WHEREAS, Section 252.38 (3)(a), Florida Statutes, gives authority to political subdivisions to declare and
enact a State of Local Emergency for a period of up to seven (7) days, thereby waiving the procedures
and formalities otherwise required of the political subdivision by law; and

WHEREAS, on March 1, 2020, the Governor of Florida issued Executive Order Number 20-51 directing
the State Health Officer and Surgeon General to declare a Public Health Emergency due to the discovery
of COVID-19/novel Coronavirus in Florida; and

WHEREAS, on March 9, 2020, the Governor of Florida issued Executive Order number 20-52, declaring a
State of Emergency for the state of Florida related to COVID-19/novel Coronavirus; and

WHEREAS, because COVID-19/novel Coronavirus posed a public health, safety and welfare risk to Taylor
County residents, on March 17, 2020 the Board of County Commissioners declared a local state of
emergency to respond to the threat posed by the COVID-19/novel Coronavirus, and to provide for
emergency measures to respond to the threat of COVID-19/novel Coronavirus remain; and

WHEREAS, responding to the threat posed by COVID-19/novel Coronavirus continues to require
extraordinary and immediate actions by Taylor County in order to protect the public health, safety, and
welfare; and

WHEREAS, section 252.38(3)(a), Florida Statutes and the Taylor County Local State of Emergency
Declaration COVID-19 #1 authorizes the County Administrator to extend the Local State of Emergency.

THEREFORE, as County Administrator of Taylor County, I hereby extend the Declaration of a State of
Local Emergency for an additional period commencing on April 28, 2020, that will continue in effect for
seven (7) days if not cancelled before that period of time.

Taylor County Declaration of Local State of Emergency

Enacted: __________________________
Signed: __________________________
County Administrator

Date: __________________________
Witness: __________________________

Cancelled: __________________________
Signed: __________________________
County Administrator

Date: __________________________
Witness: __________________________