



CITY OF WALTHOURVILLE
The Honorable Mayor Sarah B. Hayes, Presiding
October 27, 2026 @ 6:00 PM
Walthourville Police Department

The Honorable Mitchell Boston, Mayor Pro Tem
The Honorable Bridgette Kelly

The Honorable Patrick Underwood
The Honorable Luciria Luckey Lovette

The Honorable Robert (Bob) Dodd

Mr. Luke R. Moses

City Attorney

AGENDA

- | | |
|--|--------------------------------------|
| I. Call to Order | Mayor Sarah B. Hayes |
| II. Roll Call | City of Walthourville |
| III. Invocation | Appointee |
| IV. Pledge of Allegiance | In Unison |
| V. Approval of Agenda | Councilmembers |
| VI. Approval of Minutes | Councilmembers |
| <ul style="list-style-type: none">• October 13, 2026, Regular Meeting Minutes | |
| VII. Presentation(s) | |
| Mr. Sam Sullivan
2027 Sanitation Rate Increase. | Atlantic Waste |
| VIII. Agenda Items: | |
| 1. LCPC
Business License Request for Bliss and Gloss Nail Spas, LLC. The owner is Ms. Martesa Moss and will be located at 4981 West Oglethorpe Highway, Suite 8. | Mrs. Lori Parks |
| 2. City of Walthourville
SPLOST VIII. | Mayor Sarah B. Hayes |
| 3. City of Walthourville
Town of Allenhurst Fire Service Agreement. | Mayor Sarah B. Hayes |
| 4. City of Walthourville
Road Name Change for the construction of the Walthourville Bypass, for the division of Griffin Road and a portion of Carter Road. | Mayor Sarah B. Hayes |
| 5. City of Walthourville
Alternative Employee Benefits. | Mayor Pro Tem Mitchell Boston |

IX.	Citizens Comments Each citizen is allocated three (3) minutes.	Walthourville Citizens
X.	Department Head Update	
	Mr. Dave Martin	Public Works
	Mr. Patrick Golphin	Water Department
	Chief Nicolas Maxwell	Fire Department
	Chief Christopher Reed	Police Department
XI.	Elected Officials Comments	
	Mayor Pro Tem Mitchell Boston	
	Councilmember Patrick Underwood	
	Councilmember Bridgette Kelly	
	Councilmember Luciria Luckey Lovette	
	Councilmember Robert Dodd	
XII.	Mayor's Updates	Mayor Sarah B. Hayes
XIII.	Executive Session	None
XIV.	Adjournment	Mayor and Council

**When an Executive Session is warranted, it is called for the following:
(Litigation, Personnel and Real Estate)**

PRESENTATION

Atlantic Waste

Mr. Sam Sullivan



2027 Sanitation Rate Increase

Liberty Consolidated Planning Commission – Report

Governing Authority: The City of Walthourville



Mayor & Council Date: October 27, 2026

Business License: Bliss & Gloss Nail Spas, LLC

Business Owner: Martesa Moss

Address: 4981 W Oglethorpe Highway, Suite 8

Zoned: C-3 (Highway Commercial District)

Comments: Nail Salon

Recommendation: APPROVAL

LCPC Staff: *Lori Parks*
Lori Parks
Zoning Administrator

10-27-26
Date



City of Walthourville Business License Division

Mailing Address: P.O Box K
Walthourville, GA 31333
Office Location 222 Busbee Road
Walthourville, GA 31333
Phone:(912) 368-7501
Web site address- www.cityofwalthorville.com

Application For corporation or limited Liability Company LLC
Occupation Tax Certificate

*The application must be filled out completely to obtain a City of Walthourville Occupation Tax Certificate. Payment must be filed with the application to obtain a City of Walthourville Occupation tax Certificate. This application will not be processed if it is not accompanied by the appropriate tax fee. **You will not be billed.** Please print with ink or type. In order for the appropriate tax or fee to be determined the application accompanied by all appropriate documents must be submitted in person.

Pursuant to The Georgia Immigration Reform Act that was passed by the State Legislature and signed by the Governor all persons applying for renewing a City of Walthourville Tax Certificate must provide a secure and verifiable document as required by O.C.G.A 50-36-1(e) (1) and sign and notarize the affidavit required by O.C.G.A 50-36-1 (e) (2) and the affidavit required by O.C.G.A 36-60-6 (d).

This Business is:

- ☒ New Application
☐ Ownership Change / Date ownership changed & Certificate # _____
☐ I am filling a name/or address change for Certificate# _____

Name business as Bliss & Gloss Nail Spa Business Phone# 912 977-8632
Name of Corporation/LLC* Bliss & Gloss Nail Spas, LLC
Business Address 4981 W Oglethorpe Hwy, Suite B, Hinesville, GA 31313
Mailing Address 4981 W Oglethorpe Hwy, Suite B, Hinesville, GA 31313-5805
Email Address teresa.moss1218@gmail.com
Full Detailed Description of
Business Nail Salon

Date Business began in City of Walthourville _____
#of employees in City of Walthourville 1 E-verify# (Required if 11 or more employees _____
State Sales Tax ID# _____ Federal ID # 41-3625538
Owner Name MARTEZA MOSS SS# _____ DOB 5/24/1988
Home Address 3404 Rye Patch Rd NE Apt# _____ City Ludowici State GA Zip 31316

*** All electrical, mechanical, plumbing, well drilling contractors, mobile home dealers, mobile home installers, and any other contractor that is required to have a State of Georgia License will be required to attach a copy of the license to this application before insurance.

***All commercially used building may be subject to an inspection for fire and safety code compliance prior to any certificate of occupancy or business license being issued.

Secure and Verifiable Documents Under O.C.G.A. § 50-36-2
Issued August 1, 2011 by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 (“IIREA”) provides that “[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law’s website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General.” O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.

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

- A United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A driver’s license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at:
<http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm> [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A passport issued by a foreign government [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

O.C.G. A. § 50-36-1(e)(2) AFFIDAVIT

By executing this affidavit under oath, as an applicant for a loan, grant, tax credit and/or other public benefit, as referenced in O.C.G.A. § 50-36-1, administered by the Georgia Department of Community Affairs, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

- 1) ☒ I am a United States Citizen.
- 2) ☐ I am a legal permanent resident of the United States.
- 3) ☐ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

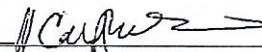
My alien number issued by the Department of Homeland Security or other federal immigration agency is: _____.

The undersigned applicant 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: _____.

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 this the ____ day of _____, 201__ in _____ (city), _____ (state).


*Signature of Applicant

MARTESA MOSS
Printed Name of Applicant

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE

____ DAY OF _____, 201__

NOTARY PUBLIC

My Commission Expires:

**This Affidavit must be signed by the same person who executes the Application Certification Form Letter*

- A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- A NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- A driver's license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]

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

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

Section 1. Please check only one:

(A) _____ On January 1st of the below-signed year, the individual, firm, or corporation employed more than ten (10) employees¹.

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

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

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

Section 2.

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

Name of Private Employer

Federal Work Authorization User Identification Number

Date of Authorization

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

Executed on _____, __, 201__ in _____ (city), _____ (state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, 201__.

NOTARY PUBLIC

My Commission Expires: _____

¹ To determine the number of employees for purposes of this affidavit, a business must count its total number of employees company-wide, regardless of the city, state, or country in which they are based, working at least 35 hours a week.

Are you, the applicant the corporation, LLC or any shareholder currently delinquent in payment of any taxes or fees to any state or local government? No If yes, please indicate the type of tax or fee, and the amount due with the reason the tax is delinquent.

If this property is zoned residential, no clients Employees, sales, deliveries, storage of inventory, Or equipment are allowed on the premises. Only One commercial vehicle not to exceed 12,500 lbs Gross weight used as transportation by the occupant May be parked at the residence.

I swear or affirm that I have obtained or will obtain within thirty days of the date of this application a City of Walthourville Certificate of Occupancy as required by the city ordinances.

I will comply with the Zoning Restrictions stated above: _____
(initials)

Signature: [Signature]

I Martesa Moss, affirm that the facts stated by me are true, I understand any misrepresentation or fraudulent statement is grounds for automatic dismissal of this application and/revocation of the license. I understand that all signs displayed on my premise must be permitted by the City of Walthourville, I further understand that my business must operated in compliances with all applicable state, federal & local laws, ordinances & regulations, & that the granting of this occupation tax certificate or payment of this occupation tax does not waive the right of any federal, state or local entity to regulate & enforce laws, ordinances & regulations. I understand that all decisions of Business License Division may be appealed to the City of Walthourville.

This 13th day of October, 2026.

Signature of applicant [Signature] legibly print name Martesa Moss

This application must be approved by the Liberty County Planning Commission

Tax Map & Parcel# 050A163

Zoning Classification C3

Approved by: [Signature]

Date Approved: _____

Date the request will be presented to Mayor and Council: 10-27-26

*****APPLICANT MUST COMPLETE THE AFFIDAVITS AND PROVIDE A SECURE AND VERIFIABLE DOCUMENT*****



Agenda Item #2

SPLOST VIII

Mayor Sarah B. Hayes



Agenda Item #3

Town of Allenhurst Fire Service Agreement

Mayor Sarah B. Hayes

STATE OF GEORGIA
COUNTY OF LIBERTY

AMENDMENT TO INTERGOVERNMENTAL AGREEMENT
BY AND BETWEEN
THE CITY OF WALTHOURVILLE, GEORGIA AND
THE TOWN OF ALLENHURST, GEORGIA
REGARDING PROVISION OF FIRE SERVICE
BY THE CITY OF WALTHOURVILLE TO THE TOWN OF ALLENHURST
AND RELATED FIRE FEES

THIS AMENDMENT TO THAT INTERGOVERNMENTAL AGREEMENT, which was previously made and entered into as of the 11th day of February, 2025, by and between the City of Walthourville, Georgia, a municipal corporation organized and existing under the laws of the State of Georgia (the "City"), and the Town of Allenhurst, Georgia, a municipal corporation organized and existing under the laws of the State of Georgia (the "Town") is hereby amended this 5th day of October, 2026, as follows:

WHEREAS, effective October 1, 2026, the City no longer collects a Fire Services Fee individually from its citizens or the citizens and property owners residing within the incorporated area of Allenhurst;

WHEREAS, pursuant to this Agreement, the City has the responsibility for providing Fire Services in the incorporated area of Allenhurst (the "Town Fire District") (collectively, the "Fire District");

WHEREAS, the City and Town previously entered into an intergovernmental agreement regarding the provision of Fire Services within the Town Fire District;

WHEREAS, a goal of the City and the Town is to provide the best fire protection possible within the resources of the City and the Town, and to achieve 24 hours per day, 7 days per week, on-duty coverage for the entire Fire District;

WHEREAS, the City is the owner and operator of certain Fire Engines, fire protection vehicles, equipment, buildings and facilities designed to provide Fire Services and assistance and has in its employ paid personnel and volunteers trained in the use of such Fire Engines, vehicles and equipment and the provision of Fire Services;

WHEREAS, the Town continues to desire to engage the City to provide Fire Services within the Town Fire District upon the terms and conditions set forth in this Agreement;

WHEREAS, the City desires to reaffirm and continue its relationship with the Town, engaging the City to provide Fire Services within the incorporated area of Allenhurst within

the Fire Utility Service Area;

WHEREAS, the City desires to provide Fire Services upon the terms and conditions set forth in this Agreement; and

WHEREAS, as a result of the City no longer collecting a Fire Services Fee individually from its citizens or the citizens and property owners residing within the incorporated area of Allenhurst, the City will collect and the Town agrees to pay to the City a Fire Services Fee of \$84,300.00 on annual basis for the duration of this Agreement.

NOW, THEREFORE, in consideration of the premise, the mutual covenants and promises hereinafter set forth, and other good and valuable consideration, the sufficiency of which is hereby acknowledged, the parties agree as follows:

ARTICLE I TERM AND SCOPE OF AGREEMENT

- 1.1 **Term.** The term of this Amendment to the Agreement shall commence on October 5, 2026, and end at 11:59 p.m. on December 31, 2029.
- 1.2 **Scope of Agreement.** During the term of this Agreement, the City shall furnish Fire Services as set out herein throughout the Service.
- 1.3 **Payment.** The City, effective October 1, 2026, is no longer collecting fire fees from individual property owners within the Town. In exchange for the Provision of Services outlined in the initial Agreement, which was adopted on or about February 11, 2025, the Town will pay the City \$21,075.00 on or before October 16, 2026 in exchange for services for the remainder of 2026, and will pay the City \$84,300.00 on or before January 31st each year thereafter until the termination or extension of this Agreement.
- 1.4 **All Other Provisions.** All other provisions of the initial Agreement, which was adopted on February 11, 2025, remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed under seal by their authorized representatives on the day and year first above written.

CITY OF WALTHOURVILLE

By: _____
Mayor

Attest: _____
Clerk

[CITY SEAL]

TOWN OF ALLENHURST

By: _____
Mayor

Attest: _____
Clerk

[CITY SEAL]



Agenda Item #4

**Road Name Change due to the Walthourville
Bypass.**

Mayor Sarah B. Hayes



Liberty County Information Technology

Tyler Iske, GIS Analyst

www.libertycountyga.gov | X: @libertycounty | Facebook: libertycounty | YouTube: @libertycountygeorgia

ROAD NAME CHANGE PETITION

To Whom It May Concern,

Liberty Count is currently undertaking the review of all addresses for compliance with our addressing standards. This is necessary to provide residents and visitors with the best possible emergency response and mail delivery services. The addressing coordinator has found that this particular street is out of compliance with the County's standards and must be given a new road name.

Road to be Renamed: Griffin Rd, Allenhurst, GA 31301
North of Carter Rd

To prevent further confusion and mitigate risk, I recommend that the road above be renamed due to road name duplication and public safety concerns.

If you have any questions, please feel free to contact me at tyler.iske@libertycountyga.gov

Sincerely,

A handwritten signature in black ink that reads 'Tyler Iske'.

Tyler Iske
GIS Analyst



Agenda Item #5

Alternative Employee Benefits

Mayor Pro Tem Mitchell Boston