

MORGAN COUNTY COMMISSION AGENDA

December 15, 2020 5:00 PM

150 East Washington Street, Madison, GA 2nd Floor Conference Room

Pledge and Invocation

Agenda Approval

New Business

1. Approval of the 2021 Alcohol Beverage Licenses for the following locations:

Country Store - Shams Ghalib Kaba

HWY 83 Sandy Creek Country Store - Irfam F. Lakhani

Rainbow Food Mart - Namrata Sadana

The Pit Stop - Ujjwal Bastola

The River Store - Manjit Kaur

Golden Pond Valero - Thakorbhai Patel

Fairplay General Store - Sheryl F. Peters

Sandhu Food Mart - Kuljit S. Sandhu

Blue Springs Marina - Benjamin Smith

Buckhead General Store - Grady Butler

The Pit Stop - Santosh Pahars

- 2. 911/Communications Console Replacements
- 3. SCBA Purchase Request
- 4. IT Replacement Vehicle
- 5. Purchase of Open Top Dumpsters
- 6. Discussion of Development Regulations
- 7. Board Vacancies
 - -Development Authority Board
 - -Tax Assessors Board
 - -Council on Aging
 - -Ag Board
 - -Library Board
- 8. Commissioner Liaison Reports
- 9. Public Comments on Agenda Items

EXECUTIVE SESSION

Personnel



understand the regulations.

< HAUS

150 East Washington Street, Suite 200 P.O. Box 1357 Madison, Georgia 30650 (706)342-4373 Office · (706)343-6455 Fax

Sworn Statement of Eligibility for the Sale of Alcoholic Beverages

l, being a person of good moral character, do hereby make
application for a license to engage in the package sale of malt beverages and wine in Morgan County, Georgia, at:
Establishment Name: So Shella ILC Coult
Address: 3571 Soverly charact RD
City: Lucid Store ' State: Lett - Zip Code: 30650
Phone Number: 4545192273
Licensee Qualifications and Acknowledgements
Section 6-52 I am over the age of 25 and have been a resident of the State of Georgia for a minimum of one (1) year.
Section 6-54. – I am not an official or employee of the county, nor a member of the Board of Commissioners.
Section 6-55. - I have not been convicted nor pled nolo contendre within the previous ten (10) years of the date of this application to a felony or a misdemeanor involving moral turpitude. Furthermore, I have not been convicted under federal, state or local law for a criminal offense involving alcoholic beverages, gambling or tax law violations.
Section 6-56 I have not been denied a license to sell alcoholic beverages within one (1) year of the date of this application.
Section 6-57. – I am the owner(s) or authorized agent of the parent corporation of the premises for which the license is requested or the holder of any lease thereon.
Section 6-58. – I attest that I, or the corporation, have adequate financial participation in the proposed business to direct and mange its affairs.
Section 6-198. – I understand that I am responsible for the management and operation of the business for which the license is granted and shall be responsible for all violations by the licensee's agents and employees.
Section 6-300 - I understand that any violation of federal, state, or any of the regulations adopted by Morgan County pertaining to the sale of malt beverages and wine, shall subject my license to immediate revocation or suspension.

Over

Section 6-210 - I have in possession a copy of the Morgan County Alcoholic Beverage Ordinance and I have read and

Section 6-324 – I understand that I must post a cash bond or a performance bond with the Morgan County Board of Commissioners in the amount of \$500.00 for retail establishments and \$2,500.00 for wholesale establishments.

Section 6-328 - I understand that the annual license fee stated in this section must be paid prior to issuance of a license. The license is only valid for the year in which it is issued and shall expire on December 31 of the year that it is granted.

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Section 6-391 – I understand that the annual license fee is \$100.00 per location and must be paid prior to issuance of a alcoholic catering license. The license is only valid for the year in which it is issued and shall expire on December 31 of the year that it is granted.

Section 6-142. - I understand that any misstatement, false statement, or concealment of fact in this application shall be grounds for the denial of the application for license issuance or revocation of the license issued, and shall make the applicant liable to prosecution for perjury under the laws of the state.

I have read and I distinctly understand the Alcoholic Beverage regulations and the qualifications and acknowledgements above and agree to abide by these regulations. I certify to the best of my knowledge that all items of the application and sworn statement are true and correct.

	Signed: Signed
Sworn to and subscribed before me This day of 20 (Signature) Notary Public	(A) If ownership is vested in more than one person, additional owners Sign Below:
Please Note: Please return all required documents in person to the N	Morgan County Planning & Development Office no later
	ns will be reviewed at the Commissioner's work session in
that month and will be voted on at their regular meeting	g for the following month. No application will be placed
on the current work session that is received after the s	econd Tuesday. Applications received after the second
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performance bond and required fee to the Planning & D	evelopment office and pick up your license. If your
application is rejected, you will be notified of the cause	of rejection.
THIS SPACE IS FOR CO	MMISSIONERS USE ONLY

APPROVED

DISAPPROVED

Item1.

DATE: ___

Clerk, Morgan County Commissioners

(Form Revised 10-20-10)



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application for a license to er Establishment Name:	ngage in the package sale	of malt beverage	ges and wine in Morg	an County, Georgia, at:
Address: 35718	sandy Cneek	Rd,		
city: Madison	State		Zip Code:	30650
Phone Number: 110 -	630-323	52		

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Sworn to and subscribed before me This 1844 day of Nov 20 25	(A) If ownership is vested in more than one person, additional owners Sign Below:
(Signature) Notary Public (Signature) Notary	
Please Note: Ovcount	

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Sworn Statement of Eligibility for the Sale of Alcoholic Beverages

1, NAmrata	Sedana	being a person of	f good moral character, d	o hereby make
			rages and wine in Morga	
Establishment Name:	Ramba	w food m	art	
Address: 4001	ATHENS	Hwy		
City: MADISO	m	State:	Zip Code: _	30560
Phone Number:	4-747-0737			
Licensee Qualification	s and Acknowledgen	nents		
Section 6-52 I am over	the age of 25 and have	been a resident of the Sta	ate of Georgia for a minimu	m of one (1) year.
Section 6-54. – I am not	an official or employee	of the county, nor a meml	ber of the Board of Commis	sioners.
application to a felony o	r a misdemeanor involv	ing moral turpitude. Furth	the previous ten (10) years nermore, I have not been co abling or tax law violations.	
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Section 6-58. — I attest the mange its affairs.	hat I, or the corporation	n, have adequate financial	participation in the propose	ed business to direct and
		ible for the management a ons by the licensee's agen	and operation of the busine ts and employees.	ss for which the license
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	Signed: Wanuat Irdany
Sworn to and subscribed before me This $\bigcirc \bigcirc \bigcirc \bigcirc$ day of $\bigcirc \bigcirc \bigcirc \bigcirc$ 20 $\bigcirc \bigcirc$	(A) If ownership is vested in more than one person
MUTTA MUTTA	additional owners Sign Below:
(Signature) Notary Public NOTARY My Comm. Expires My Comm. Expires July 6, 2021	
Please Note:	

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150 East Washington Street, Suite 200 P.O. Box 1357 Madison, Georgia 30650 (706)342-4373 Office · (706)343-6455 Fax

Sworn Statement of Eligibility for the Sale of Alcoholic Beverages

application for a license to engage in the package sale of malt beverages and wine in Morgan County, Georgia, at:
Establishment Name: The River Store
Address: U281 Greens Boro Rd
City: Madison State: NA Zip Code: 30650
Phone Number: 106 818 0422
Licensee Qualifications and Acknowledgements
Section 6-52 I am over the age of 25 and have been a resident of the State of Georgia for a minimum of one (1) year.
Section 6-54. – I am not an official or employee of the county, nor a member of the Board of Commissioners.
Section 6-55 I have not been convicted nor pled nolo contendre within the previous ten (10) years of the date of this application to a felony or a misdemeanor involving moral turpitude. Furthermore, I have not been convicted under federal, state or local law for a criminal offense involving alcoholic beverages, gambling or tax law violations.
Section 6-56 I have not been denied a license to sell alcoholic beverages within one (1) year of the date of this application.
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(Signature) Notary Public	
izimalinic i i	
10:9 APTION: #	
10 10 00 20 17 1	
Please Note:	
COUNT	
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eg se colo se successivo eg escribiga de la grando en estado en estado en estado de contrato en estado en estad	
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Signed: Manny Kall



understand the regulations.

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Sworn Statement of Eligibility for the Sale of Alcoholic Beverages

I, THAKSPBHAT V PATE being a person of good moral character, do hereby make application for a license to engage in the package sale of malt beverages and wine in Morgan County, Georgia, at:
Establishment Name: GOLDEN POND VALERO
Address: 1999 - NEWBORN RD
City: RVTVEDGE State: GA Zip Code: 30663
Phone Number: <u>706-557-177</u> 5
Licensee Qualifications and Acknowledgements
Section 6-52 I am over the age of 25 and have been a resident of the State of Georgia for a minimum of one (1) year.
Section 6-54. – I am not an official or employee of the county, nor a member of the Board of Commissioners.
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application for a license to engage in the package sale of malt beverages and wine in Morgan County, Georgia, at:	
Establishment Name: SFD Entuplises OBA Fairplay General Ston	Q
Address: 2700 Fainplay Rd.	
City: Rutledge State: GA Zip Code: 30463	
Phone Number: <u>706-752-0</u> 000	

Licensee Qualifications and Acknowledgements

Section 6-52. - I am over the age of 25 and have been a resident of the State of Georgia for a minimum of one (1) year.

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	Signed: The Transfer of the Signed:
Sworn to and subscribed before me This day of 20 20	(A) If ownership is vested in more than one person additional owners Sign Below:
(Signature) Notary Public	
F MOTA SING	
S TO BUC	
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13 FOR COMMISSIONERS USE ONLY
DATE:
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Item1. - 13 -



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I, Kulht & Sandhur - application for a license to engage in the pack	being	a person of good mora f malt beverages and w	l character, do hereby make ine in Morgan County, Georgia, at:	
Establishment Name: Sawo Hu Fo				
Address: 2550 PARK'S MILL	RO.	Buckhead.	GiA- 30625	
City: BUCKNEAD	State: _	GIA	Zip Code: 3 6 6 9 5	
Phone Number: 706 - 349 - 80 0	9			
Licensee Qualifications and Acknowledgemer	nts			
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Section 6-328 – I understand that the annual license fee stated in this section must be paid prior to issuance of a license. The license is only valid for the year in which it is issued and shall expire on December 31 of the year that it is granted.

Section 6-354 – I understand that I must post a cash bond or a performance bond with the Morgan County Board of Commissioners in the amount of \$1000.00 for a pouring license.

Section 6-358 – I understand that the annual license fee is \$1000.00 and must be paid prior to issuance of a license. The license is only valid for the year in which it is issued and shall expire on December 31 of the year that it is granted.

Section 6-391 – I understand that the annual license fee is \$100.00 per location and must be paid prior to issuance of a alcoholic catering license. The license is only valid for the year in which it is issued and shall expire on December 31 of the year that it is granted.

Section 6-142. – I understand that any misstatement, false statement, or concealment of fact in this application shall be grounds for the denial of the application for license issuance or revocation of the license issued, and shall make the applicant liable to prosecution for perjury under the laws of the state.

I have read and I distinctly understand the Alcoholic Beverage regulations and the qualifications and acknowledgements above and agree to abide by these regulations. I certify to the best of my knowledge that all items of the application and sworn statement are true and correct.

Sworn statement are true and correct.	Signed:		
Sworn to and subscribed before me This 7 Mov-20 20 (Signature) Notary Public	(A) If ownership is vested in more than one person, additional owners Sign Below:		
Please Note:			
Please return all required documents in person to the N	Morgan County Planning & Development Office no later		
than the second Tuesday of the month. The applications will be reviewed at the Commissioner's work session in			
that month and will be voted on at their regular meetin	g for the following month. No application will be placed		
	second Tuesday. Applications received after the second		
Tuesday will be placed on the following month's work			
	ision. If your application is approved, you may bring your		
performance bond and required fee to the Planning & I			
application is rejected, you will be notified of the cause	of rejection.		
THIS SPACE IS FOR CO	OMMISSIONERS USE ONLY		

APPROVED

DISAPPROVED

Item1. - 15 -

(Form Revised 10-20-10)

Clerk, Morgan County Commissioners

DATE: _____



150 East Washington Street, Suite 200 P.O. Box 1357 Madison, Georgia 30650 (706)342-4373 Office · (706)343-6455 Fax

Sworn Statement of Eligibility for the Sale of Alcoholic Beverages

I, O J J WAL BASTOLA being a person of good moral character, do h	ereby make
application for a license to engage in the package sale of malt beverages and wine in Morgan Co	
Establishment Name: BU20, LLC (DBA THE PIT STOP)
Address: 1740 SEVEN TSLANDS Rd	
City: State: Zip Code:	
Phone Number:	
Licensee Qualifications and Acknowledgements	
Section 6-52 I am over the age of 25 and have been a resident of the State of Georgia for a minimum o	f one (1) year.
Section 6-54. – I am not an official or employee of the county, nor a member of the Board of Commission	ners.
Section 6-55. - I have not been convicted nor pled nolo contendre within the previous ten (10) years of tapplication to a felony or a misdemeanor involving moral turpitude. Furthermore, I have not been convistate or local law for a criminal offense involving alcoholic beverages, gambling or tax law violations.	
Section 6-56 I have not been denied a license to sell alcoholic beverages within one (1) year of the date	e of this application
Section 6-57. – I am the owner(s) or authorized agent of the parent corporation of the premises for whic requested or the holder of any lease thereon.	h the license is
Section 6-58. – I attest that I, or the corporation, have adequate financial participation in the proposed b mange its affairs.	usiness to direct ar
Section 6-198. – I understand that I am responsible for the management and operation of the business for is granted and shall be responsible for all violations by the licensee's agents and employees.	or which the license
Section 6-300 - I understand that any violation of federal, state, or any of the regulations adopted by Mo pertaining to the sale of malt beverages and wine, shall subject my license to immediate revocation or su	rgan County uspension.
Section 6-210 - I have in possession a copy of the Morgan County Alcoholic Beverage Ordinance and I have understand the regulations.	ve read and
Section 6-324 – I understand that I must post a cash bond or a performance bond with the Morgan Coun	ity Board of

Over

Commissioners in the amount of \$500.00 for retail establishments and \$2,500.00 for wholesale establishments.

Section 6-328 – I understand that the annual license fee stated in this section must be paid prior to issuance of a license. The license is only valid for the year in which it is issued and shall expire on December 31 of the year that it is granted.

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Section 6-391 – I understand that the annual license fee is \$100.00 per location and must be paid prior to issuance of a alcoholic catering license. The license is only valid for the year in which it is issued and shall expire on December 31 of the year that it is granted.

Section 6-142. – I understand that any misstatement, false statement, or concealment of fact in this application shall be grounds for the denial of the application for license issuance or revocation of the license issued, and shall make the applicant liable to prosecution for perjury under the laws of the state.

I have read and I distinctly understand the Alcoholic Beverage regulations and the qualifications and acknowledgements above and agree to abide by these regulations. I certify to the best of my knowledge that all items of the application and sworn statement are true and correct.

	Signed:			
Sworn to and subscribed before me This day of 20 (Signature) Notary Public	(A) If ownership is vested in more than one person, additional owners Sign Below:			
Please Note:				
Please return all required documents in person to the I	Morgan County Planning & Development Office no later			
than the second Tuesday of the month. The applications will be reviewed at the Commissioner's work session in				
	ng for the following month. No application will be placed			
on the current work session that is received after the second Tuesday. Applications received after the second				
Tuesday will be placed on the following month's work				
meeting in two months. You will be notified of the decision. If your application is approved, you may bring your				
performance bond and required fee to the Planning & I	The contract of the contract o			
application is rejected, you will be notified of the cause	of rejection.			
THIS SPACE IS FOR CO	DMMISSIONERS USE ONLY			

APPROVED

DISAPPROVED

Item1.

DATE:

Clerk, Morgan County Commissioners

(Form Revised 10-20-10)



understand the regulations.

150 East Washington Street, Suite 200 P.O. Box 1357 Madison, Georgia 30650 (706)342-4373 Office · (706)343-6455 Fax

being a person of good moral character, do hereby make

Sworn Statement of Eligibility for the Sale of Alcoholic Beverages

application for a license to engage in the package sale of malt beverages and wine in Morgan County, Georgia, at:

Establishment Name: Blue Brings Marina, Inc
Address: 1271 Blue Springs Drive
City: Buckhead State: GA Zip Code:
Phone Number: 706.342.9446
Licensee Qualifications and Acknowledgements
Section 6-52 I am over the age of 25 and have been a resident of the State of Georgia for a minimum of one (1) year.
Section 6-54. – I am not an official or employee of the county, nor a member of the Board of Commissioners.
Section 6-55. - I have not been convicted nor pled nolo contendre within the previous ten (10) years of the date of this application to a felony or a misdemeanor involving moral turpitude. Furthermore, I have not been convicted under federal, state or local law for a criminal offense involving alcoholic beverages, gambling or tax law violations.
Section 6-56 I have not been denied a license to sell alcoholic beverages within one (1) year of the date of this application.
Section 6-57. – I am the owner(s) or authorized agent of the parent corporation of the premises for which the license is requested or the holder of any lease thereon.
Section 6-58. – I attest that I, or the corporation, have adequate financial participation in the proposed business to direct and mange its affairs.
Section 6-198. – I understand that I am responsible for the management and operation of the business for which the license is granted and shall be responsible for all violations by the licensee's agents and employees.
Section 6-300 - I understand that any violation of federal, state, or any of the regulations adopted by Morgan County

Over

pertaining to the sale of malt beverages and wine, shall subject my license to immediate revocation or suspension.

Section 6-210 - I have in possession a copy of the Morgan County Alcoholic Beverage Ordinance and I have read and

Section 6-324 – I understand that I must post a cash bond or a performance bond with the Morgan County Board of Commissioners in the amount of \$500.00 for retail establishments and \$2,500.00 for wholesale establishments.

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I have read and I distinctly understand the Alcoholic Beverage regulations and the qualifications and acknowledgements above and agree to abide by these regulations. I certify to the best of my knowledge that all items of the application and sworn statement are true and correct.

	Signed: Denny mult
Sworn to and subscribed before me This	(A) If ownership is vested in more than one person, additional owners Sign Below:
(Signature) Notary Public	
S W BLIC	
Please Note:	
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THIS SPA	ACE IS FOR COMMISSIONERS USE ONLY
APPROVED	DATE:
	DATE.
DISAPPROVED	
DISAPPROVED	
	Clerk, Morgan County Commissioners
	(Form Revised 10-20-10)

Item1. - 19 -



150 East Washington Street, Suite 200 P.O. Box 1357 Madison, Georgia 30650 (706)342-4373 Office · (706)343-6455 Fax

Sworn Statement of Eligibility for the Sale of Alcoholic Beverages

1, GRADG BUT	De De	ing a person of	good moral	character, do he	ereby make	
application for a license to	engage in the package sal	e of malt bever	ages and wir	ne in Morgan Co	unty, Georgia,	, at:
Establishment Name:	Buckhero	Gen	erm	Stope	-	
Address: 4420	Buckhesp	Rd	BUCK	Lord	COA	_ 38
city: Buckle	ad State	e: (g/4		Zip Code:	1625	_
Phone Number:	-653-8123	•				

Licensee Qualifications and Acknowledgements

Section 6-52. - I am over the age of 25 and have been a resident of the State of Georgia for a minimum of one (1) year.

Section 6-54. - I am not an official or employee of the county, nor a member of the Board of Commissioners.

Section 6-55. - I have not been convicted nor pled nolo contendre within the previous ten (10) years of the date of this application to a felony or a misdemeanor involving moral turpitude. Furthermore, I have not been convicted under federal, state or local law for a criminal offense involving alcoholic beverages, gambling or tax law violations.

Section 6-56. - I have not been denied a license to sell alcoholic beverages within one (1) year of the date of this application.

Section 6-57. – I am the owner(s) or authorized agent of the parent corporation of the premises for which the license is requested or the holder of any lease thereon.

Section 6-58. – I attest that I, or the corporation, have adequate financial participation in the proposed business to direct and mange its affairs.

Section 6-198. – I understand that I am responsible for the management and operation of the business for which the license is granted and shall be responsible for all violations by the licensee's agents and employees.

Section 6-300 - I understand that any violation of federal, state, or any of the regulations adopted by Morgan County pertaining to the sale of malt beverages and wine, shall subject my license to immediate revocation or suspension.

Section 6-210 - I have in possession a copy of the Morgan County Alcoholic Beverage Ordinance and I have read and understand the regulations.

Section 6-324 – I understand that I must post a cash bond or a performance bond with the Morgan County Board of Commissioners in the amount of \$500.00 for retail establishments and \$2,500.00 for wholesale establishments.

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I have read and I distinctly understand the Alcoholic Beverage regulations and the qualifications and acknowledgements above and agree to abide by these regulations. I certify to the best of my knowledge that all items of the application and sworn statement are true and correct.

	Signed: Maky & State
Sworn to and subscribed before me This	(A) If ownership is vested in more than one person, additional owners Sign Below:
(Signature) Notary Public	
AN JANION A	
Please Note:	

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S FOR COMMISSIONERS USE ONLY
DATE:
Clerk, Morgan County Commissioners



150 East Washington Street, Suite 200 P.O. Box 1357 Madison, Georgia 30650 (706)342-4373 Office · (706)343-6455 Fax

Sworn Statement of Eligibility for the Sale of Alcoholic Beverages

I, SANTOSH	PAHARI	being a person of good	moral character, do hereby make
application for a licens	se to engage in the pa	ckage sale of malt beverages a	and wine in Morgan County, Georgia, at:
Establishment Name:	E2 20 IN	VESTMENTS LLC	(DIB)A THE PAT STOP
Address: <u>1740</u>	Seven Isl	LANDS Rel	
City: BUCKIT	CAD	State: 🔄 🛧	Zip Code: 30625
Phone Number: 9	54 397 51	435	

Licensee Qualifications and Acknowledgements

Section 6-52. - I am over the age of 25 and have been a resident of the State of Georgia for a minimum of one (1) year.

Section 6-54. - I am not an official or employee of the county, nor a member of the Board of Commissioners.

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	Signed:
Sworn to and subscribed before me This day of20 (Signature) Notary Public	(A) If ownership is vested in more than one person additional owners Sign Below:
Please Note:	

Please return all required documents in person to the Morgan County Planning & Development Office no later than the second Tuesday of the month. The applications will be reviewed at the Commissioner's work session in that month and will be voted on at their regular meeting for the following month. No application will be placed on the current work session that is received after the second Tuesday. Applications received after the second Tuesday will be placed on the following month's work session and will not be voted on until the regular meeting in two months. You will be notified of the decision. If your application is approved, you may bring your performance bond and required fee to the Planning & Development office and pick up your license. If your application is rejected, you will be notified of the cause of rejection.

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DISAPPROVED	
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	(Form Revised 10-20-10)



MORGAN COUNTY AGENDA REQUEST

Department:	911 Communications	Presenter(s):	Amanda Proctor/Mark Williams
Meeting Date: mm/dd/yyyy	12/15/2020	Type of Request:	New Business
Wording for the Agenda: 911/Communications Con			
not designed to hold the vuse of space and improve consoles be purchased from	ed by Communications Officers are arious equipment and monitors now communication between dispatche om Watson Consoles for \$53,157.9	w required. The new consoles will bers. Products from multiple compan 9. Funding for the project is include	int consoles are over 15 years old and are be more streamlined, provide more efficienties were evaluated and I recommend the ed in the approved FY21 budget. The requested that the excess funds be
	ng from the Board of Commissioner ionsoles from Watson Consoles for		
If this item requires funding	g, please describe:		
Has this request been con	sidered within the past two years?	No If so, wh	nen?
Is Audio-Visual Equipmen	t Required for this Request?*	No Backup	Provided with Request? Yes
		Clerk's Office no later than 48 houdio-visual material is submitted	ours prior to the meeting. It is also at least 48 hours in advance.
Approved by Finance Approved by Purchasing Manager's Approval Staff Notes:	Yes Yes Yes	k.	

Item2.

911/Communications Consoles

Morgan County 911/Communications needs to replace our consoles (desks). Our current consoles are over 15 years old and are in disrepair. We hope to streamline our space and allow for better communication between telecommunicators by upgrading to a linear design. This layout will better serve the room that we are in and allow for all the monitors that are now used in our center. Three manufacturers were solicited for proposals on the project and they are Russ Bassett, Watson Consoles and Xybix. We are going to install 4 new consoles. Xybix provided a quote for 3 positions. The quotes are outlined below. We decided to go with Watson Consoles due to price and functionality. We also hope to use some of the funds that were saved by choosing this provider to upgrade other parts of the 911 Center.

Russ Bassett

\$59,290.50

Watson Consoles

\$53,157.99

Xybix

\$45,557.09

00025639

Morgan County 911 GA

Watson Rep Firm: King Carter &

Address Line 1: PO BOX 307

City: Matthews

Zip: 28106

Sales Person: Ben Whitley

Phone Number: 7703107621

Specified For: Morgan County Board of

1380 Monticello Rd Address Line 1:

City: Madison

State: GA

Contact Name: Amanda Proctor

Phone Number: 7063429560

Email Address: aproctor@morgancountyga.gov

CONSOLE PLAN 01

HGAC CONTRACT: EC07-20

4 Mercury Standard Consoles - 84" Primaries - 42" Screens

Each Position Includes:

Electronically Height Adjustable Work Surface with 2-Button Switch

Techlink

Stationary Monitor Array with Fully Articulating Monitor Arms

Environment Control Package - Includes Forced Air Heat, Cooling Fans, LED Ambient Lighting &

Dimmable LED Task Lighting

Technology Cabinet and Bridge with Active Ventilation to Accommodate CPU's

Cable Bridge

Personal Storage

Gounding Bar

Oty 8 - Technology Ports: (4) USB-A, (1) USB-Charger, (1) 3.5, (1) RJ11/12 & (1) CAT6

Installation based on live cut-over, one trip, 1st floor with no prevailing wage or union requirements. Includes teardown and removal of 3 existing consoles.

1. State and Local Taxes will apply unless proof of exemption is provided with the Purchase Order.

2. Deposit may be required with order; Net 30 days of Shipment of Product.

3. Chairs are for representational purposes only.

4. Lead time average 60 days after receipt of Purchase Order.

5. Completed Order consists of a signed Contract or Purchase Order, Signed Drawings, Signed Color Selection Sheet, and Deposit.

6. Change Order Fee (minimum \$500) may be applicable for changes after 5 business days of submission.

7. Pricing will be valid for four (4) months after receipt of Purchase Order. Any orders that have not been manufactured within this time frame may be subject to a price change.

Quote Date 9/2	21/2020 Expiration Date	12/21/2020	Watson Account Mar	nager: Natalie Thorne
Remit To:	Watson Consoles		Watson Factory Rep	Firm: King Carter & Associates, Inc
Remit 10.	26246 Twelve Trees Lane NW Poulsbo WA 98370		Prepared By:	Michelle Steele
This Document is Confidential &	Proprietary (C) 2017 Watson Furniture Group, Inc. A	II Rights Reserved	File Name:	Morgan Co.00.cmdrw
360,394,1300				www.watsonconsol

WATSON CONSOLES

Project: Morgan County 911 GA

Sold to **Distributor**

Company nameMorgan County Board of Commission sompany name: King Carter & Associates, Inc Contact Person Amanda Proctor Salesman: Ben Whitley

Contact Phone: 7063429560

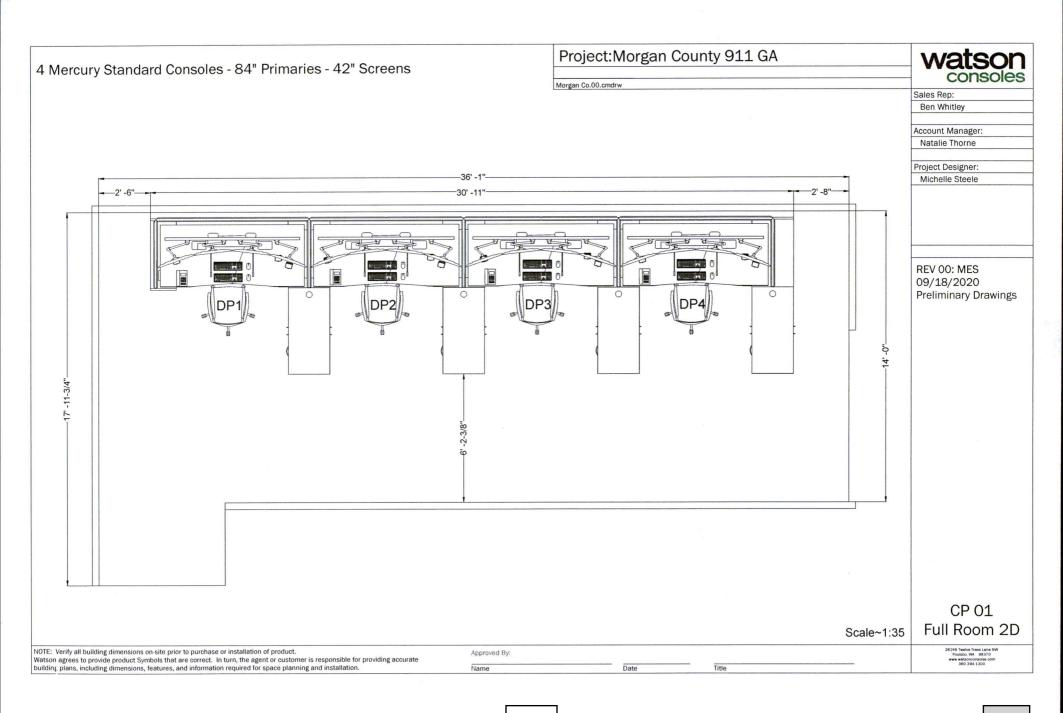
Contact Fax:

Salesman: Ben Whitley Salesman Phone7703107621

Salesman Fax:

#	Qty	Part Number	Description	Sell	Ext. Sel
Mair	n 01				
1	1	HC6H153918L-N	MERCURY STANDARD HUB, 15"D x 39"W x 18H", LEFT HAND, NO GROMMET	\$886.78	\$886.78
2	3	HC6H243918C	MERCURY STANDARD HUB, 24"D x 39"W x 18H", CENTER	\$1,431.14	\$4,293.42
3	1	HC6H243918R-N	MERCURY STANDARD HUB, 24"D x 39"W x 18H", RIGHT HAND, NO GROMMET	\$970.19	\$970.19
4	4	HC6W3684T	MERCURY STANDARD WORKSURFACE, 36"D x 84" W, WITH CONTOUR EDGE, WITH TECHLINK	\$2,704.24	\$10,816.96
5	4	HG6CS84G	MERCURY CABLE BRIDGE, SINGLE SIDED 12" D X 18"H, FOR A 84"W CONSOLE, WITH GROMMET	\$460.95	\$1,843.80
6	8	HGA	MERCURY ARRAY	\$1,132.62	\$9,060.96
7	1	HGBS1518D-L	MERCURY BRIDGE SPACER, 15"D x 18"H DUAL, LEFT HAND	\$39.51	\$39.51
8	3	HGBS2418D-C	MERCURY BRIDGE SPACER, 24"D x 18"H DUAL, CENTER	\$52.68	\$158.04
9	1	HGBS2418D-R	MERCURY BRIDGE SPACER, 24"D x 18"H DUAL, RIGHT HAND	\$52.68	\$52.68
10	4	HGPPOB24508R	MERCURY PERSONAL PALLET, OPEN BOX, 24"D x 50"W x 8"H, RIGHT HAND	\$447.78	\$1,791.12
11	1	HGSOCBKT42L	MERCURY OUTSIDE CORNER BRACKET, 42"H	\$21.95	\$21.95
12	1	HGSOCBKT42R	MERCURY OUTSIDE CORNER BRACKET, 42"H	\$21.95	\$21.95
13	5	HGSR3942F	MERCURY RETURN SCREEN, 39"W x 42"H, ALL FABRIC PANEL	\$364.37	\$1,821.85
14	4	HGSS8442F	MERCURY SPINE SCREEN, 84"W x 42"H, ALL FABRIC PANEL	\$579.48	\$2,317.92
15	3	HGSWIBKT42	MERCURY INSIDE CORNER BRACKET, 42"H	\$17.56	\$52.68
16	4	HGTB245024R	MERCURY TECHNOLOGY BASE, 24"D x 50"W x 24"H, RIGHT HAND	\$1,237.98	\$4,951.92
17	1	HHC1518	MERCURY HUB COVER, 15"D x 18"H	\$26.34	\$26.34
18	4	TXX4X6GROUND	MERCURY, GROUND BAR KIT 4" X 6"	\$74.63	\$298.52
19	4	TXXTECHAUDIO25	TECH LINK, STEREO AUDIO JACK, (3.5mm CONNECTOR SIZE) - Black, 25Ft	\$17.56	\$70.24
20	4	TXXTECHDATA25	TECHLINK, DATA JACK (CAT6), RJ45, PASS THROUGH PANEL MOUNT - Black, 25 Ft	\$30.73	\$122.92
21	4	TXXTECHPH25	TECH LINK, PHONE JACK, (RJ11 / RJ12) - Black, 25Ft	\$13.17	\$52.68
22	4	TXXTECHUSB-CHG	TECH LINK, USB CHARGER INSERT	\$70.24	\$280.96
23	16	TXXTECHUSB15	TECH LINK, USB INSERT (TYPE A), FEMALE / FEMALE WALL PLATE COUPLER - Black, 15Ft	\$21.95	\$351.20
24	1	WAKEY-STD	MASTER KEY, STANDARD LOCK (082000)	\$0.00	\$0.00
			1	Total Main 01	\$40,304.59

Subtotal Product \$40,304.59 INSTALL-WAT \$11,017.20 Freight \$1,836.20 Total \$53,157.99 \$4,252.64 Sales Tax (8 %) Grand Total \$57,410.63



4 Mercury Standard Consoles - 84" Primaries - 42" Screens

Project: Morgan County 911 GA

Morgan Co.00.cmdrw

watson consoles

Sales Rep: Ben Whitley

Account Manager: Natalie Thorne

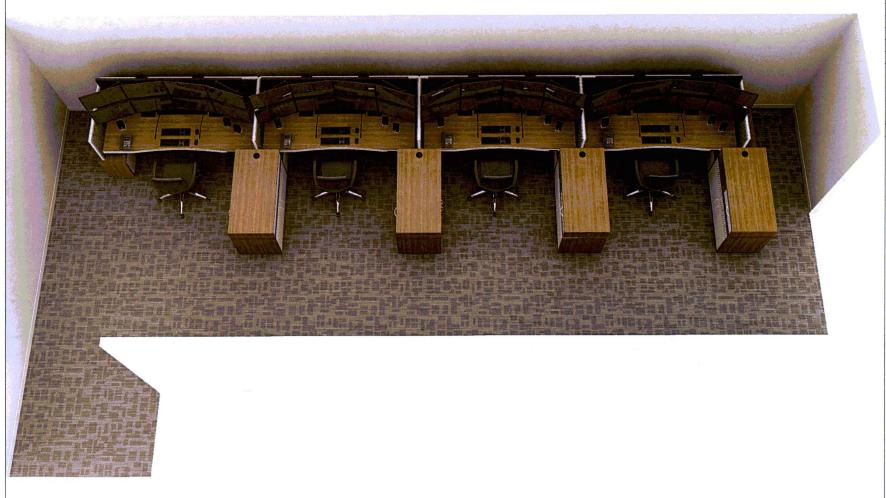
Project Designer:

Michelle Steele

REV 00: MES 09/18/2020 Preliminary Drawings

CP 01 Full Room 3D Color

> 246 Twelve Trees Lane NW Poulsbo, WA 98370 www.watsonconsoles.com



NOTE: Verify all building dimensions on-site prior to purchase or installation of product.

Watson agrees to provide product Symbols that are correct. In turn, the agent or customer is responsible for providing accurate building plans, including dimensions, features, and information required for space planning and installation.

Approved By:

Name

Date

Title

watson consoles Project: Morgan County 911 GA 4 Mercury Standard Consoles - 84" Primaries - 42" Screens Morgan Co.00.cmdrw Sales Rep: Ben Whitley Account Manager: Natalie Thorne Project Designer: Michelle Steele REV 00: MES 09/18/2020 Preliminary Drawings CP 01 Full Room 3D Color

Approved By:

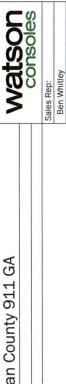
NOTE: Verify all building dimensions on-site prior to purchase or installation of product.

Watson agrees to provide product Symbols that are correct. In turn, the agent or customer is responsible for providing accurate building plans, including dimensions, features, and information required for space planning and installation.

26246 Twelve Trees Lane NW Poulsbo, WA 98370 www.watsonconsoles.com 360.394.1300

4 Mercury Standard Consoles - 84" Primaries - 42" Screens

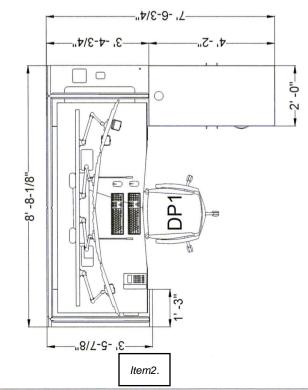
ect: Morgan County 911 GA			
ct: Morgan County 911	•	A L	5
ct: Morgan (7	5	Sailty STE
			John Maria

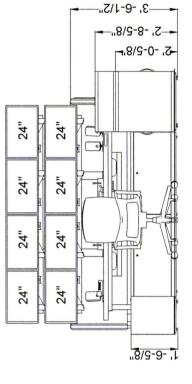


Morgan Co.00.cmdrw

Project Designer: Michelle Steele

Project Manager: Natalie Thorne





Monitors Are On Fully Articulating Arms

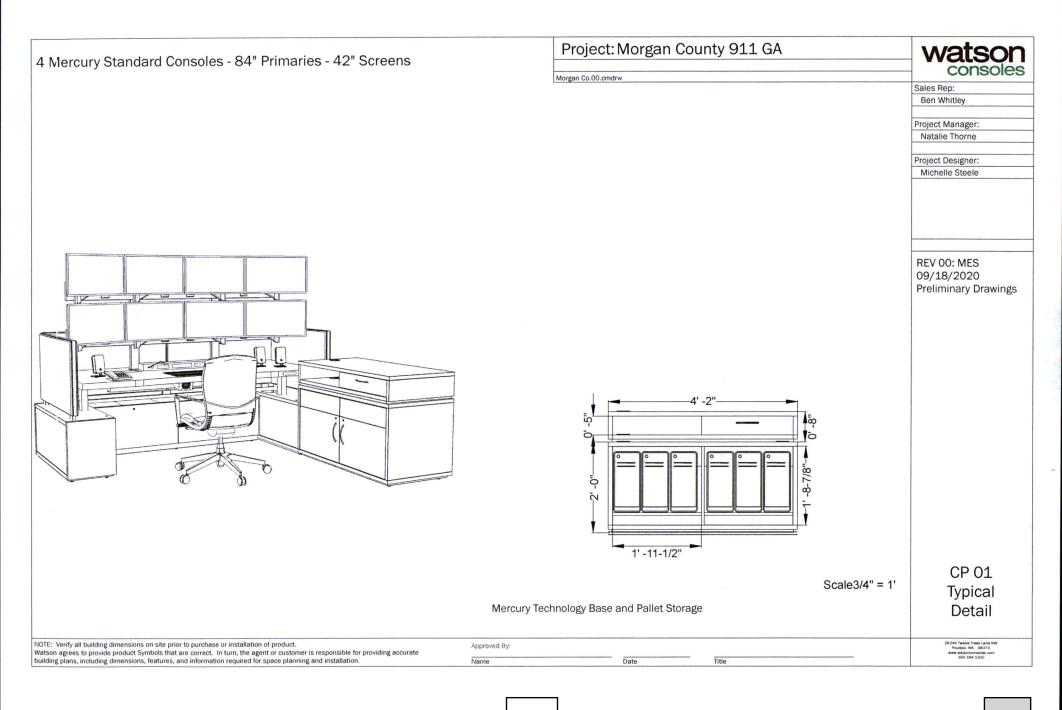
NOTE: Verify all building dimensions on-site prior to purchase or installation of product.
Watson agrees to provide product Symbols that are correct. In turn, the agent or customer is responsible for providing accurate building plans, including dimensions, features, and information required for space planning and installation.

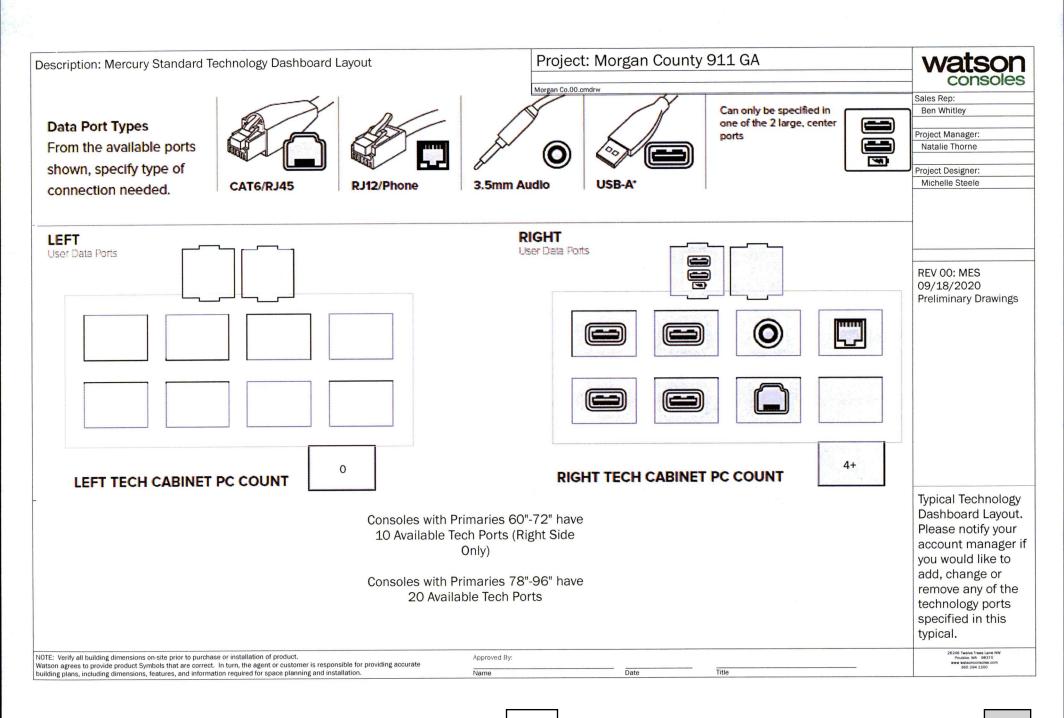
Approved By: Name

Scale 1/2" = 1

Scale 1/2" = 1

26246 Twelve Trees Lane NW Poulsbo, WA 98370 www.watsonconsoles.com 360 394 1300 CP 01 Typical







MORGAN COUNTY AGENDA REQUEST

Department:	Fire	Presenter(s):	Jeff Stone
Meeting Date: mm/dd/yyyy	12/15/2020	Type of Request:	New Business
Nording for the Agenda:			
Approval request for p	ourchase of new SCBAs		
Background/History/Details			
	ase replacement for SCBAs of grown the Board of Commissioner of 8 more SCBAs		
If this item requires funding Will be part of the discussi	please describe: on and decision process. dered within the past two years?	Yes V If so, wh	en? 2019
•			Provided with Request? Yes
is Audio-visual Equipment	Required for this Request?*	140 packupi	Toakled with Keddesit 162
All audio-visual material n our department's respons	nust be submitted to the County sibility to ensure all third-party a	Clerk's Office no later than 48 ho udio-visual material is submitted	urs prior to the meeting. It is also at least 48 hours in advance.
Approved by Finance	No		
Approved by Purchasing	No		
Manager's Approval	No		
Staff Notes:			
			

Item3.

PURCHASE ORDER REQUEST FORM MORGAN COUNTY, GEORGIA

PO#					V	endor Quotati	ion Requirement	s	
			\$2,000.00 - \$99,999 - Three quotes required						
	71 21			**************************************			up - Sealed bids		10.700 A 10
					DOR #1	200 000000	DOR #2	VEN	DOR #3
							e & Safety House		
ACCOUNT NUMBER	QTY UNIT		DESCRIPTION	UNIT	EXTENDED	UNIT	EXTENDED	UNIT	EXTENDED
100-3500-	8	Scott X3 Pro Firefighti	ng SCBA	\$8,101.22	\$64,809.76	\$ 8,290.00	\$66,320.00		
							2		
		<u> </u>	Total		\$64,809.76		\$66,320.00		\$0.00
Recommended Vendor: MES	8	\$64,809.76	Requesting Department	Fire Dept				Date	12/10/2020
					1 11		- 0		
			Elected Official/Department Head:	J. Stone	Jeffre	4 M	Sion	Date	12/10/2020
	For Pur	chases Exceeding \$7,500	0		Approv	ed for prepar	ation of purchase	order	
Date approved						\$8 NO.50	3952.		
Any stipulations of t	he Commission				Purchasing Of	ncer		Date	



Quote

Date Quote # Expires 12/10/2020 QT1426704 12/31/2020

Sales Rep

Funderburk, Brett

PO#

Shipping Method

FedEx Ground

BIII TO MORGAN CO BOARD OF COMMISSIONE P.O. BOX 168 MADISON GA 30650 United States Ship To Chief Jeff Stone MORGAN CO FIRE RESCUE 1380 MONTICELLO ROAD MADISON GA 30650 United States

Norn Att from #	Units Description	Cuy U	init Sales Pri A	mount
X8914021305304	Air-Pak X3 Pro SCBA (2018 Edition) with Snap-Change Cylinder Connection, 4.5, Standard Harness with Parachute Buckles, Standard Belt with No Escape Rope, E-Z Flo Regulator with Standard Hose, Universal EBSS Accessory Hose, No Airline Connection, No Spare Harness Kit, Pak-Tracker, No Case, Packaged 2 SCBA Per Box (Black)	8	5,744.92	45,959.36
200129-01	Snap-Change Cylinder, Carbon-Wrapped, Pressure 4500, 45 Minutes (at 40 lpm)	16	1,048.54	16,776.64
201215-22	AV3000 HT with Kevlar lining and 4-strap harness-Red, Medium	8	259.22	2,073.76
			S.:basal	64 900 76

Subtotal Shipping Cost (FedEx Ground) Total 64,809.76 0.00 \$64,809.76

This Quotation is subject to any applicable sales tax and shipping & handling charges that may apply. Tax and shipping charges are considered estimated and will be recalculated at the time of shipment to ensure they take into account the most current local tax information.

All returns must be processed within 30 days of receipt and require a return authorization number and are subject to a restocking fee.

Custom orders are not returnable. Effective tax rate will be applicable at the time of invoice.

QT1426704



QUOTE

Date P.O. No. 12/09/2020

American Safety & Fire House LLC 3848 Oakcliff Industrial Court Doraville GA 30340 Sales Rep: Chas White - (770) 441-3473 Sales Rep Email: chas@americansafetyandfire.com

Customer

Morgan County Fire Department 1380 Monticello Road Madison, GA 30650

Ship To	
Morgan County Fire Department	
1380 Monticello Road	

Pick UP Date

Item	Description	Qty	Unit	Net	Amount
X8914025305304	2018 Ed Air-Pak X3 Pro w/Snap-Change Harness Type: Parachute Buckles Pro Pressure: 4500 Belt Type: Standard EZ-Scape System: None (No FFSR) Regulator: Quick Connect (Rectus Fittings) EBSS: Universal EBSS Airline Option: None Console: PASS w/ Pak-Tracker Case: None Packaging: 2 SCBA Per Box (Black Box)	8	Each	\$5,940.00	\$47,520.00
200129-01	4500PSI Carbon 45 min X3SNAP Valve 15-YEAR	16	Each	\$1,040.00	\$16,640.00
201215-22	Scott AV3000HT (Size Can Be Specified At Time of Order)	8	Each	\$270.00	\$2,160.00
			1	Total: \$6	6,320.00

Item3. - 37 -



MORGAN COUNTY AGENDA REQUEST

Department:	IT	Presenter(s):	Mark Williams	
Meeting Date: mm/dd/yyyy	12/15/2020	Type of Reque	st: New Business	
Vording for the Agenda:				
IT Vehicle Replaceme	ent			
Lackground/History/Details	:			
	t for IT was included in the asse model. Two bids were re 20,474.		-	
What action are you seeking	g from the Board of Commissioner	s?		
f this item requires funding,	please describe:			
Has this request been cons	idered within the past two years?	No If so, v	when?	
ls Audio-Visual Equipment	Required for this Request?*	No Backu	p Provided with Request?	Yes
	nust be submitted to the County sibility to ensure all third-party a			
Approved by Finance	Yes			
Approved by Purchasing	Yes			
Manager's Approval	Yes			
Staff Notes:				
		Item4		Γ.

IT Replacement Vehicle Bid Tab

	Covington Ford	Akins Ford	Wade Ford	Courtesy Ford
2021 Ford Escape, S				
model	\$20,474.00	\$21,222.00	No Response	No Response

Item4.



MORGAN COUNTY AGENDA REQUEST

Department:	Sanitation	Presenter(s):	Mark Williams
Meeting Date: mm/dd/yyyy	12/15/2020	Type of Reque	st: New Business
Nording for the Agenda:		· · · · · · · · · · · · · · · · · · ·	
Purchase of Open Top	Dumpsters		
LBackground/History/Details	:		
In addition, four 30 yadifferent types of traspurchase of seven 30	ard open top dumpsters are r h/recyclables. Quotes were yard open top dumpsters fro wborn Road site in the FY21	needed for the planned Newloobtained from 3 providers a m Baker's Waste for \$29,56	orn Road manned site to separate and evaluated. Recommend the 1.00. There was funding for accement dumpsters will be
	g from the Board of Commissioner		
If this item requires funding	, please describe:		
Has this request been cons	sidered within the past two years?	No If so, v	vhen?
Is Audio-Visual Equipment	Required for this Request?*	No Backu	p Provided with Request? Yes
	nust be submitted to the County sibility to ensure all third-party a		hours prior to the meeting. It is also d at least 48 hours in advance.
Approved by Finance	Yes		
Approved by Purchasing	Yes		
Manager's Approval	Yes		
Staff Notes:			
		Item5.	- 4



QUOTATION

Original

41041 Quote No.: Date: 12/08/20 Valid Until: 01/08/21 **Customer No.:** C01678

Customer Ref. No.:

Page No.:

Page 1 of 2

TOTAL

\$ 29,561.00

BILL TO

Morgan County Board of Commissione PO Box 168

Madison GA 30650 USA

Sales Employee: **Contact Name:**

Missi Templeton Mark Williams

Terms:

N30

Ship Via:

2480 Athens Highway

Alan-706-342-5075

Madison GA 30650

BWE Transport, LLC

FOB:

USA

Item No.	Description	Unit Price	Quantity	Total
ROR-30-22(60)	Roll Off 30 cu yd Rect	\$ 3,989.00	7.000	\$ 27,923.00

SHIP TO

Morgan Co. Board Of Commisioners

Cable Lift

Standard Rectangular Specifications: Understructure Cross Members - 3" channel on 16" center 2 gussets per cross member Main Rails - 2" x 6" tubing 3/16" wall, with solid bull nose Pull Hook - 1 1/2" w x 5 1/2" h x 2 1/2" eye opening Floor - 3/16" steel plate Wheels - (2) 8" dia. x 6" long with grease fitting - (4) wheels optional

Guide Rollers - 4" dia. x 6" long with recessed grease fitting

Sides and Front - 12 ga

Top Cap - 4" x 3" x 11 ga wall tubing

Side Ribs - 3" x 5" channel on 38" centers

Hinges - 2 heavy-duty hinges with grease fitting

Canvas Tie Down - Each side, front and door

Paint - Primer inside and outside 2.0 mils, Industrial enamel finish to 2.0

Confirm Color

We Appreciate Your Interest In BWE Products, And For This Opportunity To Do Business,

Missi Templeton Bakers Waste Equipment Inc **BWE South Region Sales Manager** 828-448-8371 (cell) 828-726-3001 (main office) mtempleton@bwe-nc.com (email) www.bwe-nc.com (website)

*Lead Time: Approx (6.5) Weeks After Receipt Of Order - Subject To Change At Time Of Order

*Prices Quoted Are Good For 30 Days From The Date Of The Quote

*Sales Tax Will Be Applied Unless BWE Has A Tax Exempt Certificate On File

*Customer Is Responsible And Liable For Offloading Equipment Upon Delivery Unless Alternate Methods Have Been Arranged Prior

To Delivery

Phone: 828-726-3001

Fax: (828) 726-3010

Item5. USA: 8

Website: www.bwe-nc.com

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QUOTATION

Original

Quote No.:

41041

Date: Valid Until:

12/08/20 01/08/21

Customer No.:

C01678

Customer Ref. No.:

Page No.:

Page

Unit Price Quantity **Total** Item No. Description

Order Terms and Conditions:

Order Confirmation – quotes are confirmed into orders based on customer verbal or written confirmation.

ALL INFORMATION CONTAINED IN A CONFIRMED QUOTE WILL BE CONSIDERED CORRECT AND ACCURATE AT THE TIME OF THE ORDER

Purchase Orders are recommended and preferred to confirm an order. The quoted product item, price, quantity, and specifications are also acknowledged at the time the order is confirmed.

Prices will be subject to change based on any subsequent alteration to quantity, product design or specification, logistics, or delivery schedule.

*Order Cancellations – cancelled or revised orders if the order is already in production must be approved by BWE and will be subject to 25% cancelation or change order fee.

*Fees may be higher on custom engineered products.

Payment Terms – method and payment terms are confirmed at time of order. New accounts will be subject to a deposit, prepayment, and / or COD payment terms until a credit application can be processed for payment term options

Warranty – standard BWE warranty applies to all new products sold. Warranty date begins on the date the product is received and is only valid if the products have been received, and paid for in full

Shipping Damages – any damages must be noted at the time of delivery to the freight company that delivers the product. Failure to do so may jeopardize any damage claim to repair, return, or replace the damaged product. Customer is responsible for offloading equipment, and is liable for any damages incurred during offloading

*Return Policy – products must have return authorization from BWE prior to them being returned. Standard items returned are subject to a 25% restocking fee. Fees may be higher or return authorization declined if the products are custom engineered.

*BWE reserves the sole right to waive any return or restocking fees.

Subtotal Discount \$ 27,923.00

Shipping

\$ 1.638.00

Tax

Remarks:

Phone: 828-726-3001

7) ROR-30-22(60)

1 truck Loads @ \$609 ea and 1 LTL at \$1029

Total \$ 29,561.00

Item5.

- 42 -



395 South Main Street, Eagleville, TN, 37060 PHONE: 800-643-8713 FAX: 615-274-2636

WQ-10176345

Ship To Name

Ship To

Sell To:

Contact Name

Mark Williams

Bill To Name

Morgan County Solid Waste

Bill To

150 E Washington St Madison, GA 30650-1346

USA

Email

mwilliams@morgancountyga.gov

Phone

(706) 342-0725

Quote Information

Salesperson

Martin Smith

Salesperson Email msmith@wastequip.com

Created Date

12/9/2020

USA

Expiration Date

12/23/2020

Quote Number

WQ-10176345

Morgan County Solid Waste

2480 Athens Hwy Madison, GA 30650-1346

Please Reference Quote Number on all

Purchase Orders

Product	Produ	ct Description			Quantity	Sales Price	Total Price
Container - TN - 163361	18" ce	bic Yard Heavy Duty Bathtub ROC 22' Long - Floor enters and 6"x 2"x 1/4" Structural Tubing Main Rails ails, Primed and Painted any Standard Color			7.00	\$5,536.00	\$38,752.00
Payment Te	erms	Net 30 Days if credit has been established	Subtotal	\$38,752.00			
Shipping Te	erms	FOB Origin	Shipping	\$1,275.00			
		,0,	Tax	\$3,202.16			
			Grand Total	\$43,229.16			

Special Instructions

Special Instructions Customer is responsible for offloading

Additional Information

Additional Terms

Our Quote is a good faith estimate, based on our understanding of your needs. Subject to our acceptance, your Order is an offer to purchase our Products and services in accordance with the Wastequip Terms & Conditions of Sale ("WQ T&C") located at: https://www.wastequip.com/terms-conditions-of-sale, as of the date set forth in Section 1(b) of the WQ T&C, which are made a part of this Quote. These WQ T&Cs may be updated from time to time and are available by hard copy upon request.

Additional Information

Pricing is based on your anticipated Order prior to the expiration of this Quote, including product specifications, quantities and timing. Any differences to your Order may result in different pricing, freight or other costs. Due to volatility in petrochemical, steel and related Product material markets, actual prices and freight, are subject to change. We reserve the right, by providing notice to you at any time before beginning Product manufacturing, to increase the price of the Product(s) to reflect any increase in the cost to us which is due to any factor beyond our control (such as, without limitation, any increase in the costs of labor, materials, or other costs of manufacture or supply). Unless otherwise stated, materials and container sizes indicated on sales literature, invoices, price lists, quotations and delivery tickets are nominal sizes and representations – actual volume, Products and materials are subject to manufacturing and commercial variation and Wastequip's practices, and may vary from nominal sizes and materials. All prices are in US dollars; this Quote may not include all applicable taxes, brokerage fees or duties. If customer is not tax exempt, final tax calculations are subject to change.



395 South Main Street, Eagleville, TN, 37060 PHONE: 800-643-8713 FAX: 615-274-2636 WQ-10176345

Accepted By:	
Company Name:	
Date:	
Purchase Order:	

Please Reference Quote Number on all Purchase Orders

Item5. - 44 -

1-800-231-8198



Dragon Products, LLC.

Attn: Mark Williams

Equipment Quotation

December 8, 2020

Customer

Morgan County 150 East Washington Street Madison, GA. 30650 PH: 706-342-0725 FX: 706-343-6450

E-Mail: mwilliams@morgancountyga.gov

Terms: 25% Down & Balance Before Ship

Shipping Address

FAX: 1-281-470-1954

Freight to Madison, GA. \$3250 Per Load

Shipped 4 Per Load on a Flat Bed (2 Loads)

You will need to facilitate the Off Loading with a Crane or Fork Lift

Quantity	Model	Description	on	Unit Price	Extended Price
7	30 YD Rect SW	30 YD Rect S	W	\$4,950.00	\$34,650.00
Options:		30 YD Rectangu	ılar Solid W	aste Roll-Off Box	
		See S	Spec & Dra	wing	
Quantity	Model	Description	on	Unit Price	Extended Price
Options:					
Thank You For (Giving Us The On	portunity	9	uh Total	\$34.650.00
	Giving Us The Op			ub Total ht (2 Loads)	\$34,650.00 \$6,500.00
To Quote Your	r Equipment Need on / ESP Product L	s With			

State Sales Tax May Apply

Randy Prater
Dragon Products, Ltd
816 W. Barbour's Cut Blvd.

<u>La Porte, TX 77571</u> Office: 877-231-8198 Cell: 409-284-9777

FOB La Porte Tx.

randy.prater@modernusa.com

Please sign for order confirmation

Item5. - 45 -

AVAILABLE IN YOUR STANDARD PAINT COLOR!

Specifications

- FLOOR: 3/16" PL(std), 1/4" PL(optional)
- CROSSMEMBERS: 3 x 4.1 channel, 18" on center
- WALLS: 12 GAwith 3" x 4" tubing top rail and 12 GA, formed channel verticals 24" on center
- DOOR: 12 GAwith tubing frame
- FRONT: 12 GAslant formed PICK UP: Standard cable with 2" x 6" x 3/16" rails, gusset at each crossmember
- WHEELS: (2) 8" DIAx 9" Lat rear, (2) skids at front
- DOOR LATCH: Vertical latch with safety chain
- WELDS: Continuous inside, skip weld outside
- FINISH: Coated inside and out with direct to metal, rust inhibiting acrylic enamel color coat
- DIMENSIONS: 22'-11" long (21'-8" inside), 96" wide (84" inside), see drawing for height
- OPTIONS:Ampliroll, Heil and Dino pick up also available. Start with a design that has been professionally engineered, add the highest quality steel, and an experienced team of zero-defect fabricators and tough quality control inspectors and you get the best open top container on the market.

Item5. - 46 -

Board Vacancies

• **DEVELOPMENT AUTHORITY-**(1 position open)

The term of Robert "Bob" Hughes will expire 12/31/2020. Mr. Hughes submitted an application to be considered for reappointment.

Applications were also received from Lisa Thieler and Wendell McNeal for consideration.

• TAX ASSESSORS BOARD-(2 positions open)

The term of Marcus Schuchs and Mary Ellen Anton will expire 12/31/2020. Mr. Schuchs and Mrs. Anton both submitted applications to be considered for reappointment.

No other applications were received.

COUNCIL ON AGING-(5 total positions open)

The term of Geraldine Cooper will expire 12/31/2020. Ms. Cooper submitted an application to be considered for reappointment.

No other applications were received.

AG BOARD-(1 position open)

The term of Susan McCullar expired 06/30/2020. Ms. McCullar did not wish to be considered for reappointment.

One application was received from Lorrie Lavengood for consideration.

LIBRARY BOARD-(1 position open)

The term of Bonnie Hickey expired 06/30/2020. Ms. Hickey did not wish to be considered for reappointment.

One application was received from Melissa Sikorski for consideration.

Item7. - 47 -



Applicant Information:

ROBERT HUGHES	
Full Name	MADISON SA 30450
Address,	1ADISON GA
Mailing Address (If different)	
Telephone-Home	Telephone-Work
Board interested in serving on:	Commission District 5
DEVELOPMENT AUTHORIT	Y OF MORGAN COUNTY
Occupation/Employer MADISON · MORCAN CO CHAP	ABER OF COMMERCE
Do you have any experience in the field	FI GA STATE UNIV EDFP NATIONAL DEV COUNCIL; DEV AUTH BOTRUG UGA YOU are applying? If so explain. ALENT FOX DAMC. WITH 14 YRS EXPERIENCE
	ntribution if appointed to this board/position? HZ INTERG-T- OF CITIZEN- & INDUSTRY BY GOOD
Other Comments or Information:	LEVELLE
Policy:	All controls of the control of the c
I understand the obligations and commits Board of Commissioners, I agree to serve board/position for the duration of the ten of Morgan County and all municipalities	ments required by this board/position. If appointed by the Morgan County and faithfully execute the obligations and commitments of said in of appointment. In all respects, I will uphold the ordinances and policies in a professional and courteous manner and fully divulge any and all ad that advisory boards offer advice and recommendations but policy a Board of Commissioners.
Sobret Hayles-Signature	9-23-2020
Signature	Date



Applicant Information:

Lisa A. Thieler
Full Name Madison, GA 30650
Address
Mailing Address (If different)
Telephone-Home Telephone-Work
Board interested in serving on:
Development Authority of Morgan County
Background Information:
Occupation/Employer _Attorney/Regions Bank - Capital Markets Division
Education: Mercer School of Law, Juris Doctor 1998 University of Central Florida, Bachelor of Science, 1991
Do you have any experience in the field you are applying? If so explain. I am an attorney with over 22 years of specialization in corporate finance and commercial real estate, including industrial development revenue bonds.
Contribution/Intentions:
What do you feel will be your biggest contribution if appointed to this board/position? I have relevant legal knowledge and a business understanding of municipal finance. I previously represented companies seeking bond finance, as well as banks providing letters of credit backing bonds. Other Comments or Information: As a new resident of Morgan County, I am seeking an opportunity to serve the community
Policy:
I understand the obligations and commitments required by this board/position. If appointed by the Morgan County Board of Commissioners, I agree to serve and faithfully execute the obligations and commitments of said board/position for the duration of the term of appointment. In all respects, I will uphold the ordinances and policies of Morgan County and all municipalities in a professional and courteous manner and fully divulge any and all potential conflicts of interest. I understand that advisory boards offer advice and recommendations but policy decisions are the sole responsibility of the Board of Commissioners.
Lisa Thisler 11.24.2020 Signature Date

Item7.

- 49 -



Applicant Information:

Wendell D. McNeal	
Full Name	2650
, Madison, GA 3	0650
Mailing Address (If different)	
Telephone-Home Tele	phone-Work
Board interested in serving on:	
Development Authority	
Background Information:	
Occupation/Employer KeyCorp Financial, Inc owner/ass totalling \$7 million +/-	et manager of real estate holdings
Education: Graduate of South Georgia Technical Georgia Southwestern State Universi	College in Americus, GA and studied at
Do you have any experience in the field you are applying? Please see attached letter	If so explain.
Contribution/Intentions:	
What do you feel will be your biggest contribution if appo Please see attached letter.	inted to this board/position?
Other Comments or Information:	
• •	
Policy:	
I understand the obligations and commitments required by Board of Commissioners, I agree to serve and faithfully exboard/position for the duration of the term of appointment of Morgan County and all municipalities in a professional potential conflicts of interest. I understand that advisory be decisions are the sole responsibility of the Board of Comm	tecute the obligations and commitments of said In all respects, I will uphold the ordinances and policies and courteous manner and fully divulge any and all oards offer advice and recommendations but policy
Masmer	11/20/2020
V Signature WENDELL D. MCNEAL	Date



November 19, 2020

Morgan County Board of Commissioners 150 E. Washington Street Madison, Georgia 30650

Re: Application for Development Authority Board

Dear Gentlemen:

My name is Wendell D. McNeal and I have resided in Morgan County since 2004. I am writing this letter to expand on the information I have included on my application form for your consideration of me to be a member of the Development Authority Board.

I feel I would serve well on this Board given my years of experience with managing finances and real estate. I owned and managed 4 locations of a multi-store franchise for 27 years and we enjoyed an income of over \$5 million annually. I sold my business to a publicly traded company approximately 10 years ago. I currently own and manage a portfolio of real properties valued at approximately 7 million and held by 7 different companies which I own and manage. In that regard, I supervise the preparation and maintenance of all financial records, including profit and loss statements, cash flow statements and balance sheets, etc. for all the companies and properties. We adhere to the regulations of GAP and I am familiar with both the LIFO and FIFO accounting methods.

The nature of my business requires me to have a very analytical mind. With the acquisition of each property, I must make choices regarding the rehabilitation of the property; manage the expenses for acquisition and rehabilitation; project future earnings and in conjunction with that, make the decision to retain the property in my portfolio or to market the property for sale. I am continuously making judgments on the tolerability of risk on the basis of a risk analysis while considering influential factors. To effectively do this, I keep abreast of current market conditions and economic trends. I know the abilities I have developed will serve this Board well.

My current property holdings in Morgan County consist of my personal residence and a lake house at Lake Oconee which is titled in one of my companies. I currently serve in a fiduciary capacity as Treasurer of the Georgia Youth Challenge Academy Foundation, Inc., a non-profit which supports the efforts of the Georgia National Guard's Youth Challenge Academy. I am involved locally in many activities which reflect my commitment to my community, such as serving as a reserve officer for the Morgan County Sheriff's Department, serving on the board of the Boys & Girls Club of North Central Georgia, Inc. and Emergency Coordinator for the Amateur Radio Emergency Service for Morgan County.

I feel my commitment to Morgan County and my blend of experience with finances and real estate recommend me to serve on the Development Authority Board. Thank you for your consideration.

P.O. Box 81123 • Conyers, Georgia 30013

office 770.388.77 | x.770.760.0003



November 19, 2020

Morgan County Board of Commissioners 150 E. Washington Street Madison, Georgia 30650

Re: Application for Development Authority Board

Dear Mr. Riden:

My name is Wendell D. McNeal and I have resided in Morgan County since 2004. I am writing this letter to expand on the information I have included on my application form for your consideration of me to be a member of the Development Authority Board.

I feel I would serve well on this Board given my years of experience with managing finances and real estate. I owned and managed 4 locations of a multi-store franchise for 27 years and we enjoyed an income of over \$5 million annually. I sold my business to a publicly traded company approximately 10 years ago. I currently own and manage a portfolio of real properties valued at approximately 7 million and held by 7 different companies which I own and manage. In that regard, I supervise the preparation and maintenance of all financial records, Including profit and loss statements, cash flow statements and balance sheets, etc. for all the companies and properties. We adhere to the regulations of GAP and I am familiar with both the LIFO and FIFO accounting methods.

The nature of my business requires me to have a very analytical mind. With the acquisition of each property, I must make choices regarding the rehabilitation of the property; manage the expenses for acquisition and rehabilitation; project future earnings and in conjunction with that, make the decision to retain the property in my portfolio or to market the property for sale. I am continuously making judgments on the tolerability of risk on the basis of a risk analysis while considering influential factors. To effectively do this, I keep abreast of current market conditions and economic trends. I know the abilities I have developed will serve this Board well.

My current property holdings in Morgan County consist of my personal residence and a lake house at Lake Oconee which is titled in one of my companies. I currently serve in a fiduciary capacity as Treasurer of the Georgia Youth Challenge Academy Foundation, Inc., a non-profit which supports the efforts of the Georgia National Guard's Youth Challenge Academy. I am involved locally in many activities which reflect my commitment to my community, such as serving as a reserve officer for the Morgan County Sheriff's Department, serving on the board of the Boys & Girls Club of North Central Georgia, Inc. and Emergency Coordinator for the Amateur Radio Emergency Service for Morgan County.

I feel my commitment to Morgan County and my blend of experience with finances and real estate recommend me to serve on the Development Authority Board. Thank you for your consideration.

Sincerely.

Wendell D. McNeal

P.O. Box 81123 • Conyers, Georgia 30013 office 770.388.7777 • fax.770.760.0003

Item7.

Morgan County Board of Tax Assessors Application

Applicant Information: MARCUST Schucks TR	YES D NO 21 or Older			
Full Name	~ 122 = 110 <u>= 131 = 131</u>			
Address MAd'SON GA 30650				
Mailing Address (if different)	N/A			
Telephone: (Home)	(Work)			
Background Information: LAND MAN AGEK				
Occupation/Employer				
Education: FORESTRY RRA - BUSINESS Admin				
BBA - BUSINESS Admin				
Do you have any experience in tax assessment and/or Real Estate? If so explain.				
Contribution/Intentions:				
What do you feel will be your biggest contribution if appointed to this board/position?				
KNOW ludge of LAND & Timber				
Other Comments or Information:				

Term of Office is 4 Years: Attendance of Board of Assessors monthly meeting. Board of Assessors meets third Tuesday of the month at 9:00A.M. Work Sessions and Special Called are held on called basis as needed.

O.C.G.A §48-5-291 Requirement for oath of office: Attend 40 hour training within first 180 days of appointment to obtain Certificate of Eligibility by the Revenue Commissioner and maintain 40 hours of education for each two calendar years of tenure.

Policy:

I have been informed and understand the obligations and commitments required by this board/position. If appointed by the Board of Commissioners, I agree to serve and faithfully execute the obligations and commitments of said board/position for the duration of the term of appointment. In all respects, I will uphold the ordinances and policies pertinent to the Department of Revenue, Morgan County and all municipalities in a professional and courteous manner and fully divulge any and all potential conflicts of interest.

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Signature

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Morgan County Board of Tax Assessors Application

Applicant Inform	nation:		
	EN Anton	YES D NO 21 or older	
Full Name			
	GA 30625		
Address			
Mailing Address (if different)		
Telephone:	(Home)	(Work)	
Background Info Retired – spent o		real estate appraiser and appraisal course teacher	
Occupation/Emplo			
Education: High School education; completed and passed all courses required to be a Certified Residential appraiser; USPAP;			
Completed all cou	irses required to be a Tax Asse	ssor's Board member	
Do you have any experience in tax assessment and/or Real Estate? If so explain. Certified Residential Appraiser in Georgia and Florida (retired); USPAP and appraisal course teacher (retired);: 4 years on the Board of Tax Assessors board.			
Contribution/Int	entions:		
What do you feel will be your biggest contribution if appointed to this board/position? The experience in real estate and the knowledge of CUVA properties.			
Other Comments	or Information:		
Term of Office is	4 Years: Attendance of Boa	ard of Assessors monthly meeting. Board of Assessors meets	

third Tuesday of the month at 9:00A.M. Work Sessions and Special Called are held on called basis as needed.

O.C.G.A §48-5-291 Requirement for oath of office: Attend 40 hour training within first 180 days of appointment to obtain Certificate of Eligibility by the Revenue Commissioner and maintain 40 hours of education for each two calendar years of tenure.

Policy:

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Mary Ellen anton Signature

11/16/2020 Date



Applicant information.
Geraldine C. Cooper
Full Name Rutledge, GA. 30663
Address Address
N. '1' A 11 (T. 1'.C') (A)
Mailing Address (If different)
Telephone-Home Telephone-Work
Board interested in serving on: COUNCIL ON AGING
Background Information:
Occupation/Employer Retired - MORGAN Co- Health Dept.
Education: High School Graduate - Some College
Do you have any experience in the field you are applying? If so explain. I'm a Senior citizen now also - Have experience working with the public
Contribution/Intentions:
What do you feel will be your biggest contribution if appointed to this board/position?
Other Comments or Information:
Term of appointment is three years. For more information, call the Sr. Center Director at 706-342-1614.
Policy:
I understand the obligations and commitments required by this board/position. If appointed by the Morgan County Board of Commissioners, I agree to serve and faithfully execute the obligations and commitments of said board/position for the duration of the term of appointment. In all respects, I will uphold the ordinances and policies of Morgan County and all municipalities in a professional and courteous manner and fully divulge any and all potential conflicts of interest. I understand that advisory boards offer advice and recommendations but policy decisions are the sole responsibility of the Board of Commissioners.
Heraldine C. Cooper 11-10-2020 Signature Date



Applicant information:
Lorrie Ellan Lavengood
Full Name -
Address Machisco, (517 3008)
Mailing Address (If different)
Telephone-Home Telephone-Work
Board interested in serving on:
Agriculture Center Authority Board
Background Information:
Occupation/Employer Canty - Accounts Payable
Education: A.A.S. Accounting of A.A.S. Banking of Finance
Do you have any experience in the field you are applying? If so explain YES - I raise sheep on ar farm and both my Children show them with the margan canty yy
Contribution/Intentions:
What do you feel will be your biggest contribution if appointed to this board/position? Twill be able to help fock at choices from a Dreader and a payent that has a brawing view.
Other Comments or Information:
Policy:
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Applicant Information:

Melissa Brinson Sikorski	
Full Name	
: Madison, GA 30650	
Address	
Mailing Address (If different)	
Telephone-Home	Telephone-Work

Board interested in serving on:

Morgan County Library Board

Members appointed by the Board of Commissioners to a six-year term. Contact Stacy Brown @706-342-4974 ext. 1010 for more information.

Background Information:

Occupation/Employer

I am an Occupational Therapist with 17 years experience working with both pediatrics and adults. I have worked for Baldwin County School System, Atlanta Medical Center, and Children's Healthcare of Atlanta. Since moving to Madison (a little over 1 year ago), I have been a stay at home parent taking care of our six year old and two year old.

Education:

I have a Bachelors of Science in Occupational Therapy. I graduated from The Medical College of Georgia in 2003.

Do you have any experience in the field you are applying? If so explain.

I was a member of the Junior League of Atlanta for five years. During that time I served on committees that focused on children and women safety, education, and advancement. I was on the board for the Avondale Estates Parent Co-Op for two years. I am currently Vice-President of the Morgan County Primary School Parent-Teacher Organization (PTO).

Contribution/Intentions:

What do you feel will be your biggest contribution if appointed to this board/position?

My grandmother was the librarian for the Harlie Fulford Memorial Library (Wrightsville, GA) for over 20 years. During that time, I spent most of my afternoons at the library helping re-shelve books and reading everything I could find. I grew up in the library and because of that I have a love for reading and deep understanding of just how important literacy is to our communities. I feel that between my love of the public library, being an occupational therapist with experience working with children and adults with disabilities, and my history in leadership, I can contribute in multiple areas while on the board.

Other Comments or Information:

While living in Avondale Estates, I started a local book club that met once a month. For five years, I headed up the book club for local mothers and it is still going on today.

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Policy:

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decisions are the sole responsibility of the Board of Commissioners.

Melissa Sikorski	November 19, 2020
Signature	Date

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