RECEIVED
JUL 07 2026
BY: S-S

DISBURSED
7-14-26

FORM
FIN1510-01
For Accounts Payable Use Only

Vendor Number
6762

CHECK REQUEST FORM

Use this form to arrange for payment to individuals or businesses when a Purchase Order or P-card is not required.

This form must be submitted in typed format only.

Vendor Information		
Vendor or Employee Name	**Date**	**Department Name**
Georgia Dept of Natural Resources	7/7/2026	WTP 4430
	If there is a Purchase Order issued for this expense,	
	DO NOT USE THIS FORM. If so, submit invoice with a copy of the PO.	
Mailing Address		
P.O. Box 101788	If payment is to a Vendor, is a W-9 on	
Atlanta, GA 30392	file in the Purchasing Office?	
	If No, a completed W-9 MUST be	
Email Address	attached. Email Shervonda.ellis@rockdalecountyga.gov in our	
	Purchasing Division for a complete New Vendor Packet.	
	Shervonda.ellis@rockdalecountyga.gov	

EXPENSE/ACCOUNT DETAILS

Description (for individuals, Services, Expense Reimbursements)	Date of Service or Invoice	General Ledger Account Fund	Function	Account	Dept.	Amount
Annual Drinking Water Fees	7/6/2026	505	4430	521300	44	$16,170.00
BUDGETED (X) NOT BUDGETED ( )					Total Check Amount	

DESCRIBE FULLY THE NATURE OF THE PAYMENT

Annual Drinking Water Fees for 07/01/2026-06/30/2027

SIGNATURES/APPROVALS

Dept. Designee	Date	Chief Financial Officer/Designee	Date
7/14/26	7/7/2026		
Staff Accountant	**Date**	**Purchasing Manager**	**Date**

CHECK HANDLING INSTRUCTIONS

5. Mail	6. Pick Up-Approval by Finance Director	7. Send Inter-Department Mail
(Enclose attachments if required in letter size envelope)	Available at the Finance Office Front Desk after 2:00 pm every Friday	Will be placed in mailbox after 2:00 p.m every Friday

7/7/26

General Manager's Signature:

7/8/26

Please send this form with attachments to the Department of Finance. Each check request received Monday-Friday will be processed the following Friday.

2026-417

GEORGIA
DEPARTMENT OF NATURAL RESOURCES
ENVIRONMENTAL PROTECTION DIVISION

DRINKING WATER INVOICE

FIMS Account ID:	1951
Customer Name:	ROCKDALE CO. WATER SYSTEM
Water System ID:	GA2470000
Invoice Number:	DW-2027-007280

Total Due : $ 16,170.00

Bill To:
ROCKDALE CO. WATER SYSTEM
MILLER, TRACEY
3090 GEES MILL RD.
CONYERS, GA 30013

Notification:
Check Water System Information
gadrinkingwater.net
Account Information:
TOTAL AMOUNT DUE ON *08/17/2026*

BILLING SUMMARY

Invoice Period	Invoice Date	Current Invoice Amount	Previous Balance	Adjustment	Amount Paid	Total Due
07/01/2026 - 06/30/2027	7/6/2026	$ 16,170.00	$ 0.00	$ 0.00	$ 0.00	$ 16,170.00

EXPLANATION OF CHARGES

Population	TCR	Entry Point	Water System Type	Source Type	Analysis Type	Fee
87,156	1,080	1	C	SW	Chemical	$ 16,170.00
					Total :	$ 16,170.00

PAST DUE SUMMARY

# of Days Past Due	Due	≤ 30	> 30 and ≤ 60	> 60 and ≤ 90	> 90 and ≤ 120	> 120
Past Due Amount	$ 16,170.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00
Late Fee	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00

PLEASE RETURN THIS PORTION OF YOUR INVOICE WITH YOUR PAYMENT.

MAKE CHECK(S) PAYABLE TO : **EPD - Drinking Water Fees**

FIMS ACCOUNT ID	TOTAL DUE	INVOICE #
1951	$ 16,170.00	DW-2027-007280

DUE DATE:	08/17/2026
TOTAL AMOUNT DUE:	$ 16,170.00
TOTAL AMOUNT PAID:	

ROCKDALE CO. WATER SYSTEM
MILLER, TRACEY
3090 GEES MILL RD.
CONYERS, GA 30013

MAIL PAYMENT TO:
DRINKING WATER FEES
P.O. BOX 101788
ATLANTA, GA 30392

GEORGIA
DEPARTMENT OF NATURAL RESOURCES

ENVIRONMENTAL PROTECTION DIVISION

DRINKING WATER INVOICE

FIMS Account ID:	1951
Customer Name:	ROCKDALE CO. WATER SYSTEM
Water System ID:	GA2470000
Invoice Number:	DW-2027-007280
Total Due :	$ 16,170.00

BILLING DETAIL

Transaction Date	Transaction Type Description	Transaction Amount
6/30/2026	Past Due Balance	$ 0.00
7/1/2026	Current Charges	$ 16,170.00
		Total: $ 16,170.00

If you have questions regarding your invoice, please contact the Branch most closely related to your fees at one of the numbers below:

Air Protection Branch: (404) 363-7000
Land Protection Branch: (404) 657-8600
Watershed Protection Branch: (404) 463-1511

You may also email epdfinance@dnr.ga.gov for billing questions or for technical assistance, you can visit http://epd.georgia.gov/geos/contact-us for program-specific contacts.

Board of Commissioners
Agenda Item Transmittal Form
Procurement/Contract Transmittal Form

Type of Contract: 1 Year	**CC Use Only** **Contract #:**

Submission Information:	**Vendor Information:**
Contact Name: Kimbry L. Peek Sr., Director of Water Resources	**Vendor Name:** Georgia Department of Natural Resources
Department: Water Resources	**Address:** P.O. Box 101788; Atlanta, GA 30392
Project Title: Water Resources – Georgia Department of Natural Resources – Annual Drinking Water Fees (July 1, 2026 – June 30, 2027)	**Email:** epdfinance@dnr.ga.gov **Phone #:** 404-463-1511 **Contact:** Watershed Protection Branch
Budgeted: Yes	**Term of Contract:** Net 30 days
Funding Account Number: 505-4430-521300-44	
Contract Amount: $16,170.00	
Contract Type: Services	
Contract Action: New	
Original Contract Number:	

Notes and Comments:

VENDOR NAME: Georgia Department of Natural Resources – Environmental Protection Division **ADDRESS:** PO Box 101788, Atlanta, GA 30392
VENDOR CONTACT: Watershed Protection Branch **PHONE #:** 404-463-1511 **EMAIL:** epdfinance@dnr.ga.gov
CONTRACT TERM: Net 30 Days
CONTRACT AMOUNT: $16,170.00
CONTRACT TYPE: Services
CONTRACT ACTION: New

Annual Drinking Water Fees Payable to the Georgia Department of Natural Resources for the period of **July 1, 2026 through June 30, 2027.** Payment is based on a population of 87,156 and **payment is due on or before August 17, 2026**