### DAWSON COUNTY BOARD OF COMMISSIONERS WORK SESSION AGENDA - THURSDAY, APRIL 13, 2017 DAWSON COUNTY GOVERNMENT CENTER ASSEMBLY ROOM 4:00 PM

### **NEW BUSINESS**

- 1. Presentation of Application for Parade and Assembly 4 H Rabies Clinic Planning and Development Director Jason Streetman / Extension Office Coordinator Clark MacAllister
- 2. Presentation of Planning and Development Budget Amendment Request *Administrative Assistant* Planning and Development Director Jason Streetman
- 3. Presentation of Planning and Development Budget Amendment Request *Building Inspector* Planning and Development Director Jason Streetman
- <u>4.</u> Discussion of Annual Compensation for County Clerk Position Dawson County Board of Commissioners
- 5. County Manager Report
- 6. County Attorney Report

1. Presentation of Application for Parade and Assembly - *4 H Rabies Clinic* - Planning and Development Director Jason Streetman / Extension Office Coordinator Clark MacAllister



Department: <u>P</u>	lanning & Deve	elopment			Work Ses	sion: <u>4/13/17</u>
Prepared By: <u>(</u>	Ginny Tarver				Voting Sess	sion: <u>4/20/17</u>
Presenter: <u>Jas</u>	son Streetman			Publi	c Hearing: Yes	s □ No ⊠
Agenda Item T	Fitle: Permit for	4-H Rabies Clin	<u>ic</u>			
Background In	formation:					
	ise. Pets are ne	n Office has hosever loose on th				_
Current Inform	nation:					
	ill be held on Sa om 10am to 1pi	aturday, 4/22/17 m.	. The Extension	n Office is reque	esting use of the	e courthouse
Budget Informa	ation: Applica	ıble: □ Not Ap	pplicable: ⊠	Budge	ted: Yes □	No 🗆
Budget Informa	ation: Applica	ble: □ Not Ap	oplicable: ⊠ Budget	Budge Balance	ted: Yes  Requested	No □
Fund Recommendat	Dept. tion/Motion: Sta		Budget allowing the Ex	Balance	Requested	Remaining
Fund Recommendat	Dept. tion/Motion: Sta	Acct No.  aff recommends , April 22, 2017.	Budget allowing the Ex	Balance	Requested	Remaining nouse parking
Fund Recommendate for Rabies Clire Department He	Dept.  tion/Motion: Sta	Acct No.  aff recommends April 22, 2017.	Budget allowing the Ex	Balance	Requested  o use the courth	Remaining nouse parking
Fund  Recommendate for Rabies Clin  Department Here  Finance Dept.	Dept.  tion/Motion: Stanic on Saturday  ead Authorization: 1	Acct No.  aff recommends April 22, 2017.	Budget allowing the Ex	Balance	Requested  o use the courth  Date:	Remaining house parking
Fund  Recommendate for Rabies Clire  Department Here  Finance Dept.  County Manage	Dept.  tion/Motion: Stanic on Saturday  ead Authorization: 1	Acct No.  aff recommends April 22, 2017.  on:  Vickie Neikirk  n: David Headle	Budget allowing the Ex	Balance	Date: 04/0	Remaining house parking 04/2017
Fund  Recommendate for Rabies Clire  Department Here  Finance Dept.  County Manage	Dept.  tion/Motion: Stanic on Saturday  ead Authorization: Yer Authorization	Acct No.  aff recommends April 22, 2017.  on:  Vickie Neikirk  n: David Headle	Budget allowing the Ex	Balance	Date: 04/0	Remaining house parking 04/2017

PAR 3-17-10764

01-31-12



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# Dawson County Planning & Development 25 Justice Way, Suite 2322 Dawsonville, GA 30534 (706) 344-3500

### Permit for Parades, Public Assemblies, Demonstrations, and Rallies In Public Places

Date Received: 3-30-17

Applicant answers all questions on pages 1-4; attach separate sheet(s) if necessary.

Application must be received a minimum of 30 days prior to event and must be complete and legible.

☐ ROAD CLOSING □ PUBLIC DEMONSTRATION □ PUBLIC ASSEMBLY □ PARADE □ RALLY Name of Event: 4-th Rabies Location of Event: Dawson County Courthouse TMP# Date(s) of Event: 4/22/1 100 Time of Event: Start: / 0 100 (a.m. / p.m. End: a.m. /p.m Provide information listed below for the main contact person responsible for the organization of this event: Organization: U.G.A Extens Telephone #: 5. Provide information listed below for any key personnel involved in coordinating this event. Also, provide information listed below on each officer of the club, organization, corporation or partnership requesting this event. Attach a separate sheet if necessary. Title: Name: Telephone #: Organization: State: Zip Code: Address: City: Name: Title: Organization: Telephone #: State: Zip Code: Address: City: Title: Name: Telephone #: Organization: Address: City: State: Zip Code: Title: Name: Organization: Telephone #: Address: State: Zip Code:

6.	Expected number of participants:
7.	Physical description of materials to be distributed: Reviews shots for gets
8	How do participants expect to interact with public? Pulmy cars, girny shits to pets
9.	Route of event: (attach a detailed map of the route) Courthouse public but off of Shool Creek Rd.
	9.a. Number and type of units in parade:
	9.b. Size of the parade:
10.	Will any part of this Event take place within the City Limits of Dawsonville?
	If YES, do you have a permit for the event from the City? Ab Date Issued: **Attach Copy
11.	Do you anticipate any unusual problems concerning either police protection or traffic congestion as a consequence of the event?YesNo If YES, please explain in detail:
12.	List all <u>prior</u> parades or public assemblies, demonstrations or rallies in a public place within Dawson County for which you obtained a permit: (Also include dates – attach separate sheet, if necessary). <u>fabres</u> <u>C(me</u>
Det	ails: Please outline what your event will involve: (number of people / life safety issues / vendors / cooking / tents /
pa	s/handicap parking / egress) - attach separate sheet if necessary.  attacpute will put in parking but, exit vehicle to register and  y, then drive to vet area. Nets will then administer  hots to puts.
Rou	ite or Lay Out: (attach a detailed site plan)
	Courthouse Shoul Creek Rd

Page 2 of 8

What participation, if any, do you expect from Dawson County Emergency Services?
What participation, if any, do you expect from the Dawson County Sheriff Department?
Insurance Requirements: In compliance with Ordinance Section VII (C), an applicant for a permit shall obtain liability insurance from an insurer licensed in the State of Georgia for the parade, public assembly, demonstration or rally in a public place, if one or more of the following criteria exists:  1. The use, participation, exhibition, or showing of live animals;  2. The use, participation, exhibition, or showing of automobiles of any size or description, motorcycles, tractors, bicycles, or similar conveyances;  3. The use of a stage, platform, bleachers, or grandstands that will be erected for the event;  4. The use of inflatable apparatus used for jumping, bouncing, or similar activities;  5. The use of roller coasters, bungee jumping, or similar activities; or  6. Vendors or concessions.  Does your parade, non-spontaneous private assembly, demonstration, or rally in a public place meet any of the criteria above?   Yes  No If yes, which one(s)?
Any applicant required to provide insurance shall provide Dawson County with a copy of the Certificate of Insurance from an insurer authorized and <b>licensed by the State of Georgia</b> . Dawson County shall be added as an additional named insured for the event on the Certificate of Insurance by the carrier. The minimum policy limits shall be \$1,000,000.00 per incident and \$2,000,000.00 aggregate for the entire event. All costs for insurance and naming Dawson County as an additional named insured shall be borne solely by the applicant. Such insurance shall protect Dawson County from any and all claims for damages to property and/or bodily injury or death.
Is the Certificate of Liability Insurance attached?  No Not applicable to this event
Additional information/comments about liability insurance:
Additional information/comments about this application:

### APPLICANT'S SIGNATURE FOR THE PERMIT APPLICATION; RELEASE & WAIVER OF LIABLITY; AND AGREEMENT FOR FINANCIAL RESPONSIBILITY.

### APPLICATION:

OATH: I hereby swear and affirm that the information provided with this application for parade, public assembly, demonstration, or rally is true and correct to the best of my knowledge. In addition, I agree to abide by all regulations of the ordinance and to advise all participants of the conditions of the permit.

### **RELEASE & WAIVER OF LIABILITY:**

The permit holder shall indemnify and hold Dawson County harmless from any claim, demand, or cause of action that may arise from activities associated with the event. I acknowledge that I understand this Release, and I hereby agree for myself and on behalf of the Applicant to indemnify and hold harmless Dawson County, Georgia and its agents, officers, and employees, individually and jointly, from and against any claim for injury (including, but not limited to, personal injury and property damage), loss, inconvenience, or damage suffered or sustained by any individual, including but not limited to, business owners, patrons, participants of the parade, public assembly, demonstration, or rally, and spectators participating in and/or occurring during the event, unless the claim for injury is caused by intentional misconduct of an individual, agent, officer, or employee of Dawson County.

### AGREEMENT FOR FINANCIAL RESPONSIBILITY:

The undersigned agrees to be solely responsible for cleaning affected areas littered during the activity, providing sufficient parking and storage areas for motor vehicles, providing temporary toilet facilities, and providing other similar special and extraordinary items deemed necessary for the permitted activity by Dawson County to keep the area of the event safe and sanitary. However, Dawson County shall <u>not</u> require individuals, organizations, or groups of persons to provide personnel for <u>normal</u> governmental functions such as traffic control, police protection, or other activities or expenses associated with the maintenance of public order. If additional requirements are placed upon an applicant and if such requirements are not met, then Dawson County may revoke the issued permit and/or deny any subsequent permit requested by the applicant. Dawson County shall be entitled to recover from the applicant any sum expended by Dawson County for extraordinary expenses not provided by the applicant. The additional expense may include, but not be limited to, Dawson County utilizing off-duty personnel or providing equipment or resources from other areas of the county to supplement equipment or resources already present.

Made Mac Alliste

Dawson County
My Comm expires 11-18-17

Sworn to and subscribed before me this 8th day of March 2017.	Applicant's Printed Name  Applicant's Signature
Marxan Millar	
Notary Public, State of Georgia	Marjean Miller
My Commission Expires:	Notary Public State of Georgla

Note to Applicant: Once your permit is processed, Planning & Development will notify you of the meeting dates for the Board of Commissioner's work session and voting session. You are required to attend both meetings.



### Dawson County Planning & Development 25 Justice Way, Suite 2322 (706) 344-3500

Permit for
Parades, Public Assemblies,
Demonstrations, and Rallies
In Public Places

(EMERGENCY SERVICES)

EMERGENCY SERVICES: Please <u>complete</u> this sheet and <u>return</u> it to Dawson County Planning and Development. (Please attach additional sheet, if necessary.)

Name of Event: 4H Rabies Clinic
Any anticipated problems with proposed route?
Any anticipated problems with the designated location for participants to assemble?
How many personnel will be required for this event?
Estimated cost for personnel:
Number and type of vehicles required:
Trumber and type of venicles required.
Type of procedures or equipment needed for the health and safety needs of the participants and the viewing
public:
Followated and for any imment.
Estimated cost for equipment:
Additional comments/concerns
Additional comments/concerns:
Emergency Services: APPROVED: YES NO (Please also sign off on page 8 of application.)
By: Jan Het Date: 20 Mark 17



# **Dawson County Planning & Development**25 Justice Way, Suite 2322 Dawsonville, GA 30534 (706) 344-3500

Permit for
Parades, Public Assemblies,
Demonstrations, and Rallies
In Public Places

(SHERIFF DEPARTMENT)

SHERIFF DEPARTMENT: Please <u>complete</u> this sheet and <u>return</u> it to Dawson County Planning and Development. (Please attach additional sheet, if necessary.)

Name of Event:	4-H Rubres	Cliniz	Date(s) of Event:	4/22/17
Any anticipated pr	roblems with propose	ed route?	Date(s) of Event:	
Any anticipated pr	roblems with the desi	gnated location for	participants to assemble?	None
How many officers	s will be required for	this event?	D	
Estimated cost for	r officers:	Ð		
Number of vehicle	es required:	)		
Type of procedure public:			and safety needs of the pa	
Estimated cost for				
Additional commen	ts/concerns/recommen	dations:/	ONE	
Sheriff Departme	ent: APPROVED: [	YES   NO	(Please also sign off on pag	•



# **Dawson County Planning & Development**25 Justice Way, Suite 2322 Dawsonville, GA 30534 (706) 344-3500

## Permit for Parades, Public Assemblies, Demonstrations, and Rallies In Public Places

(Marshal / Public Works / Environmental Health / Parks & Recreation)

## PLEASE PROVIDE COMMENTS AND APPROVALS BELOW (Attach additional sheet if necessary) (Please also sign off on page 8 of the application.)

MARSHAL:			
2=====			
X			
8			
<u></u>			
y			
APPROVED: YES	□NO	By:	Date:
		<u>-1</u> :	
PUBLIC WORKS:			
7			
, <del></del>			
	3		
APPROVED: YES		By:	Date:
<del>7</del>			
ENVIDONMENTAL LIE	AI TU:		
ENVIRONIVIENTAL REA	ALIN		
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-			
ADDROVED DVEC		D (	Datas
APPROVED: YES	□ NO	By:	Date:
PARKS & RECREATIO	N:		
APPROVED: YES		By:	Date:
APPROVED: YES		Dy.	Dale.



# **Dawson County Planning & Development**25 Justice Way, Suite 2322 Dawsonville, GA 30534 (706) 344-3500

### Permit for Parades, Public Assemblies, Demonstrations, and Rallies In Public Places

(APPROVALS)

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If applicable to the event, the following departments have reviewed and approved this event!

Department	Printed Name	Signature for Ap	proval	Date
Sheriff Dept.	CEFF COMNE	an Syll	2	3/20/2017
Emergency Services	Laurer Sunfto	I Fem Sth	P	20 March 17
Marshal's Office	Igson Stree			20 March 2017
Public Works Dept.				
Environmental Health				
Parks and Recreation				
-State Park Office				
Georgia Dept. of Transportation	n			
Dawson County Board of (	Commissioners:	Voting Session	Date:	
Approved:		Attest:	X	
Mike Berg, Chairman / Dawson County Board of (	3:11y Thurnond Commissioners	Danielle Yarbro	ough, Coun	ty Clerk
cc: (as applicable)	Applicant County Attorney Sheriff Dept. Emergency Services	Marshal Dept. Environmental Health Public Works Parks and Recreation	GA DO GA Stat	Γ (Brent Cook) e Parks
PERMIT #				
DATE ISSUED:				

## STATE OF GEORGIA DEPARTMENT OF ADMINISTRATIVE SERVICES CERTIFICATE OF INSURANCE

	CERTIT	OATE OF HIGH	// // // // // // // // // // // // //	
Name and Ad	dress of Agency		Coverages Affo	orded By:
	Department of Administrative Services		Company	
	Risk Management Services		Letter	A State of Ga. Risk Management Services
	P.O. Box 38198, Capitol Hill Station		Company	
	Atlanta, Georgia 30334		Letter	B Great American Insurance Company
Name and Ad	dress of Insured		Company	
	Board of Regents		Letter	C
	University of Georgia		Company	D
	4435 Atlanta Highway Bogart, Georgia 30622		Letter Company	D
	Dogar o Georgia Dogar		Letter	E
This certificate i	s given as a matter of information only and confers no right	ts upon the certificate hold	ler. Notwithstandi	ng any requirement, term or condition of any contract or
other document	with respect to which this certificate may be issued or may	y pertain, the insurance at	forded by the police	cy(ies) described herein is subject to all the terms,
	conditions of such policy(ies). This certificate does not ame			afforded by the policy(ies) described herein.
COMPANY LETTER	TYPES OF INSURANCE	POLICY NUMBER	POLICY EXPIRES	LIMITS APPLY SEPARATELY PER POLICY
	COV. LIABILITY (GL, MEDICAL MALPRACTICE)			
A	A TORT CLAIMS LIABILITY POLICY.	TCP 401-14-17	6/30/2017	BODILY INJURY & PROPERTY DAMAGE
	State agency or Authority is insured			& PERSONAL INJURY COMBINED
	when sued in state courts.			
A	B EMPLOYEE LIABILITY POLICY.	CGL 401-14-17	6/30/2017	PER PERSON \$1,000,000
	Employee is insured when sued			
	individually.			AGGREGATE \$3,000,000
	C STATE AUTHORITY POLICY.			
	Coverage applies when Authority.			
	is sued in federal court			OCCURRENCE POLICIES (X)
	Contractual and/or Additional Insured Coverage applies to	Certificate Holder		
	if policy A B C is checked.			
	COV. AUTOMOBILE LIABILITY COVERAGE			C.S.L.
A	D Owned, rented, and non-owned	TCP 401-14-17	6/30/2017	
A	automobiles when Agency or Authority	101 401-14-17	0,50,2017	PER PERSON \$1,000,000
	is sued in state court or employee			
	is sued in federal court			AGGREGATE \$3,000,000
	E Physical Damage Coverage			Other than Coll. 500 Ded.
	E Physical Damage Coverage			Coll. 500 Ded.
	F Excess Authority Coverage when			Tooli. doo bud.
	Authority is sued in federal court			LIMITS SHOWN INCLUDE THE LIMITS OF
	G Excess Contractual and /or additional			LIABILITY SHOWN UNDER COVERAGES
	=			C-D FOR AUTHORITIES ONLY
	insured coverage when certificate			SINGLE LIMIT LIABILITY:
	holder is sued in federal or state court			SINGLE LIVIT LIABILITY.
	yes no			
A	H WORKER'S COMP. COVERAGE	SELF-INSURED	NONE	STATUTE
	COV. MISC. COVERAGE			
_	I Property	ATT TO BE 4 40 0 5 4 5	C/20/2015	#50 000 000
В	J Other (Fideility Bond)	GVT 554-39-95-16	6/30/2017	\$50,000,000
DESCRIPTION	OF OPERATIONS/LOCATIONS/VEHICLES			
Contractual Li	ability is NOT provided and the Certificate Holder is NO	OT an additional insured	Coverage appli	es to state employees while performing state assigned
autito:				
CANCELLATI				
	cancellation of the policy(ies) described herein, Risl			
days written n	otice to the certificate holder, however Risk Manage	ment Services assume	s no legal respo	ensibility for failure to do so.
NAME	AND ADDRESS OF CERTIFICATE HOLDER		DATE ISSUED:	
	To Whom It May Concern		Water 8	
				AUTHORIZED REPRESENTATIVE

2. Presentation of Planning and Development Budget Amendment Request - *Administrative Assistant* - Planning and Development Director Jason Streetman



	ln. & Dev.			VVC	ork Session: <u>04/</u>	13/2011	
Prepared By: <u>J. Streetman</u> Voting Session: <u>04/20/2017</u>							
Presenter: <u>J. S</u>	Streetman .			Public Hea	ring: Yes <u>x</u> No		
Agenda Item 1	itle: <u>Budget am</u>	endment for cri	tical personnel-	Administrative	<u>Assistant</u>		
Background In	formation:						
Walk in custousing the incuptick in revo	omer traffic has creased 1 <sup>st</sup> qtr. v enue and custor	increased by 4 walk in #'s, reve mer traffic has i	1% for Jan-Mar enue is expecte ncreased permi	from \$545k in 2 2016 (653) to J d to also be high itting, inspection nd staying late, ju	lan-Mar 2017 (9 ner by year end s and admin wo	922). 2017. This orkload. I	
Current Inform	ation:						
I am requesting an administrative assistant to assist in: answering the phone, greeting the public, accepting & keying in permits, scheduling inspections, ordering supplies, processing & reviewing business and alcohol license to include background inspections and processing excise tax. Assisting the planning director in admin support on special projects and creating/coordinating the planning commission meetings and BOC agenda items							
					<del>-</del>	ems	
Budget Inform	ation: Applicab	ole: <u>x</u> Not Appli	cable: E	Budgeted: Yes	No <u>x</u>		
					<del>-</del>	Remaining	
Budget Inform Fund	ation: Applicab	ole: x Not Appli Acct No.	cable: E	Budgeted: Yes	No <u>x</u>		
Budget Inform Fund Recommenda	ation: Applicab	ole: x Not Appli Acct No.	cable: E	Budgeted: Yes	No <u>x</u>	Remaining	
Budget Inform Fund Recommenda	ation: Applicable  Dept.  tion/Motion:	ole: x Not Appli Acct No.	cable: E	Budgeted: Yes	No <u>x</u> Requested \$52,000	Remaining	
Budget Inform Fund  Recommenda  Department Horizonta	ation: Applicable  Dept.  tion/Motion:	ole: x Not Appli Acct No.  On: J. Streetman	cable: E	Budgeted: Yes	No <u>x</u> Requested \$52,000	Remaining 04/17 2017	
Budget Inform Fund  Recommenda  Department Horitance Dept.  County Manage	ation: Applicable  Dept.  tion/Motion: ead Authorization: \( \)	on: J. Streetman	cable: E	Budgeted: Yes	No <u>x</u> Requested \$52,000  Date: 04/0	Remaining 04/17 2017 04/2017	
Budget Inform Fund  Recommenda  Department Horitance Dept.  County Manage	Dept.  bead Authorization: \( \)  der Authorization  beay Authorization  continuous description  continuous description  d	on: J. Streetman	cable: E	Budgeted: Yes	No <u>x</u> Requested \$52,000  Date: 04/0  Date: 4/4/2  Date: 04/0	Remaining 04/17 2017 04/2017	

3. Presentation of Planning and Development Budget Amendment Request - *Building Inspector* - Planning and Development Director Jason Streetman



Department: <u>F</u>	ork Session: <u>04/</u>	<u>/13/2017</u>						
					ting Session: 04	4/20/2017		
Presenter: <u>J. S</u>	Streetman			Public Hea	ring: Yes <u>x</u> No			
Agenda Item 1	Fitle: Budget am	endment for cri	tical personnel-	Building Inspec	<u>tor</u>			
Background Ir	formation:							
The pln. & dev. Dept. saw an increase in revenue of 32%- from \$545k in 2015 to \$720k in 2016. Walk in customer traffic has increased by 41% for Jan-Mar 2016 (653) to Jan-Mar 2017 (922). Using the increased 1 <sup>st</sup> qtr. walk in #'s, revenue is expected to also be higher by year end 2017. This uptick in revenue and customer traffic has increased permitting, and inspections. This increase has my inspector working through lunch, coming in early and staying late, just to get work done.								
Current Inform	ation:							
increase in reapproving neapproving neappr	I am requesting an additional building inspector to assist in increased building inspections due to an increase in residential & commercial development. The pln. & dev. dept. is in process of reviewing & approving new commercial development along with several hundred single family homes & apartments. This increase means more inspections than one inspector can do in a day resulting in the county marshal doing inspections and putting him behind in code enforcement duties.							
Budget Inform	ation: Applicab	ole: x Not Appli	cable: E	Budgeted: Yes	No <u>x</u>			
Fund	Dept.	Acct No.	Budget	Balance	Requested \$55,800	Remaining		
Recommenda	tion/Motion:	_						
Department H	ead Authorizatio	on: <u>J. Streetmar</u>	1		Date: <u>04/0</u>	) <u>4/17</u>		
Finance Dept.	Authorization: \	∕ickie Neikirk			Date: <u>04/0</u>	04/2017		
County Manag	County Manager Authorization: <u>David Headley</u> Date: <u>04/04/2017</u>							
County Attorne	ey Authorization	ı:			Date:	<u> </u>		
Comments/Att	achments:							
•	ing a budget am llary for a buildir			-		ks down to		

4. Discussion of Annual Compensation for County Clerk Position - Dawson County Board of Commissioners



Department: Board of Commissioners				Work Session: <u>04/13/17</u>		
Prepared By: <u>Danielle Yarbrough</u>			Voting Session: 04/20/17			
Presenter: Board of Commissioners			Public Hearing: Yes No X			
Agenda Item Title: Discussion	n of Annual Com	npensation for C	ounty Clerk Pos	<u>sition</u>		
Background Information:						
Historically the County Cler combined with other full-time	•	lways been a fu	II-time position,	but since 2012,	, it has been	
Current Information:						
The recent salary study recommended a salary range of \$38,962 to \$60,392 for the County Clerk position based upon its daily duties. The current pay for the County Clerk position is \$5,000 annually.						
Budget Information: Applicable: Not Applicable: Budgeted: Yes No						
Fund Dept.	Acct No.	Budget	Balance	Requested	Remaining	
Recommendation/Motion: Motion to increase the pay for the County Clerk position from \$5,000 a year to \$10,000 a year.						
Department Head Authorization: Board of Commissioners				Date: <u>04/0</u>	Date: <u>04/04/17</u>	
Finance Dept. Authorization: Vickie Neikirk				Date: <u>04/0</u>	Date: <u>04/04/2017</u>	
County Manager Authorization: <u>David Headley</u>				Date: 04/0	Date: 04/04/2017	
County Attorney Authorization:				Date:	Date:	
Comments/Attachments:						