CITY OF KINGSLAND, GEORGIA

CITY COUNCIL

AGENDA ● JUNE 10, 2024

Regular Meeting	City Council Chamber	6:00 PM

107 South Lee Street - City Hall, Kingsland, GA 31548

I. PUBLIC HEARING - STARTS AT 6:00PM

1. Public Hearing for the Purpose of Considering an Alcohol License for Parker's Kitchen Store #120 -

Gregory Michael Parker, owner of Gregory M. Parker, Inc. and Lucy L. Oglesbee, Store Manager, are applying for an alcohol license for the sale of retail packaged beer/wine at the Parker's Kitchen Store #120. The business is located at 1215 East King Avenue.

II. CALL TO ORDER AND WELCOME GUESTS

III. ROLL CALL

Charles Grayson Day Jr.	Mayor
James W Galloway	Councilman
Farran Fullilove	Councilman
Kristy Chance	Councilwoman
Alex Blount	Mayor Pro Tem

IV. INVOCATION AND PLEDGE TO THE FLAG

V. CONSENT DOCKET

A. Approve the Council Minutes of the last regular Council Meeting
B. Approve the Agenda as Presented
C. Approve the Payments of Accounts Payable as Due and Funds Available

VI. GRANTING AUDIENCE TO THE PUBLIC

VII. OLD BUSINESS

VIII. PLANNING AND ZONING

1. Approval of Home Occupation - 836 East Hilton Avenue - Map & Parcel K17A 01 001E -

Howard Day has applied for a Home Occupation Permit for a handyman/construction service business known as "Brighter Day's Handyman/Construction Service, LLC." The applicant has been notified and agrees to the requirements of a Home Occupation as noted in KLADO. Zoning is R-1.

Planning Commission recommends approval.

2. Approval of ROW Acceptance - Settler's Hammock Phase 3 -

Lamar Smith with LSSD Settler's Hammock, LLC has submitted a Quit-Claim Deed requesting the City of Kingsland to accept a 50' ROW with all infrastructure within Settler's Hammock Phase 3 that includes Daniel Trent Way and Olson Way. An inspection of the infrastructure was completed by the Planning Department. and Public Works in April of 2024 and no issues were found, all infrastructure was in good working order. The submitted Quit Claim Deed is attached to this report. Zoning is PD/R-1.

Planning Commission recommends approval.

3. Approval of Special Use Permit-1801 Harrietts Bluff Rd.-Map & Parcel 093 017A -

Chunlan Zhao has applied for a Special Use Permit for parcel 093 017A located at 1801 Harrietts Bluff Road. The purpose of the Special Use Permit is for the applicant to be able to operate a retail business that includes the sale of decorative steel gates, roof panels, and other building materials in a C-4 zoning district. The Kingsland Zoning and Land Development Ordinance, Sec.61.4.2- C-4, Interchange Commercial Permitted Uses does not allow for this type of business.

Planning Commission recommends approval.

4. Approval of Re-Zoning-Parcels 093 054O, 093 054R, and 093 054S -

James Coughlin with Camden County JDA is requesting parcels 093 054O, 093 054R, and 093 054S be re-zoned to I-G (General Industrial) for the purpose of allowing additional types of business uses other than what the existing zoning I-L (Light Industrial) allows. The parcels are located in the Camden County Industrial Park containing a total of approximately 29 acres.

Planning Commission recommends approval.

IX. NEW BUSINESS

1. Approval Of: GMEBS Defined Benefit Ordinance and Adoption Agreement -

An Ordinance to amend and restate the Retirement Plan for the Employees of the City of Kingsland, Georgia, in accordance with and subject to the terms and conditions set forth in the Adoption Agreement, any Addendum to the Adoption Agreement, the Georgia Municipal Employees Benefit System (GMEBS) Basic Plan Document, and the GMEBS Trust Agreement.

Staff recommends approval.

2. Approval of: MainPoint Employee Wellness Clinic MOU FY 2024-2025 -

A Memorandum of Understanding (MOU) establishing a cooperative partnership between the Camden County Board of Commissioners and the City of Kingsland, Georgia for providing onsite clinical medical services by Camden County to employees of the City of Kingsland. The city's pro-rata funding remains at 12% of the $621,221 FY 24-25 budget, an increase of $386 per month.

Staff recommends approval.

3. Approval of: Resolution 2024-08 - Establishing Qualifying Dates and Time -

This will set the date and time for qualifying for the 2024 election for City Council Posts #1 and #2.

4. Approval of: Resolution 2024-10 - Level 1 Freeport Exemption for Fullfilment Centers -

This provides a Level 1 Freeport Tax Exemption for Fulfillment Centers as authorized by O.C.G.A. 45-5-48.2. This exemption does not add any tax burden to the citizens of Kingsland or Camden County and makes Kingsland more competitive for companies bringing jobs to our community. This exemption was approved by voter referendum on May 21, 2024.

5. BID AWARD: Sewer Pump -

Staff recommends sole bidder, Southern Civil, for $793,684. Estimated start date is 3/04/2025.

6. Approval of: Alcohol License for Parker's Kitchen Store #120 -

Gregory Michael Parker, owner of Gregory M. Parker, Inc. and Lucy L. Oglesbee, Store Manager, are applying for an alcohol license for the sale of retail packaged beer/wine at the Parker's Kitchen Store #120. The business is located at 1215 East King Avenue.

X. MAYOR AND COUNCIL ANNOUNCEMENT

XI. ADJOURNED

City Council
107 South Lee Street
Kingsland, GA 31548

SCHEDULED

Meeting: 06/10/24 06:00 PM
Department: City Clerk
Category: Public Hearing
Prepared By: Jean Seigler
Initiator: Jean Seigler
Sponsors:
DOC ID: 4479

AGENDA ITEM (ID # 4479)

Public Hearing for the Purpose of Considering an Alcohol License for Parker's Kitchen Store #120

Gregory Michael Parker, owner of Gregory M. Parker, Inc. and Lucy L. Oglesbee, Store Manager, are applying for an alcohol license for the sale of retail packaged beer/wine at the Parker's Kitchen Store #120. The business is located at 1215 East King Avenue.

City Council
107 South Lee Street
Kingsland, GA 31548

SCHEDULED

Meeting: 06/10/24 06:00 PM
Department: Planning and Zoning
Category: Home Office Occupancy
Prepared By: Natalie Moreland
Initiator: Natalie Moreland
Sponsors:

AGENDA ITEM (ID # 4473)

DOC ID: 4473

Approval of Home Occupation - 836 East Hilton Avenue - Map & Parcel K17A 01 001E

Howard Day has applied for a Home Occupation Permit for a handyman/construction service business known as "Brighter Day's Handyman/Construction Service, LLC." The applicant has been notified and agrees to the requirements of a Home Occupation as noted in KLADO. Zoning is R-1.

Planning Commission recommends approval.

The City of Kingsland, GA
107 South Lee Street
P.O. Box 250
Kingsland, GA 31548
Ph: 912-729-5613
Fax: 912-729-7618

Planning and Community Development

Staff Report

Planning Commission Meeting Date: June 3, 2024

City Council Meeting Date: June 10, 2024

Agenda Item: Home Occupation for 836 E. Hilton Ave.

Summary:

Howard Day has applied for a home occupation permit for a handy-man business known as Brighter Day's Handyman, LLC. The applicant has been notified and agrees to the requirements of a Home Occupation as noted in KLADO.

Zoning: R-1

Is Proposal Consistent with the Comprehensive Plan? Yes

Staff Recommendation: Staff recommends approval

Scott L. Kimball
Planning & Zoning Director


802
849
831
827
825
Kingsland Zoning Map
Zoning 2024
ZONING
C-1
C-1 Overlay
C-1A Overlay
C-2
C-4
C-ED
C-PLMU
FT- Forest
I-G
I-L
LI Overlay
MU
PD
PD/C-2
PD/C-4
PD/MU
PD/R-1
PD/R-2
PD/R-3
R-1
R-2
R-3
R-4
R-5
R-6
E Hilton Ave
836
832
826
828
830
828
826
825
821
821
834
834

Camden County, GA

Overview

Legend

- Parcels
- Roads

USA Major Highways

- Limited Access
- Highway
- Major Road
- Local Road
- Minor Road
- Other Road
- Ramp
- Ferry
- Pedestrian Way

City Labels

Parcel ID	K17A01 001E	**Owner**	SEXTON NANCY BROWN
Class Code	Residential		836 E HILTON AVE
Taxing District	KINGSLAND		KINGSLAND, GA 31548
	KINGSLAND	**Physical Address**	836 E HILTON AVE
Acres	0.32	**Assessed Value**	Value $173517

Last 2 Sales

Date	Net Price	Reason	Qual
4/16/2015	$125000	FM	Q
2/24/2014	$100000	ES	U

(Note: Not to be used on legal documents)

THE PARCEL LINES SHOWN ON THIS SITE ARE NOT LEGAL BOUNDRIES AND MUST NOT BE USED FOR LEGAL DOCUMENTS. THE PARCEL LINEWORK ARE FOR LOCATING PARCELS FOR TAX PURPOSES ONLY. THEY ARE NOT SURVEYS DUE TO THE NATURE OF HOW THE ARE PRODUCED. LEGAL BOUNDRIES SHOULD BE TAKEN FROM LEGALLY DOCUMENTED PLATS AND DEEDS.

Date created: 4/23/2024
Last Data Uploaded: 4/23/2024 6:08:25 AM

Developed by Schneider GEOSPATIAL

City Council
107 South Lee Street
Kingsland, GA 31548

SCHEDULED

AGENDA ITEM (ID # 4474)

Meeting: 06/10/24 06:00 PM
Department: Planning and Zoning
Category: Planning & Zoning
Prepared By: Natalie Moreland
Initiator: Natalie Moreland
Sponsors:
DOC ID: 4474

Approval of ROW Acceptance - Settler's Hammock Phase 3

Lamar Smith with LSSD Settler's Hammock, LLC has submitted a Quit-Claim Deed requesting the City of Kingsland to accept a 50' ROW with all infrastructure within Settler's Hammock Phase 3 that includes Daniel Trent Way and Olson Way. An inspection of the infrastructure was completed by the Planning Department. and Public Works in April of 2024 and no issues were found, all infrastructure was in good working order. The submitted Quit Claim Deed is attached to this report. Zoning is PD/R-1.

Planning Commission recommends approval.

The City of Kingsland, GA
107 South Lee Street
P.O. Box 250
Kingsland, GA 31548
Ph: 912-729-5613
Fax: 912-729-7618

Kingsland
GEORGIA | EST. 1908

Planning and Community Development

Staff Report

Planning Commission Meeting Date: June 3, 2024

City Council Meeting Date: June 10, 2024

Agenda Item: ROW Acceptance- Settler's Hammock Phase 3

Summary:

Lamar Smith with LSSD Settler's Hammock, LLC and has submitted a Quit- Claim Deed requesting the City of Kingsland to accept a 50' ROW with all infrastructure within Settler's Hammock Phase 3 that includes Daniel Trent Way and Olson Way. An inspection of the infrastructure was completed by the Planning Dept. and Public Works April of 2024 and no issues were found, all infrastructure was in good working order. The submitted Quit Claim Deed is attached to this report.

Zoning: PD/R-1

Is Proposal Consistent with the Comprehensive Plan? Yes

Staff Recommendation: Staff Recommends approval

Scott L. Kimball

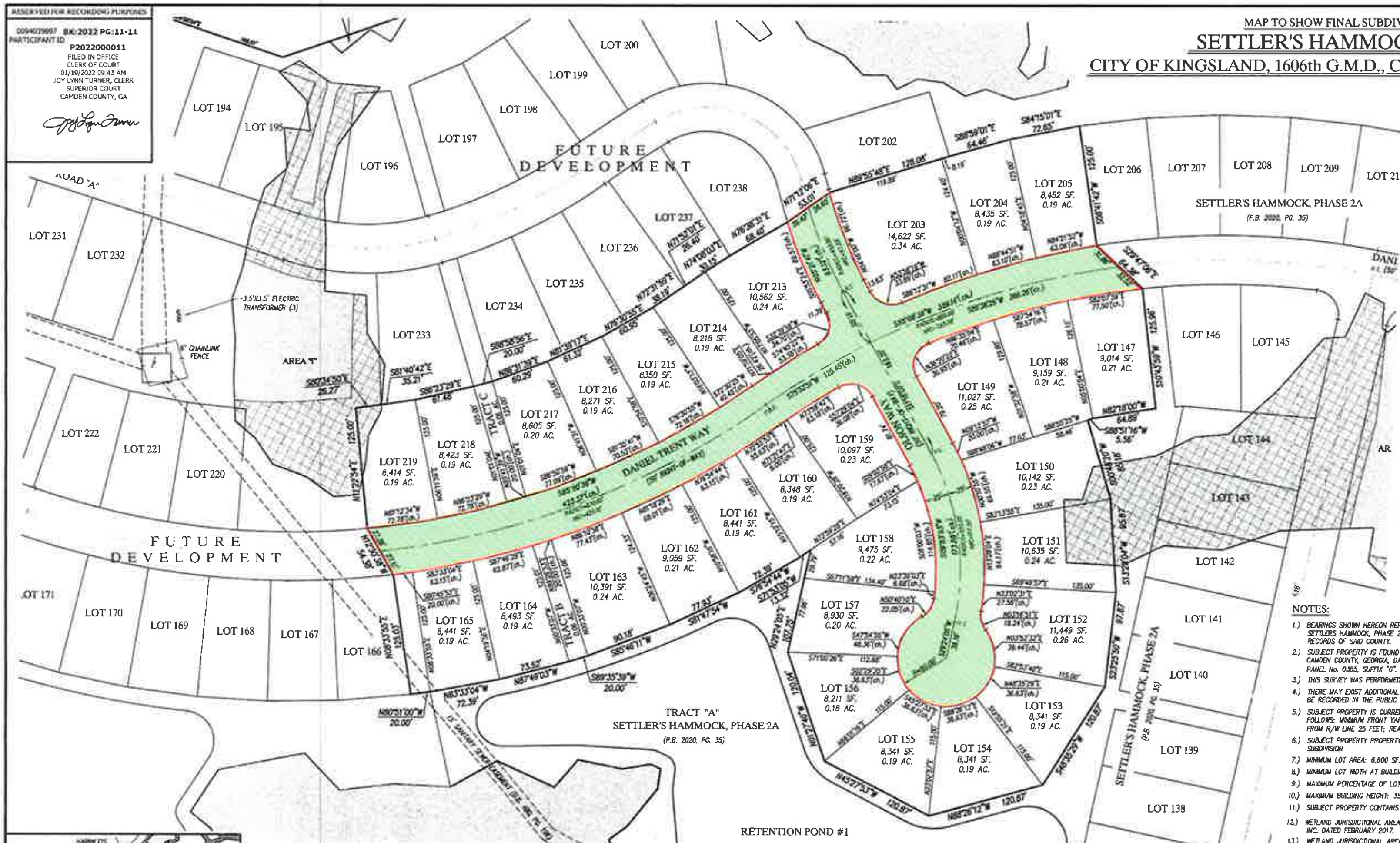
Planning Director

MAP TO SHOW FINAL SUBDIVISION PLAT OF

SETTLER'S HAMMOCK ~ PHASE 3

CITY OF KINGSLAND, 1606th G.M.D., CAMDEN COUNTY, GEORGIA

PROPERTY OWNED BY:
LAMAR SMITH SIGNATURE HOMES, LLC
152 THUNDERBIRD DRIVE
RICHMOND HILL, GA 31324

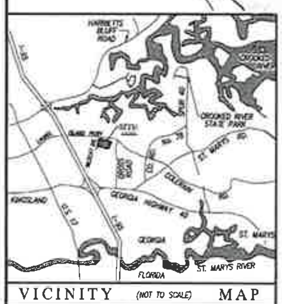


NOTES:

1.) BEARINGS SHOWN HEREON REFER TO THE BEARING OF S08°41'42W FOR THE WESTERLY LINE OF SETTLERS HAMMOCK, PHASE 2A, ACCORDING TO PLAT RECORDED IN P.B. 2020, PG. 35, PUBLIC RECORDS OF SAID COUNTY.
2.) SUBJECT PROPERTY IS FOUND TO BE IN FLOOD HAZARD ZONES "X" (UNSHADED) AS PER F.I.R. MAP FOR CAMDEN COUNTY, GEORGIA, DATED: DECEMBER 21, 2017, MAP No. 13039C0385G, COMMUNITY No. 130238, PANEL No. 0385, SUFFIX "G".
3.) THIS SURVEY WAS PERFORMED WITHOUT THE BENEFIT OF ANY FORMAL TITLE REVIEW.
4.) THERE MAY EXIST ADDITIONAL RESTRICTIONS LYING OVER THE SUBJECT PROPERTY NOT SHOWN HEREON THAT MAY BE RECORDED IN THE PUBLIC RECORDS OF SAID COUNTY.
5.) SUBJECT PROPERTY IS CURRENTLY ZONED: PD (SINGLE FAMILY RESIDENTIAL USAGE). BUILDING SETBACKS ARE AS FOLLOWS: MINIMUM FRONT YARD SETBACK: 25 FEET; MINIMUM SIDE YARD SETBACK FROM LOT LINE: 5 FEET, FROM R/W LINE 25 FEET; REAR YARD SETBACK: 15 FEET.
6.) SUBJECT PROPERTY PROPERTY IS SERVICED BY CITY WATER AND SEWER. OWNER TO INSTALL UTILITIES WITHIN SUBDIVISION
7.) MINIMUM LOT AREA: 6,600 SF.
8.) MINIMUM LOT WIDTH AT BUILDING LINE: 50 FEET.
9.) MAXIMUM PERCENTAGE OF LOT COVERAGE: 40%
10.) MAXIMUM BUILDING HEIGHT: 35 FEET
11.) SUBJECT PROPERTY CONTAINS ±7.94 ACRES, 29 LOTS AND 2 TRACTS.
12.) WETLAND JURISDICTIONAL AREAS SHOWN HEREON WERE TAKEN FROM PLAN PREPARED BY BENNETT SURVEYING, INC. DATED FEBRUARY 2017.
13.) WETLAND JURISDICTIONAL AREAS SHOWN HEREON ARE UNDER THE JURISDICTIONS OF THE U.S. ARMY CORPS OF ENGINEERS. OWNERS MAY BE SUBJECT TO PENALTY BY LAW FOR DISTURBANCE TO THESE AREA WITHOUT PROPER AUTHORIZATION.
14.) SUBDIVISION PLAT RESERVES A 7.5 FOOT WIDE EASEMENT FOR DRAINAGE & UTILITIES ALONG THE FRONT, SIDE AND REAR PROPERTY LINES UNLESS NOTED OTHERWISE.

WETLAND JURISDICTIONAL AREAS SHOWN THUS:

PROPOSED PERMITTED WETLAND FILL AREAS SHOWN THUS:



OWNER'S CERTIFICATE:
STATE OF GEORGIA, COUNTY OF CAMDEN

THE OWNER OF THE LAND SHOWN ON THIS PLAT AND WHOSE NAME IS SUBSCRIBED HERETO, IN PERSON OR THROUGH A DULY AUTHORIZED AGENT, CERTIFIES THAT SAID OWNER HAS CAUSED THE SUBDIVISION OF THE LAND SHOWN HEREON BY AN ACTUAL SURVEY, AND DOES HEREBY IRREVOCABLY DEDICATE TO THE USE OF THE PUBLIC ALL ROADS AND EASEMENTS FOR THE PURPOSES THEY ARE LABELED.

BY: ____ LAMAR SMITH SIGNATURE GROUP   11/16/21 DATE

CERTIFICATION OF APPROVAL BY THE COUNCIL:
I HEREBY CERTIFY THAT THE OWNER, OR AGENT, HAS COMPLETED THE CONSTRUCTION AND INSTALLATION OF THE STREETS, DRAINAGE, UTILITIES AND OTHER IMPROVEMENTS IN ACCORDANCE WITH THE LAWS AND SPECIFICATIONS OF THE CITY OF KINGSLAND, GEORGIA, OR HAS POSTED A PERFORMANCE BOND IN LIEU THEREOF.

BY: ____ MAYOR   1/5/22 DATE

CERTIFICATION OF FINAL APPROVAL BY THE COMMISSION:
I CERTIFY THAT ALL REQUIREMENTS FOR FINAL APPROVAL OF THIS PLAT HAVE BEEN FULFILLED IN ACCORDANCE WITH THE ORDINANCES OF THE CITY OF KINGSLAND, GEORGIA, AND THE REQUIREMENTS OF THE KINGSLAND PLANNING COMMISSION.

BY: ____ CHAIRMAN OF PLANNING COMMISSION   1/3/22 DATE

APPROVAL CERTIFICATE:
THE FOLLOWING GOVERNMENTAL BODY HAS APPROVED THIS PLAT, MAP, OR PLAN FOR FILING OR HAS AFFIRMED THAT APPROVAL IS NOT REQUIRED.

BY: ____ NAME   1/13/22 DATE
Scott L Kimbrell PRINTED NAME   Planning Director TITLE

CLOSURE NOTE:
THE FIELD DATA UPON WHICH THIS MAP IS BASED HAS A CLOSURE PRECISION OF ONE FOOT IN XX,XXX FEET AND AN ANGULAR ERROR OF XX SECONDS PER ANGLE AND WAS ADJUSTED USING THE COMPASS RULE. (RADIAL SURVEY)

THIS MAP HAS BEEN CALCULATED FOR CLOSURE AND IS FOUND TO BE ACCURATE WITHIN ONE FOOT IN 209,396 FEET.

SCALE: 1" = 50'

DWN. BY: J.S.   CKD. BY: J.S.F.

DWG. # SD-2-1141-07-20

LEGEND:

○ = SET 1/2" REBAR LSF 1067	P.C. = PLAT CABINET
□ = SET 4"X4"X24" CONCRETE MONUMENT, LSF 1067	P.B. = PLAT BOOK
■ = FOUND 4"X4"X24" CONCRETE IDENTIFICATION AS NOTED	P.D. = PLAT DRAWER
● = FOUND 1/2" IRON PIPE LSF 166	D.B. = DEED BOOK
△ = FOUND PK NAIL & WASHER IDENTIFICATION AS NOTED	PG. = PAGE
	(ch.) = CHORD
	PC = POINT OF CURVATURE
	PT = POINT OF TANGENCY
	PRC = POINT OF REVERSE CURVE
	B.R.L. = BUILDING RESTRICTION LINE

P.O. BOX 5730
ST. MARYS, GEORGIA 31558
(912) 729-1507 PHONE
(912) 729-1509 FAX

GEORGIA LICENSED
SURVEY FIRM No. 1067

PREPARED BY:
A K M
SURVEYING, INC.
SURVEYORS & LAND PLANNERS

CERTIFICATION: 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.

BY: ____ DATE: 11/15/21
JEFFREY S. FOSTER
GA. REGISTERED SURVEYOR No. 2143

Return Recorded Document to:

MATTHEW C. WEINER, ESQ.
ATTORNEY AT LAW
222 E. GORDON STREET
SAVANNAH, GA 31401

LIMITED WARRANTY DEED
FOR RIGHT OF WAY

STATE OF GEORGIA

COUNTY OF CAMDEN

THIS INDENTURE made this __ day of MAY, 2024, between **LSSD SETTLERS HAMOCK, LLC**, a Georgia limited liability company, as party or parties of the first part, hereinafter called Grantor, and **CITY OF KINGSLAND**, 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, that certain real property consisting of a 50 foot right of way located in the County of Camden, State of Georgia, and identified as "Daniel Trent Way (50' Right of Way)" and "Olson Way" on Exhibit "A" attached hereto and incorporated herein.

This Deed is given subject to all easements and restrictions of record.

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 the presence of:	**LSSD SETTLERS HAMMOCK, LLC**
_________________ (Unofficial Witness)	_________________ (Seal)
_________________ (Notary Public)	By: Byron Lamar Smith Its: Manager

JENNIFER M. MCCARDLE
COMMISSION EXPIRES
NOTARY PUBLIC
MARCH 29, 2026
EFFINGHAM COUNTY, GEORGIA

Planning and Zoning
105 South Lee Street
Kingsland, GA 31548

SCHEDULED

AGENDA ITEM (ID # 4465)

Meeting: 06/03/24 06:00 PM
Department: Planning and Zoning
Category: Planning & Zoning
Prepared By: Natalie Moreland
Initiator: Natalie Moreland
Sponsors:
DOC ID: 4465

ROW Acceptance-Settler's Hammock Phase 3

Lamar Smith with LSSD Settler's Hammock, LLC has submitted a Quit-Claim Deed requesting the City of Kingsland to accept a 50' ROW with all infrastructure within Settler's Hammock Phase 3 that includes Daniel Trent Way and Olson Way. An inspection of the infrastructure was completed by the Planning Dept. and Public Works in April of 2024 and no issues were found, all infrastructure was in good working order. The submitted Quit Claim Deed is attached to this report. Zoning is PD/R-1. Staff recommends approval.

The City of Kingsland, GA
107 South Lee Street
P.O. Box 250
Kingsland, GA 31548
Ph: 912-729-5613
Fax: 912-729-7618

Kingsland
GEORGIA | EST. 1908

Planning and Community Development

Staff Report

Planning Commission Meeting Date: June 3, 2024

City Council Meeting Date: June 10, 2024

Agenda Item: ROW Acceptance- Settler's Hammock Phase 3

Summary:

Lamar Smith with LSSD Settler's Hammock, LLC and has submitted a Quit- Claim Deed requesting the City of Kingsland to accept a 50' ROW with all infrastructure within Settler's Hammock Phase 3 that includes Daniel Trent Way and Olson Way. An inspection of the infrastructure was completed by the Planning Dept. and Public Works April of 2024 and no issues were found, all infrastructure was in good working order. The submitted Quit Claim Deed is attached to this report.

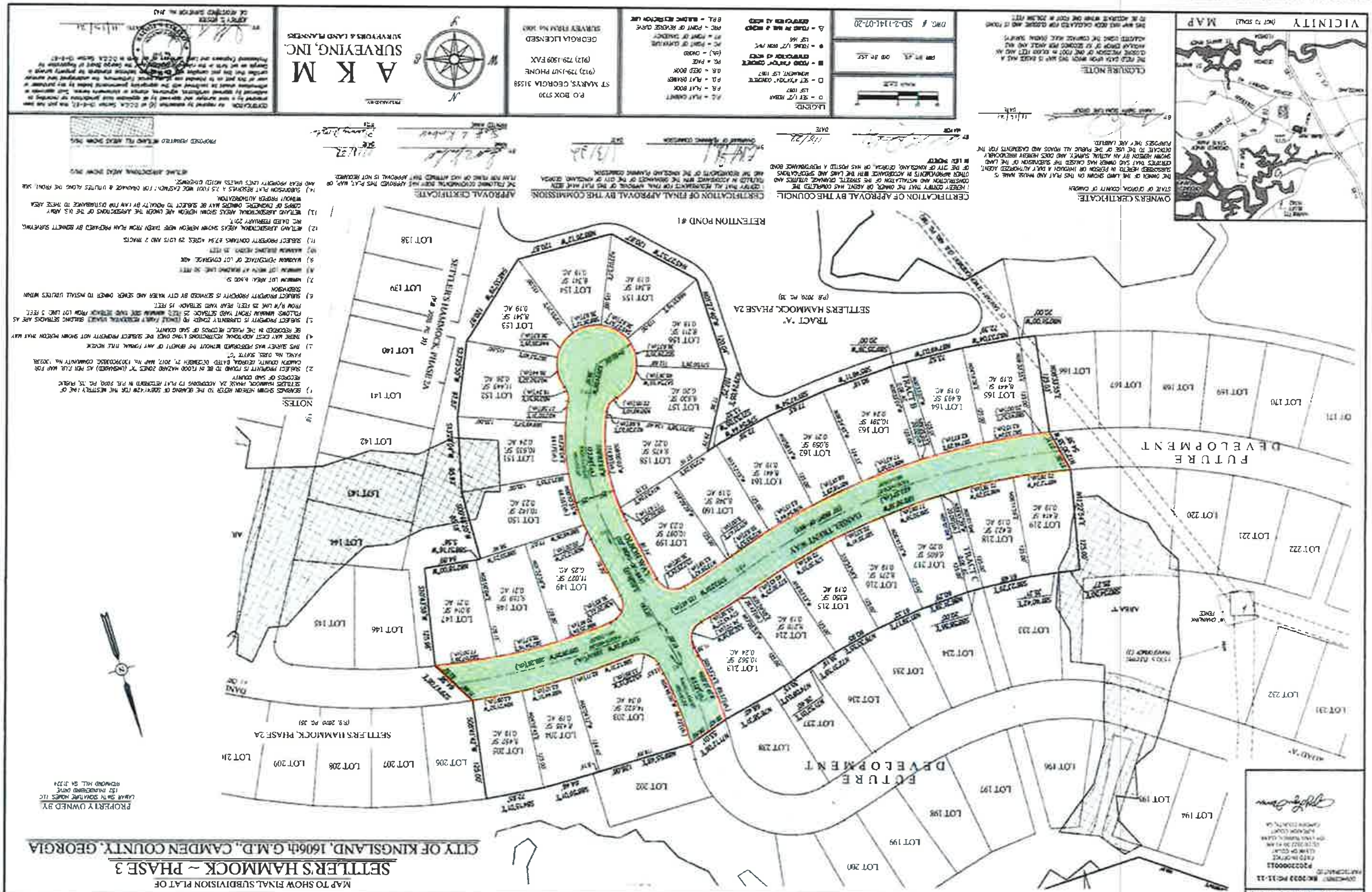
Zoning: PD/R-1

Is Proposal Consistent with the Comprehensive Plan? Yes

Staff Recommendation: Staff Recommends approval

Scott L. Kimball

Planning Director



MAP TO SHOW FINAL SUBDIVISION PLAT OF
SETTLER'S HAMMOCK ~ PHASE 3
CITY OF KINGSLAND, 1606th G.M.D., CAMDEN COUNTY, GEORGIA
FUTURE DEVELOPMENT
RETENTION POND #1
TRACT "A"
SETTLER'S HAMMOCK, PHASE 2A
VICINITY MAP
OWNER'S CERTIFICATE:
CLOSURE NOTE:
CERTIFICATION OF APPROVAL BY THE COUNCIL
CERTIFICATION OF FINAL APPROVAL BY THE COMMISSION
APPROVAL CERTIFICATE:
LEGEND:
NOTES:
P.O. BOX 5730
ST MARYS, GEORGIA 31558
(912) 729-1507 FAX
GEORGIA LICENSED
A K M
SURVEYING, INC.
SURVEYORS & LAND PLANNERS
DWG. # SD-2-1141-07-20
PROPERTY OWNED BY

RESOLUTION ACCEPTING PROPERTY

Whereas, the City of Kingsland has previously approved the subdivision plan of:

Settler's Hammock, Phase 3 Subdivision, as shown on that plat of survey prepared by Jeffery S. Foster Registered Surveyor No. 3143, dated 1/19/22, recorded in Plat Book 2022, Page 11-11, Camden County, Georgia, records.

Whereas, all streets and other improvements required under ordinance of the City of Kingsland have been completed and accepted by the City of Kingsland: and

Whereas, LSSD Settlers Hammock, LLC has tendered to the City of Kingsland a Quit Claim Deed conveying the following property:

All that certain real property consisting of a 50 foot right of way located in the County of Camden, State of Georgia, and identified as "Daniel Trent Way (50' Right of Way)" and "Olson Way" and more fully and accurately shown and descried on that certain plat of survey prepared by Jeffery S. Foster Registered Surveyor No. 3143, dated 1/19/22, recorded in Plat Book 2022, Page 11-11, Camden County, Georgia, records.

Together with all water and sewer systems and infrastructure located therein and also together with all utility and drainage easements rights dedicated on the aforementioned subdivision plat. This conveyance shall not include any irrigation lines and wells located within the property being conveyed. Grantor hereby reserve an easement over, under and through the aforesaid property for the placement, repair, and maintenance of irrigation lines and wells.

Which deed is acceptable to the City of Kingsland:

NOW THEREFORE BE IT RESOLVED BY THE MAYOR AND COUNCIL OF THE CITY OF KINGSLAND, GEORGIA, that the deed from LSSD Settlers Hammock, LLC to the City of Kingsland, Georgia, conveying the aforesaid street and easements within the subdivisions, dated______________, is hereby accepted by the City of Kingsland.

THIS ____ day of ____________________, 2021

City of Kingsland, Georgia

By: ______________________________

Its Mayor

Attest:______________________________

Its Clerk

Return Recorded Document to:

MATTHEW C. WEINER, ESQ.
ATTORNEY AT LAW
222 E. GORDON STREET
SAVANNAH, GA 31401

LIMITED WARRANTY DEED
FOR RIGHT OF WAY

STATE OF GEORGIA

COUNTY OF CAMDEN

THIS INDENTURE made this __ day of MAY, 2024, between **LSSD SETTLERS HAMOCK, LLC**, a Georgia limited liability company, as party or parties of the first part, hereinafter called Grantor, and **CITY OF KINGSLAND**, 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, that certain real property consisting of a 50 foot right of way located in the County of Camden, State of Georgia, and identified as "Daniel Trent Way (50' Right of Way)" and "Olson Way" on Exhibit "A" attached hereto and incorporated herein.

This Deed is given subject to all easements and restrictions of record.

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 the presence of:	**LSSD SETTLERS HAMMOCK, LLC**
(Unofficial Witness)	(Seal) By: Byron Lamar Smith Its: Manager
(Notary Public)	

JENNIFER M. MCCARDLE
NOTARY PUBLIC
COMMISSION EXPIRES MARCH 29, 2028
EFFINGHAM COUNTY, GEORGIA

City Council
107 South Lee Street
Kingsland, GA 31548

SCHEDULED

Meeting: 06/10/24 06:00 PM
Department: Planning and Zoning
Category: Planning & Zoning
Prepared By: Natalie Moreland
Initiator: Natalie Moreland
Sponsors:
DOC ID: 4475

AGENDA ITEM (ID # 4475)

Approval of Special Use Permit-1801 Harrietts Bluff Rd.-Map & Parcel 093 017A

Chunlan Zhao has applied for a Special Use Permit for parcel 093 017A located at 1801 Harrietts Bluff Road. The purpose of the Special Use Permit is for the applicant to be able to operate a retail business that includes the sale of decorative steel gates, roof panels, and other building materials in a C-4 zoning district. The Kingsland Zoning and Land Development Ordinance, Sec.61.4.2- C-4, Interchange Commercial Permitted Uses does not allow for this type of business.

Planning Commission recommends approval.

Kingsland
GEORGIA | EST. 1908

The City of Kingsland, GA
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Ph: 912-729-5613
Fax: 912-729-7618

Planning and Community Development

Staff Report

Planning Commission Meeting Date: June 3, 2024

City Council Meeting Date: June 10, 2024

Agenda Item: Special Use Permit

Background:

Chunlan Zhao has applied for a Special Use Permit for parcel 093 017A located at 1801 Harriett's Bluff Rd. The purpose of the request is for the applicant to be able to operate retail business in a C-4 zoning district, that includes the sale of decorative steel gates, roof panels, and other building materials.

Summary:

The Kingsland Zoning Ordinance for C-4 Interchange Commercial does not allow for this type of business. However, the property is buffered by natural vegetation and large trees from I-95. The adjacent properties are mostly vacant or undeveloped and the fact that there is light transfer truck and tourist traffic on Harriett's Bluff Rd., Planning Staff agrees that this type of business would not have a negative impact on the C-4 Zoning District.

Zoning: C-4

Is Proposal Consistent with the Comprehensive Plan? Yes

Staff Recommendation: Staff recommends approval

Scott L. Kimball
Planning & Zoning Director

1801 Harriett Bluff Rd
Woodbine, GA 31569

Discretion of selling products

Product 1. Steel Gates:

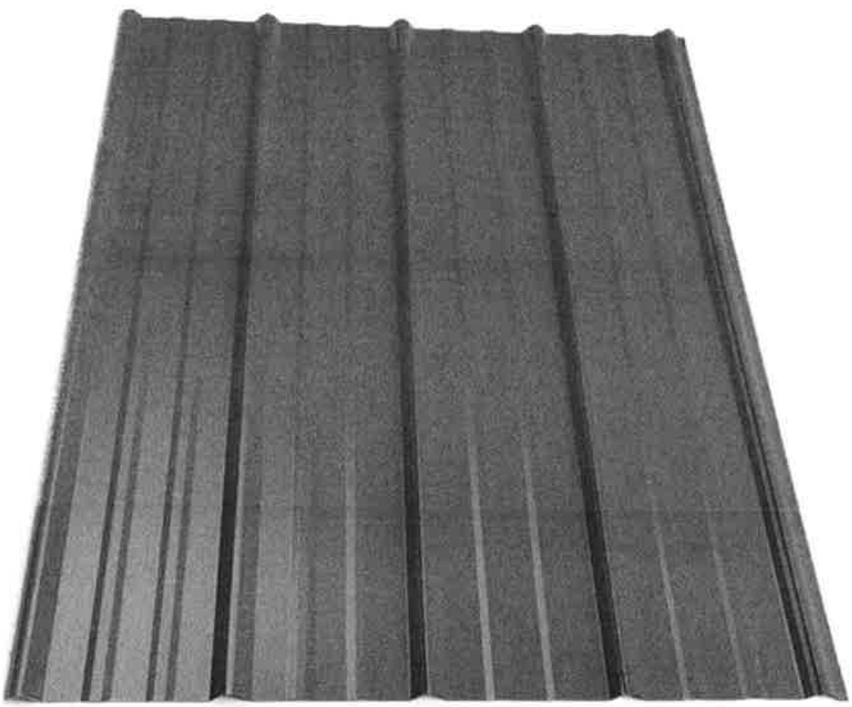
12ft; 14ft; 16ft and 18ft

- **Height: 91 inches high on the high side, 71 inches on the low side.**
- **Inner frame: 1*1inches. Outer frame: 2*2inches.**
- **Frame space: 3.8inches~4.2inches.**
- **Artwork pattern in the middle of Gate: 35*51inches.**
- **Surface treatment: powder coated**
- **Color: black & gold**

Product 2. Painted Galvalume Steel root Panel:

Size: 8ft, 10ft, 12ft, and 16ft

12ft: 144in L X 37.5 in W X 0.016 H



Product 3. Decorative Exterior Wall (PU material)

Size: W3ft X L14ft

Product 4. Steel Square tube

Size:

Length: 36in, 48in, and 72in

Width: 0.5in, 0.75in, 1,25in

Planning and Zoning
105 South Lee Street
Kingsland, GA 31548

SCHEDULED

Meeting: 06/03/24 06:00 PM
Department: Planning and Zoning
Category: Planning & Zoning
Prepared By: Natalie Moreland
Initiator: Natalie Moreland
Sponsors:

AGENDA ITEM (ID # 4462)

DOC ID: 4462

Special Use Permit-Parcel 093 017A-1801 Harrietts Bluff Rd.

Chunlan Zhao has applied for a Special Use Permit for parcel 093 017A located at 1801 Harrietts Bluff Rd. The purpose of the Special Use Permit is for the applicant to be able to operate a retail business that includes the sale of decorative steel gates, roof panels, and other building materials in a c-4 zoning district. The Kingsland Zoning and Land Development Ordinance, Sec.61.4.2-C-4, Interchange Commercial Permitted Uses does not allow for this type of business. Zoning is C-4. Staff recommends approval.

The City of Kingsland, GA
107 South Lee Street
P.O. Box 250
Kingsland, GA 31548
Ph: 912-729-5613
Fax: 912-729-7618

Kingsland GEORGIA | EST 1908

Planning and Community Development

Staff Report

Planning Commission Meeting Date: June 3, 2024

City Council Meeting Date: June 10, 2024

Agenda Item: Special Use Permit

Background:

Chunlan Zhao has applied for a Special Use Permit for parcel 093 017A located at 1801 Harriett's Bluff Rd. The purpose of the request is for the applicant to be able to operate retail business in a C-4 zoning district, that includes the sale of decorative steel gates, roof panels, and other building materials.

Summary:

The Kingsland Zoning Ordinance for C-4 Interchange Commercial does not allow for this type of business. However, the property is buffered by natural vegetation and large trees from I-95. The adjacent properties are mostly vacant or undeveloped and the fact that there is light transfer truck and tourist traffic on Harriett's Bluff Rd., Planning Staff agrees that this type of business would not have a negative impact on the C-4 Zoning District.

Zoning: C-4

Is Proposal Consistent with the Comprehensive Plan? Yes

Staff Recommendation: Staff recommends approval

Scott L. Kimball
Planning & Zoning Director

Kingsland
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The City of Kingsland, GA
107 South Lee Street
P.O. Box 250
Kingsland, GA 31548
Ph: 912-729-5613
Fax: 912-729-7618

Member:

Bryant Shepard, Chairman
Fyrth Morris, Vice Chairman
Walter Fuller, Jr.
Michael Haynes
Matthew Hooks
Kathryn Markes
Rebecca Shannon

TO WHOM IT MAY CONCERN:

Chunlan Zhao has filed an application with our office. The applicant asks that the Kingsland Planning Commission recommend approval and that the Kingsland City Council approve the following item:

(X) SPECIAL USE PERMIT: The applicant has applied for a Special Use Permit for parcel 093 017A located at 1801 Harrietts Bluff Rd. The purpose of the Special Use Permit is for the applicant to be able to operate a retail business that includes the sale of decorative steel gates, roof panels, and other building materials in a C-4 zoning district. The Kingsland Zoning and Land Development Ordinance, Sec.61.4.2- C-4, Interchange Commercial Permitted Uses does not allow for this type of business.

In order to review the application, the Kingsland Planning Commission will hold a public hearing on Monday, June 3, 2024 at 6:00 p.m. and the Kingsland City Council will vote on the Planning Commission recommendation at their meeting on Monday, June 10, 2024 at 6:00 p.m. at Kingsland City Hall in the Council Chambers located at 107 S. Lee St. in Downtown Kingsland.

If you are unable to attend either meeting, you may submit a written statement to our office which will be read at the meeting, or give me a call expressing your concern. For further information, please call our office at 912-729-8296.

Sincerely,

Scott L. Kimball

Scott Kimball, Planning Director

June - 240071

APPLICATION FOR SPECIAL USE PERMIT

Kingsland, Georgia

This Application must be filed with the Planning & Zoning Administrator at least 26 days before the Planning Commission meeting at which it will be heard. The Kingsland Planning Commission will hold at least one public hearing and make a recommendation about your request within 45 days of the date you file a complete application. The City Council will then issue or deny the permit.

TO BE COMPLETED BY APPLICANT:

1. Your Name: Chunlan Zhao Phone: 404-735-9050
   Mailing Address: 131 Demeries Lake Lane Richmond Hill, Ga 31324
2. The Planning & Zoning Administrator informed me that a special use permit is required at the time I applied for (check one):
   ( ) A Zoning Amendment (rezoning)
   ( ) A home occupation
   (✓) Other Business Use
3. Location of property:
   Street Address 1801 Harrietts Bluff Rd.
   Parcel No. 093 017A Lot No. ______
4. Present Zoning C-4 (Interchange Commercial)
5. Owner of property, if not you: (Name, Address & Phone Number, please)
   Chunlan Zhao ; 131 Demeries lake Ln. Richmond Hill, GA 31324
   404-735-9050.
6. Proposed use of property: steel gate. ~~metal~~ steel tube, steel roof pannel. Decorative Exterior Wall

NOTE: PLEASE ATTACH A SITE PLAN OR SURVEY PLAT AND SPECIAL PERMIT FEE OF $300. THESE ITEMS MUST BE SUBMITTED WITH THE COMPLETED APPLICATION. If your property is in any multi-family, mobile home, commercial or industrial zoning district, you are required to submit a site plan at the time you file this application. **YOUR PRESENCE OR THAT OF YOUR REPRESENTATIVE IS ENCOURAGED AT THE PLANNING COMMISSION PUBLIC HEARING.**

Signed: [signature] Date: 05/10/2024

TO BE COMPLETED BY PLANNING & ZONING ADMINISTRATOR:

1. Has the correct fee been paid?
   (✓) Yes ( ) No Amount $ 300.00
2. Date complete application filed: 5-10-24
3. List of attachments:
   (✓) Simple map with property owner's name
   ( ) Site Plan
   (✓) Other
4. Public hearing:
   (✓) Date applicant notified: 5-10-24
   (✓) Date hearing advertised: 5-16-24
   (✓) Date hearing held: 6-3-24
5. Planning Commission recommended:
   ( ) Approval ( ) Denial Date: ______
   Conditions of approval or reasons for denial: ______
6. City Council: ( ) Approved ( ) Denied
   Conditions of approval or reasons for denial: ______
7. Date applicant notified of final action: 6-11-24

1801 Harriett Bluff Rd
Woodbine, GA 31569

Discretion of selling products

Product 1. Steel Gates:

12ft; 14ft; 16ft and 18ft

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Size: W3ft X L14ft

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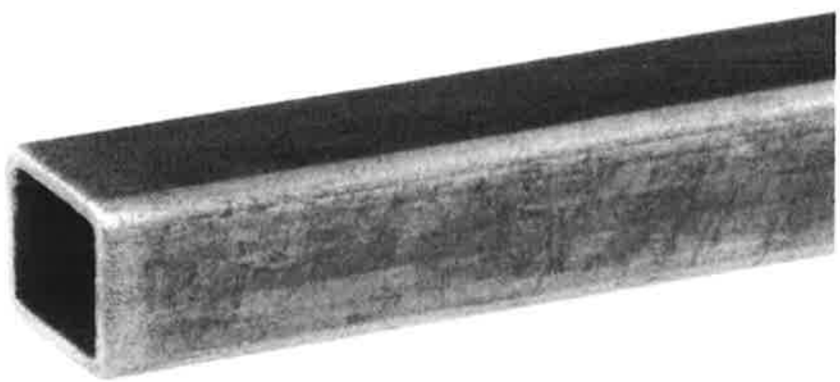

1801 HARRIETTS BLUFF RD
093 017A

GREEN CEDAR LLC **1833 OSBORNE RD** **ST MARYS GA 31558**	**SPACEPORT 34 LLC** **3300 N 29TH AVE** **SUITE 101** **HOLLYWOOD FL 33020**	**IRTIZA & NAEEM RAOFF** **2600 SCRUBBY BLUFF RD** **KINGSLAND GA 31548**
KEMP RIDGE HOLDINGS LLC **C/O CIRCLE K STORES INC** **PROPERTY TAX DC-17** **P O BOX 52085** **PHOENIX AZ 85072**	**WOODBINE FRESH FARMS LLC** **304 N SWEETWATER COVE BLVD** **LONGWOOD FL 32779**	

The City of Kingsland, GA
107 South Lee Street
P.O. Box 250
Kingsland, GA 31548
Ph: 912-729-5613
Fax: 912-729-7618

Planning and Community Development

Staff Report

Planning Commission Meeting Date: June 3, 2024

City Council Meeting Date: June 10, 2024

Agenda Item: Special Use Permit

Background:

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Zoning: C-4

Is Proposal Consistent with the Comprehensive Plan? Yes

Staff Recommendation: Staff recommends approval

Scott L. Kimball
Planning & Zoning Director

June
240071

APPLICATION FOR SPECIAL USE PERMIT

Kingsland, Georgia

This Application must be filed with the Planning & Zoning Administrator at least 26 days before the Planning Commission meeting at which it will be heard. The Kingsland Planning Commission will hold at least one public hearing and make a recommendation about your request within 45 days of the date you file a complete application. The City Council will then issue or deny the permit.

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   Parcel No. 093 017A Lot No. ______
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Signed: [signature] Date: 05/10/2024

TO BE COMPLETED BY PLANNING & ZONING ADMINISTRATOR:

1. Has the correct fee been paid?
   (✓) Yes ( ) No Amount $ 300.00
2. Date complete application filed: 5-10-24
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6. City Council: ( ) Approved ( ) Denied
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1801 Harriett Bluff Rd
Woodbine, GA 31569

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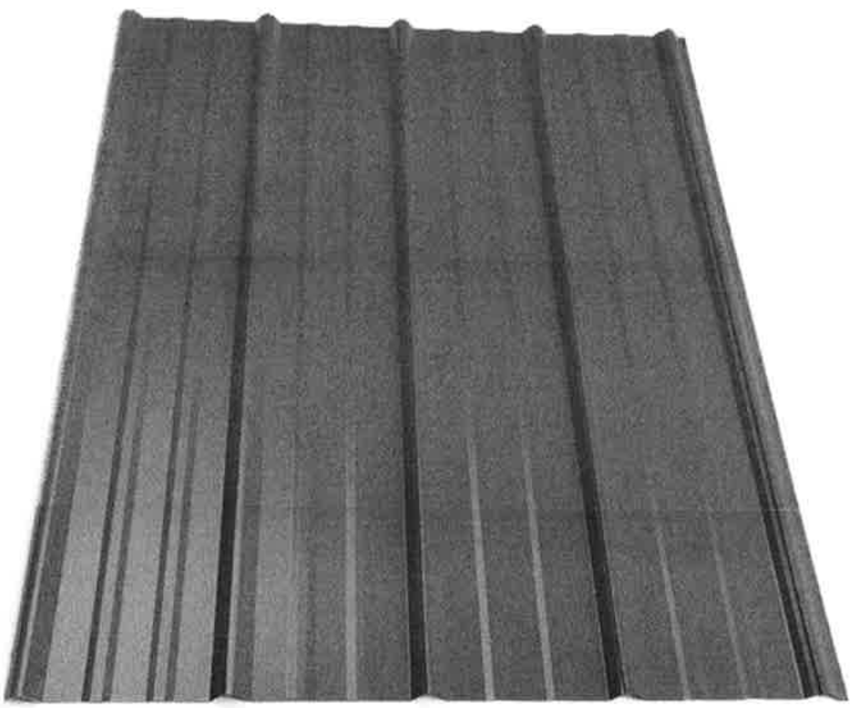

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Product 4. Steel Square tube

Size:

Length: 36in, 48in, and 72in

Width: 0.5in, 0.75in, 1,25in

City Council
107 South Lee Street
Kingsland, GA 31548

SCHEDULED

Meeting: 06/10/24 06:00 PM
Department: Planning and Zoning
Category: Planning & Zoning
Prepared By: Natalie Moreland
Initiator: Natalie Moreland
Sponsors:

AGENDA ITEM (ID # 4477)

DOC ID: 4477

Approval of Re-Zoning-Parcels 093 054O, 093 054R, and 093 054S

James Coughlin with Camden County JDA is requesting parcels 093 054O, 093 054R, and 093 054S be re-zoned to I-G (General Industrial) for the purpose of allowing additional types of business uses other than what the existing zoning I-L (Light Industrial) allows. The parcels are located in the Camden County Industrial Park containing a total of approximately 29 acres.

Planning Commission recommends approval.

The City of Kingsland, GA
107 South Lee Street
P.O. Box 250
Kingsland, GA 31548
Ph: 912-729-5613
Fax: 912-729-7618

GEORGIA | EST. 1908

Planning and Community Development

Staff Report

Planning Commission Meeting Date: June 3, 2024

City Council Meeting Date: June 10, 2024

Agenda Item: Rezoning

Background:

The area surrounding the parcels are located in the Camden County industrial park and the are a mixture of light and general industrial. The JDA has requested to rezone the parcels to I-G. (General Industrial)

Summary:

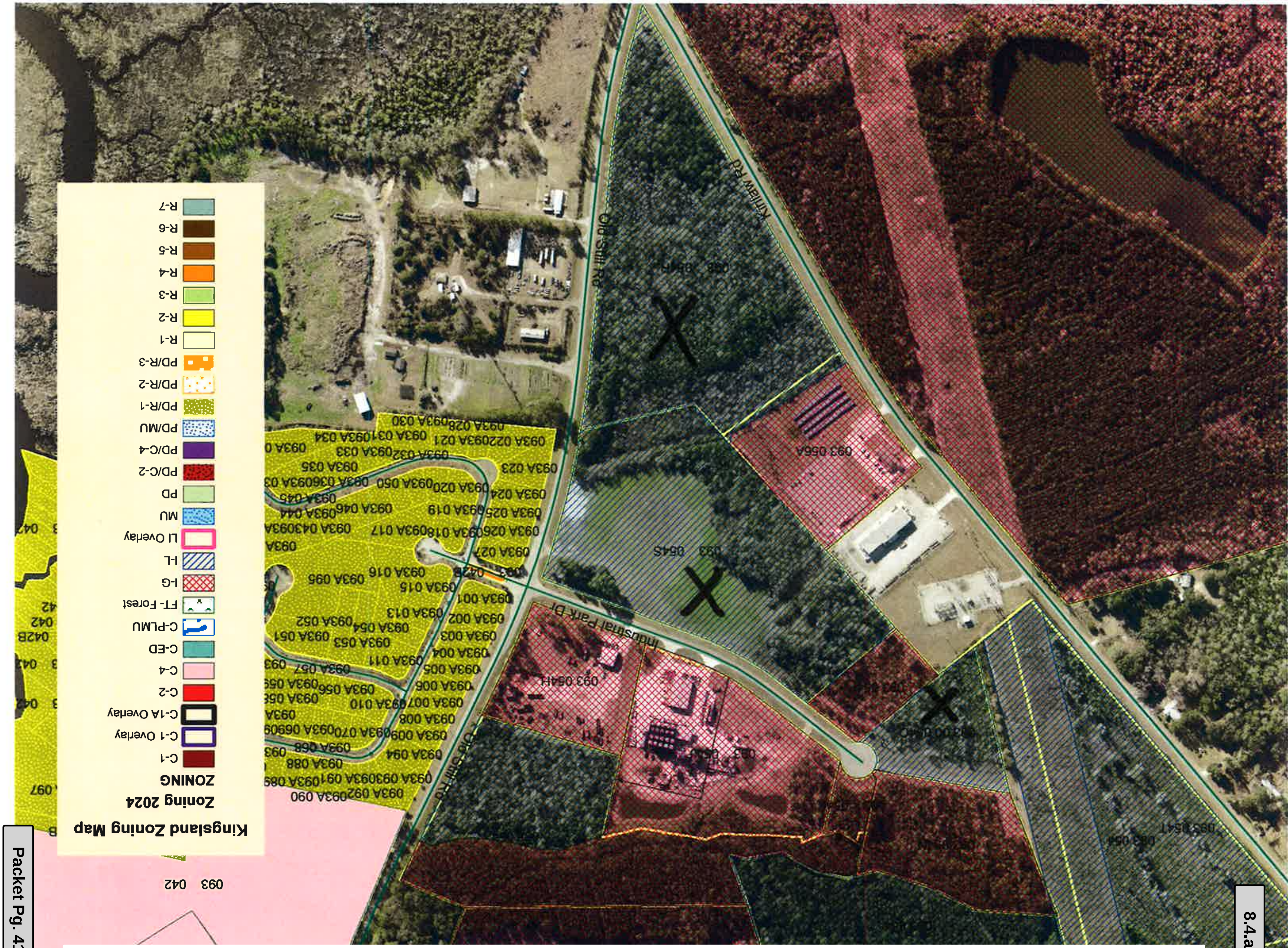
James Coughlin, with Camden County Joint Development Authority has applied for a rezoning of parcels 093 054O, 093 054R, and 093 054S containing approx. 29 acres located in the Camden County Industrial Park. The applicant is requesting the parcels be rezoned to I-G (General Industrial) for the purpose of allowing additional types of industrial uses and to allow for higher structures.

Current Zoning: I-L (Light Industrial)

Is Proposal Consistent with the Comprehensive Plan? Yes

Staff Recommendation: Staff Recommends Approval

Scott L. Kimball
Planning Director



Kingsland Zoning Map
Zoning 2024
ZONING
C-1
C-1 Overlay
C-1A Overlay
C-2
C-4
C-ED
C-PLMU
FT- Forest
I-G
I-L
LI Overlay
MU
PD
PD/C-2
PD/C-4
PD/MU
PD/R-1
PD/R-2
PD/R-3
R-1
R-2
R-3
R-4
R-5
R-6
R-7
Killaw Rd
Old Still Rd
Industrial Park Dr
093 054R
093 054S
093 054A
093 054H
093 042

Camden County, GA

Overview

Legend

- Parcels
- USA Major Highways
- Limited Access
- Highway
- Major Road
- Local Road
- Minor Road
- Other Road
- Ramp
- Ferry
- Pedestrian Way
- City Labels

Parcel ID	093 054O
Class Code	Industrial
Taxing District	KINGSLAND KINGSLAND
Acres	2.79

Owner	CAMDEN COUNTY JOINT DEV AUTHORITY 531 NORTH LEE STREET KINGSLAND, GA 31548
Physical Address	n/a
Assessed Value	Value $54955

Last 2 Sales

Date	Net Price	Reason	Qual
5/4/2023	$111600	NM	U
11/12/2020	$30000	LM	Q

(Note: Not to be used on legal documents)

THE PARCEL LINES SHOWN ON THIS SITE ARE NOT LEGAL BOUNDRIES AND MUST NOT BE USED FOR LEGAL DOCUMENTS. THE PARCEL LINEWORK ARE FOR LOCATING PARCELS FOR TAX PURPOSES ONLY. THEY ARE NOT SURVEYS DUE TO THE NATURE OF HOW THE ARE PRODUCED. LEGAL BOUNDRIES SHOULD BE TAKEN FROM LEGALLY DOCUMENTED PLATS AND DEEDS.

Date created: 4/29/2024
Last Data Uploaded: 4/27/2024 3:28:17 AM

Developed by Schneider GEOSPATIAL

The City of Kingsland, GA
107 South Lee Street
P.O. Box 250
Kingsland, GA 31548
Ph: 912-729-5613
Fax: 912-729-7618

Planning and Community Development

Staff Report

Planning Commission Meeting Date: June 3, 2024

City Council Meeting Date: June 10, 2024

Agenda Item: Rezoning

Background:

The area surrounding the parcels are located in the Camden County industrial park and the are a mixture of light and general industrial. The JDA has requested to rezone the parcels to I-G. (General Industrial)

Summary:

James Coughlin, with Camden County Joint Development Authority has applied for a rezoning of parcels 093 054O, 093 054R, and 093 054S containing approx. 29 acres located in the Camden County Industrial Park. The applicant is requesting the parcels be rezoned to I-G (General Industrial) for the purpose of allowing additional types of industrial uses and to allow for higher structures.

Current Zoning: I-L (Light Industrial)

Is Proposal Consistent with the Comprehensive Plan? Yes

Staff Recommendation: Staff Recommends Approval

Scott L. Kimball
Planning Director

June 2024

CITY OF KINGSLAND ZONING APPLICATION

Please attach to this application a plot plan/survey showing the location and dimensions of the property to be rezoned. Also attach the appropriate fee for this request (fee schedule attached). If paid by check make payable to "City of Kingsland".

REQUEST

EXISTING ZONING: 093 054R - I-L / 093 054 S - I-L / 093 054O - I-L

EXISTING USE: 093 054R - timbered - vacant / 093 054 S - cleared - vacant / 093-054O - partially cleared - vacant

REQUESTED ZONING: 093 054R - I-G / 093 054S - I-G / 093-054O - I-G

REQUESTED USE: 093-054R - industrial development / 093 054S - industrial development / 093 054O - industrial development

PROPERTY OWNER(S)

Name(s) Camden County Joint Development Authority

Address 531 North Lee Street Kingsland, Georgia 31548

Phone No. 912-729-7530 (Work and/or home); Fax No. ____

___Individual ___Partnership ___Sole Proprietor ___Firm ___Corporation ___Association X Local Government Authority

Corporation: Submit list of officers, directors and major stockholders with name, address and title.

Partnership: Submit list of all partners with name, address and title.

GENERAL INFORMATION

Location or Legal Property Description: parcel 093 054R, 093 054S, & 093 054O in the Camden County Industrial Park

Property Address: parcel 093 054R - no address / 093 054S - no address / 093 054S - 110 Industrial Park [illegible]

Tax Map Reference Number: parcel 093 054R parcel 093 054S parcel 093 054O Zoning Map: I-L Kingsland

Property Size: 093 054R - ~~[illegible]~~ 13.54 Ac / 093 054S - 12.59 Ac. / 093-054O - 2.79 Ac

Property Frontage: 093 054R - 601' on Old St[illegible] / 1209' on Kinlaw / 093 054S - 604 Feet / 093-054O - 116'

City of Kingsland Zoning Application
Page Two

Check One: ✓ Paved Road or ______ Unpaved
✓ Public Water or ______ Individual Well
✓ Public Sewer or ______ Individual Septic Tank

REASON FOR REQUEST

Would be in harmony with the character of the neighborhood because ~~all~~ most of the surrounding property is zoned Industrial - General. This property rezoning will help with two companies who are interested in locating in the industrial park.

Would not be detrimental to property or persons in the area because Most of the surrounding property owners/businesses are of an industrial nature.

Other Comments: ______________________________

DISCLOSURE

Identify all members of the City Council of the City of Kingsland, City of Kingsland Planning Commission and Employees of the City of Kingsland Community Development who

(1) Have a property interest in the real property affected by this request

None

(2) Have a financial interest (direct ownership interest of the total assets or capital stock of a business entity where such ownership interest is more than 10% in any business entity which has a property interest in the real property affected by this request

None

(3) Have a member of the family (spouse, mother, father, brother, sister, son or daughter) having a property financial interest as herein defined, in the real property affected by this request

None

City of Kingsland Zoning Application
Page Three

CAMPAIGN CONTRIBUTION

List below the names of local government officials of the City of Kingsland to whom campaign contributions were made, within two (2) years immediately preceding the filing of this application, which campaign contributions total $250.00 or more or to whom gifts were made having a total value of $250.00 or more.

Elected Officials Name	Amount of Description of Gift
None.	None
None	None

SIGNATURE(S) OF OWNER(S)

I/We, the owner(s), submit this application and certify that the information is correct and true to the best of my knowledge.

Owner

Owner

Owner

HEARING DATE

This application is scheduled to be heard by the City of Kingsland Planning Commission at their meeting of June 3rd, 2024, at 6:00 P.M. in the Council Chambers of Kingsland City Hall, 107 S. Lee St., Kingsland, Georgia.

Owner or agent must be present in order for the request to be heard.

RECEIPT

Submission fee for rezoning received from James Laughlin
in the amount of $ 0. per Lee Spell.

City of Kingsland
BY:
Planning & Zoning Administrator

Date: 5/6/24

City of Kingsland Community Planning and Development Department

AGENT AUTHORIZATION FORM

Ownership Certification

State of Georgia
County of Camden

I, the undersigned, do hereby certify that I am the owner of the property to be affected by the proposed application to the City of Kingsland Planning Commission dated 5/6/24 , 200___, by virtue of a deed dated ______________________, _______, on file in the Office of the Clerk of Superior Court, Camden County, in Deed Book 610 , Page 129 .

James M. Coughlin
Owner's Printed/Typed Name

Other Owner's Printed/Typed Name

James M. Co
Owner's Signature Date: 04/29/24

Other Owner's Signature Date: ________

Agent Authorization

I/We, the undersigned owner(s) of the property involved in this application, do hereby authorize ______________________________ to act as Agent in submitting and representing the above identified application in my/our behalf.

Owner's Signature

Other Owner's Signature

I accept this authorization to act on behalf of the above ownership as Agent.

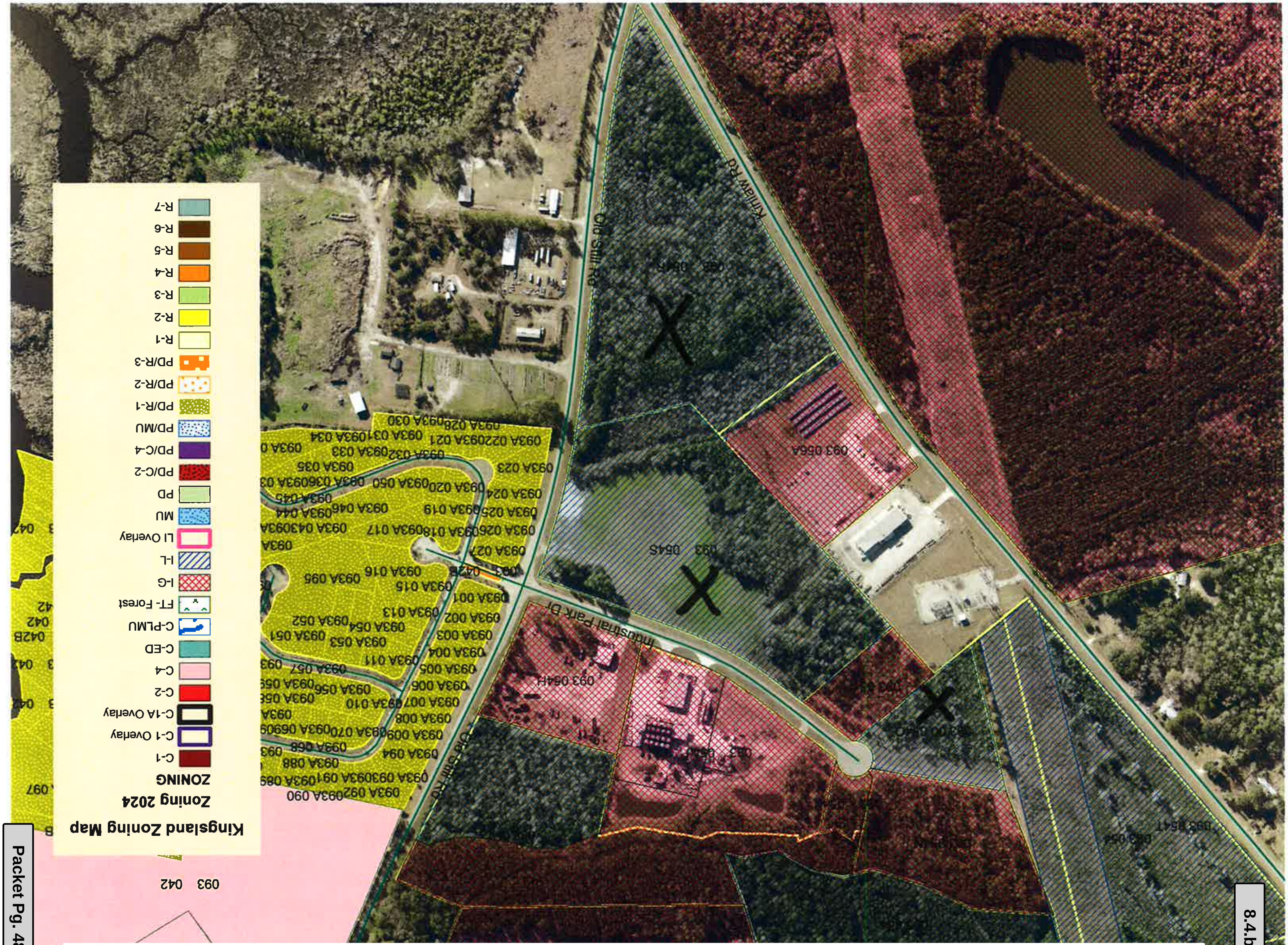
Authorized Agent's Name-Printed

Authorized Agent's Signature

Date

Community Planning and Development

Received by: Scott Kimbrell Date: 5/6/24


Kingsland Zoning Map
Zoning 2024
ZONING
C-1
C-1 Overlay
C-1A Overlay
C-2
C-4
C-ED
C-PLMU
FT- Forest
I-G
I-L
LI Overlay
MU
PD
PD/C-2
PD/C-4
PD/MU
PD/R-1
PD/R-2
PD/R-3
R-1
R-2
R-3
R-4
R-5
R-6
R-7
Kinlaw Rd
Old Still Rd
Industrial Park Dr
093 054R
093 054S
093 054H
093 056A
093 042

Camden County, GA

Overview

Legend

- Parcels
- **USA Major Highways**
- Limited Access
- Highway
- Major Road
- Local Road
- Minor Road
- Other Road
- Ramp
- Ferry
- Pedestrian Way
- **City Labels**

Parcel ID	093 054O	**Owner**	CAMDEN COUNTY JOINT DEV AUTHORITY 531 NORTH LEE STREET KINGSLAND, GA 31548
Class Code	Industrial		
Taxing District	KINGSLAND KINGSLAND		
Acres	2.79	**Physical Address**	n/a
		Assessed Value	Value $54955

Last 2 Sales

Date	Net Price	Reason	Qual
5/4/2023	$111600	NM	U
11/12/2020	$30000	LM	Q

(Note: Not to be used on legal documents)

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Last Data Uploaded: 4/27/2024 3:28:17 AM

Developed by Schneider GEOSPATIAL

Planning and Zoning
105 South Lee Street
Kingsland, GA 31548

SCHEDULED

AGENDA ITEM (ID # 4460)

Meeting: 06/03/24 06:00 PM
Department: Planning and Zoning
Category: Planning & Zoning
Prepared By: Natalie Moreland
Initiator: Natalie Moreland
Sponsors:
DOC ID: 4460

Re-Zoning-Parcels 093 054O, 093 054R, and 093 054S

James Coughlin with Camden County JDA has applied for a re-zoning of parcels 093 054O, 093 054R, and 093 054S containing approximately 29 acres located in the Camden County Industrial Park. The applicant is requesting the parcels be re-zoned to I-G (General Industrial) for the purpose of allowing additional types of industrial uses and to allow for higher structures. Current Zoning is I-L (Light Industrial). Staff recommends approval.

The City of Kingsland, GA
107 South Lee Street
P.O. Box 250
Kingsland, GA 31548
Ph: 912-729-5613
Fax: 912-729-7618

Kingsland
GEORGIA | EST 1908

Planning and Community Development

Staff Report

Planning Commission Meeting Date: June 3, 2024

City Council Meeting Date: June 10, 2024

Agenda Item: Rezoning

Background:

The area surrounding the parcels are located in the Camden County industrial park and the are a mixture of light and general industrial. The JDA has requested to rezone the parcels to I-G. (General Industrial)

Summary:

James Coughlin, with Camden County Joint Development Authority has applied for a rezoning of parcels 093 054O, 093 054R, and 093 054S containing approx. 29 acres located in the Camden County Industrial Park. The applicant is requesting the parcels be rezoned to I-G (General Industrial) for the purpose of allowing additional types of industrial uses and to allow for higher structures.

Current Zoning: I-L (Light Industrial)

Is Proposal Consistent with the Comprehensive Plan? Yes

Staff Recommendation: Staff Recommends Approval

Scott L. Kimball
Planning Director

The City of Kingsland, GA
107 South Lee Street
P.O. Box 250
Kingsland, GA 31548
Ph: 912-729-5613
Fax: 912-729-7618

Kingsland GEORGIA | EST 1908

Member:

Bryant Shepard, Chairman
Fyrth Morris, Vice Chairman
Walter Fuller, Jr.
Michael Haynes
Matthew Hooks
Kathryn Markes
Rebecca Shannon

TO WHOM IT MAY CONCERN:

James Coughlin with Camden County JDA has filed an application with our office. The applicant asks that the Kingsland Planning Commission recommend approval and that the Kingsland City Council approve the following item:

(X) RE-ZONING: The applicant has applied for a re-zoning of parcels 093 054O, 093 054R, and 093 054S. The applicant is requesting the parcel be re-zoned to I-G (General Industrial) for the purpose of allowing additional types of business uses other than what the existing zoning I-L (Light Industrial) allows. The parcels are located in the Camden County Industrial Park containing a total of approximately 29 acres.

In order to review the application, the Kingsland Planning Commission will hold a public hearing on Monday, June 3, 2024 at 6:00 p.m. and the Kingsland City Council will vote on the Planning Commission recommendation at their meeting on Monday, June 10, 2024 at 6:00 p.m. at Kingsland City Hall in the Council Chambers located at 107 S. Lee St. in Downtown Kingsland.

If you are unable to attend either meeting, you may submit a written statement to our office which will be read at the meeting, or give me a call expressing your concern. For further information, please call our office at 912-729-8296.

Sincerely,

Scott L. Kimball

Scott Kimball, Planning Director

June 2024

CITY OF KINGSLAND ZONING APPLICATION

Please attach to this application a plot plan/survey showing the location and dimensions of the property to be rezoned. Also attach the appropriate fee for this request (fee schedule attached). If paid by check make payable to "City of Kingsland".

REQUEST

EXISTING ZONING: 093 054R - I-L; 093 054S - I-L; 093 054O - I-L

EXISTING USE: 093 054R - timbered - vacant; 093 054S - cleared - vacant; 093-054O - partially cleared - vacant

REQUESTED ZONING: 093 054R - I-G; 093 054S - I-G; 093-054O - I-G

REQUESTED USE: 093-054R - industrial development; 093 054S - industrial development; 093 054O - industrial development

PROPERTY OWNER(S)

Name(s): Camden County Joint Development Authority

Address: 531 North Lee Street Kingsland, Georgia 31548

Phone No. 912-729-7530 (Work and/or home); Fax No. ______

___Individual ___Partnership ___Sole Proprietor ___Firm ___Corporation
___Association X Local Government Authority

Corporation: Submit list of officers, directors and major stockholders with name, address and title.

Partnership: Submit list of all partners with name, address and title.

GENERAL INFORMATION

Location or Legal Property Description: parcel 093 054R, 093 054S, & 093 054O in the Camden County Industrial Park

Property Address: parcel 093 054R - no address / 093 054S - no address / 093 054S - 110 Industrial Park 1

Tax Map Reference Number: parcel 093 054R parcel 093 054S parcel 093 054O

Zoning Map: I-L Kingsland

Property Size: 093 054R - 13.54 Ac; 093 054S - 12.59 Ac.; 093-054O - 2.79 Ac

Property Frontage: 093 054R - 601' on Old St. 1209' on Kinlaw; 093 054S - 604 Feet; 093-054O - 116'

City of Kingsland Zoning Application
Page Two

Check One: ✓ Paved Road or ______ Unpaved
✓ Public Water or ______ Individual Well
✓ Public Sewer or ______ Individual Septic Tank

REASON FOR REQUEST

Would be in harmony with the character of the neighborhood because ~~all~~ most of the surrounding property is zoned Industrial - General. This property rezoning will help with two companies who are interested in locating in the industrial park.

Would not be detrimental to property or persons in the area because Most of the surrounding property owners/businesses are of an industrial nature.

Other Comments: ______

DISCLOSURE

Identify all members of the City Council of the City of Kingsland, City of Kingsland Planning Commission and Employees of the City of Kingsland Community Development who

(1) Have a property interest in the real property affected by this request

None

(2) Have a financial interest (direct ownership interest of the total assets or capital stock of a business entity where such ownership interest is more than 10% in any business entity which has a property interest in the real property affected by this request

None

(3) Have a member of the family (spouse, mother, father, brother, sister, son or daughter) having a property financial interest as herein defined, in the real property affected by this request

None

City of Kingsland Zoning Application
Page Three

CAMPAIGN CONTRIBUTION

List below the names of local government officials of the City of Kingsland to whom campaign contributions were made, within two (2) years immediately preceding the filing of this application, which campaign contributions total $250.00 or more or to whom gifts were made having a total value of $250.00 or more.

Elected Officials Name	Amount of Description of Gift
None.	None
None	None

SIGNATURE(S) OF OWNER(S)

I/We, the owner(s), submit this application and certify that the information is correct and true to the best of my knowledge.

Owner _[signature]_

Owner ______

Owner ______

HEARING DATE

This application is scheduled to be heard by the City of Kingsland Planning Commission at their meeting of June 3rd, 2024, at 6:00 P.M. in the Council Chambers of Kingsland City Hall, 107 S. Lee St., Kingsland, Georgia.

Owner or agent must be present in order for the request to be heard.

RECEIPT

Submission fee for rezoning received from James Laughlin
in the amount of $ 0 per Lee Spell.

City of Kingsland
BY: _[signature]_ Date: 5/6/24
Planning & Zoning Administrator

City of Kingsland Community Planning and Development Department

AGENT AUTHORIZATION FORM

Ownership Certification

State of Georgia
County of Camden

I, the undersigned, do hereby certify that I am the owner of the property to be affected by the proposed application to the City of Kingsland Planning Commission dated 5/6/24, 200___, by virtue of a deed dated ____________________, ______, on file in the Office of the Clerk of Superior Court, Camden County, in Deed Book 610, Page 129.

James M. Coughlin
Owner's Printed/Typed Name

Owner's Signature Date: 04/29/24

Other Owner's Printed/Typed Name

Other Owner's Signature Date: ________

Agent Authorization

I/We, the undersigned owner(s) of the property involved in this application, do hereby authorize ________________________________ to act as Agent in submitting and representing the above identified application in my/our behalf.

Owner's Signature

Other Owner's Signature

I accept this authorization to act on behalf of the above ownership as Agent.

Authorized Agent's Name-Printed

Authorized Agent's Signature

Date

Community Planning and Development

Received by: ________________ Date: 5/6/24

PARCELS 093 054R, 093 054S, 093 054O

OKEFENOKEE RURAL EMC
ATTN JOYCE STRICKLAND
P O BOX 602
NAHUNTA GA 31553

CAMDEN CO JOINT
DEVELOPMENT AUTHORITY
531 N LEE ST
KINGSLAND GA 31548

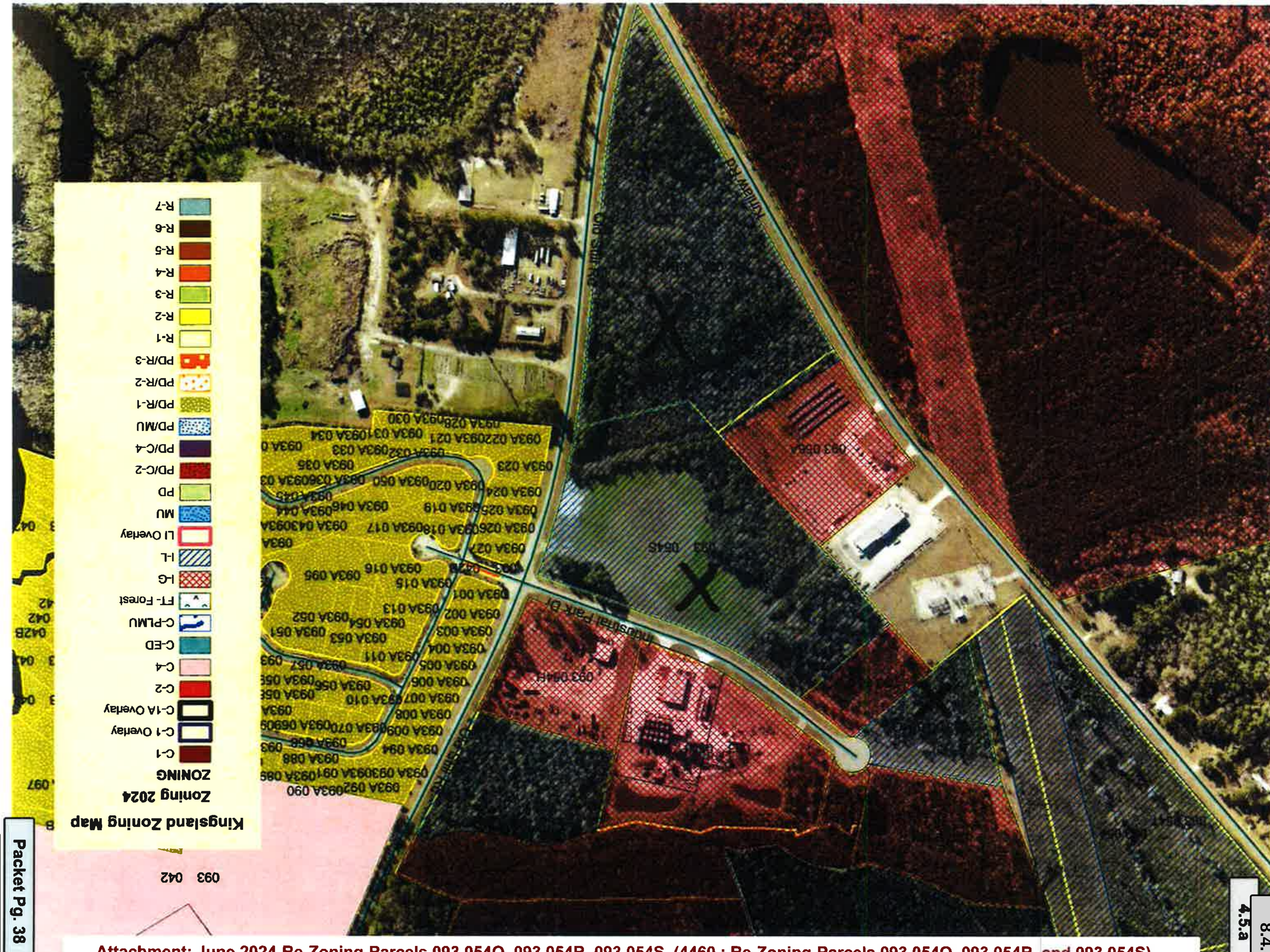
CUMBERLAND SERVICES LL
P O BOX 1317
KINGSLAND GA 31548

SUNERGY RECYCLING LLC
P O BOX 92108
AUSTIN TX 78709

BRITTANY MASON & CURTIS
EMORY HARPER JR
100 LANDING BLVD
WOODBINE GA 31569

KINAISHA K & CONELIUS
DONNELL ELLIOT-HATCHE
102 LANDING BLVD
WOODBINE GA 31569

D R HORTON INC
4220 RACETRACK RD
JACKSONVILLE FL 32259


Kingsland Zoning Map
Zoning 2024
ZONING
C-1
C-1 Overlay
C-1A Overlay
C-2
C-4
C-ED
C-PLMU
FT- Forest
I-G
I-L
LI Overlay
MU
PD
PD/C-2
PD/C-4
PD/MU
PD/R-1
PD/R-2
PD/R-3
R-1
R-2
R-3
R-4
R-5
R-6
R-7
Industrial Park Dr
Old Still Rd
Hamlaw Rd

Camden County, GA

Overview

Legend

- Parcels
- USA Major Highways
- Limited Access
- Highway
- Major Road
- Local Road
- Minor Road
- Other Road
- Ramp
- Ferry
- Pedestrian Way
- City Labels

Parcel ID	093 054O
Class Code	Industrial
Taxing District	KINGSLAND KINGSLAND
Acres	2.79

Owner	CAMDEN COUNTY JOINT DEV AUTHORITY 531 NORTH LEE STREET KINGSLAND, GA 31548
Physical Address	n/a
Assessed Value	Value $54955

Last 2 Sales

Date	Net Price	Reason	Qual
5/4/2023	$111600	NM	U
11/12/2020	$30000	LM	Q

(Note: Not to be used on legal documents)

THE PARCEL LINES SHOWN ON THIS SITE ARE NOT LEGAL BOUNDRIES AND MUST NOT BE USED FOR LEGAL DOCUMENTS. THE PARCEL LINEWORK ARE FOR LOCATING PARCELS FOR TAX PURPOSES ONLY. THEY ARE NOT SURVEYS DUE TO THE NATURE OF HOW THE ARE PRODUCED. LEGAL BOUNDRIES SHOULD BE TAKEN FROM LEGALLY DOCUMENTED PLATS AND DEEDS.

Date created: 4/29/2024
Last Data Uploaded: 4/27/2024 3:28:17 AM

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City Council
107 South Lee Street
Kingsland, GA 31548

SCHEDULED

AGENDA ITEM (ID # 4485)

Meeting: 06/10/24 06:00 PM
Department: City Manager
Category: Agreement
Prepared By: Lee Spell
Initiator: Lee Spell
Sponsors:
DOC ID: 4485

Approval Of: GMEBS Defined Benefit Ordinance and Adoption Agreement

An Ordinance to amend and restate the Retirement Plan for the Employees of the City of Kingsland, Georgia, in accordance with and subject to the terms and conditions set forth in the Adoption Agreement, any Addendum to the Adoption Agreement, the Georgia Municipal Employees Benefit System (GMEBS) Basic Plan Document, and the GMEBS Trust Agreement.
Staff recommends approval.

GEORGIA MUNICIPAL ASSOCIATION

RISK MANAGEMENT AND EMPLOYEE BENEFITS SERVICES

June 6, 2024

MEMORANDUM VIA E-MAIL
(rlewis@kingslandgeorgia.com)

TO: Mr. Robert Lewis
HR Director

FROM: Mr. Kevin Jeselnik
Assistant General Counsel

SUBJECT: **Action Required: Georgia Municipal Employees Benefit System Defined Benefit Retirement Plan Restatement**

The City of Kingsland previously adopted the Georgia Municipal Employees Benefit System ("GMEBS") Defined Benefit Retirement Plan ("Plan"), which is comprised of the Basic Plan Document and Adoption Agreement. The Plan is considered a "qualified plan" under the Internal Revenue Code, which is important to ensure the tax-exempt status of the trust fund.

To protect the Plan's tax-qualified status, GMEBS filed draft restated Plan documents, updated to reflect recent amendments and comply with changes in federal tax law, with the IRS on June 29, 2022. On August 31, 2023, the IRS issued a favorable opinion letter ("IRS opinion letter") for the restated Plan documents. The IRS opinion letter provides assurance to employers providing retirement benefits for their employees through the GMEBS Plan that GMEBS is maintaining a qualified pension benefit program that allows employees to accrue benefits tax-free until retirement benefits are distributed to them.

To ensure continued tax-qualified status for all GMEBS-member retirement plans, all participating employers must readopt their plans using the most recent IRS-approved Adoption Agreement. To that end, we have completed the attached Adoption Agreement to include the benefit and eligibility provisions that you currently have in place.

If the draft document is acceptable, please have the designated representatives sign and date where indicated (p. 39). Next, please scan and email the document to Gina Gresham at rgresham@gacities.com no later than **August 9, 2024**. We will then countersign it and return an electronic copy to you. Please note, GMEBS will not execute documents that have been edited by the city. If the Adoption Agreement requires revisions, please let us know before adopting it.

201 Pryor Street, SW • Atlanta, GA 30303-3606 • Tel 404.688.0472 • Toll Free 1.888.488.4462 • Website www.gacities.com
Mailing Address: PO Box 105377 • Atlanta, GA 30348

The draft Adoption Agreement will take effect on the date of its approval by the governing authority. **Please note that per O.C.G.A. § 47-5-40, the Adoption Agreement has been drafted in the form of an ordinance.**

We have also attached a copy of the restated Basic Plan Document and Amendment 1, which do not need to be adopted by the city. Finally, we have included a summary of key amendments to the Plan relating to the restatement.

If you have any questions about the information provided in this letter or require further information, please contact Gina Gresham.

Encl.

C: Mr. Steven Blackerby, City Attorney, City of Kingsland (w/ encl.)
Ms. Marinetty Bienvenu, Director, Retirement Quality Assurance (w/o encl.)
Ms. Michelle Warner, Director, GMEBS Retirement and DC Programs (w/o encl.)
Ms. Gwin Hall, Senior Associate General Counsel (w/o encl.)

SUMMARY OF KEY AMENDMENTS
TO THE RESTATED
GEORGIA MUNICIPAL EMPLOYEES BENEFIT SYSTEM
DEFINED BENEFIT RETIREMENT PLAN

I. GENERAL OVERVIEW

On August 31, 2023, the IRS issued a favorable opinion letter for the Amended and Restated Third Six-Year Cycle Georgia Municipal Employees Benefit System Defined Benefit Retirement Plan ("DB Plan" or "Plan"). The Plan, as approved, incorporates required federal law updates, as well as administrative updates adopted by the Board of Trustees of GMEBS over the last several years. The IRS requires that each Adopting Employer sign an updated DB Plan Adoption Agreement (and Addendum, if applicable).

II. SUMMARY OF KEY CHANGES TO THE BASIC PLAN DOCUMENT

Participating employers have already been apprised of the content of all amendments adopted by the Board before August 31, 2023. However, during its review, the IRS required GMEBS to include additional amendments in the restated Plan documents. The following information summarizes those amendments, as well as Amendment 1 to the Basic Plan Document, which was approved by the Board of Trustees on September 22, 2023.

- **Change from "Master Plan Document" to "Basic Plan Document"** – The IRS changed its terminology for pre-approved plan documents from "Master Plan document" to Basic Plan Document."

- **Removal of Outdated Language** – GMEBS amended the Plan for administrative purposes to move provisions that were no longer in effect or no longer applicable.

- **Minimum Age Limits for In-Service Distribution** – As a general rule, employees or elected officials may not draw retirement benefits while employed. The Basic Plan document states that if a plan allows in-service distribution, a participant must be at least age 62, or satisfy certain "safe harbor" age and service combinations established in IRS regulations, to receive retirement benefits while employed. If a plan allows in-service distribution and has an alternative normal retirement provision with a minimum age of at least 50 specifically for public safety employees (or that satisfies certain IRS "safe harbor" age and service qualifications that apply to public safety employees), public safety employees who are eligible for the alternative normal retirement may receive an in-service distribution even if they are younger than age 62. Though Congress amended federal law in 2019 to allow plans to set normal retirement ages at a minimum age of 59 ½, the IRS's opinion letter for the DB Plan specified it would not apply to plans that allowed in-service distribution at ages younger than 62 (or 50 for public safety employees) or that did not satisfy one of the IRS's safe harbors for in-service distribution. **As in prior restatements, GMEBS plans that currently have in-service distribution provisions that don't meet these requirements will have the opportunity to file for separate IRS approval of these provisions.** "In-service distribution" means a distribution of normal or alternative normal retirement benefits without a bona fide separation from service. A "bona fide separation from service" is a separation from service of at least six months with no expectation of returning to service.

- **Removal of Public Employment Related Crime Provisions** – At the request of the IRS, GMEBS removed language concerning the reduction or forfeiture of a participant's benefits following a final conviction of a public employment related crime from the Basic Plan Document. State laws requiring a reduction in or forfeiture of retirement benefits if a participant is convicted of a public employment related crime still apply but are no longer mentioned in the Plan documents.

- **Clarification of Process for Locating an Individual Owed Benefits** – As required by the IRS, the restated Basic Plan Document details the steps an employer offering benefits under the DB Plan must take to locate an individual to whom benefits are owed under the Plan. These steps include searching Plan-related and publicly available records or directories for alternative contact information; sending certified mail to the individual's last known mailing address and reaching out through appropriate means for address or contact information (such as email addresses and phone numbers) available to the employer; and using either a commercial locator service, a credit reporting agency or internet search tools to find the individual.

- **Federal Tax Law Updates** – The Basic Plan Document contains several federal tax law updates, including allowing rollovers to SIMPLE IRAs in certain situations, updating mortality table language relating to annual benefit limits, and allowing employers to amend the plan as necessary to satisfy Section 415 of the Internal Revenue Code, even if doing so impacts benefits.

- **Voting Representative; Trustees** – GMEBS updated language in the Basic Plan Document designating employers' voting representative for GMEBS purposes to be consistent with the GMEBS Bylaws. The language provides that, unless otherwise directed by an employer's chief executive, a GMEBS trustee will be considered his or her employer's designated voting representative. For all other employers, the chief executive or administrative officer will be the employer's voting representative.

- **Use of Trust Fund Assets** – The Basic Plan Document stipulates that trust fund assets can be used to pay reasonable fees, taxes and expenses of the Plan and Trust.

- **Reversion of Assets in Event of Plan Termination** – Per the request of the IRS, GMEBS amended the Basic Plan Document to state that, in the event an employer's plan is terminated, excess trust fund assets remaining after paying all vested accrued benefits to all participants can only revert to the employer if the excess was due to an actuarial error.

- **Added Language to Adoption Agreement Regarding Compliance with Federal Law when an Employer Has More than One Defined Benefit Retirement Plan** – Per the request of the IRS, the Adoption Agreement contains a new Section 15(G) concerning Section 415(b) of the Internal Revenue Code, when an employer has more than one defined benefit retirement plan. This provision will be blank in most GMEBS employers' Adoption Agreements.

SUMMARY OF KEY AMENDMENTS

- **Adjusted Minimum Ages for Commencement of Required Minimum Contributions** – The SECURE Act of 2019 and 2022's SECURE 2.0 raised the age at which participants have to start drawing retirement benefits. These changes were not included in the restated Basic Plan Document reviewed by the IRS. However, on September 23, 2023, the Board of Trustees of GMEBS adopted Amendment 1 to the Restated Plan to implement these updates. Currently, a terminated vested participant must retire no later than the April 1 following the date the participant turns 73. Starting in 2033, a terminated vested participant must retire no later than the April 1 following the date the participant turns 75.

GEORGIA MUNICIPAL EMPLOYEES BENEFIT SYSTEM

DEFINED BENEFIT RETIREMENT PLAN

AN ORDINANCE
and
ADOPTION AGREEMENT
for

City of Kingsland

Form Pre-approved Plan Adoption Agreement
Amended and Restated for Third Six-Year Cycle, 2020 Cumulative List

TABLE OF CONTENTS

PAGE

I. AN ORDINANCE

An Ordinance to amend and restate the Retirement Plan for the Employees of the City of Kingsland, Georgia, in accordance with and subject to the terms and conditions set forth in the attached Adoption Agreement, any Addendum to the Adoption Agreement, the Georgia Municipal Employees Benefit System (GMEBS) Basic Plan Document, and the GMEBS Trust Agreement. When accepted by the authorized officers of the City and GMEBS, the foregoing shall constitute a Contract between the City and GMEBS, all as authorized and provided by O.C.G.A. § 47-5-1 et seq.

BE IT ORDAINED by the Mayor and Council of the City of Kingsland, Georgia, and it is hereby ordained by the authority thereof:

Section 1. The Retirement Plan for the Employees of the City of Kingsland, Georgia, is hereby amended and restated as set forth in and subject to the terms and conditions stated in the following Adoption Agreement, any Addendum to the Adoption Agreement, the Georgia Municipal Employees Benefit System (GMEBS) Basic Plan Document, and the GMEBS Trust Agreement.

Ordinance continued on page 39

II. GMEBS DEFINED BENEFIT RETIREMENT PLAN ADOPTION AGREEMENT

1. ADMINISTRATOR

Georgia Municipal Employees Benefit System
201 Pryor Street, SW
Atlanta, Georgia 30303
Telephone: 404-688-0472
Facsimile: 404-577-6663

2. ADOPTING EMPLOYER

Name: **City of Kingsland, Georgia**

3. GOVERNING AUTHORITY

Name: **Mayor and Council**
Address: **P.O. Box 250, Kingsland, GA 31548-0250**
Phone: **(912) 729-5613**
Facsimile: **(912) 729-7618**

4. PLAN REPRESENTATIVE

[To represent Governing Authority in all communications with GMEBS and Employees]
(See Section 2.49 of Basic Plan Document)

Name: **Human Resources Director**
Address: **P.O. Box 250, Kingsland, GA 31548-0250**
Phone: **(912) 729-5613**
Facsimile: **(912) 729-7618**

5. PENSION COMMITTEE

[Please designate members by position. If not, members of Pension Committee shall be determined in accordance with Article XIV of the Basic Plan Document]

Position:
Position:
Position:
Position:
Position:

Pension Committee Secretary: **Human Resources Director**
Address: **P.O. Box 250, Kingsland, GA 31548-0250**
Phone: **(912) 729-5613**
Facsimile: **(912) 729-7618**

6. TYPE OF ADOPTION

This Adoption Agreement is for the following purpose (**check one**):

☐ This is a new defined benefit plan adopted by the Adopting Employer for its Employees. This plan does not replace or restate an existing defined benefit plan.

☐ This is an amendment and restatement of the Adopting Employer's preexisting non-GMEBS defined benefit plan.

☒ This is an amendment and restatement of the Adoption Agreement previously adopted by the Employer, as follows **(check one or more as applicable):**

- ☒ To update the Plan to comply with the PATH Act, and other applicable federal laws and guidance under IRS Notice 2020-14 (the 2020 Cumulative List).

- ☐ To make the following amendments to the Adoption Agreement **(must specify below revisions made in this Adoption Agreement; all provisions must be completed in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ________.

7. EFFECTIVE DATE

NOTE: This Adoption Agreement and any Addendum, with the accompanying Basic Plan Document, is designed to comply with Internal Revenue Code Section 401(a), as applicable to a governmental qualified defined benefit plan, and is part of the GMEBS Defined Benefit Retirement Plan. Plan provisions designed to comply with certain provisions of the Protecting Americans from Tax Hikes Act of 2015 ("PATH Act"); and Plan provisions designed to comply with certain provisions of additional changes in federal law and guidance from the Internal Revenue Service under Internal Revenue Service Notice 2020-14 (the 2020 Cumulative List) are effective as of the applicable effective dates set forth in the Adoption Agreement and Basic Plan Document. By adopting this Adoption Agreement, with its accompanying Basic Plan Document, the Adopting Employer is adopting a plan document intended to comply with Internal Revenue Code Section 401(a), as updated by the PATH Act and the 2020 Cumulative List with the applicable effective dates.

(1) **Complete this item (1) only if this is a new defined benefit plan which does not replace or restate an existing defined benefit plan**.

The effective date of this Plan is _____.
(insert effective date of this Adoption Agreement but not earlier than the first day of the current Plan Year in which the Plan is adopted).

(2) **Complete this item (2) only if this Plan is being adopted to replace a non-GMEBS defined benefit plan.**

Except as otherwise specifically provided in the Basic Plan Document or in this Adoption Agreement, the effective date of this restatement shall be _____ **(insert effective date of this Adoption Agreement but not earlier than the first day of the current Plan Year in which the Plan is adopted (unless a retroactive corrective amendment is permitted under EPCRS, Rev. Proc. 2021-30 (or subsequent updated guidance))**. This Plan is intended to replace and serve as an amendment and restatement of the Employer's preexisting plan, which became effective on _____ **(insert original effective date of preexisting plan)**.

(3) **Complete this item (3) only if this is an amendment and complete restatement of the Adopting Employer's existing GMEBS defined benefit plan.**

Except as otherwise specifically provided in the Basic Plan Document or in this Adoption Agreement, the effective date of this restatement shall be **the date of its approval by the Governing Authority** **(insert effective date of this Adoption Agreement but not earlier than the first day of the current Plan Year in which the Plan is adopted (unless a retroactive corrective amendment is permitted under EPCRS, Rev. Proc. 2021-30 (or subsequent updated guidance))**.

This Plan is adopted as an amendment and restatement of the Employer's preexisting GMEBS Adoption Agreement, which became effective on **August 23, 2021** **(insert effective date of most recent Adoption Agreement preceding this Adoption Agreement)**.

The Employer's first Adoption Agreement became effective **January 1, 2003** **(insert effective date of Employer's first GMEBS Adoption Agreement)**. The Employer's GMEBS Plan was originally effective **March 1, 1973** **(insert effective date of Employer's original GMEBS Plan)**. (If the Employer's Plan was originally a non-GMEBS Plan, then the Employer's non-GMEBS Plan was originally effective _____ **(if applicable, insert effective date of Employer's original non-GMEBS Plan)**.)

8. PLAN YEAR

Plan Year means **(check one):**

☐ Calendar Year
☐ Employer Fiscal Year commencing ____.
☒ Other **(must specify month and day commencing)**: **March 1**.

9. CLASSES OF ELIGIBLE EMPLOYEES

Only Employees of the Adopting Employer who meet the Basic Plan Document's definition of "Employee" may be covered under the Adoption Agreement. Eligible Employees shall not include non-governmental employees, independent contractors, leased employees, nonresident aliens, or any other ineligible individuals, and this Section 9 must not be completed in a manner that violates the "exclusive benefit rule" of Internal Revenue Code Section 401(a)(2).

A. Eligible Regular Employees

Regular Employees include Employees, other than elected or appointed members of the Governing Authority or Municipal Legal Officers, who are regularly employed in the services of the Adopting Employer. Subject to the other conditions of the Basic Plan Document and the Adoption Agreement, the following Regular Employees are eligible to participate in the Plan **(check one)**:

☒ **ALL** - All Regular Employees, provided they satisfy the minimum hour and other requirements specified under "Eligibility Conditions" below.

☐ **ALL REGULAR EMPLOYEES EXCEPT** for the following employees **(must specify; specific positions are permissible; specific individuals may not be named)**: _________.

B. Elected or Appointed Members of the Governing Authority

An Adopting Employer may elect to permit participation in the Plan by elected or appointed members of the Governing Authority and/or Municipal Legal Officers, provided they otherwise meet the Basic Plan Document's definition of "Employee" and provided they satisfy any other requirements specified by the Adopting Employer. Municipal Legal Officers to be covered must be specifically identified by position. Subject to the above conditions, the Employer hereby elects the following treatment for elected and appointed officials:

(1) Elected or Appointed Members of the Governing Authority (check one):

☐ **ARE NOT** eligible to participate in the Plan.

☒ **ARE** eligible to participate in the Plan.

Please specify any limitations on eligibility to participate here (e.g., service on or after certain date, or special waiting period provision): **Each elected or appointed member of the Governing Authority who held an office on March 1, 1988, was qualified to apply for**

participation in the Plan on such date. Each other elected or appointed member of the Governing Authority who held an office subsequent to March 1, 1988, but before March 1, 1991, was qualified to apply for participation in the Plan on the first day of the month immediately following or coinciding with the first date after March 1, 1988, (but before March 1, 1991), that such member occupied any elective office of the Governing Authority. However, any elected or appointed member of the Governing Authority who held an office between March 1, 1991, and August 22, 2021, was not eligible to participate in the Plan during such time period. Elected or appointed members of the Governing Authority who hold office on or after August 23, 2021, shall participate in the Plan on or after such date, and shall commence participation on August 23, 2021, or, if later, the date on which they first take office or first return to office (after a vacation of office). Notwithstanding any provision to the contrary, elected or appointed members of the Governing Authority in office on August 23, 2021, shall receive Credited Service for their Service as elected or appointed members of the Governing Authority prior to such date. Service shall not include any term of office between March 1, 1991 and August 22, 2021, unless the elected or appointed member of the Governing Authority holds office on August 23, 2021 (see Section 13A(2) below).

(2) **Municipal Legal Officers (check one)**:

☒ **ARE NOT** eligible to participate in the Plan.

☐ **ARE** eligible to participate in the Plan. The term "Municipal Legal Officer" shall include only the following positions **(must specify - specific positions are permissible; specific individuals may not be named)**: ____.

Please specify any limitations on eligibility to participate here (e.g., service on or after certain date) **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ____.

10. ELIGIBILITY CONDITIONS

A. Hours Per Week (Regular Employees)

The Adopting Employer may specify a minimum number of work hours per week which are required to be scheduled by Regular Employees in order for them to become and remain "Eligible Regular Employees" under the Plan. **It is the responsibility of the Adopting Employer to determine whether these requirements are and continue to be satisfied**. The Employer hereby elects the following minimum hour requirement for Regular Employees:

☐ No minimum
☐ 20 hours/week (regularly scheduled)
☐ 30 hours/week (regularly scheduled)
☒ Other: **35 hours per week** (must not exceed 40 hours/week regularly scheduled)

Exceptions: If a different minimum hour requirement applies to a particular class or classes of Regular Employees, please specify below the classes to whom the different requirement applies and indicate the minimum hour requirement applicable to them.

Class(es) of Regular Employees to whom exception applies **(must specify - specific positions are permissible; specific individuals may not be named):** **Eligible Regular Employees employed as of December 8, 2008, provided they are not reemployed with the City after said date.**

Minimum hour requirement applicable to excepted Regular Employees:

- ☐ No minimum
- ☒ 20 hours/week (regularly scheduled)
- ☐ 30 hours/week (regularly scheduled)
- ☐ Other: _________________ (must not exceed 40 hours/week regularly scheduled)

B. Months Per Year (Regular Employees)

The Adopting Employer may specify a minimum number of work months per year which are required to be scheduled by Regular Employees in order for them to become and remain "Eligible Employees" under the Plan. **It is the responsibility of the Adopting Employer to determine whether these requirements are and continue to be satisfied**. The Employer hereby elects the following minimum requirement for Regular Employees:

- ☐ No minimum
- ☒ At least **5** months per year (regularly scheduled)

Exceptions: If different months per year requirements apply to a particular class or classes of Regular Employees, the Employer must specify below the classes to whom the different requirements apply and indicate below the requirements applicable to them.

Regular Employees to whom exception applies **(must specify - specific positions are permissible; specific individuals may not be named)**: ________________________________.

The months to year requirement for excepted class(es) are:

- ☐ No minimum
- ☐ At least _______ months per year (regularly scheduled)

11. WAITING PERIOD

Except as otherwise provided in Section 4.02(b) of the Basic Plan Document, Eligible Regular Employees shall not have a waiting period before participating in the Plan. Likewise, elected or appointed members of the Governing Authority and Municipal Legal Officers, if eligible to participate in the Plan, shall not have a waiting period before participating in the Plan.

12. ESTABLISHING PARTICIPATION IN THE PLAN

Participation in the Plan is considered mandatory for all Eligible Employees who satisfy the eligibility conditions specified in the Adoption Agreement, except as provided in Section 4.03(e) of the Basic Plan Document. However, the Employer may specify below that participation is optional for certain classes of Eligible Employees, including Regular Employees, elected or appointed members of the Governing Authority, Municipal Legal Officers, City

Managers, and/or Department Heads. If participation is optional for an Eligible Employee, then in order to become a Participant, the Employee must make a written election to participate within 120 days after employment, election or appointment to office, or if later, the date the Employee first becomes eligible to participate in the Plan. The election is irrevocable, and the failure to make the election within the 120 day time limit shall be deemed an irrevocable election not to participate in the Plan.

Classes for whom participation is optional **(check one)**:

☒ None (Participation is mandatory for all Eligible Employees except as provided in Section 4.03(e) of the Basic Plan Document).

☐ Participation is optional for the following Eligible Employees **(must specify - specific positions are permissible; specific individuals may not be named; all positions or classes specified must be Eligible Employees)**: ___________________.

13. CREDITED SERVICE

In addition to Current Credited Service the Adopting Employer may include as Credited Service the following types of service:

A. <u>Credited Past Service with Adopting Employer</u>

Credited Past Service means the number of years and complete months of Service with the Adopting Employer prior to the date an Eligible Employee becomes a Participant which are treated as credited service under the Plan.

(1) Eligible Employees Employed on Original Effective Date of GMEBS Plan. With respect to Eligible Employees who are employed by the Adopting Employer on the original Effective Date of the Employer's GMEBS Plan, Service with the Adopting Employer prior to the date the Eligible Employee becomes a Participant (including any Service prior to the Effective Date of the Plan) shall be treated as follows **(check one)**:

☒ All Service prior to the date the Eligible Employee becomes a Participant shall be credited (as Credited Past Service).

☐ All Service prior to the date the Eligible Employee becomes a Participant shall be credited (as Credited Past Service), except for Service rendered prior to ______________________________ **(insert date)**.

☐ All Service prior to the date the Eligible Employee becomes a Participant shall be credited (as Credited Past Service), except as follows **(must specify other limitation in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ________.

☐ No Service prior to the date the Eligible Employee becomes a Participant shall be credited (as Credited Past Service).

(2) Previously Employed, Returning to Service after Original Effective Date. If an Eligible Employee is not employed on the original Effective Date of the Employer's GMEBS Plan, but returns to Service with the Adopting Employer sometime after the Effective Date, said Eligible Employee's Service prior to becoming a Participant (including any Service prior the Effective Date) shall be treated as follows **(check one)**:

☐ All Service prior to the date the Eligible Employee becomes a Participant shall be credited (as Credited Past Service), subject to any limitations imposed above with respect to Eligible Employees employed on the Effective Date.

☒ All Service prior to the date the Eligible Employee becomes a Participant shall be credited (as Credited Past Service), provided that after returning to employment, the Eligible Employee performs Service equal to the period of the break in Service or one (1) year, whichever is less. Any limitations imposed above with respect to Eligible Employees employed on the Effective Date shall also apply.

☐ No Service prior to the date the Eligible Employee becomes a Participant shall be credited (as Credited Past Service).

Other limitation(s) on Recognition of Credited Past Service **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: **<u>In addition to the above limitations, Credited Past Service shall not include any tenure of office as an elected or appointed member of the Governing Authority unless the Participant was serving as an elected or appointed member of the Governing Authority or Eligible Regular Employee on March 1, 1988, or on August 23, 2021.</u>**

(3) Eligible Employees Initially Employed After Effective Date. If an Eligible Employee's initial employment date is after the original Effective Date of the Employer's GMEBS Plan, said Employee's Credited Past Service shall include only the number of years and complete months of Service from the Employee's initial employment date to the date the Employee becomes a Participant in the Plan.

(4) Newly Eligible Classes of Employees. If a previously ineligible class of Employees becomes eligible to participate in the Plan, the Employer must specify in an addendum to this Adoption Agreement whether and to what extent said Employees' prior service with the Employer shall be treated as Credited Past Service under the Plan.

B. <u>Prior Military Service</u>

<u>Note</u>: This Section does not concern military service required to be credited under USERRA – See Section 3.02 of the Basic Plan Document for rules on the crediting of USERRA Military Service.

(1) Credit for Prior Military Service.

The Adopting Employer may elect to treat military service rendered prior to a Participant's initial employment date or reemployment date as Credited Service under the Plan. Unless otherwise specified by the Employer under "Other Conditions" below, the term "Military Service" shall be as defined in the Basic Plan Document. Except as otherwise required by federal or state law or under "Other Conditions" below, Military Service shall not include service which is credited under any other local, state, or federal retirement or pension plan.

Military Service credited under this Section shall not include any service which is otherwise required to be credited under the Plan by federal or state law. Prior Military Service shall be treated as follows **(check one)**:

☒ Prior Military Service is **not** creditable under the Plan **(if checked, skip to Section 13.C. – Prior Governmental Service)**.

☐ Prior Military Service shall be counted as Credited Service for the following purposes (check one or more as applicable):

- ☐ Computing amount of benefits payable.
- ☐ Meeting minimum service requirements for vesting.
- ☐ Meeting minimum service requirements for benefit eligibility.

(2) Maximum Credit for Prior Military Service.

Credit for Prior Military Service shall be limited to a maximum of _____ years **(insert number)**.

(3) Rate of Accrual for Prior Military Service.

Credit for Prior Military Service shall accrue at the following rate **(check one)**:

☐ One month of military service credit for every _______ month(s) **(insert number)** of Credited Service with the Adopting Employer.

☐ One year of military service credit for every _____ year(s**) (insert number)** of Credited Service with the Adopting Employer.

☐ All military service shall be creditable (subject to any caps imposed above) after the Participant has completed _______ years **(insert number)** of Credited Service with the Employer.

☐ Other requirement **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ________.

(4) Payment for Prior Military Service Credit (check one):

☐ Participants shall **not** be required to pay for military service credit.

☐ Participants shall be required to pay for military service credit as follows:

- ☐ The Participant must pay ____% of the actuarial cost of the service credit (as defined below).
- ☐ The Participant must pay an amount equal to **(must specify in a manner that satisfies the definite written program requirement of Treasury**

Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i)): _________________________.

Other Conditions for Award of Prior Military Service Credit **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ____.

(5) Limitations on Service Credit Purchases. Unless otherwise specified in an Addendum to the Adoption Agreement, for purposes of this Section and Section 13.C. concerning prior governmental service credit, the term "actuarial cost of service credit" is defined as set forth in the Service Credit Purchase Addendum. In the case of a service credit purchase, the Participant shall be required to comply with any rules and regulations established by the GMEBS Board of Trustees concerning said purchases.

C. <u>Prior Governmental Service</u>

<u>Note</u>: A Participant's prior service with other GMEBS employers shall be credited for purposes of satisfying the minimum service requirements for Vesting and eligibility for Retirement and pre-retirement death benefits as provided under Section 9.05 of the Basic Plan Document, relating to portability service. This Section 13(C) does not need to be completed in order for Participants to receive this portability service credit pursuant to Section 9.05 of the Basic Plan Document.

(1) Credit for Prior Governmental Service.

The Adopting Employer may elect to treat governmental service rendered prior to a Participant's initial employment date or reemployment date as creditable service under the Plan. Subject to any limitations imposed by law, the term "prior governmental service" shall be as defined by the Adopting Employer below. The Employer elects to treat prior governmental service as follows **(check one)**:

☒ Prior governmental service is **not** creditable under the Plan **(if checked, skip to Section 13.D. – Unused Sick/Vacation Leave)**.

☐ Prior governmental service shall be counted as Credited Service for the following purposes under the Plan **(check one or more as applicable)**:

- ☐ Computing amount of benefits payable.
- ☐ Meeting minimum service requirements for vesting.
- ☐ Meeting minimum service requirements for benefit eligibility.

(2) Definition of Prior Governmental Service.

Prior governmental service shall be defined as follows: **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ___________.

Unless otherwise specified above, prior governmental service shall include only full-time service (minimum hour requirement same as that applicable to Eligible Regular Employees).

(3) Maximum Credit for Prior Governmental Service.

Credit for prior governmental service shall be limited to a maximum of ________ years **(insert number)**.

(4) Rate of Accrual for Prior Governmental Service Credit.

Credit for prior governmental service shall accrue at the following rate **(check one)**:

☐ One month of prior governmental service credit for every _____ month(s) **(insert number)** of Credited Service with the Adopting Employer.

☐ One year of prior governmental service credit for every _____ year(s) **(insert number)** of Credited Service with the Adopting Employer.

☐ All prior governmental service shall be creditable (subject to any caps imposed above) after the Participant has completed _____ years **(insert number)** of Credited Service with the Adopting Employer.

☐ Other requirement **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: _______.

(5) Payment for Prior Governmental Service Credit.

☐ Participants shall **not** be required to pay for governmental service credit.

☐ Participants shall be required to pay for governmental service credit as follows:

- ☐ The Participant must pay ____% of the actuarial cost of the service credit.
- ☐ The Participant must pay an amount equal to **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ___________________________.

Other Conditions for Award of Prior Governmental Service Credit **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ____.

D. Leave Conversion for Unused Paid Time Off (e.g., Sick, Vacation, or Personal Leave)

(1) Credit for Unused Paid Time Off.

Subject to the limitations in Section 3.01 of the Basic Plan Document, an Adopting Employer may elect to treat accumulated days of unused paid time off for a terminated Participant, for which the Participant is not paid, as Credited Service. The only type of leave permitted to be credited under this provision is leave from a paid time off plan which qualifies as a bona fide sick and vacation leave plan (which may include sick, vacation or personal leave) and which the

Participant may take as paid leave without regard to whether the leave is due to illness or incapacity. The Credited Service resulting from the conversion of unused paid time off must not be the only Credited Service applied toward the accrual of a normal retirement benefit under the Plan. The Pension Committee shall be responsible to certify to GMEBS the total amount of unused paid time off that is creditable hereunder.

Important Note: Leave cannot be converted to Credited Service in lieu of receiving a cash payment. If the Employer elects treating unused paid time off as Credited Service, the conversion to Credited Service will be automatic, and the Participant cannot request a cash payment for the unused paid time off.

The Employer elects the following treatment of unused paid time off:

☒ Unused paid time off shall **not** be treated as Credited Service **(if checked, skip to Section 14 – Retirement Eligibility)**.

☐ The following types of unused paid time off for which the Participant is not paid shall be treated as Credited Service under the Plan **(check one or more as applicable)**:

- ☐ Unused sick leave
- ☐ Unused vacation leave
- ☐ Unused personal leave
- ☐ Other paid time off **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ____.

(2) Minimum Service Requirement.

In order to receive credit for unused paid time off, a Participant must meet the following requirement at termination **(check one)**:

☐ The Participant must be 100% vested in a normal retirement benefit.
☐ The Participant must have at least _______ years **(insert number)** of Total Credited Service (not including leave otherwise creditable under this Section).
☐ Other **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ________.

(3) Use of Unused Paid Time Off Credit. Unused paid time off for which the Participant is not paid shall count as Credited Service for the following purposes under the Plan **(check one or more as applicable)**:

☐ Computing amount of benefits payable.
☐ Meeting minimum service requirements for vesting.
☐ Meeting minimum service requirements for benefit eligibility.

(4) Maximum Credit for Unused Paid Time Off.

Credit for unused paid time off for which the Participant is not paid shall be limited to a maximum of ____ months **(insert number)**.

(5) Computation of Unused Paid Time Off.

Unless otherwise specified by the Adopting Employer under "Other Conditions" below, each twenty (20) days of creditable unused paid time off shall constitute one (1) complete month of Credited Service under the Plan. Partial months shall not be credited.

(6) Other Conditions (please specify, subject to limitations in Section 3.01 of Basic Plan Document; must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i)): ________________________________.

14. RETIREMENT ELIGIBILITY

A. <u>Early Retirement Qualifications</u>

Early retirement qualifications are **(check one or more as applicable)**:

☒ Attainment of age <u>**55**</u> **(insert number)**

☒ Completion of <u>**10**</u> years **(insert number)** of Total Credited Service

<u>**Exceptions**</u>**:** If different early retirement eligibility requirements apply to a particular class or classes of Eligible Employees, the Employer must specify below the classes to whom the different requirements apply and indicate below the requirements applicable to them.

Eligible Employees to whom exception applies **(must specify - specific positions are permissible; specific individuals may not be named)**: __________________________________.

Early retirement qualifications for excepted class(es) are **(check one or more as applicable)**:

☐ Attainment of age _________ **(insert number)**

☐ Completion of _________ years **(insert number)** of Total Credited Service

B. <u>Normal Retirement Qualifications</u>

<u>**Note**</u>**: Please complete this Section and also list "Alternative" Normal Retirement Qualifications, if any, in Section 14.C**.

(1) <u>Regular Employees</u>

Normal retirement qualifications for Regular Employees are **(check one or more as applicable)**:

☒ Attainment of age <u>**65**</u> **(insert number)**

☒ Completion of **5** years **(insert number)** of Total Credited Service

☐ In-Service Distribution to Eligible Employees permitted (i.e., a qualifying Participant may commence receiving retirement benefits while in service without first incurring a Bona Fide Separation from Service), if Participant meets minimum age and service requirements specified immediately above and satisfies the minimum age parameters for In-Service Distribution described in Section 6.06(a)(3) of the Basic Plan Document, subject to applicable Plan provisions concerning recalculation and offset applied at re-retirement to account for the value of benefits received prior to re-retirement. This rule shall apply to **(check one)**: ☐ all Participants ☐ only the following class(es) of Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: ____.

Exceptions: If different normal retirement qualifications apply to a particular class or classes of Regular Employees, the Employer must specify below the classes to whom the different requirements apply and indicate below the requirements applicable to them.

Class(es) of Regular Employees to whom exception applies **(must specify - specific positions are permissible; specific individuals may not be named)**: ______________________________.

Normal retirement qualifications for excepted class(es) are **(check one or more as applicable)**:

☐ Attainment of age _________ **(insert number)**

☐ Completion of _________ years **(insert number)** of Total Credited Service

☐ In-Service Distribution to Eligible Employees permitted (i.e., a qualifying Participant may commence receiving retirement benefits while in service without first incurring a Bona Fide Separation from Service), if Participant meets minimum age and service requirements specified immediately above and satisfies the minimum age parameters for In-Service Distribution described in Section 6.06(a)(3) of the Basic Plan Document, subject to applicable Plan provisions concerning recalculation and offset applied at re-retirement to account for the value of benefits received prior to re-retirement. This rule shall apply to **(check one)**: ☐ all Participants ☐ only the following class(es) of Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: ____.

(2) Elected or Appointed Members of Governing Authority

Complete this Section only if elected or appointed members of the Governing Authority or Municipal Legal Officers are permitted to participate in the Plan. Normal retirement qualifications for this class are **(check one or more as applicable)**:

☒ Attainment of age **65** **(insert number)**

☐ Completion of _________ years **(insert number)** of Total Credited Service

☐ In-Service Distribution to Eligible Employees permitted (i.e., a qualifying Participant may commence receiving retirement benefits while in service without first incurring a Bona Fide Separation from Service), if Participant meets minimum age and service requirements specified immediately above and satisfies the minimum age parameters for In-Service Distribution described in Section 6.06(a)(3) of the Basic Plan Document, subject to applicable Plan provisions concerning recalculation and offset applied at re-retirement to account for the value of benefits received prior to re-retirement. This rule shall apply to **(check one)**: ☐ all Participants ☐ only the following class(es) of Participants **(must specify - specific positions are permissible; specific individuals may not be named)**:____.

Exceptions: If different normal retirement qualifications apply to particular elected or appointed members of the Governing Authority or Municipal Legal Officers, the Employer must specify below to whom the different requirements apply and indicate below the requirements applicable to them.

Particular elected or appointed members of the Governing Authority or Municipal Legal Officers to whom exception applies **(must specify - specific positions are permissible; specific individuals may not be named)**: ____.

Normal retirement qualifications for excepted elected or appointed members of the Governing Authority or Municipal Legal Officers are **(check one or more as applicable)**:

☐ Attainment of age _________ **(insert number)**

☐ Completion of _________ years **(insert number)** of Total Credited Service

☐ In-Service Distribution to Eligible Employees permitted (i.e., a qualifying Participant may commence receiving retirement benefits while in service without first incurring a Bona Fide Separation from Service), if Participant meets minimum age and service requirements specified immediately above and satisfies the minimum age parameters for In-Service Distribution described in Section 6.06(a)(3) of the Basic Plan Document, subject to applicable Plan provisions concerning recalculation and offset applied at re-retirement to account for the value of benefits received prior to re-retirement. This rule shall apply to **(check one)**: ☐ all Participants ☐ only the following class(es) of Participants **(must specify - specific positions are permissible; specific individuals may not be named)**:____.

C. Alternative Normal Retirement Qualifications

The Employer may elect to permit Participants to retire with unreduced benefits after they satisfy service and/or age requirements other than the regular normal retirement qualifications specified above. The Employer hereby adopts the following alternative normal retirement qualifications:

Alternative Normal Retirement Qualifications (check one or more, as applicable):

(1) ☐ Not applicable (the Adopting Employer does not offer alternative normal retirement benefits under the Plan).

(2) ☒ **Alternative Minimum Age & Service Qualifications (if checked, please complete one or more items below, as applicable):**

☒ Attainment of age **62** **(insert number)**

☒ Completion of **20** years **(insert number)** of Total Credited Service

☐ In-Service Distribution to Eligible Employees permitted (i.e., a qualifying Participant may commence receiving retirement benefits while in service without first incurring a Bona Fide Separation from Service), if Participant meets minimum age and service requirements specified immediately above and satisfies the minimum age parameters for In-Service Distribution described in Section 6.06(a)(3) of the Basic Plan Document, subject to applicable Plan provisions concerning recalculation and offset applied at re-retirement to account for the value of benefits received prior to re-retirement. This rule shall apply to **(check one)**: ☐ all Participants ☐ only the following class(es) of Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: __.

This alternative normal retirement benefit is available to:

☐ All Participants who qualify.

☒ Only the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: **Eligible Regular Employees.**

A Participant **(check one)**: ☐ is required ☒ is not required to be in the service of the Employer at the time the Participant satisfies the above qualifications in order to qualify for this alternative normal retirement benefit.

Other eligibility requirement **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ____.

(3) ☐ **Rule of _______ (insert number)**. The Participant's combined Total Credited Service and age must equal or exceed this number. Please complete additional items below:

To qualify for this alternative normal retirement benefit, the Participant **(check one or more items below, as applicable)**:

☐ Must have attained at least age ______ **(insert number)**

☐ Must not satisfy any minimum age requirement

☐ In-Service Distribution to Eligible Employees permitted (i.e., a qualifying Participant may commence receiving retirement benefits while in service without first incurring a Bona Fide Separation from Service), if the Participant meets the minimum age and service requirements specified immediately above and satisfies the minimum age parameters for In-Service Distribution described in Section 6.06(a)(3) of the Basic Plan Document, subject to applicable Plan provisions concerning recalculation and offset applied at re-retirement to account for the value of benefits received prior to re-retirement. This rule shall apply to **(check one)**: ☐ all Participants ☐ only the following class(es) of Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: ____.

This alternative normal retirement benefit is available to:

☐ All Participants who qualify.

☐ Only the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: _______________.

A Participant **(check one)**: ☐ is required ☐ is not required to be in the service of the Employer at the time the Participant satisfies the Rule in order to qualify for this alternative normal retirement benefit.

Other eligibility requirement **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ____.

(4) ☒ **Alternative Minimum Service**. A Participant is eligible for an alternative normal retirement benefit if the Participant has at least **20** years **(insert number)** of Total Credited Service, regardless of the Participant's age.

☐ In-Service Distribution to Eligible Employees permitted (i.e., a qualifying Participant may commence receiving retirement benefits while in service without first incurring a Bona Fide Separation from Service), if the Participant meets the minimum service requirement specified immediately above and satisfies the minimum age parameters for In-Service Distribution described in Section 6.06(a)(3) of the Basic Plan Document, subject to applicable Plan provisions concerning recalculation and offset applied at re-retirement to account for the value of benefits received prior to re-retirement. This rule shall apply to **(check one)**: ☐ all Participants ☐ only the following class(es) of Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: __.

This alternative normal retirement benefit is available to:

☐ All Participants who qualify.

☒ Only the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: <u>**Participants who retire directly from active Service as a City of Kingsland Firefighter or Police Officer and who have at least 20 years of Credited Service (including prior Credited Service with other GMEBS employers). For purposes of this provision, the term "Firefighter" and "Police Officer" shall be as defined in the GMEBS Basic Plan Document.**</u>

A Participant **(check one)**: ☒ is required ☐ is not required to be in the service of the Employer at the time the Participant satisfies the qualifications for this alternative normal retirement benefit.

Other eligibility requirement **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ____.

(5) ☐ **Other Alternative Normal Retirement Benefit**.

Must specify qualifications (in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i)): ________.

☐ In-Service Distribution to Eligible Employees permitted (<u>i.e.</u>, a qualifying Participant may commence receiving retirement benefits while in service without first incurring a Bona Fide Separation from Service), if the Participant meets minimum age and service requirements specified immediately above and satisfies the minimum age parameters for In-Service Distribution described in Section 6.06(a)(3) of the Basic Plan Document, subject to applicable Plan provisions concerning recalculation and offset applied at re-retirement to account for the value of benefits received prior to re-retirement. This rule shall apply to **(check one)**: ☐ all Participants ☐ only the following class(es) of Participants **(must specify - specific positions are permissible; specific individuals may not be named)**:____.

This alternative normal retirement benefit is available to:

☐ All Participants who qualify.

☐ Only the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: _______________.

A Participant **(check one)**: ☐ is required ☐ is not required to be in the service of the Employer at the time the Participant satisfies the qualifications for this alternative normal retirement benefit.

Other eligibility requirement **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ____.

(6) ☐ **Other Alternative Normal Retirement Benefit <u>for Public Safety Employees Only</u>**.

Must specify qualifications (in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i)): ________.

☐ In-Service Distribution to Eligible Employees who are Public Safety Employees permitted (<u>i.e.</u>, a qualifying Participant may commence receiving retirement benefits while in service without first incurring a Bona Fide Separation from Service), if the Participant meets minimum age and service requirements specified immediately above and satisfies the minimum age parameters for In-Service Distribution Described in Section 6.06(a)(3) of the Basic Plan Document, subject to applicable Plan provisions concerning recalculation and offset applied at re-retirement to account for the value of benefits received prior to re-retirement. This rule shall apply to **(check one)**: ☐ all Participants ☐ only the following class(es) of Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: ______________.

This alternative normal retirement benefit is available to:

☐ All public safety employee Participants who qualify.

☐ Only the following public safety employee Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: ____.

A public safety employee Participant **(check one)**: ☐ is required ☐ is not required to be in the service of the Employer at the time the Participant satisfies the qualifications for this alternative normal retirement benefit.

Other eligibility requirement **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ____.

Note: "Public safety employees" are defined under the Internal Revenue Code for this purpose as employees of a State or political subdivision of a State who provide police protection, firefighting services, or emergency medical services for any area within the jurisdiction of such State or political subdivision.

D. Disability Benefit Qualifications

Subject to the other terms and conditions of the Basic Plan Document and except as otherwise provided in an Addendum to this Adoption Agreement, disability retirement qualifications are based upon Social Security Administration award criteria or as otherwise provided under Section 2.23 of the Basic Plan Document. The Disability Retirement benefit shall commence as of the Participant's Disability Retirement Date under Section 2.24 of the Basic Plan Document.

To qualify for a disability benefit, a Participant must have the following minimum number of years of Total Credited Service **(check one)**:

☐ Not applicable (the Adopting Employer does not offer disability retirement benefits under the Plan).

☒ No minimum.

☐ _______ years **(insert number)** of Total Credited Service.

Other eligibility requirement **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ______________________________.

15. RETIREMENT BENEFIT COMPUTATION

A. Maximum Total Credited Service

The number of years of Total Credited Service which may be used to calculate a benefit is **(check one or all that apply)**:

☒ not limited.

☐ limited to _________ years for all Participants.

☐ limited to ________ years for the following classes of Eligible Regular Employees:

- ☐ All Eligible Regular Employees.
- ☐ Only the following Eligible Regular Employees: ______________________.

☐ limited to _______ years as an elected or appointed member of the Governing Authority.

☐ limited to _______ years as a Municipal Legal Officer.

☐ Other **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ________.

B. Monthly Normal Retirement Benefit Amount

(1) Regular Employee Formula

The monthly normal retirement benefit for Eligible Regular Employees shall be 1/12 of **(check and complete one or more as applicable)**:

☒ (a) **Flat Percentage Formula**. **1.6% (insert percentage)** of Final Average Earnings multiplied by years of Total Credited Service as an Eligible Regular Employee.

This formula applies to:

☐ All Participants who are Regular Employees.

☒ Only the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: **1) Eligible Regular Employees initially employed after December 8, 2008; and 2) Eligible Regular Employees employed on or before December 8, 2008, when application of this formula would result in a higher benefit than the Split Final Average Earnings Formula provided under subsection 15(B)(1)(c) below.**

☐ (b) **Alternative Flat Percentage Formula**. **______% (insert percentage)** of Final Average Earnings multiplied by years of Total Credited Service as an Eligible Regular Employee. This formula applies to the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: __________________________________.

☒ (c) **Split Final Average Earnings Formula**. **1.25** % **(insert percentage)** of Final Average Earnings up to the amount of **Covered Compensation (see subsection (2) below for definition of Covered Compensation)**, plus 2.0% **(insert percentage)** of Final Average Earnings in excess of said Covered Compensation, multiplied by years of Total Credited Service as an Eligible Regular Employee.

This formula applies to:

☐ All Participants who are Regular Employees.

☒ Only the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: **Eligible Regular Employees employed on or before December 8, 2008, only when application of this formula would result in a higher benefit than the Flat Percentage Formula provided under subsection 15(B)(1)(a) above.**

☐ (d) **Alternative Split Final Average Earnings Formula**. _____ % **(insert percentage)** of Final Average Earnings up to the amount of **Covered Compensation (see subsection (2) below for definition of Covered**

Compensation), plus ______% **(insert percentage)** of Final Average Earnings in excess of said Covered Compensation, multiplied by years of Total Credited Service as an Eligible Regular Employee.

This formula applies to:

☐ All Participants.
☐ Only the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: _____.

[Repeat above subsections as necessary for each applicable benefit formula and Participant class covered under the Plan.]

(2) <u>Covered Compensation (complete only if Split Formula(s) is checked above):</u>

Covered Compensation is defined as (check one or more as applicable):

☐ (a) **A.I.M.E. Covered Compensation** as defined in Section 2.18 of the Basic Plan Document. This definition of Covered Compensation shall apply to **(check one)**:

☐ All Participants who are Regular Employees.
☐ Only the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: __________.

☒ (b) **Dynamic Break Point** Covered Compensation as defined in Section 2.19 of the Basic Plan Document. This definition of Covered Compensation shall apply to **(check one)**:

☐ All Participants who are Regular Employees.
☒ Only the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: **<u>Participants to whom the Split Final Average Earnings Formula set forth in subsection 15(B)(l)(c) above applies.</u>**

☐ (c) **Table Break Point** Covered Compensation as defined in Section 2.20 of the Basic Plan Document. This definition of Covered Compensation shall apply to **(check one)**:

☐ All Participants who are Regular Employees.
☐ Only the following class(es) of Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: ____.

☐ (d) **Covered Compensation** shall mean a Participant's annual Earnings that do not exceed $______________ **(specify amount)**. This definition shall apply to **(check one)**:

☐ All Participants who are Regular Employees.

☐ Only the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**:______.

(3) <u>Final Average Earnings</u>

Unless otherwise specified in an Addendum to the Adoption Agreement, Final Average Earnings is defined as the monthly average of Earnings paid to a Participant by the Adopting Employer for the **<u>60</u> (insert number not to exceed 60)** consecutive months of Credited Service preceding the Participant's most recent Termination in which the Participant's Earnings were the highest, multiplied by 12. Note: GMEBS has prescribed forms for calculation of Final Average Earnings that must be used for this purpose.

This definition of Final Average Earnings applies to:

☒ All Participants who are Regular Employees.
☐ Only the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: ____.

[Repeat above subsection as necessary for each applicable definition and Participant class covered under the Plan.]

(4) <u>Formula for Elected or Appointed Members of the Governing Authority</u>

The monthly normal retirement benefit for members of this class shall be as follows **(check one)**:

☐ Not applicable (elected or appointed members of the Governing Authority or Municipal Legal Officers are not permitted to participate in the Plan).

☒ $**<u>25.00</u> (insert dollar amount)** per month for each year of Total Credited Service as an elected or appointed member of the Governing Authority or Municipal Legal Officer (service of at least 6 months and 1 day is treated as a year of Total Credited Service; provided, however, than an elected or appointed member of the Governing Authority or Municipal Legal Officer may accrue a maximum of one year of Total Credited Service for every 12-month period of Service as an elected or appointed member of the Governing Authority or Municipal Legal Officer).

This formula applies to:

☒ All elected or appointed members of the Governing Authority or Municipal Legal Officers eligible to participate.
☐ Only the following elected or appointed members of the Governing Authority or Municipal Legal Officers eligible to participate **(must specify - specific positions are permissible; specific individuals may not be named)**: ____________________________.

[Repeat above subsection as necessary for each applicable formula for classes of elected or appointed members covered under the Plan.]

C. <u>Monthly Early Retirement Benefit Amount</u>

Check and complete one or more as applicable:

☒ (1) **Standard Early Retirement Reduction Table**. The monthly Early Retirement benefit shall be computed in the same manner as the monthly Normal Retirement benefit, but the benefit shall be reduced on an Actuarially Equivalent basis in accordance with Section 12.01 of the Basic Plan Document to account for early commencement of benefits. This provision shall apply to:

☒ All Participants.
☐ Only the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**:______.

☐ (2) **Alternative Early Retirement Reduction Table**. The monthly Early Retirement benefit shall be computed in the same manner as the monthly Normal Retirement benefit, but the benefit shall be reduced to account for early commencement of benefits based on the following table. This table shall apply to:

☐ All Participants.
☐ Only the following Participants **(must specify - specific positions are permissible; specific individuals may not be named)**:______.

Alternative Early Retirement Reduction Table

Number of Years Before [Age ___ (Insert Normal Retirement Age)] (check as applicable)	**Percentage of Normal Retirement Benefit* (complete as applicable)**
☐ 0	1.000
☐ 1	0.___
☐ 2	0.___
☐ 3	0.___
☐ 4	0.___
☐ 5	0.___
☐ 6	0.___
☐ 7	0.___
☐ 8	0.___
☐ 9	0.___
☐ 10	0.___
☐ 11	0.___
☐ 12	0.___
☐ 13	0.___
☐ 14	0.___
☐ 15	0.___

*Interpolate for whole months

D. Monthly Late Retirement Benefit Amount (check one):

☒ (1) The monthly Late Retirement benefit shall be computed in the same manner as the Normal Retirement Benefit, based upon the Participant's Accrued Benefit as of the Participant's Late Retirement Date.

☐ (2) The monthly Late Retirement benefit shall be the greater of: (1) the monthly retirement benefit accrued as of the Participant's Normal Retirement Date, actuarially increased in accordance with the actuarial table contained in Section 12.05 of the Basic Plan Document; or (2) the monthly retirement benefit accrued as of the Participant's Late Retirement Date, without further actuarial adjustment under Section 12.06 of the Basic Plan Document.

E. Monthly Disability Benefit Amount

The amount of the monthly Disability Benefit shall be computed in the same manner as the Normal Retirement benefit, based upon the Participant's Accrued Benefit as of the Participant's Disability Retirement Date.

Minimum Disability Benefit. The Adopting Employer may set a minimum Disability Benefit. The Employer elects the following minimum Disability benefit **(check one)**:

☐ Not applicable (the Adopting Employer does not offer disability retirement benefits under the Plan).

☐ No minimum is established.

☒ No less than **(check one):** ☒ 20% ☐ 10% ☐ ____% **(if other than 20% or 10% insert percentage amount)** of the Participant's average monthly Earnings for the 12 calendar month period (excluding any period of unpaid leave of absence) immediately preceding the Participant's Termination of Employment as a result of a Disability. (Unless otherwise specified in an Addendum to the Adoption Agreement, no minimum will apply to elected or appointed members of the Governing Authority or Municipal Legal Officers.)

☐ No less than **(check one):** ☐ 66 2/3 % ☐ ______% **(if other than 66 2/3%, insert percentage amount)** of the Participant's average monthly Earnings for the 12 calendar month period (excluding any period of unpaid leave of absence) immediately preceding the Participant's Termination of Employment as a result of a Disability, less any monthly benefits paid from federal Social Security benefits as a result of disability as reported by the Employer. (Unless otherwise specified in an Addendum to the Adoption Agreement, no minimum will apply to elected or appointed members of the Governing Authority or Municipal Legal Officers.)

F. Minimum/Maximum Benefit For Elected Officials

In addition to any other limitations imposed by federal or state law, the Employer may impose a cap on the monthly benefit amount that may be received by elected or appointed members of the Governing Authority. The Employer elects **(check one)**:

☐ Not applicable (elected or appointed members of the Governing Authority do not participate in the Plan).

☒ No minimum or maximum applies.

☐ Monthly benefit for Service as an elected or appointed member of the Governing Authority may not exceed 100% of the Participant's final salary as an elected or appointed member of the Governing Authority.

☐ Other minimum or maximum **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ______________________________.

G. Multiple Plans

In the event that the Employer maintains multiple plans, the following provisions will apply to the extent necessary to satisfy Code § 415.

____

____

16. SUSPENSION OF BENEFITS FOLLOWING BONA FIDE SEPARATION OF SERVICE; COLA

A. Re-Employment as Eligible Employee After Normal, Alternative Normal, or Early Retirement and Following Bona Fide Separation of Service (see Basic Plan Document Section 6.06(c) Regarding Re-Employment as an Ineligible Employee and Basic Plan Document Section 6.06(e) and (f) Regarding Re-Employment After Disability Retirement)

(1) Reemployment After Normal or Alternative Normal Retirement. In the event that a Retired Participant 1) is reemployed with the Employer as an Eligible Employee (as defined in the Plan) after the Participant's Normal or Alternative Normal Retirement Date and after a Bona Fide Separation from Service, or 2) is reemployed with the Employer in an Ineligible Employee class, and subsequently again becomes an Eligible Employee (as defined in the Plan) due to the addition of such class to the Plan after the Participant's Normal or Alternative Normal Retirement Date, the following rule shall apply **(check one)**:

☐ (a) The Participant's benefit shall be suspended in accordance with Section 6.06(a)(1) of the Basic Plan Document for as long as the Participant remains employed.

☒ (b) The Participant may continue to receive retirement benefits in accordance with Section 6.06(b) of the Basic Plan Document. This rule shall apply to **(check one)**: ☐ all Retired Participants ☒ only the following classes of Retired Participants **(must specify (specific positions are permissible; specific individuals may not be named) - benefits of those Retired Participants not listed shall be suspended in accordance with Section 6.06(a) of the Basic Plan Document if they return to work with the Employer)**: **<u>Retired Participants who are serving as elected or appointed members of the Governing Authority on August 23, 2021, and those who return to Service as elected or appointed members of the Governing Authority on or after such date.</u>**

(2) Reemployment After Early Retirement. In the event a Participant Retires with an Early Retirement benefit after a Bona Fide Separation from Service 1) is reemployed with the Employer as an Eligible Employee before the Participant's Normal Retirement Date; or 2) is reemployed with the Employer in an Ineligible Employee class, and subsequently again becomes an Eligible Employee (as defined in the Plan) before the Participant's Normal Retirement Date due to the addition of such class to the Plan, the following rule shall apply **(check one or more as applicable)**:

(a) ☒ The Participant's Early Retirement benefit shall be suspended in accordance with Section 6.06(a)(1) of the Basic Plan Document for as long as the Participant remains employed.

This rule shall apply to **(check one)**: ☐ all Retired Participants; ☒ only the following classes of Retired Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: **<u>Retired Participants who return to Service as Eligible Regular Employees</u>**.

(b) ☐ The Participant's Early Retirement benefit shall be suspended in accordance with Section 6.06(a)(1) of the Basic Plan Document. However, the Participant may begin receiving benefits after satisfying the qualifications for Normal Retirement or Alternative Normal Retirement, as applicable, and after satisfying the minimum age parameters of Section 6.06(a)(3) of the Basic Plan Document, in accordance with Section 6.06(b)(2)(B)(i) of the Basic Plan Document.

This rule shall apply to **(check one)**: ☐ all Retired Participants; ☐ only the following classes of Retired Participants **(must specify - specific positions are permissible; specific individuals may not be named)**: ____.

(c) ☒ The Participant's Early Retirement benefit shall continue in accordance with Section 6.06(b)(2)(B)(ii) of the Basic Plan Document.

This rule shall apply to **(check one)**: ☐ all Retired Participants; ☒ only the following classes of Retired Participants **(must specify - specific**

positions are permissible; specific individuals may not be named): **<u>Retired Participants who are serving as elected or appointed members of the Governing Authority on August 23, 2021, and those who return to Service as elected or appointed members of the Governing Authority on or after such date.</u>**

B. <u>Cost Of Living Adjustment</u>

The Employer may elect to provide for an annual cost-of-living adjustment (COLA) in the amount of benefits being received by Retired Participants and Beneficiaries, which shall be calculated and paid in accordance with the terms of the Basic Plan Document. The Employer hereby elects the following **(check one)**:

☐ (1) No cost-of-living adjustment.

☒ (2) Variable Annual cost-of-living adjustment not to exceed <u>3.0</u>% **(insert percentage)**.

☐ (3) Fixed annual cost-of-living adjustment equal to ______% **(insert percentage)**.

The above cost-of-living adjustment shall apply with respect to the following Participants (and their Beneficiaries) **(check one)**:

☐ All Participants (and their Beneficiaries).
☐ Participants (and their Beneficiaries) who terminate employment on or after __________________ **(insert date)**.
☒ Other **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i)); specific positions are permissible; specific individuals may not be named)**: **<u>Participants land their Beneficiaries) who Terminate employment on or after October 1, 1989; provided, however, that the cost-of-living adjustment shall not apply with respect to Participants who are initially employed on or after January 1, 2014.</u>**

The Adjustment Date for the above cost-of-living adjustment shall be (if not specified, the Adjustment Date shall be January 1): ____.

17. TERMINATION OF EMPLOYMENT BEFORE RETIREMENT; VESTING

A. <u>Eligible Regular Employees</u>

Subject to the terms and conditions of the Basic Plan Document, a Participant who is an Eligible Regular Employee and whose employment is terminated for any reason other than death or retirement shall earn a vested right in the Participant's accrued retirement benefit in accordance with the following schedule **(check one):**

☐ **No vesting schedule (immediate vesting)**.

☒ **Cliff Vesting Schedule**. Benefits shall be 100% vested after the Participant has a minimum of **10** years **(insert number not to exceed 10)** of Total Credited Service. Benefits remain 0% vested until the Participant satisfies this minimum.

☐ **Graduated Vesting Schedule**. Benefits shall become vested in accordance with the following schedule **(insert percentages)**:

COMPLETED YEARS OF TOTAL CREDITED SERVICE	VESTED PERCENTAGE
1	%
2	%
3	%
4	%
5	%
6	%
7	%
8	%
9	%
10	%

Exceptions: If a vesting schedule other than that specified above applies to a special class(es) of Regular Employees, the Employer must specify the different vesting schedule below and the class(es) to whom the different vesting schedule applies.

Regular Employees to whom exception applies **(must specify - specific positions are permissible; specific individuals may not be named)**: **Active Employees Who Do Not Terminate and Return On or After January 1, 2014 -This class includes Employees who: (1) are employed by the City on December 31, 2013; and (2) do not become reemployed by the City on or after January 1, 2014.**

Vesting Schedule for excepted class **(Must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i). Must be at least as favorable as one of the following schedules: (i) 15-year cliff vesting, (ii) 20-year graded vesting, or (iii) for qualified public safety employees, 20-year cliff vesting.)**: **Participant will be 100% Vested after the Participant has at least five (5) years of Total Credited Service. Benefits remain 0% Vested until the Participant satisfies this 5-year minimum.**

Regular Employees to whom exception applies **(must specify - specific positions are permissible; specific individuals may not be named): (1) Active Employees Who Terminate and Return on or After January 1, 2014 - This class includes Employees who: (a) are employed by the City on December 31, 2013; and (b) become reemployed by the City on or after January 1, 2014; and**

<u>(2) Former Employees who Return After January 1, 2014 - This class includes former Employees who: (a) are not employed by the City on December 31, 2013; and (b) become reemployed by the City on or after January 1, 2014.</u>

Vesting Schedule for excepted class **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-l(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-l(b)(l)(i)): <u>10 Years Upon Reemployment – For Participants described in paragraph (1) or (2) immediately above, if upon reemployment with the City on or after January 1, 2014, the Participant has at least ten (10) years of Total Credited Service, the Participant will be 100% Vested.</u>**

<u>5-10 Years Upon Reemployment – For Participants described in paragraph (1) or (2) immediately above, if upon reemployment with the City on or after January 1, 2014, the Participant has at least five (5) but fewer than ten (10) years of Total Credited Service, then the Participant will be 100% Vested in that portion of said Participant's Normal Retirement benefit that is attributable to Credited Service with the City prior to the Participant's reemployment date. The Participant will become 100% Vested in the portion of said Participant's Normal Retirement benefit attributable to Credited Service after the reemployment date after the Participant has attained at least ten (10) years of Total Credited Service. The Participant will remain 0% Vested in the portion of said Participant's Normal Retirement benefit attributable to Credited Service with the City after the Participant's reemployment date until the Participant satisfies the 10-year requirement.</u>

<u>Fewer than 5 Years Upon Reemployment – For Participants described in paragraph (1) or 2) immediately above, if upon reemployment with the City on or after January 1, 2014, the Participant has fewer than five (5) years of Total Credited Service, then the Participant shall be 100% Vested after the Participant has attained at least ten (10) years of Total Credited Service. The Participant will remain 0% vested until the Participant satisfies the 10-year requirement.</u>

B. <u>Elected or Appointed Members of the Governing Authority</u>

Subject to the terms and conditions of the Basic Plan Document, a Participant who is an elected or appointed member of the Governing Authority or a Municipal Legal Officer shall earn a vested right in the Participant's accrued retirement benefit for Credited Service in such capacity in accordance with the following schedule **(check one)**:

☐ Not applicable (elected or appointed members of the Governing Authority are not permitted to participate in the Plan).

☒ No vesting schedule (immediate vesting).

☐ Other vesting schedule **(Must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i). Must be at least as favorable as one of the following schedules: (i) 15-year cliff vesting, (ii) 20-year graded vesting, or (iii) for qualified public safety employees, 20-year cliff vesting.)**: ______________________________________.

18. PRE-RETIREMENT DEATH BENEFITS

A. In-Service Death Benefit

Subject to the terms and conditions of the Basic Plan Document, the Employer hereby elects the following in-service death benefit, to be payable in the event that an eligible Participant's employment with the Employer is terminated by reason of the Participant's death prior to Retirement **(check and complete one)**:

(1) ☐ **Auto A Death Benefit**. A monthly benefit payable to the Participant's Pre-Retirement Beneficiary, equal to the decreased monthly retirement benefit that would have otherwise been payable to the Participant, had the Participant elected a 100% joint and survivor benefit under Section 7.03 of the Basic Plan Document. In order to be eligible for this benefit, a Participant must meet the following requirements **(check one)**:

☐ The Participant must be vested in a normal retirement benefit.

☐ The Participant must have ______ years **(insert number)** of Total Credited Service.

☐ The Participant must be eligible for Early or Normal Retirement.

☐ Other eligibility requirement **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ____________________________________.

(2) ☒ **Actuarial Reserve Death Benefit**. A monthly benefit payable to the Participant's Pre-Retirement Beneficiary, actuarially equivalent to the reserve required for the Participant's anticipated Normal Retirement benefit, provided the Participant meets the following eligibility conditions **(check one)**:

☒ The Participant shall be eligible upon satisfying the eligibility requirements of Section 8.02(c) of the Basic Plan Document.

☐ The Participant must have _____ years **(insert number)** of Total Credited Service.

☐ Other eligibility requirement **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ____________________________________.

Imputed Service. For purposes of computing the actuarial reserve death benefit, the Participant's Total Credited Service shall include **(check one)**:

☐ Total Credited Service accrued prior to the date of the Participant's death.

☒ Total Credited Service accrued prior to the date of the Participant's death, plus **(check one)**: ☒ one-half (½) ☐ ___________ **(insert other fraction)** of the Service between such date of death and what would otherwise have been the Participant's Normal Retirement Date. **(See Basic Plan Document Section 8.02(b) regarding 10-year cap on additional Credited Service.)**

Minimum In-Service Death Benefit for Vested Employees Equal to Terminated Vested Death Benefit. Unless otherwise specified under "Exceptions" below, if a Participant's employment is terminated by reason of the Participant's death prior to Retirement, and if as of the date of death the Participant is vested but does not qualify for the in-service death benefit, then the Auto A Death Benefit will be payable, provided the Auto A Death Benefit is made available to terminated vested employees under the Adoption Agreement (see "Terminated Vested Death Benefit" below).

(3) **Exceptions:** If an in-service death benefit other than that specified above applies to one or more classes of Participants, the Employer must specify below the death benefit payable, the class(es) to whom the different death benefit applies, and the eligibility conditions for said death benefit.

Alternative Death Benefit **(must specify formula that satisfies the definite written program and definitely determinable requirements of Treasury Regulations Sections 1.401-1(a)(2) and 1.401-1(b)(1)(i) and does not violate limits applicable to governmental plans under Code Sections 401(a)(17) and 415): ____**.

Participants to whom alternative death benefit applies **(must specify - specific positions are permissible; specific individuals may not be named)**: ________________________________.

Eligibility conditions for alternative death benefit **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ___________.

B. Terminated Vested Death Benefit

(1) **Complete this Section only if the Employer offers a terminated vested death benefit**. The Employer may elect to provide a terminated vested death benefit, to be payable in the event that a Participant who is vested dies after termination of employment but before Retirement benefits commence. Subject to the terms and conditions of the Basic Plan Document, the Employer hereby elects the following terminated vested death benefit **(check one)**:

☒ **Auto A Death Benefit**. A monthly benefit payable to the Participant's Pre-Retirement Beneficiary, equal to the decreased monthly retirement benefit that would have otherwise been payable to the Participant had the Participant elected a 100% joint and survivor benefit under Section 7.03 of the Basic Plan Document.

☐ **Accrued Retirement Benefit**. A monthly benefit payable to the Participant's Pre-Retirement Beneficiary which shall be actuarially equivalent to the

Participant's Accrued Normal Retirement Benefit determined as of the date of death.

(2) **Exceptions:** If a terminated vested death benefit other than that specified above applies to one or more classes of Participants, the Employer must specify below the death benefit payable, the class(es) to whom the different death benefit applies, and the eligibility conditions for said death benefit.

Alternative Death Benefit **(must specify formula that satisfies the definite written program and definitely determinable requirements of Treasury Regulations Sections 1.401-1(a)(2) and 1.401-1(b)(1)(i) and does not violate limits applicable to governmental plans under Code Sections 401(a)(17) and 415)**: ____.

Participants to whom alternative death benefit applies **(must specify - specific positions are permissible; specific individuals may not be named)**: _________________________________.

Eligibility conditions for alternative death benefit **(must specify in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ___________.

19. EMPLOYEE CONTRIBUTIONS

(1) **Employee contributions (check one):**

☒ Are not required.

☐ Are required in the amount of _____ % **(insert percentage)** of Earnings for all Participants.

☐ Are required in the amount of _____ % **(insert percentage)** of Earnings for Participants in the following classes **(must specify - specific positions are permissible; specific individuals may not be named)**: _____________________.

[Repeat above subsection as necessary if more than one contribution rate applies.]

(2) **Pre-Tax Treatment of Employee Contributions**. If Employee Contributions are required in Subsection (1) above, an Adopting Employer may elect to "pick up" Employee Contributions to the Plan in accordance with IRC Section 414(h). In such case, Employee Contributions shall be made on a pre-tax rather than a post-tax basis, provided the requirements of IRC Section 414(h) are met. If the Employer elects to pick up Employee Contributions, it is the Employer's responsibility to ensure that Employee Contributions are paid and reported in accordance with IRC Section 414(h). The Adopting Employer must not report picked up contributions as wages subject to federal income tax withholding.

The Employer hereby elects **(check one)**:

☐ To pick up Employee Contributions. By electing to pick up Employee Contributions, the Adopting Employer specifies that the contributions, although designated as Employee Contributions, are being paid by the Employer in lieu of Employee Contributions. The Adopting Employer confirms that the executor of this Adoption Agreement is duly authorized to take this action as required to pick up contributions. This pick-up of contributions applies prospectively, and it is evidenced by this contemporaneous written document. On and after the date of the pick-up of contributions, a Participant does not have a cash or deferred election right (within the meaning of Treasury Regulation Section 1.401(k)-1(a)(3)) with respect to the designated Employee Contributions, which includes not having the option of receiving the amounts directly instead of having them paid to the Plan.

☐ Not to pick up Employee Contributions.

(3) Interest on Employee Contributions. The Adopting Employer may elect to pay interest on any refund of Employee Contributions.

☐ Interest shall not be paid.

☐ Interest shall be paid on a refund of Employee Contributions at a rate established by GMEBS from time to time.

☐ Other rate of interest **(must specify rate in a manner that satisfies the definite written program requirement of Treasury Regulation 1.401-1(a)(2) and the definitely determinable requirement of Treasury Regulation 1.401-1(b)(1)(i))**: ____.

20. MODIFICATION OF THE TERMS OF THE ADOPTION AGREEMENT

If an Adopting Employer desires to amend any of its elections contained in this Adoption Agreement (or any Addendum), the Governing Authority by official action must adopt an amendment of the Adoption Agreement (or any Addendum) or a new Adoption Agreement (or Addendum) must be adopted and forwarded to the Board for approval. The amendment of the new Adoption Agreement (or Addendum) is not effective until approved by the Board and other procedures required by the Plan have been implemented.

The Administrator will timely inform the Adopting Employer of any amendments made by the Board to the Plan.

21. TERMINATION OF THE ADOPTION AGREEMENT

This Adoption Agreement (and any Addendum) may be terminated only in accordance with the Plan. The Administrator will inform the Adopting Employer in the event the Board should decide to discontinue this pre-approved plan program.

22. EMPLOYER ADOPTION AND AUTHORIZATION FOR AMENDMENTS

Adoption. The Adopting Employer hereby adopts the terms of the Adoption Agreement and any Addendum, which is attached hereto and made a part of this ordinance. The Adoption Agreement (and, if applicable, the Addendum) sets forth the Employees to be covered by the Plan, the benefits to be provided by the Adopting Employer under the Plan, and any conditions imposed by the Adopting Employer with respect to, but not inconsistent with, the Plan. The Adopting Employer reserves the right to amend its elections under the Adoption Agreement and any Addendum, so long as the amendment is not inconsistent with the Plan or the Internal Revenue Code or other applicable law and is approved by the Board of Trustees of GMEBS. The Adopting Employer acknowledges that it may not be able to rely on the pre-approved plan opinion letter if it makes certain elections under the Adoption Agreement or the Addendum, and that the failure to properly complete the Adoption Agreement may result in a failure of the Adopting Employer's Plan to be a qualified plan.

The Adopting Employer hereby agrees to abide by the Basic Plan Document, Trust Agreement, and rules and regulations adopted by the Board of Trustees of GMEBS, as each may be amended from time to time, in all matters pertaining to the operation and administration of the Plan. It is intended that the Act creating the Board of Trustees of GMEBS, this Plan, and the rules and regulations of the Board are to be construed in harmony with each other. In the event of a conflict between the provisions of any of the foregoing, they shall govern in the following order:

(1) The Act creating the Board of Trustees of The Georgia Municipal Employees' Benefit System, O.C.G.A. Section 47-5-1 *et seq*. (a copy of which is included in the Appendix to the Basic Defined Benefit Plan Document) and any other applicable provisions of O.C.G.A. Title 47;

(2) The Basic Defined Benefit Plan Document and Trust Agreement;

(3) This Ordinance and Adoption Agreement (and any Addendum); and

(4) The rules and regulations of the Board.

In the event that any section, subsection, sentence, clause or phrase of this Plan shall be declared or adjudged invalid or unconstitutional, such adjudication shall in no manner affect the previously existing provisions or the other section or sections, subsections, sentences, clauses or phrases of this Plan, which shall remain in full force and effect, as if the section, subsection, sentence, clause or phrase so declared or adjudicated invalid or unconstitutional were not originally a part hereof. The Governing Authority hereby declares that it would have passed the remaining parts of this Plan or retained the previously existing provisions if it had known that such part or parts hereof would be declared or adjudicated invalid or unconstitutional.

This Adoption Agreement (and any Addendum) may only be used in conjunction with Georgia Municipal Employees Benefit System Basic Defined Benefit Retirement Plan Document approved by the Internal Revenue Service under opinion letter Q705465a dated August 31, 2023. The Adopting Employer understands that failure to properly complete this Adoption Agreement (or any Addendum), or to operate and maintain the Plan and Trust in accordance with the terms of the completed Adoption Agreement (and any Addendum), Basic Plan Document and Trust, may result in disqualification of the Adopting Employer's Plan under the Internal Revenue Code. Inquiries regarding the adoption of the Plan, the meaning of Plan provisions, or the effect of the IRS opinion letter should be directed to the Administrator. The Administrator is Georgia Municipal Employees Benefit System, with its primary business offices located at: 201 Pryor Street, SW, Atlanta, Georgia, 30303. The business telephone number is: (404) 688-0472. The primary person to contact is: GMEBS Legal Counsel.

Authorization for Amendments. Effective on and after February 17, 2005, the Adopting Employer hereby authorizes the pre-approved plan provider who sponsors the Plan on behalf of GMEBS to prepare amendments to the Plan, for approval by the Board, on its behalf as provided under Revenue Procedure 2005-16, as superseded by Revenue Procedure 2015-36, Revenue Procedure 2011-49, and Announcement 2005-37. Effective January 1, 2013, Georgia Municipal Association, Inc., serves as the pre-approved plan provider for the Plan. Employer notice and signature requirements were met for the Adopting Employer before the effective date of February 17, 2005. The Adopting Employer understands that the implementing amendment reads as follows:

> On and after February 17, 2005, the Board delegates to the Provider the authority to advise and prepare amendments to the Plan, for approval by the Board, on behalf of all Adopting Employers, including those Adopting Employers who have adopted the Plan prior to the January 1, 2013, restatement of the Plan, for changes in the Code, the regulations thereunder, revenue rulings, other statements published by Internal Revenue Service, including model, sample, or other required good faith amendments (but only if their adoption will not cause such Plan to be individually designed), and for corrections of prior approved plans. These amendments shall be applied to all Adopting Employers. Employer notice and signature requirements have been met for all Adopting Employers before the effective date of February 17, 2005. In any event, any amendment prepared by the Practitioner and approved by the Board will be provided by the Administrator to Adopting Employers.
>
> Notwithstanding the foregoing paragraph, no amendment to the Plan shall be prepared on behalf of any Adopting Employer as of either:
>
> - the date the Internal Revenue Service requires the Adopting Employer to file Form 5300 as an individually designed plan as a result of an amendment by the Adopting Employer to incorporate a type of Plan not allowable in a pre-approved plan as described in Revenue Procedure 2017-41; or
> - as of the date the Plan is otherwise considered an individually designed plan due to the nature and extent of the amendments.
>
> If the Adopting Employer is required to obtain a determination letter for any reason in order to maintain reliance on the opinion letter, the Provider's authority to amend the Plan on behalf of the Adopting Employer is conditioned on the Plan receiving a favorable determination letter.

The Adopting Employer further understands that, if it does not give its authorization hereunder or, in the alternative, adopt another pre-approved plan, its Plan will become an individually designed plan and will not be able to rely on the pre-approved plan opinion letter.

Reliance on Opinion Letter. As provided in Revenue Procedure 2017-41, the Adopting Employer may rely on the Plan's opinion letter, provided that the Adopting Employer's Plan is identical to the GMEBS Plan, and the Adopting Employer has not amended or made any modifications to the Plan other than to choose the options permitted under the Plan, Adoption Agreement, and any Addendum.

AN ORDINANCE (continued from page 1)

<u>Section 2</u>. Except as otherwise specifically required by law or by the terms of the Basic Plan Document or Adoption Agreement (or any Addendum), the rights and obligations under the Plan with respect to persons whose employment with the City was terminated or who vacated office with the City for any reason whatsoever prior to the effective date of this Ordinance are fixed and shall be governed by such Plan, if any, as it existed and was in effect at the time of such termination.

<u>Section 3</u>. The effective date of this Ordinance shall be the date of its approval by the Governing Authority **(not earlier than the first day of the current Plan Year in which the Plan is adopted, unless a retroactive corrective amendment is permitted under EPCRS, Rev. Proc. 2021-30 (or subsequent updated guidance))**.

<u>Section 4</u>. All Ordinances and parts of ordinances in conflict herewith are expressly repealed.

Approved by the Mayor and Council of the City of Kingsland, Georgia, this _______ day of _____________________, 20_____.

Attest: CITY OF KINGSLAND, GEORGIA

________________________ ______________________________________

City Clerk Mayor

(SEAL)

Approved:

____

City Attorney

The terms of the foregoing Adoption Agreement are approved by the Board of Trustees of Georgia Municipal Employees Benefit System.

IN WITNESS WHEREOF, the Board of Trustees of Georgia Municipal Employees Benefit System has caused its Seal and the signatures of its duly authorized officers to be affixed this ______ day of __________________________, 20____.

Board of Trustees
Georgia Municipal Employees
Benefit System

(SEAL)

____

Secretary

City Council
107 South Lee Street
Kingsland, GA 31548

SCHEDULED

AGENDA ITEM (ID # 4484)

Meeting: 06/10/24 06:00 PM
Department: City Clerk
Category: Agreement
Prepared By: Jean Seigler
Initiator: Jean Seigler
Sponsors:
DOC ID: 4484

Approval of: MainPoint Employee Wellness Clinic MOU FY 2024-2025

A Memorandum of Understanding (MOU) establishing a cooperative partnership between the Camden County Board of Commissioners and the City of Kingsland, Georgia for providing onsite clinical medical services by Camden County to employees of the City of Kingsland. The city's pro-rata funding remains at 12% of the $621,221 FY 24-25 budget, an increase of $386 per month.
Staff recommends approval.

COUNTY OF CAMDEN

MEMORANDUM OF UNDERSTANDING
ESTABLISHING A COOPERATIVE PARTNERSHIP
BETWEEN THE CAMDEN COUNTY BOARD OF COMMISSIONERS
AND THE CITY OF KINGSLAND, GEORGIA
FOR PROVIDING ONSITE CLINICAL MEDICAL SERVICES
BY CAMDEN COUNTY TO EMPLOYEES OF THE CITY OF KINGSLAND

This Memorandum of Understanding (herein after the "MOU") between the Camden County Board of Commissioners (herein after the "CCBC") and the City of Kingsland, Georgia (herein after the "CITY"); entered into this the ____ day of ______, 2024 for providing of clinical medical services by Camden County for the employees of the City of Kingsland for the period starting July 1, 2024 and continuing through June 30, 2025 as defined and as agreed to as set forth herein:

1.

WHEREAS the CCBC and the CITY are lawful governments as envisioned by Georgia Law.

2.

WHEREAS the CCBC is a self-insured body for the purposes of providing health insurance benefits to CCBC's employees; and the CITY has purchased a health insurance policy for the purposes of providing health insurance benefits to CITY's employees.

3.

WHEREAS both CCBC and CITY desires to manage their employer provided health insurance costs in the most economical manner.

4.

WHEREAS CCBC has an established onsite medical clinic to provide a wellness program for employees in an attempt to reduce health insurance costs for CCBC. The clinic is at 701 Charles Gilman Jr. Avenue, Suite B, Kingsland, Georgia.

5.

WHEREAS CCBC has contracted with a local Georgia licensed physician, a nurse practitioner, and a Clinic Director/RN to oversee and provide medical services for CCBC's employees at the afore-stated clinic in a continued effort to reduce costs associated with the self-insured program.

6.

WHEREAS CCBC and CITY have entered into discussions that have led to the CITY and CCBC entering into this MOU which creates a cooperative partnership so as to allow CITY's employees to utilize the afore-stated clinic whereby the physician, nurse practitioner, and the registered nurses will provide an onsite medical clinical treatment program to CITY's employees while performing the onsite medical clinical treatment program for CCBC.

7.

NOW THEREFORE BE IT RESOLVED the CCBC and CITY hereby enters into this MOU which establishes a cooperative partnership between the parties hereto for the providing of onsite medical clinical services, to include pre-employment screenings and applicable firefighter physicals as part of the measured usage, to the employees of the City of Kingsland, pursuant to the following terms.

a.

This MOU shall be effective upon the final approval by the CCBC (Camden County Board of Commissioners) and CITY (the Council for the City of Kingsland, Georgia) and entered upon the lawful minutes of each political body.

b.

Operational dates of this MOU shall be effective on July 1, 2024, upon final approval by CCBC and CITY, and shall continue until either party provides proper notification for termination. Either CCBC or the CITY may terminate this MOU at any time by informing the other party in writing 30 days prior to the termination of the agreement which shall be delivered to the County Administrator for CCBC or the City Manger for the CITY.

c.

CCBC shall establish the medical clinics hours of operation as stated herein below; and shall have sole authority for the retaining of the afore-said professional medical services for this MOU and the clinic; the location and hours of operations shall be:

i. Staff will be available during set operational hours.

d.

In the forming of this cooperative partnership the CCBC and the CITY shall each be responsible for the total clinic operations cost on a pro-rata basis pursuant to the following formula.

CCBC has determined the estimated budgeted operating cost for CCBC's Fiscal Year 2024-2025 to be $621,221. This budgeted amount is to cover any and all expenses associated with the onsite clinic (physician, physician's assistant, registered nursing staff, malpractice liability insurance premiums, non-medical staff, medical supplies, medications, and the utility and maintenance costs to operate the clinic).

It has further been determined that the CITY utilized the onsite medical clinic for CCBC's Fiscal year 2023-2024 for a pro-rated use percentage of 12% of the total operating costs for the afore-stated fiscal budget year.

It is hereby agreed and consented to by the parties hereto that the CITY shall pay to CCBC 12% of the afore-stated $621,221 budget, conditioned on the CITY use of the clinical services not exceeding the projected 12% use of the clinic for 2024-2025 Fiscal Budget Year.

CITY shall pay to CCBC the total annual amount of $74,546.52 for medical services provided by the CCBC's onsite clinic to the CITY. Said annual amount shall be paid in 12 monthly installments of $6,212.21. CITY shall pay CCBC for the monthly installment payment by the 10th day of each month for the services performed in the previous month starting with July 1, 2024.

The aforesaid formula for payment of clinical services provided to the CITY shall be reviewed by CCBC on a quarterly basis in an effort to keep the CITY informed of the percentage of clinical services provided and costs so associated with the provided services in comparison to the funding so allocated for the onsite clinic operations. Upon review of the quarterly reports, the CITY shall be notified by the CCBC of the actual costs and utilization as well as any differential in pay.

The quarterly reviews are for the periods of July 1, 2024 to September 30, 2024; October 1, 2024 to December 31, 2024; January 1, 2025 to March 31, 2025; and April 1, 2025 to June 30, 2025. The completed quarterly review shall be presented by the CCBC to CITY on or before the 20th day of the month following the quarter just completed.

e.

CITY will be notified by CCBC in a timely manner of a change in clinic's hour of operation so that the CITY's employees may schedule their time to meet with the health care providers. Representatives of the CCBC's Human Resources Department and the CITY's Human Resources Department shall meet as needed to work out clinic schedules as necessary.

f.

This MOU does not establish an employer/employee relationship between CITY's employees and CCBC.

g.

CITY agrees to hold harmless and indemnify CCBC from any damages, liability, actions, claims, or demands that may arise within the scope of this MOU in regards to CITY's agents, servants, employees, invitees, or licenses arising out of this MOU during the term of this MOU.

h.

The services as defined herein shall only be provided to those CITY employees, and their dependents, that are currently enrolled in the CITY's employer provided health insurance program. City shall provide to CCBC a list of currently enrolled employees in CITY's employer provided health insurance program as may be amended from time to time.

Hereby agreed to by the parties hereto on the date as approved:

This ______ day of _____2024

____
Ben L. Casey, Chairman
Camden County Board of Commissioners

ATTEST:__________________________
Kathryn Bishop, County Clerk

____
Dr. C. Grayson Day, Mayor
City of Kingsland, GA

This _____ day of ______________2024

ATTEST: __________________________
Jo Seigler, City Clerk

MainPoint Health and Wellness
FY 23 Quarterly Utilization Report

Quarter		Camden County	City of St Marys	PSA	City of Kingsland	Totals
1st Quarter	**July**					
	Nurse Encounters	59	22	7	16	104
	Provider Encounters	91	41	8	18	158
	Provider Consults	31	18	5	4	58
	Total	181	81	20	38	320
	August					
	Nurse Encounters	113	24	9	19	165
	Provider Encounters	112	34	11	18	175
	Provider Consults	52	20	5	13	90
	Total	277	78	25	50	430
	September					
	Nurse Encounters	86	23	5	27	141
	Provider Encounters	88	22	2	11	123
	Provider Consults	45	16	2	23	86
	Total	219	61	9	61	350
	Totals	677	220	54	149	1100
	Percentage of Total Clinic Utilization	61.55%	20.00%	4.91%	13.55%	100.00%
2nd Quarter	**October**					
	Nurse Encounters	152	51	9	31	243
	Provider Encounters	96	37	3	21	157
	Provider Consults	31	22	4	9	66
	Total	279	110	16	61	466
	November					
	Nurse Encounters	98	17	6	15	136
	Provider Encounters	96	28	8	17	149
	Provider Consults	42	11	3	8	64
	Total	236	56	17	40	349
	December					
	Nurse Encounters	92	27	11	20	150
	Provider Encounters	102	22	4	22	150
	Provider Consults	40	23	5	11	79
	Total	234	72	20	53	379
	Totals	749	238	53	154	1194
	Percentage of Total Clinic Utilization	62.73%	19.93%	4.44%	12.90%	100.00%
3rd Quarter	**January**					
	Nurse Encounters	138	28	6	16	188
	Provider Encounters	111	39	2	25	177
	Provider Consults	57	20	3	10	90
	Total	306	87	11	51	455
	February					
	Nurse Encounters	146	27	8	20	201
	Provider Encounters	79	29	5	18	131
	Provider Consults	46	18	5	15	84
	Total	271	74	18	53	416
	March					
	Nurse Encounters	161	25	12	21	219
	Provider Encounters	134	27	3	34	198
	Provider Consults	53	18	7	16	94
	Total	348	70	22	71	511
	Totals	925	231	51	175	1382
	Percentage of Total Clinic Utilization	66.93%	16.71%	3.69%	12.66%	100.00%
4th Quarter	**April**					
	Nurse Encounters	163	31	5	19	218
	Provider Encounters	107	35	7	20	169
	Provider Consults	48	20	2	14	84
	Total	318	86	14	53	471
	May					
	Nurse Encounters	138	26	21	21	206
	Provider Encounters	114	33	1	14	162
	Provider Consults	71	14	2	16	103
	Total	323	73	24	51	471
	June					
	Nurse Encounters	129	37	12	15	193
	Provider Encounters	101	26	4	25	156
	Provider Consults	53	26	4	11	94
	Total	283	89	20	51	443
	Totals	924	248	58	155	1385
	Percentage of Total Clinic Utilization	66.71%	17.91%	4.19%	11.19%	100.00%
Grand Totals	**Total Encounters**	3275	937	216	633	5061
	Overall Percentage of Total Clinic Utilization	64.71%	18.51%	4.27%	12.51%	100.00%

Totals by Provider	Nurse	Provider	Provider Consult	Grand Totals
1st Quarter	410	456	234	110
2nd Quarter	529	456	209	119
3rd Quarter	608	506	268	138
4th Quarter	617	487	281	138
Totals	2164	1905	992	506

Attachment: Camden County Total Clinic Utilization All Entities FY 22-23 Final (4484 : Approval of: MainPoint Employee Wellness Clinic MOU

MainPoint Health and Wellness
FY 24 Quarterly Utilization Report

Quarter		Camden County	City of St Marys	PSA	City of Kingsland	Totals
1st Quarter	**July**					
	Nurse Encounters	108	41	6	14	169
	Provider Encounters	101	30	2	21	154
	Provider Consults	49	26	2	10	87
	Total	258	97	10	45	410
	August					
	Nurse Encounters	117	30	13	11	171
	Provider Encounters	110	37	9	17	173
	Provider Consults	63	13	8	7	91
	Total	290	80	30	35	435
	September					
	Nurse Encounters	133	30	6	18	187
	Provider Encounters	109	39	3	30	181
	Provider Consults	55	17	3	12	87
	Total	297	86	12	60	455
	Totals	845	263	52	140	1300
	Percentage of Total Clinic Utilization	65.00%	20.23%	4.00%	10.77%	100.00%
2nd Quarter	**October**					
	Nurse Encounters	154	38	11	57	260
	Provider Encounters	102	31	6	34	173
	Provider Consults	57	17	5	15	94
	Total	313	86	22	106	527
	November					
	Nurse Encounters	124	25	6	14	169
	Provider Encounters	117	25	5	28	175
	Provider Consults	58	14	4	4	80
	Total	299	64	15	46	424
	December					
	Nurse Encounters	103	21	6	12	142
	Provider Encounters	95	25	5	20	145
	Provider Consults	63	12	2	7	84
	Total	261	58	13	39	371
	Totals	873	208	50	191	1322
	Percentage of Total Clinic Utilization	66.04%	15.73%	3.78%	14.45%	100.00%
3rd Quarter	**January**					
	Nurse Encounters	103	34	9	25	171
	Provider Encounters	112	31	5	31	179
	Provider Consults	54	22	5	14	95
	Total	269	87	19	70	445
	February					
	Nurse Encounters	127	27	4	16	174
	Provider Encounters	127	31	3	37	198
	Provider Consults	59	17	4	11	91
	Total	313	75	11	64	463
	March					
	Nurse Encounters	164	32	7	24	227
	Provider Encounters	136	39	3	28	206
	Provider Consults	51	24	4	13	92
	Total	351	95	14	65	525
	Totals	933	257	44	199	1433
	Percentage of Total Clinic Utilization	65.11%	17.93%	3.07%	13.89%	100.00%
4th Quarter	**Totals**	0	0	0	0	0
	Percentage of Total Clinic Utilization	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Grand Totals	**Total Encounters**	2651	728	146	530	4055
	Overall Percentage of Total Clinic Utilization	65.38%	17.95%	3.60%	13.07%	100.00%

Totals by Provider	Nurse	Provider	Provider Consult	Grand Totals
1st Quarter	527	508	265	1300
2nd Quarter	571	493	258	1322
3rd Quarter	572	583	278	1433
4th Quarter	0	0	0	0
Totals	1670	1584	801	4055

City Council
107 South Lee Street
Kingsland, GA 31548

SCHEDULED

Meeting: 06/10/24 06:00 PM
Department: City Clerk
Category: Resolution
Prepared By: Jean Seigler
Initiator: Jean Seigler
Sponsors:
DOC ID: 4482

AGENDA ITEM (ID # 4482)

Approval of: Resolution 2024-08 - Establishing Qualifying Dates and Time

This will set the date and time for qualifying for the 2024 election for City Council Posts #1 and #2.

RESOLUTION #2024-08

A RESOLUTION ESTABLISHING THE 2024 QUALIFYING DATES AND TIMES FOR CERTAIN CITY OFFICES IN THE CITY OF KINGSLAND

WHEREAS, O.C.G.A. §§ 21-2-132; 21-2-153 requires City Council to fix and publish qualifying dates and times in the upcoming General Election;

NOW, THEREFORE BE IT RESOLVED, by the City Council, acting as the governing authority of the City of Kingsland, Georgia that the 2024 qualifying dates and times for certain city offices are established as follows:

Hours of 8:30 A.M. – 12:00 PM and 1:00 PM – 4:00 PM., Monday, August 19, 2024 through Friday, August 23, 2024.

Qualifying fee for City Council Posts #1 and #2 - $270.75.

ADOPTED, this 10th day of June, 2024. **CITY OF KINGSLAND, GEORGIA**

BY: ____

Dr. C. Grayson Day, Jr., Mayor

ATTEST:

____

Jean Seigler Horne, City Clerk

City Council
107 South Lee Street
Kingsland, GA 31548

SCHEDULED

Meeting: 06/10/24 06:00 PM
Department: City Clerk
Category: Resolution
Prepared By: Jean Seigler
Initiator: Jean Seigler
Sponsors:
DOC ID: 4481

AGENDA ITEM (ID # 4481)

Approval of: Resolution 2024-10 - Level 1 Freeport Exemption for Fullfilment Centers

This provides a Level 1 Freeport Tax Exemption for Fulfillment Centers as authorized by O.C.G.A. 45-5-48.2. This exemption does not add any tax burden to the citizens of Kingsland or Camden County and makes Kingsland more competitive for companies bringing jobs to our community. This exemption was approved by voter referendum on May 21, 2024.

CITY OF KINGSLAND
LEVEL 1 FREEPORT EXEMPTION FOR FULFILLMENT CENTERS

RESOLUTION # 2024-10

WHEREAS, the goal of every unit of local government in Georgia is to provide the highest possible quality of life for its citizens, as well as increasing job opportunities; and

WHEREAS, it is beneficial to all citizens in our areas, as well as to the economy, to attempt to attract fulfillment centers to the City of Kingsland thus creating jobs for our citizens, and

WHEREAS, in order to compete with other locations for the attraction of fulfillment centers, it is imperative that a community have incentives to attract those businesses, and

WHEREAS, incentives for fulfillment centers can be provided in multiple ways, with the most effective being by way of implementing an exemption for tangible personal property inventory such as the Freeport inventory tax exemption, and

WHEREAS, in May of 2024, the citizens of the City of Kingsland approved the provision of Level 1 Freeport Exemption of stock in trade of a fulfillment center, and

WHEREAS, The City of Kingsland, in an effort to create a competitive incentive for economic development efforts, supports the Level 1 Freeport Exemption of stock in trade of a fulfillment center,

NOW THEREFORE BE IT RESOLVED, that the City Council of the City of Kingsland do hereby resolve and establish the Level 1 Freeport Exemption for stock in trade of a fulfillment centers at 100 percent within the City of Kingsland, Georgia. Be it further resolved that upon approval and execution of this resolution that same be forwarded to the Commissioner of the Georgia Department of Revenue.

Approved this _______ day of ___________, 2024

____
Mayor

Attest: _________________________________
City Clerk

Camden County Board of Elections & Registration

P.O. Box 608 / 200 East 4th Street • Woodbine, Georgia 31569
Phone: (912) 576.3245 • www.camdencountyga.gov

Office of Elections & Registration

June 5, 2024

Mr. Lee Spell
City Manager
City of Kingsland
P.O. Box 250
Kingsland, Ga 31548

Mr. Spell,

On behalf of the Camden County Board of Elections & Registration, please find the enclosed certified copy of the official results of the Kingsland Freeport Exemption Special Election held on May 21, 2024.

Page 18 of the Official and Complete Election Summary Report has the race results available for your review.

If further information is needed, please give me a call.

Sincerely,

Shannon B. Nettles

Shannon Nettles
Elections Supervisor
Camden County Elections & Registration

Your Vote Counts

Election Summary Report

Closed Primary

Camden

May 21, 2024

Summary for: All Contests, All Districts, All Tabulators, All Counting Groups

Camden County
General Primary
Official & Complete

Precincts Reported: 11 of 11 (100.00%)

Registered Voters: 6,907 of 36,426 (18.96%)

Ballots Cast: 6,907

US House of Representatives - District 1 - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Earl L. 'Buddy' Carter (I)		2,511	2,331	106	1	4,949	
Total Votes		2,511	2,331	106	1	4,949	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

US House of Representatives - District 1 - Dem (Vote for 1) DEM

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	460	406	138	1	1,005 / 36,426	2.76%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Patti Hewitt		392	340	119	1	852	
Total Votes		392	340	119	1	852	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

State Senate - District 3 - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Mike Hodges (I)		2,447	2,308	99	1	4,855	
Total Votes		2,447	2,308	99	1	4,855	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

State House of Representatives - District 180 - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Glenn Cook		641	678	29	0	1,348	
David L. Rainer		702	663	37	0	1,402	
Steven Sainz (I)		1,472	1,324	63	1	2,860	
Total Votes		2,815	2,665	129	1	5,610	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

State House of Representatives - District 180 - Dem (Vote for 1) DEM

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	460	406	138	1	1,005 / 36,426	2.76%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Defonsio Daniels		399	337	116	1	853	
Total Votes		399	337	116	1	853	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

District Attorney - Brunswick Judicial Circuit - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Keith Higgins (I)		1,827	1,798	102	0	3,727	
John B. Johnson		823	746	22	1	1,592	
Total Votes		2,650	2,544	124	1	5,319	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Clerk of Superior Court - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Joy Lynn Turner (I)		2,530	2,428	103	1	5,062	
Total Votes		2,530	2,428	103	1	5,062	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Sheriff - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
James Kevin Chaney		2,000	1,909	91	1	4,001	
Trevor W. Readdick		789	723	39	0	1,551	
Total Votes		2,789	2,632	130	1	5,552	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Tax Commissioner - Rep (Vote for 1)
REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Beth Soles (I)		2,600	2,463	106	1	5,170	
Total Votes		2,600	2,463	106	1	5,170	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Coroner - Rep (Vote for 1)
REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Wayne Peeples (I)		2,463	2,336	101	1	4,901	
Total Votes		2,463	2,336	101	1	4,901	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

County Commission - District 1 - Rep (Vote for 1)
REP

Precincts Reported: 5 of 5 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	688	520	25	0	1,233 / 7,822	15.76%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Robbie Cheek		569	444	13	0	1,026	
Total Votes		569	444	13	0	1,026	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Attachment: Resolution 2024-10 (4481 : Approval of: Resolution 2024-10 - Level 1 Freeport Exemption for Fulfilment Centers)

County Commission - District 1 - Dem (Vote for 1) DEM

Precincts Reported: 5 of 5 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	157	128	66	0	351 / 7,822	4.49%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Kevin M. Walker		148	118	62	0	328	
Total Votes		148	118	62	0	328	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

County Commission - District 3 - Rep (Vote for 1) REP

Precincts Reported: 3 of 3 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	348	321	16	0	685 / 5,253	13.04%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Marcus L. Hill		130	175	6	0	311	
Cody Smith		197	135	10	0	342	
Total Votes		327	310	16	0	653	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

County Commission - District 5 - Rep (Vote for 1) REP

Precincts Reported: 2 of 2 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	489	532	23	0	1,044 / 7,320	14.26%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Ben Casey (I)		258	276	10	0	544	
Mike Harris		214	239	10	0	463	
Total Votes		472	515	20	0	1,007	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 1 - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		1,734	1,649	79	1	3,463	
No		1,043	984	51	0	2,078	
Total Votes		2,777	2,633	130	1	5,541	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 2 - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		1,619	1,542	49	1	3,211	
No		1,055	1,015	78	0	2,148	
Total Votes		2,674	2,557	127	1	5,359	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 3 - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		2,512	2,411	121	1	5,045	
No		224	192	8	0	424	
Total Votes		2,736	2,603	129	1	5,469	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 4 - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		1,756	1,693	71	0	3,520	
No		993	939	61	1	1,994	
Total Votes		2,749	2,632	132	1	5,514	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 5 - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		2,335	2,185	97	1	4,618	
No		441	465	32	0	938	
Total Votes		2,776	2,650	129	1	5,556	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 6 - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		2,367	2,236	101	0	4,704	
No		383	404	23	1	811	
Total Votes		2,750	2,640	124	1	5,515	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 7 - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		2,278	2,164	89	1	4,532	
No		494	470	38	0	1,002	
Total Votes		2,772	2,634	127	1	5,534	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 8 - Rep (Vote for 1) REP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	2,873	2,711	139	1	5,724 / 36,426	15.71%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		175	226	14	0	415	
No		2,575	2,385	112	1	5,073	
Total Votes		2,750	2,611	126	1	5,488	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 1 - Dem (Vote for 1) DEM

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	460	406	138	1	1,005 / 36,426	2.76%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		420	376	133	1	930	
No		30	24	3	0	57	
Total Votes		450	400	136	1	987	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 2 - Dem (Vote for 1) DEM

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	460	406	138	1	1,005 / 36,426	2.76%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		420	391	133	1	945	
No		27	8	3	0	38	
Total Votes		447	399	136	1	983	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 3 - Dem (Vote for 1) DEM

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	460	406	138	1	1,005 / 36,426	2.76%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		388	353	115	1	857	
No		65	44	20	0	129	
Total Votes		453	397	135	1	986	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 4 - Dem (Vote for 1) DEM

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	460	406	138	1	1,005 / 36,426	2.76%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		412	366	121	1	900	
No		35	29	13	0	77	
Total Votes		447	395	134	1	977	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 5 - Dem (Vote for 1) DEM

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	460	406	138	1	1,005 / 36,426	2.76%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		373	338	121	1	833	
No		79	60	16	0	155	
Total Votes		452	398	137	1	988	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 6 - Dem (Vote for 1) DEM

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	460	406	138	1	1,005 / 36,426	2.76%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		433	387	133	1	954	
No		20	16	2	0	38	
Total Votes		453	403	135	1	992	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 7 - Dem (Vote for 1) DEM

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	460	406	138	1	1,005 / 36,426	2.76%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		350	329	104	1	784	
No		93	66	24	0	183	
Total Votes		443	395	128	1	967	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Party Question 8 - Dem (Vote for 1)
DEM

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	460	406	138	1	1,005 / 36,426	2.76%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		439	386	128	1	954	
No		12	14	7	0	33	
Total Votes		451	400	135	1	987	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

Judge - Supreme Court (Boggs) (Vote for 1)
NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Michael P. Boggs (I)		2,872	2,700	215	1	5,788	
Total Votes		2,872	2,700	215	1	5,788	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		43	33	0	0	76	

Judge - Supreme Court (Ellington) (Vote for 1)
NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
John J. Ellington (I)		2,837	2,668	205	1	5,711	
Total Votes		2,837	2,668	205	1	5,711	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		21	10	2	0	33	

Judge - Supreme Court (Peterson) (Vote for 1) NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Nels Peterson (I)		2,828	2,652	206	2	5,688	
Total Votes		2,828	2,652	206	2	5,688	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		18	15	1	0	34	

Judge - Supreme Court (Pinson) (Vote for 1) NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
John Barrow		1,166	1,068	121	2	2,357	
Andrew Pinson (I)		1,846	1,754	116	0	3,716	
Total Votes		3,012	2,822	237	2	6,073	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		9	6	0	0	15	

Judge - Court of Appeals (Dillard) (Vote for 1) NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Stephen Dillard (I)		2,834	2,656	209	2	5,701	
Total Votes		2,834	2,656	209	2	5,701	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		12	10	2	0	24	

Judge - Court of Appeals (Hodges) (Vote for 1)
NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Ken Hodges (I)		2,824	2,649	211	2	5,686	
Total Votes		2,824	2,649	211	2	5,686	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		14	11	3	0	28	

Judge - Court of Appeals (Land) (Vote for 1)
NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Ben Land (I)		2,797	2,628	209	2	5,636	
Total Votes		2,797	2,628	209	2	5,636	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		10	10	2	0	22	

Judge - Court of Appeals (Mercier) (Vote for 1)
NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Amanda H. Mercier (I)		2,815	2,636	207	2	5,660	
Total Votes		2,815	2,636	207	2	5,660	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		11	9	3	0	23	

Judge - Court of Appeals (Miller) (Vote for 1) NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Jeff Davis		2,085	1,960	100	1	4,146	
Tabitha Ponder		850	824	134	1	1,809	
Total Votes		2,935	2,784	234	2	5,955	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		10	4	0	0	14	

Judge - Court of Appeals (Rickman) (Vote for 1) NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Brian M. Rickman (I)		2,799	2,623	206	2	5,630	
Total Votes		2,799	2,623	206	2	5,630	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		8	6	2	0	16	

Judge - Court of Appeals (Watkins) (Vote for 1) NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Jeffrey A. Watkins (I)		2,796	2,624	209	1	5,630	
Total Votes		2,796	2,624	209	1	5,630	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		9	6	2	0	17	

Judge - Superior Court - Brunswick Judicial Circuit (Guy) (Vote for 1) NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Bert Guy (I)		2,836	2,667	220	1	5,724	
Total Votes		2,836	2,667	220	1	5,724	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		40	34	2	0	76	

Judge - Superior Court - Brunswick Judicial Circuit (Harrison) (Vote for 1) NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Anthony Harrison (I)		2,803	2,643	209	1	5,656	
Total Votes		2,803	2,643	209	1	5,656	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		13	7	2	0	22	

Judge - Superior Court - Brunswick Judicial Circuit (Kelley) (Vote for 1) NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Stephen D. Kelley (I)		2,838	2,661	210	1	5,710	
Total Votes		2,838	2,661	210	1	5,710	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		12	8	2	0	22	

Judge - Superior Court - Brunswick Judicial Circuit (Scarlett) (Vote for 1) NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Stephen G. Scarlett (I)		2,835	2,670	209	1	5,715	
Total Votes		2,835	2,670	209	1	5,715	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		13	7	4	0	24	

Probate Judge (Vote for 1) NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Robert "Beau" Sweatt, Jr. (I)		2,947	2,778	224	1	5,950	
Total Votes		2,947	2,778	224	1	5,950	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		22	11	1	0	34	

Chief Magistrate (Vote for 1) NP

Precincts Reported: 11 of 11 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	3,452	3,172	281	2	6,907 / 36,426	18.96%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Jennifer E. Lewis (I)		2,852	2,687	214	1	5,754	
Total Votes		2,852	2,687	214	1	5,754	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		22	23	2	0	47	

County BOE - District 1 (Vote for 1) NP

Precincts Reported: 5 of 5 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	860	657	91	0	1,608 / 7,822	20.56%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Jason Leon Chance (I)		705	566	72	0	1,343	
Total Votes		705	566	72	0	1,343	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		9	0	0	0	9	

County BOE - District 3 (Vote for 1) NP

Precincts Reported: 3 of 3 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	414	366	31	0	811 / 5,253	15.44%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Melissa C. Hodge		357	308	24	0	689	
Total Votes		357	308	24	0	689	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		2	2	0	0	4	

County BOE - District 5 (Vote for 1) NP

Precincts Reported: 2 of 2 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	568	613	36	0	1,217 / 7,320	16.63%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Amy S. Melton		481	529	28	0	1,038	
Total Votes		481	529	28	0	1,038	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		3	3	0	0	6	

Kingsland Freeport Exemption (Vote for 1)
NP

Precincts Reported: 3 of 3 (100.00%)

	Election Day	Advance Voti	Absentee by	Provisional	Total	
Times Cast	777	1,121	54	1	1,953 / 12,652	15.44%

Candidate	Party	Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Yes		432	641	31	0	1,104	
No		308	421	21	1	751	
Total Votes		740	1,062	52	1	1,855	

		Election Day	Advance Voting	Absentee by Mail	Provisional	Total	
Unresolved Write-In		0	0	0	0	0	

City Council
107 South Lee Street
Kingsland, GA 31548

SCHEDULED

AGENDA ITEM (ID # 4483)

Meeting: 06/10/24 06:00 PM
Department: Finance
Category: Bid Award
Prepared By: Filiz Morrow
Initiator: Filiz Morrow
Sponsors:
DOC ID: 4483

BID AWARD: Sewer Pump

Staff recommends sole bidder, Southern Civil, for $793,684. Estimated start date is 3/04/2025.

City of Kingsland
Bid Opening Tabulation
Replacement of Sewer Pumps
RFP #COK 24-025
Tuesday, May 28, 2024 @ 2:00 PM

Contractor	Total Project Cost	Estimated Start Date
Southern Civil	$793,684.00	3/4/2025

City Council
107 South Lee Street
Kingsland, GA 31548

SCHEDULED

AGENDA ITEM (ID # 4480)

Meeting: 06/10/24 06:00 PM
Department: City Clerk
Category: License
Prepared By: Jean Seigler
Initiator: Jean Seigler
Sponsors:
DOC ID: 4480

Approval of: Alcohol License for Parker's Kitchen Store #120

Gregory Michael Parker, owner of Gregory M. Parker, Inc. and Lucy L. Oglesbee, Store Manager, are applying for an alcohol license for the sale of retail packaged beer/wine at the Parker's Kitchen Store #120. The business is located at 1215 East King Avenue.

The City of Kingsland, GA
107 South Lee Street
P.O. Box 250
Kingsland, GA 31548
Ph: 912-729-5613
Fax: 912-729-7618

Planning and Community Development

Staff Report

City Council Meeting Date: June 10, 2024

Agenda Item: Alcohol License for Gregory Parker & Lucy Oglesbee

Summary: The applicants have applied for an alcohol license for "Parkers Kitchen" located at 1215 E. King Ave. The purpose of the alcohol license will be retail sale of packaged beer/wine. No issues were found during the background and fingerprint checks.

Zoning: C-4 (General Commercial)

Staff Recommendation: Chief of Police and the Planning Department Staff recommends approval of the Alcohol License.

Scott L. Kimball

Planning & Zoning Director

Kingsland Police Department
111 South Seaboard Street
P.O. Box 250
Kingsland, GA 31548
Phone: 912-729-8254
Fax: 912-729-8628
www.KingslandGeorgia.com

Kingsland

Rick Evans, Chief of Police

Jason Seaward, Deputy Chief

To: Scott Kimball,
April 30, 2024

A background investigation was conducted for the Alcohol Beverage License application submitted by Gregory Michael Parker for Gregory M. Parker, Inc. dba Parker's #120, 1215 E King Ave, Kingsland, GA 31548. The findings are:

A local criminal background check was conducted for Mr. Parker and his appointed manager Ms. Oglesbee and no criminal history was located. There is no record of Mr. Parker or Ms. Oglesbee having any negative contact with law enforcement with the Kingsland Police Dept. or any law enforcement in the region.

I spoke with two of three persons listed as references on the application.

On 04/29/2024, I spoke with Michael B. Noble, 615-252-2391. Mr. Noble stated he has known Mr. Parker for approximately three years. Mr. Noble stated he knows of no reason why Mr. Parker should not be granted this application.

On 04/30/2024, I spoke with Brian Prevatt, 912-687-3753. Mr. Prevatt stated he has known Mr. Parker for approximately 15 years. Mr. Prevatt stated he knows of no reason why Mr. Parker should not be granted this application.

Based on the above information I believe Gregory M. Parker is qualified for this alcohol license.
Respectfully,

Investigator James Flowers (Sgt)
Criminal Investigations Division
Kingsland Police Dept.
912-729-3038

x James Flowers
Signature

x 4/30/2024
Date

June 10th
City Council

(912) 298 1223

License # 6013

City of Kingsland

Post Office Box 250, Kingsland, Georgia 31548
Phone: (912) 729-5613 Fax: (912)729-7618

APPLICATION FOR ALCOHOL BEVERAGE LICENSE

Application will not be accepted unless filled out completely.
(An investigation fee of $250.00 is due upon submittal.)

NOTE: *For on-premise sales and consumption of alcoholic beverages, you MUST meet the following requirements:*

(1) Must be located within the proper zoning district;
(2) Eating establishments:
(3) Lounges located within hotels or motels where food is served and consumed: Must have a seating capacity of at least 50 people;
(4) Private Clubs or association of individuals organized for fraternal or charitable purposes, must have a membership of at least 25 members.

The above requirements are more clearly defined in Sec. 3-3 of Ordinance 2003-23, as amended.

TYPE OF LICENSE APPLYING FOR: (Initial all that applies):

Malt Beverage (Beer) Retail
Packaged to Go: X
Consumed on Premises: ______

Wine Retail
Packaged to Go: X
Consumed on Premises: ______

Complimentary Beer/Wine Consumed on Premises______
Intoxicating Liquor (distilled/Spirituous Liquors) By the Drink Consumed on Premises ______

Type of Business (Check one): ____ Restaurant X Retail Store ____ Private Club ____ Hotel Lounge ____ Hotel In-Room Service ____ Bowling Alley ____ Golf Course/Club House ____ Temporary-Daily

Seating Capacity: 28 Zoning District: C-4

Before the undersigned attesting officer, duly authorized by law to administer oaths, personally appeared the undersigned applicant for a license or permit for the sale of alcoholic beverages in the City of Kingsland, Georgia, and, being first duly sworn, on oath, states that the information given, statements made, and questions answered in this application are true and correct:

1. State the official name under which the business or establishment to be licensed will be conducted: Gregory M. Parker, Inc. dba Parker's #120

Address of Applicant 1195 George Swindell Rd NE, Ludowici, GA 31316
Phone Number: 912-610-0331
Applicant's Date of Birth [redacted] S.S.N. [redacted] Race W

2. **State the business name under which the business or establishment to be licensed:**
Gregory M. Parker, Inc. dba Parker's #120
Address: 1215 E. King Avenue, Kingsland, GA 31548

3. **If applicant is a partnership of any kind, state the names, Social Security numbers, telephone Number and mailing addresses of all members of the partnership:**
N/A

4. **Attached a copy of partnership Agreement or Articles of Partnership to this Application.**

5. **If Applicant is a corporation, state the following:**

(a) **Shareholders' names, Social Security numbers, telephone numbers, and addresses:**
Gregory M. Parker [redacted] 912-231-1001
10 E. Taylor Street, Savannah, GA 31401
See attached Exhibit "A"

(b) **Officers' names, Social Security numbers, telephone numbers, and addresses:**

CEO/Owner ~~**President:**~~ Gregory M. Parker [redacted] 912-231-1001
10 E. Taylor Street, Savannah, GA 31401

~~**Vice**~~ **President:** Brandon P. Hofmann [redacted] 912-231-1001
29 Golf Drive, Pooler, GA 31322

Secretary: Blake L. Greco [redacted] 912–675-2427
243 Lyman Hall, Savannah, GA 31410

CFO ~~**Treasurer:**~~ Keith Saltzman [redacted] 912-721-3777
8 Southernwood Place, Savannah, GA 31405

6. **If applicant is a corporation, attach a copy of the Articles of Incorporation:** See attached Exhibit "B"

7. **State the name(s), Social Security number(s), telephone number(s), and mailing address (es) of any Persons or entities, other than those named above, who have any financial interest or beneficial ownership interest in the establishment or business to be licensed:**
N/A

8. **State the name(s), Social Security number(s), and mailing address(es) and birth date(s) of each Manger the establishment or business licensed:**
Lucy L. Oglesbee [redacted] D[redacted]
1195 George Swindell R[redacted]ci, GA 31[redacted]

9. **State whether or not the above-named manager(s) has ever been convicted of a crime or has been the subject of an alcoholic beverage license suspension or revocation by the State of Georgia or any other city or jurisdiction:**
No

10. **If the response to the preceding was in the affirmative, state the date, nature, and name of said revoking or suspending body or agency:**

N/A

11. State whether or not the applicant and/or any of the officials, entities, or persons named above have ever been convicted of violating any ordinance, regulation, or law of any jurisdiction with regard to the sale or distribution of alcoholic beverages:

No

12. If your response to the preceding was in the affirmative, give a detailed description of such violation, including the name of the jurisdiction where the violation occurred:

N/A

13. State whether or not any of the individuals or entities identified above have been convicted of any crime and, if so, state a detailed description which includes the nature of the offense, date of conviction, and name of the jurisdiction:

No

14. If applicant or any of the individuals or entities named above holds an alcohol beverage license from any other jurisdiction or from the State of Georgia, state the name of each such jurisdiction and of the licensed location for any State license or attach a copy of each such license to this application.

See attached Exhibit "C"

15. If the location for which the license is sought has been or is now licensed, state the name of the Business or establishment and the name of the license:

N/A

16. IF MY APPLICATION IS APPROVED, I CERITIFY:
(Please initial each of the following)

BOGP That I will abide by all the requirements of the City of Kingsland Code, law of the State of Georgia, and regulations of the State Department of Revenue.

BOGP That I will abide by the opening and closing hours and days on which sales are prohibited as set forth in the Kingsland Code.

BOGP That I will not attempt to transfer any license granted except under the terms and conditions as set forth in the City of Kingsland Code.

BOGP That the business in which I propose to sell alcoholic beverages to be consumed on the premises is not with 600 feet of any church, school ground, college campus, any business catering primarily to teenage persons, or any city-owned or city operated recreational facility (except as approved by council).

BOGP That if a license, as applied for, is granted, I will allow my business premises to be open to inspection at any time by City Officials authorized to conduct inspections of business premises.

BOGP That if I fail to comply with the City of Kingsland code, laws of the State of Georgia, or regulations of the Department of revenue, I understand that my license may be suspended and that no license fee paid shall be refundable.

TDGP That if a license for Malt Beverage or Wine Packaged to Go is issued to me, I will sell only in the original, unbroken packaged and will not allow alcoholic beverages to be consumed on premises.

TDGP That the building in which alcoholic beverages are to be sold has been completed according to the Southern Standard Building Code and evidence of ownership or a copy of the lease to said premises is attached hereto.

TDGP That I have never been convicted of any felony involving moral turpitude.

TDGP That I or any proposed employee have not been convicted for the violation of any law involving alcoholic beverages, gambling, or tax law violations. If yes, please list the names, type of conviction, and job title below.

17. **List three references who are not family/relatives or current or future employees:**

	Name	Address	Phone
1.	Brian Prevatt	131 Bartram Road, Savannah, GA 31411	912-687-3753
2.	Michael B. Noble	1600 Divison St., #700, Nashville, TN 37203	615-252-2391
3.	Allison Hersh	17 E. 36th Street, Savannah, GA 31401	912-441-1285

18. **If at current address for less than three years, list previous address:**

N/A

19. **Have you ever been convicted of any felony?** No **If sp please describe:**

N/A

20. **List any Alcoholic Beverages License currently held, include address and state):**

See attached Exhibit "D"

21. **List any Alcoholic Beverages Licenses previously held, include address and state):**

N/A

22. **Have you had any administrative sanctions brought against you by any state regulatory agency regarding alcohol sales?** Yes

We have only had a few administrative fines when team members violated their training and/or policies.
They were terminated and we used each as a way to improve.

The undersigned hereby stipulates and states that all statements given in this application are true and correct and made for the purpose of inducing aforesaid City to issue or renew said alcoholic beverage license(s). Applicant further states this document is sworn to and subscribed hereto with the full knowledge that any statement herein, given falsely shall constitute perjury and may result in the revocation of the license granted or the refusal to grant such license. The applicant agrees to comply and abide by the City's Alcoholic Beverage Ordinance.

Applicant further acknowledges that application must be fully completed at the time of filing and that applications may not be supplemented, amended, or revised after filing with the Clerk, except to correct misspelling or names.

APPLICANT HEREBY AGGREES AND CONSENTS PURSUANT TO PUBLIC LAW 93-579 OF THE PRIVACY ACT OF 1974, THE DISCLOSURE OF INFORMATION OBTAINED IN THIS APPLICATION MAY BE SUBMITTED TO ANY AGENCY OF THE CITY, COUNTY, STATE, AND FEDERAL GOVERNMENT FOR THE PURPOSES OF OBTAINING THE NECESSARY INFORMATION TO PROCESS THE APPLICATION.

INITIAL
LOGP I have read, understand, and will comply with all rules and regulations set forth in Ordinance No. 2003-23. (Available for viewing at City Hall, Kingsland Community Planning & Development Building, or online at www.kingslandgeorgia.com

Sworn to and subscribed to this 14 day of April, 20 24

Lucy Oglesbee
Lucy L. Oglesbee
1195 George Swindell Rd NE
Ludowici, GA 31316
912-610-0331
APPLICANT (s)

WITNESS

Melissa Wright
NOTARY PUBLIC 4-19-24
(SEAL)

MELISSA R WRIGHT
NOTARY PUBLIC
Chatham County
State of Georgia
My Comm. Expires June 13 2026

To be completed by City Officials

Recommendation of Planning Dir. ✓ Approve ______ Disapprove JK Initials

Recommendation of Police Chief ✓ Approve ______ Disapprove ______ Initials

Recommendation of Building Insp. ✓ Approve ______ Disapprove ______ Initials

Date of Publication 5/16 & 5/23/2024

Dates of Reading by Council 6/10/24

Council Voted to: ______ Approve ______ Disapprove ______ Initials

Date License Issued (subject to Council Approval): License will be Issued when C.O. is Issued.

Notice of the public hearing on the application for the license shall be published once a week for two weeks in the official newspaper of the city wherein legal advertisement are published. After the application is complete and all information is received by the license officer, a public hearing will be scheduled on the application by the council. In addition, if the proposed location does not have an existing license, a sign shall be posted by the license officer on premises at least 15 days prior to the public hearing.

GAPS COGENT SYSTEMS
Georgia Applicant Processing Services

Acknowledgement

I authorize Cogent Systems, Inc. to conduct a fingerprint based criminal history record check of me.

I understand that Cogent Systems, Inc. will send my fingerprints to the Georgia Crime Information Center for a search of criminal history information in its files and to the Federal Bureau of Investigation for a search of its files when a federal record check is so authorized.

I understand that the electronic results of this fingerprint check will be received by Cogent Systems, Inc. and forwarded to the agency responsible for determining my suitability for the position for which I have applied.

I further understand that Cogent Systems, Inc. will not maintain a copy of my record and that Cogent Systems, Inc. meets all confidentiality and security requirements for handling and dissemination of state and federal criminal history record information.

By: Lucy [signature]

Date: 4/19/24

GAPS COGENT SYSTEMS
Georgia Applicant Processing Services

Acknowledgement

I authorize Cogent Systems, Inc. to conduct a fingerprint based criminal history record check of me.

I understand that Cogent Systems, Inc. will send my fingerprints to the Georgia Crime Information Center for a search of criminal history information in its files and to the Federal Bureau of Investigation for a search of its files when a federal record check is so authorized.

I understand that the electronic results of this fingerprint check will be received by Cogent Systems, Inc. and forwarded to the agency responsible for determining my suitability for the position for which I have applied.

I further understand that Cogent Systems, Inc. will not maintain a copy of my record and that Cogent Systems, Inc. meets all confidentiality and security requirements for handling and dissemination of state and federal criminal history record information.

By: ____________________

Date: 4/19/24

E-VERIFY FORM
CITY OF KINGSLAND AFFIDAVIT
O.C.G.A. § 36-60-6(d) E-VERIFY PRIVATE EMPLOYER AFFIDAVIT OF COMPLIANCE

By executing this affidavit under oath, as an applicant for a(n) Alcohol License [Occupational Tax Certificate, Alcohol License or other document required to operate a business] as referenced in O.C.G.A. § 36-60-6(d), from the City of Kingsland, Georgia, the undersigned applicant representing the private employer known as Gregory M. Parker, Inc. dba Parker's #120 [printed name of private employer] verifies one of the following with respect to my application for the above mentioned document:

1)

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

b) _______ On January 1st of the below signed year the individual, firm, or corporation employed less than ten (10) employees. (Exempt from E-Verify Program)

If the employer selected 1(a) please fill out Section 2 below.

2) X 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. § 13-10-90. The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as listed below:

1182520
Federal Work Authorization User Identification Number

BUSINESS ACCOUNT NO.

9/14/2020
Date of Authorization

308893273
SALES TAX ID NO. (Only if Applicable)

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

Executed in Savannah (City), GA (State).

Lucy L Oglesbee 4/19/24
Signature of Applicant Date

Lucy L. Oglesbee
Printed Name of Applicant

SUBSCRIBED AND SWORN BEFORE ME ON
THIS THE 19 DAY OF April, 2024

Melissa Wright
NOTARY PUBLIC/SEAL

My Commission Expires: 6-13-26

MELISSA R WRIGHT
NOTARY PUBLIC
Chatham County
State of Georgia
My Comm. Expires June 13 2026

Attachment: Parkers Alcohol (4480 : Approval of: Alcohol License for Parker's Kitchen Store #120)

CITY OF KINGSLAND, GEORGIA
SYSTEMATIC ALIEN VERIFICATION FOR ENTITLEMENTS (SAVE) FORM
O.C.G.A. § 50-36-1(E)(2) AFFIDAVIT VERIFYING STATUS FOR PUBLIC BENEFIT

By executing this affidavit under oath, as an applicant for a(n) Occupational Tax Certificate, as referenced in O.C.G.A. § 50-36-1, from the City of Kingsland, Georgia, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

1) x I am a United States citizen.
Please see link for acceptable forms of identification: http://law.ga.gov/immigration-reports

2) ____ I am a legal permanent resident of the United States. **
Please see link for acceptable forms of identification: http://law.ga.gov/immigration-reports

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.**
Please see link for acceptable forms of identification: http://law.ga.gov/immigration-reports

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

____

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:
Driver's License (please attach copy of document)

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an 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.

Executed in Savannah (City), GA (State).

Lucy L. Oglesbee 4/19/24
Signature of Applicant Date

Lucy L. Oglesbee
Printed Name of Applicant

Business License Acct. No. ______

Sales Tax ID No. (If Applicable) 308893273

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 19 DAY OF April, 2024

Melissa R Wright
NOTARY PUBLIC/SEAL

My Commission Expires: 6-13-26

MELISSA R WRIGHT
NOTARY PUBLIC
Chatham County
State of Georgia
My Comm. Expires June 13 2026