**
Expense Total:	**26,711,635.92**	**26,886,389.87**	**1,367,636.84**	**10,574,113.92**	**1,623,621.53**	**14,688,654.42**	**54.63%**
Report Total:	**26,711,635.92**	**26,886,389.87**	**1,367,636.84**	**10,574,113.92**	**1,623,621.53**	**14,688,654.42**	**54.63%**

Fund Summary

Fund	Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
100 - GENERAL FUND	26,711,635.92	26,886,389.87	1,367,636.84	10,574,113.92	1,623,621.53	14,688,654.42	54.63%
Report Total:	**26,711,635.92**	**26,886,389.87**	**1,367,636.84**	**10,574,113.92**	**1,623,621.53**	**14,688,654.42**	**54.63%**

Stockbridge

Where Community Connects

4640 North Henry Blvd. Stockbridge, GA 30281

APPLICATION FOR BOARD, COMMITTEE OR COMMISSION APPOINTMENT

Citizens provide a great insight and knowledge to City government. An avenue that the City of Stockbridge uses to get this insight is through the various Boards and Commissions of the City of Stockbridge. The members of the Boards and Commissions make decisions and help recommend and review policies for the City of Stockbridge and its Mayor and Council. This questionnaire will assist the Mayor and Council in the review process and in determining applicant eligibility requirements and qualifications for Board or Commission membership.

Questions to consider before applying for membership on a Board or Commission:

- Do I fully understand what this Board, Committee or Commission expects from me?
- Am I committed to the goals and mission of this Board, Committee or Commission?
- Can I afford the demands on my time, resources and energy?
- Will I attend meetings regularly, making them a priority for the duration of my appointment?
- Am I willing to perform a reasonable amount of work outside of regularly scheduled Board, Committee or Commission meetings and prepare for each meeting?
- Can I work effectively with the other members of the Board, Committee or Commission?
- Am I willing to participate in necessary Board, Committee or Commission training, education and development activities that will improve my effectiveness in my position?
- Am I willing to complete a Criminal Background Check upon selection?

APPLICANT INFORMATION

Applicant Name: Samantha Samuels

Occupation: Self-Employed

Employer: Young Legacy Learning Academy

Home Address: 212 Adam Circle

City: McDonough

Zip: 30253

Home Phone: (_____) _____

Home E-Mail: [redacted]

Work Phone: (_____) _____

Work E-Mail: [redacted]

Cell Phone: [redacted]

Preferred E-Mail: ☐ Home ● Work

Name and address of the business entity you own/operate, located within the city limits of Stockbridge (if applicable)

4740 N Henry Blvd Stockbridge, GA 30281

BOARD, COMMITTEE OR COMMISSION APPLICATION

a) Which Board(s) or Commission(s) do you wish to be appointed to? Public Facilities Authority Board

If applying for the Main Street Advisory Board, which position? (see positions noted below) _____

b) How long have you been a resident or business owner/operator in the City of Stockbridge? 3 ___ Years 6 ___ Months

c) Are you current with all your financial obligations to the City of Stockbridge? ● Yes ☐ No

d) Are you willing and available to attend training sessions on-site and/or off-site if provided by the City? ● Yes ☐ No

e) Available Boards and Commissions and their terms and meeting schedules are listed at the end of this application. Are you able to meet the attendance requirements of the position for which you are applying? ● Yes ☐ No

f) Do you know of any circumstances that would result in you having to abstain from voting on any action before the Board or Commission? ☐ Yes ● No If yes, please explain:

_____

_____

g) Do you or your employer, or your spouse, child, relative or their employers, do business with the City of Stockbridge ☐ Yes ● No If yes, please explain:

_____

_____

h) Do you have any employment or contractual relationship with the City of Stockbridge that would create a continuing or frequently recurring conflict regarding your participation on a Board or Commission? ☐ Yes ● No
If yes, please explain:

_____

BOARD, COMMITTEE OR COMMISSION APPLICATION

i) Please briefly explain your reasons for wishing to serve on the Board or Commission you select:

I believe in the vision and mission of the City of Stockbridge for the community. I think my values and vision will align with the City to continue to develop and enhance the community for the citizens of Stockbridge. As a new business and a former resident of the City, I believe I can help enhance the community for all citizens.

j) Are you willing to be considered for appointment to any of the other Boards or Commissions of the City if a position is not available on the Board or Commission of your first choice? ☒ Yes ☐ No If yes, please list the Boards or Commissions for which you would like to be considered (in order of interest):

Youth Council, Board of Ethics, and or Downtown Development Authority

k) **Please attach a Resume of Qualifications for the Board position for which you are applying.**

APPLICANT STATEMENT

I understand that I am applying for appointment to a Board, Committee or Commission office of the City of Stockbridge that the appointing authority may require an interview prior to consideration for appointment; that I will be required to take an oath of office to uphold the City's charter and ordinances; that I may be removed from office for any reason permitted by law or City charter; and that my application will remain on file for consideration for a period of six (6) months, after which time, I will need to file a new application. I always agree to comply with all requirements of the office for which I am applying and to which I may be appointed. All statements and information provided in this application are true to the best of my knowledge. I understand a Criminal Background Check will be completed if I am considered to go before the Mayor & Council prior to being appointed. Members who qualify for elected office shall be removed from the Board/Commission of which they serve.

Signature	Printed Name	Date
Samantha Samuels	Samantha Samuels	07-11-2024

Please return signed application to:

City Clerk
City of Stockbridge
4640 North Henry Blvd.
Stockbridge, Georgia 30281

Fax: 770.389.7912
Email: cityclerk@cityofstockbridge-ga.gov

Stockbridge

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- Do I fully understand what this Board, Committee or Commission expects from me?
- Am I committed to the goals and mission of this Board, Committee or Commission?
- Can I afford the demands on my time, resources and energy?
- Will I attend meetings regularly, making them a priority for the duration of my appointment?
- Am I willing to perform a reasonable amount of work outside of regularly scheduled Board, Committee or Commission meetings and prepare for each meeting?
- Can I work effectively with the other members of the Board, Committee or Commission?
- Am I willing to participate in necessary Board, Committee or Commission training, education and development activities that will improve my effectiveness in my position?
- Am I willing to complete a Criminal Background Check upon selection?

APPLICANT INFORMATION

Applicant Name: Mark D Glenn

Occupation: IT support manager

Employer: Kaiser Permanente

Home Address: 199 Eagles Club Dr.

City: Stockbridge

Zip: 30281

Home Phone: [redacted]

Home E-Mail: [redacted]

Work Phone: (_____) _____

Work E-Mail: [redacted]

Cell Phone: (_____) _____

Preferred E-Mail: ☒ Home ☐ Work

Name and address of the business entity you own/operate, located within the city limits of Stockbridge (if applicable)

_____

BOARD, COMMITTEE OR COMMISSION APPLICATION

a) Which Board(s) or Commission(s) do you wish to be appointed to? Public Facilities Authority Board

If applying for the Main Street Advisory Board, which position? (see positions noted below) _____

b) How long have you been a resident or business owner/operator in the City of Stockbridge? 6 ___ Years 8 ___ Months

c) Are you current with all your financial obligations to the City of Stockbridge? ● Yes ☐ No

d) Are you willing and available to attend training sessions on-site and/or off-site if provided by the City? ● Yes ☐ No

e) Available Boards and Commissions and their terms and meeting schedules are listed at the end of this application. Are you able to meet the attendance requirements of the position for which you are applying? ● Yes ☐ No

f) Do you know of any circumstances that would result in you having to abstain from voting on any action before the Board or Commission? ☐ Yes ● No If yes, please explain:

_____

_____

g) Do you or your employer, or your spouse, child, relative or their employers, do business with the City of Stockbridge ☐ Yes ● No If yes, please explain:

_____

_____

h) Do you have any employment or contractual relationship with the City of Stockbridge that would create a continuing or frequently recurring conflict regarding your participation on a Board or Commission? ☐ Yes ● No
If yes, please explain:

_____

BOARD, COMMITTEE OR COMMISSION APPLICATION

i) Please briefly explain your reasons for wishing to serve on the Board or Commission you select:

I am looking for an opportunity to serve my community.

j) Are you willing to be considered for appointment to any of the other Boards or Commissions of the City if a position is not available on the Board or Commission of your first choice? ☒ Yes ☐ No If yes, please list the Boards or Commissions for which you would like to be considered (in order of interest):

Downtown development authority

k) **Please attach a Resume of Qualifications for the Board position for which you are applying.**

APPLICANT STATEMENT

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Signature _____ Printed Name _____ Date _____

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- Am I willing to participate in necessary Board, Committee or Commission training, education and development activities that will improve my effectiveness in my position?
- Am I willing to complete a Criminal Background Check upon selection?

APPLICANT INFORMATION

Applicant Name: Antonio B Gordon

Occupation: Master Cosmetologist / Music

Employer: 1200 Music Management

Home Address: 5285 yellow pine drive

City: mcdonough

Zip: 30252

Home Phone: (_____) _____

Home E-Mail: [redacted]

Work Phone: (_____) _____

Work E-Mail: _____

Cell Phone: [redacted]

Preferred E-Mail: ● Home ☐ Work

Name and address of the business entity you own/operate, located within the city limits of Stockbridge (if applicable)

1200 Music Management 5625 N Henry Blvd Stockbridge,Ga 30281

BOARD, COMMITTEE OR COMMISSION APPLICATION

a) Which Board(s) or Commission(s) do you wish to be appointed to? Public Facilities Authority

If applying for the Main Street Advisory Board, which position? (see positions noted below) _____

b) How long have you been a resident or business owner/operator in the City of Stockbridge? 4 ___ Years 8 ___ Months

c) Are you current with all your financial obligations to the City of Stockbridge? ● Yes ☐ No

d) Are you willing and available to attend training sessions on-site and/or off-site if provided by the City? ● Yes ☐ No

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_____

_____

g) Do you or your employer, or your spouse, child, relative or their employers, do business with the City of Stockbridge ☐ Yes ● No If yes, please explain:

_____

_____

h) Do you have any employment or contractual relationship with the City of Stockbridge that would create a continuing or frequently recurring conflict regarding your participation on a Board or Commission? ☐ Yes ● No
If yes, please explain:

_____

BOARD, COMMITTEE OR COMMISSION APPLICATION

i) Please briefly explain your reasons for wishing to serve on the Board or Commission you select:

I am a hard worker and a leader in my community. . I believe in helping and doing the right thing will create better opportunities. I also mentor young kids who made bad choices at RYDC program. By picking me you have a pers that will follow all rules and regulations. I am a businessperson so everything i do will be professional and in order. I am fair and will treat everyone with respect and make sure i am leading in a way of professional representing the city of Stockbridge with class.

j) Are you willing to be considered for appointment to any of the other Boards or Commissions of the City if a position is not available on the Board or Commission of your first choice? ☒ Yes ☐ No If yes, please list the Boards or Commissions for which you would like to be considered (in order of interest):

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Signature | Printed Name | Date

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