



Scott County Board of Supervisors
December 6, 2023 – 8:30 a.m.
AGENDA

190 Beech Street Suite 201 Gate City, VA 24251



| <i>No.</i> | <i>Item of Business/Action Requested</i> | <i>Action Taken by Board</i> | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------|---|--|-------|--|-------|--------------------------|-------|--------------------------|--------------------------|--------|--------------------------|--------------------------|--------|--------------------------|--------------------------|---------|--------------------------|--------------------------|------|--------------------------|--------------------------|------|--------------------------|--------------------------|-----------|--------------------------|
| 1. | Call To Order – Chairman Danny P. Mann | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. | Invocation and Pledge of Allegiance by Michael K. Brickey | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. | Roll Call of Members | <input type="checkbox"/> Mr. Jeter, District 1 <input type="checkbox"/> Mr. Tipton, District 2 <input type="checkbox"/> Mr. Herron, District 3 <input type="checkbox"/> Mr. Brickey, District 4 <input type="checkbox"/> Mr. Mann, District 5 <input type="checkbox"/> Ms. Hood, District 6 <input type="checkbox"/> Ms. Addington, At Large | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. | Approve Agenda | Motion: _____ Second _____ <table border="0"> <tr> <td align="center">A Y E</td> <td></td> <td align="center">N A Y</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | A Y E | | N A Y | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| 5. | Approve Minutes: November 1, 2023 | Motion: _____ Second _____ <table border="0"> <tr> <td align="center">A Y E</td> <td></td> <td align="center">N A Y</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | A Y E | | N A Y | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| 6. | <p>Citizen Expression Period:</p> <p>1. Tim Casteel</p> | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. | <p>Public Hearing on a Special Use Permit Application submitted by Kristen Rucevice for tax Map # 160 A 18A on Fawn Drive off of Yuma Road in Gate City, VA to use the parcel as Commercial Kennel.</p> | | | | | | | | | | | | | | | | | | | | | | | | |
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| 8. | <p>Public Hearing to amend the Scott County FY 2024 Budget. Amendments include an increase in funds to the School Operating Fund totaling \$5,277,917, \$773,335 Fund 1 expenditures, \$2,900 Law Library, \$3,000 Technology Trust Fund, \$23,989 Opioid Settlement Fund, \$7,160 Motor Vehicle Violation Fund, \$39,181 Local Assistance and Tribal Consistency Fund and \$25,470 Regional Improvement Funds. Additional Revenue is projected to be \$654,368.</p> | | | | | | | | | | | | | | | | | | | | | | | | |
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| 9. | Ratify Robinson Farmer Cox Engagement Letter | Motion: _____ Second _____ <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| 10. | Small Purchase Procedure Discussion | Motion: _____ Second _____ <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| 11. | Manville Road Tree Discussion | Motion: _____ Second _____ <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| 12. | Update Powell Valley National Bank Petty Cash Signature Card | Motion: _____ Second _____ <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| 13. | Carter Fold 50 th Anniversary | Motion: _____ Second _____ <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| 14. | Natural Tunnel State Park Pool Resolution | Motion: _____ Second _____ <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
| AYE | | NAY | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Jeter | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Tipton | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> | Addington | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| 15. | Approval of ARPA Projects | Motion: _____ Second _____ <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| 16. | Bookkeeping – Amy Vicars | Motion: _____ Second _____ <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| <input type="checkbox"/> | Addington | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |



Scott County Board of Supervisors
December 6, 2023 – 8:30 a.m.
AGENDA

190 Beech Street Suite 201 Gate City, VA 24251



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| <p>17.</p> | <p>Appointments – Tina Seay</p> <p>Planning District One Behavioral Health Services Board</p> <p>Regional Industrial Facilities Board</p> | <p>Motion: _____ Second _____</p> <table border="0"> <tr> <td>AYE</td> <td></td> <td>NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> <p>Motion: _____ Second _____</p> <table border="0"> <tr> <td>AYE</td> <td></td> <td>NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
| AYE | | NAY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> | Tipton | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <p>18.</p> | <p>County Attorney Items</p> | <p>Motion: _____ Second _____</p> <table border="0"> <tr> <td>AYE</td> <td></td> <td>NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
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Scott County Board of Supervisors
December 6, 2023 – 8:30 a.m.
AGENDA

190 Beech Street Suite 201 Gate City, VA 24251



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| 19. | <p>County Administrator Items</p> <p>Claims</p> <p>Miscellaneous</p> | <p>Motion: _____ Second _____</p> <table border="0"><tr><td>AYE</td><td></td><td>NAY</td></tr><tr><td><input type="checkbox"/></td><td>Jeter</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Tipton</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Herron</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Brickey</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Mann</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Hood</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Addington</td><td><input type="checkbox"/></td></tr></table> <p>Motion: _____ Second _____</p> <table border="0"><tr><td>AYE</td><td></td><td>NAY</td></tr><tr><td><input type="checkbox"/></td><td>Jeter</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Tipton</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Herron</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Brickey</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Mann</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Hood</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Addington</td><td><input type="checkbox"/></td></tr></table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| <input type="checkbox"/> | Tipton | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> | Addington | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 20. | Report: Mike Dishman - Public Service Authority | <p>Motion: _____ Second _____</p> <table border="0"><tr><td>AYE</td><td></td><td>NAY</td></tr><tr><td><input type="checkbox"/></td><td>Jeter</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Tipton</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Herron</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Brickey</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Mann</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Hood</td><td><input type="checkbox"/></td></tr><tr><td><input type="checkbox"/></td><td>Addington</td><td><input type="checkbox"/></td></tr></table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> | Jeter | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Tipton | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Herron | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Brickey | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Mann | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Hood | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Addington | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |



Scott County Board of Supervisors
December 6, 2023 – 8:30 a.m.
AGENDA

190 Beech Street Suite 201 Gate City, VA 24251



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|--------------------------|--|--|-----|--|-----|--------------------------|-------|--------------------------|--------------------------|--------|--------------------------|--------------------------|--------|--------------------------|--------------------------|---------|--------------------------|--------------------------|------|--------------------------|--------------------------|------|--------------------------|--------------------------|-----------|--------------------------|
| 21. | <p>Comments, Requests, Recommendations from Board of Supervisors:</p> <p>Mr. Jeter – Mr. Tipton – Mr. Herron – Mr. Brickey – Mr. Mann – Ms. Hood – Ms. Addington –</p> | <p>Motion: _____ Second _____</p> <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| <input type="checkbox"/> | Tipton | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> | Hood | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Addington | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| 22a. | <p>Enter Closed Session Pursuant to Virginia Code Section 2.2-3711A</p> <p>1-Personnel 3-Real Estate 5-Prospective Industry 6-Competitive Investments 7-Legal Counsel</p> | <p>Motion: _____ Second _____</p> <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| <input type="checkbox"/> | Addington | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| 22b. | Return to Open Session | <p>Motion: _____ Second _____</p> <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| <input type="checkbox"/> | Jeter | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> | Addington | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |



Scott County Board of Supervisors
December 6, 2023 – 8:30 a.m.
AGENDA

190 Beech Street Suite 201 Gate City, VA 24251



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|--------------------------|---|--|-----|--|-----|--------------------------|-------|--------------------------|--------------------------|--------|--------------------------|--------------------------|--------|--------------------------|--------------------------|---------|--------------------------|--------------------------|------|--------------------------|--------------------------|------|--------------------------|--------------------------|-----------|--------------------------|
| 22c. | Certify Closed Session | Motion: _____ Second _____ <table border="0"> <tr> <td align="center">AYE</td> <td></td> <td align="center">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| <input type="checkbox"/> | Brickey | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Mann | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Hood | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Addington | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| 23. | Take Any Necessary Action from Closed Session | Motion: _____ Second _____ <table border="0"> <tr> <td align="center">AYE</td> <td></td> <td align="center">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| <input type="checkbox"/> | Tipton | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> | Mann | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Hood | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Addington | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| 24. | Adjourn meeting to January 3, 2024 at 8:30 a.m. | Motion: _____ Second _____ <table border="0"> <tr> <td align="center">AYE</td> <td></td> <td align="center">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table> | AYE | | NAY | <input type="checkbox"/> | Jeter | <input type="checkbox"/> | <input type="checkbox"/> | Tipton | <input type="checkbox"/> | <input type="checkbox"/> | Herron | <input type="checkbox"/> | <input type="checkbox"/> | Brickey | <input type="checkbox"/> | <input type="checkbox"/> | Mann | <input type="checkbox"/> | <input type="checkbox"/> | Hood | <input type="checkbox"/> | <input type="checkbox"/> | Addington | <input type="checkbox"/> |
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| <input type="checkbox"/> | Addington | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |