Complete the information below, add the appropriate attachments and submit to:

Kenneth Franks, State TIA Administrator Georgia Department of Transportation 600 West Peachtree Street, NW Atlanta, Georgia 30308

_{I,} Bill Slaughter (Name), th	իշ Chairman
Lowndes County Board of Commissione (Title), on behalf of	ers, who being duly sworn do swear that the
information given herein is true to the best of his/her knowledge and belief.	
LOCAL GOVERNMENT: (Signature)	Sworn to and subscribed before me,
Chairman (Title)	This 22 day of lune, 2072. In the presence of:
June 23, 2022 (Date)	O NOTA SLIZE
SEAL: 1825 OF COMMISSION	NOTARY PUBLIC TO BUS COUNTY OF THE PROPERTY O