After recording, return to: Georgia Power Company Attn: Land Acquisition (Recording) 241 Ralph McGill Blvd NE Bin 10151 Atlanta, GA 30308-3374

AND THE ARGS (1995)

PROJECT 2022060238 LETTER FILE DEED FILE MAP FILE

ACCOUNT NUMBER 10585396-GPC9596-0-12.02.01

NAME OF LINE/PROJECT: CLOVERLEAF - TREE TRIM - C3112-KMZ SECTION 4 (2023 BIL) (BARTOW

COUNTY) DL

PARCEL NUMBER 007

STATE OF GEORGIA BARTOW COUNTY

DISTRIBUTION TREE TRIM / CLEARING EASEMENT

For and in consideration of the sum of Ten and No/100 Dollars (\$10.00) and other good and valuable consideration, in hand paid by GEORGIA POWER COMPANY, a Georgia corporation (the "Company"), the receipt and sufficiency of which are hereby acknowledged, CITY OF CARTERSVILLE (the "Undersigned", which term shall include heirs, successors and/or assigns), whose mailing Address is PO Box 1390, Cartersville, GA 30120-1390, does hereby grant and convey to the Company, its successors and assigns, the right, privilege and easement to cut, trim, remove, clear and keep clear any and all trees and other obstructions located on the Easement Area (as defined below), as well as the right, privilege and easement to cut, trim and/or remove any trees which now or may hereafter endanger the electric transmission and/or distribution lines and/or communication lines of the Company, its successors and assigns now constructed or which may hereafter be constructed on or adjacent to the Property (as defined below) and the right of ingress and egress over the Property to and from the Easement Area in connection therewith.

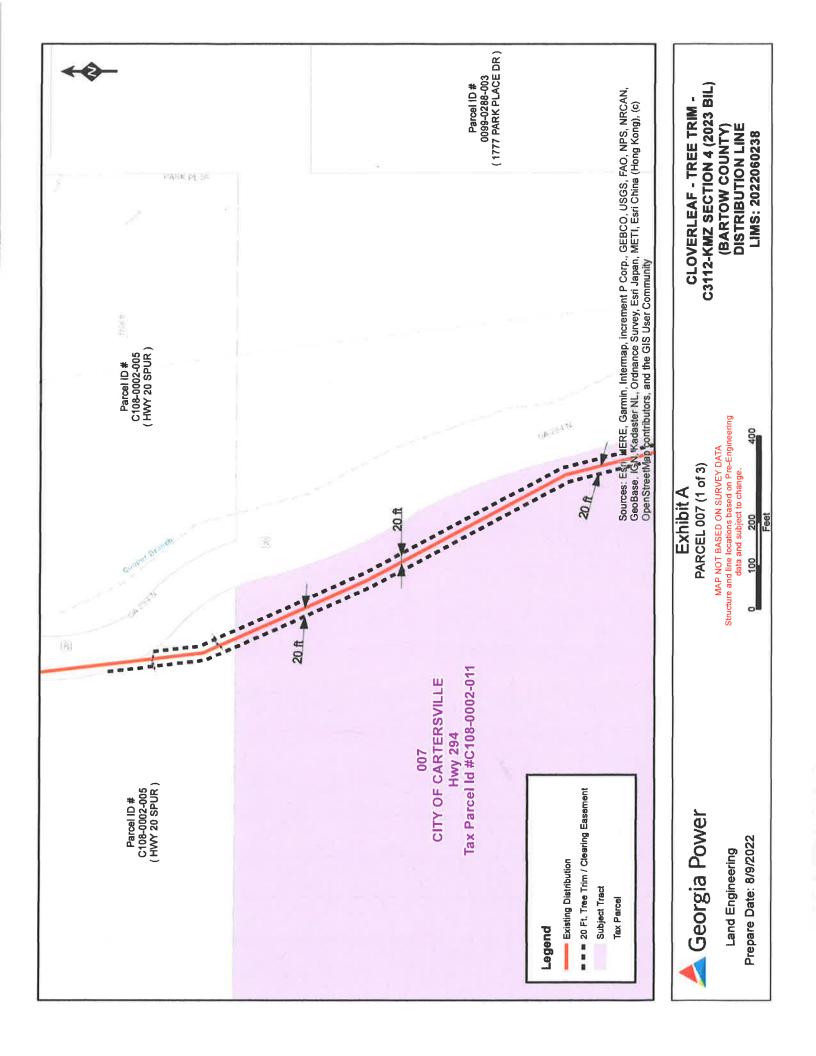
The "Property" is defined as that certain tract of land owned by the Undersigned at HWY 294, CARTERSVILLE, GA 30121 (Tax Parcel ID No. C108-0002-011) in Land Lot 253, 254, 321-328, 393-396, Section 3; 289, 360, Section 3 of the 21, 4 District of Bartow County, Georgia.

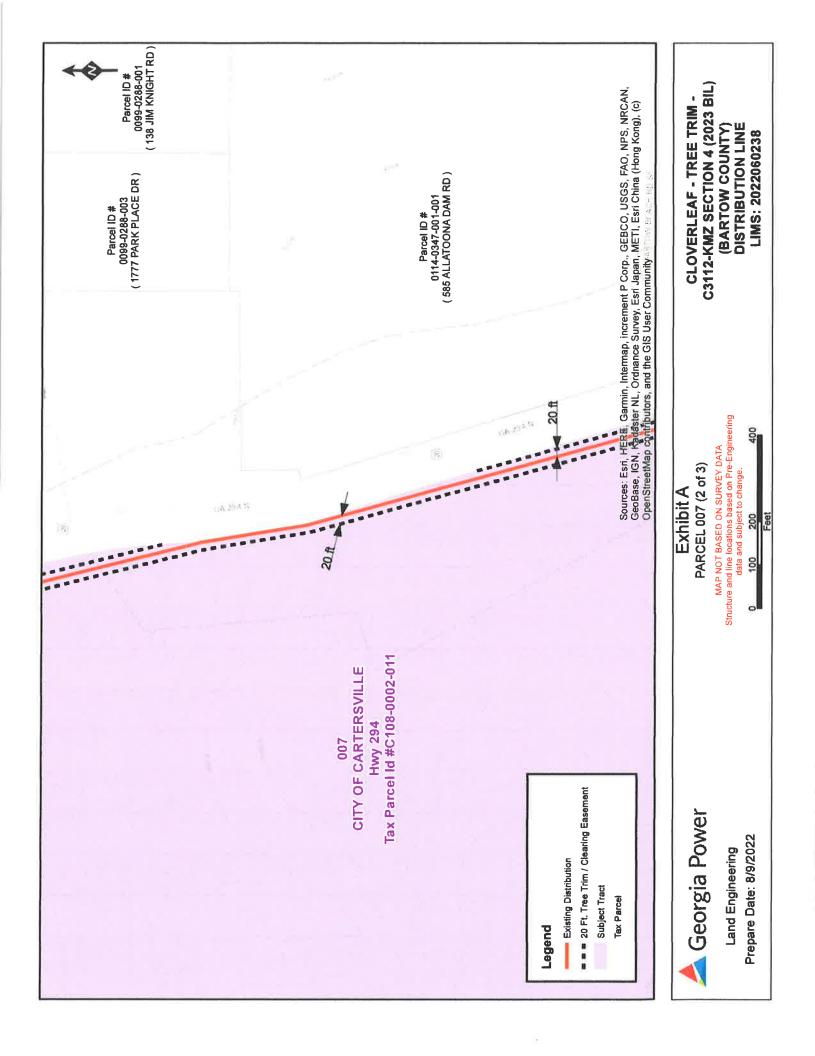
The "Easement Area" is defined as the portion of the Property located within twenty (20) feet of the centerline of the existing overhead of the existing electric transmission, distribution and/or communication lines of the Company, such Easement area being more particularly shown on "Exhibit A" attached hereto and made a part hereof.

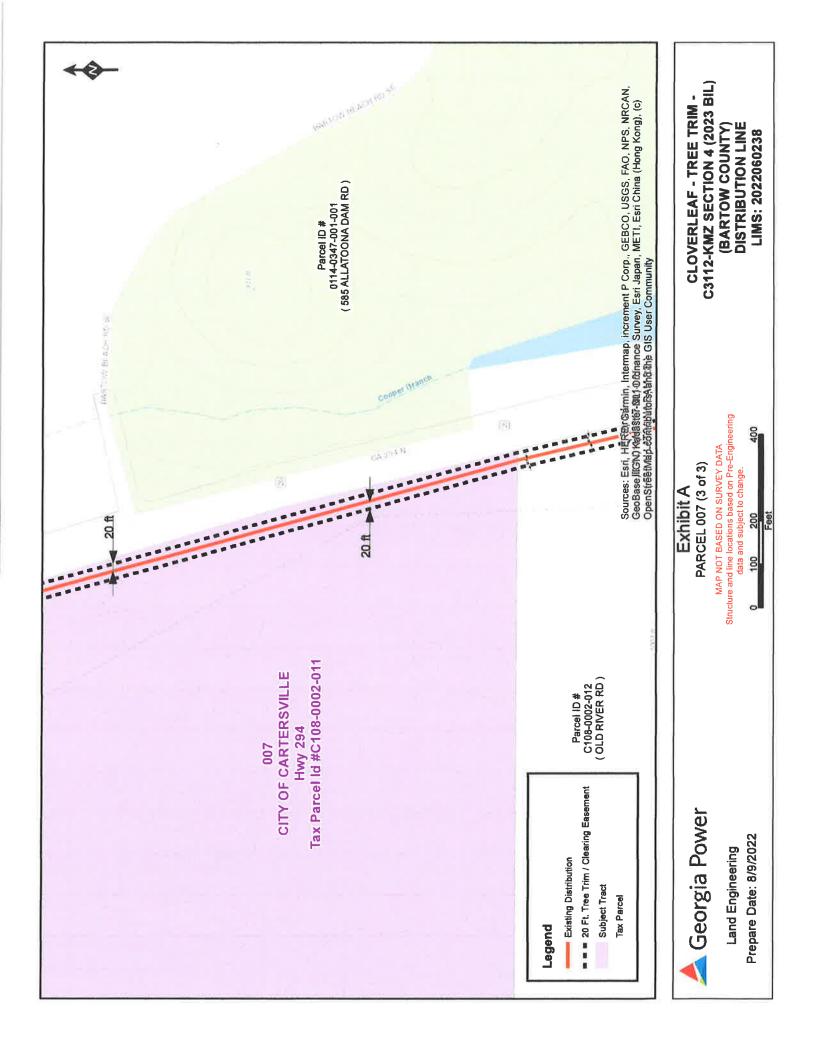
[Signature(s) on Following Page(s)]

PARCEL 007	NAME OF LINE/PROJECT:	CLOVERLEAF - TREE TRIM - C3112-KMZ SECT (2023 BIL) (BARTOW COUNTY) DL	TION 4
man and cost your size four face size and size size size size and			
		Undersigned has/have hereunto set his	/her/their
Signed, seal presence of:	ed and delivered i	in the CITY OF CARTERSVILLE	
Witness		By: Name: Title:	(SEAL)
Notary Publi	c	Attest:Name: Title:	(SEAL)

[CORPORATE SEAL]









Taxpayer Identification Number Request

Form W9

Project Number 2020 (02)	Parcel Number: 07	County: Barton			
Closing Agent: X2EHODGS	Tax APN: <u>(10 %-G</u> xx)	2-011 Gross Proceeds: 23	<u>,59</u> 0		
responsibility. In order for us to pro return the form to the Georgia Pow may be subject to a \$50 penalty impou. Part 1 Tax Status Instructions: Check ONE	perly meet the federal law requirements, we er Land Acquisition Agent or to the address sl posed by the Internal Revenue Service. In add box only and provide your complete na	need certain information from you. Plea hown above. If you do not provide us wi lition, you may be subject to 28% backup			
U.S. Resident Individual:	Individual's Name		Individual's Social Security Number		
A sala proprietorchia may bayo a "dai	ng business as" trade name, but the legal name	is the name of the business owner			
U.S. Sole Proprietor:	Business Owner's Name	is the name of the dusiness twiner.	Owner's Social Security Number		
	Business or Trade Name:		Or Employer's Identification Number		
	and the state of t	4 - fab fab			
U.S. Partnership,	ness as" trade name, but the legal name is the lis Name of Partnership/ LLC/	st or the names or the partners.	Employer Identification Number		
Limited Liability Co. (LLC), T or Estate:		orms)			
	Partnership's Legal Name (Name of first partner):				
A corporation may use an abbreviated	name or its initials, but its legal name is the name	ne on the articles of incorporation.			
	U.S. tax purposes, please attach a copy of you U.		essification Election		
U.S. Corporation,	Name of Corporation or Entity		Employer identification Number		
Tax Exempt Org, Federal, St Local Gov't. Agency:	ate or				
Part 2 Exemption 1. Corporation 2. Tax Exempt Charity under 501(a), or IRA 3. The United States or any of its agencies or instrumentalities 4. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions 5. A foreign government or any of its political subdivisions 6. Other Under penalties of perjury, my signature certifies that: 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me). 2. I am not subject to backup withholding because a) I am exempt from backup withholding, or b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or c) the IRS has notified me that I am no longer subject to backup withholding. 3. I am a U.S. person (including a U.S. resident alien). The IRS defines a U.S. person as a) U.S. citizen, b) an entity (company, corporation, trust, partnership, estate, etc.) created or organized in, or under the laws of, the United States; a state; or the District of Columbia, or c) a U.S. resident (someone who has a "green card" or has passed the IRS "substantial-presence test." For an explanation of the substantial-presence test, please see IRS Pub. 515 or 519, available at www.irs.gov.) If you are a foreign person, do not complete this Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).					
<u>Signature</u>	Name (Typed or Printed)	Title			
Date	Home Phone Number	Cell/Work Phone I	Number		
Address	City	State	ZIP		

Payment Request	Form
Owner Name:	City of Cartersville
LIMS Project & Parcel:	2022-060238-07
Agent Name:	Eric Hodgson
Payment Amount: Verified By:	\$ 23,590
Payment Options (Sel	ect one – Check or Zelle)
□ Check	
Payable To:	
Street Addres	\$S:
City, State &	Zip:
Phone No:	(managarana)
E-mail Addre	ss:
□ Zelle Electro	nic Payment (In addition to above items, owner must select one of the following.)
E-mail Addre	SS:
Or U.S. Mobile N	No:
By selecting one of the	above options, I hereby authorize payment by the chosen method.
 By selecting the 	e first option, I understand that a paper check will be processed and delivered by s to me at the street address provided within 2-4 weeks.
text message to the electronic p processed with currently enrolle the provided no	e second option, I understand that a notification message will be sent via e-mail or or my e-mail address or U. S. mobile phone number with instructions for completing ayment process from Bank of America to my bank account. This should be in 2-4 business days. Further, if my e-mail address or U.S. mobile number is not ed with the Zelle payment system, I understand that I am responsible for associating stification method with my bank account by following the instructions in the issage and/or contacting my bank for assistance.
Prior to processing payer Form W-9 to collect info	ments of \$600.00 or more, I also understand that I must complete an IRS-required ormation which Southern Company will report according to law.
Owner's Signature:	·
Date:	