# Environmental Quality

#### State of North Carolina

Department of Environmental Quality
Division of Waste Management &
Division of Environmental Assistance and Customer Service

## Solid Waste and Materials Management Annual Report July 1, 2015 -- June 30, 2016

Please submit this form to Lgteam@ncdenr.gov by September 1, 2016.

On the following pages you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2015-2016. Each North Carolina County and Municipality is required to complete this report annually. Completion and submission of this report will fulfill the annual reporting mandate to the state as required by G.S. 130A-309.09A. Failure to complete and submit this report could result in the local government being excluded from distributions of Solid Waste Disposal Tax Proceeds and other Department of Environmental Quality grants.

#### **Instructions:**

Each local government should determine which staff member is responsible for preparing and submitting the annual report and ensure that the report is completed and submitted before the reporting deadline on September 1, 2016.

Options for obtaining a blank copy of this form:

- 1 download a copy of the form from this web site: <a href="http://deq.nc.gov/about/divisions/waste-management/solid-waste-section/annual-reporting-local-government-solid-waste-facility-reporting">http://deq.nc.gov/about/divisions/waste-management/solid-waste-section/annual-reporting-local-government-solid-waste-facility-reporting</a>
- 2 call the Division of Environmental Assistance and Customer Service at 877-623-6748
- 3 request a copy of the form by sending an email to Lgteam@ncdenr.gov.

This form must be completed electronically using Adobe Reader. Adobe Reader can be downloaded for free at the following web site: <a href="https://get.adobe.com/reader/">https://get.adobe.com/reader/</a> - it is suggested that you complete the form using the latest version of Adobe Reader. Please <a href="DO NOT">DO NOT</a> complete this form using Adobe Acrobat Pro.

Complete the form by entering responses in the appropriate fields using Adobe Reader. Please save a copy of the completed form to your computer for your records by using the "Save As" option and choosing an appropriate file name. When naming the file, please include your community's name as a part of the file name.

After completing the report form, please submit a copy electronically to the Division of Environmental Assistance and Customer Service by attaching it to an email and sending the email to Lgteam@ncdenr.gov

If you need assistance completing or submitting this form, please feel free to contact one of the following Division of Environmental Assistance and Customer Service staff members:

Joseph Fitzpatrick, phone: 919-707-8121, email: joseph.fitzpatrick@ncdenr.gov Rob Taylor, phone: 919-707-8139, email: rob.taylor@ncdenr.gov

Form Year

2016



Local Government

**Required** - Enter Your Local Government Name: Ahoskie

## **State of North Carolina**

Department of Environmental Quality Division of Waste Management & Division of Environmental Assistance and Customer Service

# Solid Waste and Materials Management Annual Report July 1, 2015 -- June 30, 2016

COMPLETION AND SUBMISSION OF THIS REPORT WILL FULFILL THE ANNUAL REPORTING MANDATE TO THE STATE AS REQUIRED BY G.S. 130A-309.09A.

	Pleaso	e submit this form to Lgtea	m@ncdenr.gov by Septembe	r 1, 2016.	
If yo	ou have questions about comple reporting requirement, ple	0 0 1	ll 919-707-8121 or 919-707 or contact your Regional En		-
Persor	Completing This Report: Charles	s Anthony Hammond	Title	e: Town Manager	
Mailir	ng Address: O.O. Box 767		City: Ahoskie		Zip: 27910
Phone	: 252-332-5146	Fax: 252-332-1643		Date: 7/28/16	
Email	: tonyhammond@ahoskie.org				
		Genera	al Instructions		
	remember that the time period for pecific question.	the report is JULY 1, 2015	through JUNE 30, 2016. Ple	ase check "No" if	you have nothing to report
_	Did your local government have a F	Recycling Coordinator or s	imilar position for FY 15-16?	Yes	∑ No
N	Name Recycling Coordinator (if dif	ferent from person comple	ting this report.)		
1	Name:		Title	e: 	
I	Address:		City:	Ž	Zip:
7	Γelephone:	Fax:	Email:		
2. Γ	Did your local government have a S	olid Waste Director or sin	nilar position for FY 15-16?	X Yes	No
I	If Yes, Name: Kiek Rogers	Title	rirector		
I	Address: P.O. Box 767		City: Ahoskie	7	Zip: 27910
7	Геlephone: 252-287-7077	Fax: 252-332-1643	Email: kirkroge	ers@ahoskie.org	
3. I	Did your local government have <b>de</b>	dicated or part-time Solid	d Waste Enforcement Staff for	FY 15-16?	Yes No
I	If Yes, Name:		Title:		
I	Address:		City:		Zip:
7	Геlephone:	Fax:	Email:		
	Did your local government have sol ill that apply)	id waste ordinances in place	ce addressing any of the follow	wing during FY 15	5-16? (if yes, please check
	Disposal Bans Illega	al Dumping Littering	g Other, Please Describe	e:	
	Oid your local government manage nulching, composting)?	provide or contract for an	y solid waste services in FY 1	, 0	ion, disposal, recycling,  No
	If you answer ''No	'' to question 5, the repor	t is complete, please email t	o Lgteam@ncder	nr.gov.

#### Part I. Waste Reduction and Recycling Programs Serving Government Facilities The following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. An example of source reduction at government facilities is duplex or two-sided copying. Did your local government have an in-house / government building recycling program in place for FY 15-16? X Yes No 7. Did your local government have any program or policy encouraging or requiring local agencies to X No purchase products with recycled content? Did your local government have a program in place to collect and recycle spent fluorescent lights X Yes | No generated from public buildings? Part II. Waste Reduction and Recycling Programs Serving the Public SOURCE REDUCTION / REUSE Did your local government have a backyard composting program? Yes X No If yes, please check all backyard composting activities that apply: ☐ Education Demonstration site(s) Bin distribution/sales Number of Bins distributed? Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes X No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives? Did your local government offer a waste exchange or reuse program? Yes X No 13 If yes, please indicate which waste exchange and/or reuse programs were available to the public: Swap shop/shed Number of sheds in use? Paint exchange Number of gallons recovered? Other (e.g. pallet exchange, etc.) PUBLIC RECYCLING SERVICES Which of the following responses best describes your recyclables recovery activities for the period July 1, 2015 through June 30, 2016? My local government **DID operate or contract** for a recyclables recovery program. (please continue to question 15) My local government DID NOT operate or contract for recyclables recovery BUT DID participate in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; then go to Part IV on page 7.) With what local government did you participate? My local government **DID NOT operate**, contract or participate in a recycling program. (Go to Part IV on page 7.) If you **DID** operate or contract for a recyclables recovery program, please indicate the type of program in operation and provide specifics about your program(s). CURBSIDE RECYCLING PROGRAM Did your government operate a Curbside Recycling Program? X Yes No, skip to question # 26 Who collected the recyclable materials for your local government's curbside recycling program? 16.

Other (please specify)

Local government employees

Private contractor (please specify)

Franchised hauler (please specify)

Waste Industries

17.	Please answer the following questions about your community.
	a. Total number of households?  2,341
	b. Number of households served by curbside recycling? 1,926
10	c. Please estimate the <b>number of households</b> that regularly participate in the program? 1,926
18.	If your curbside recycling program is operated through a <u>public franchise to a private company</u> then please answer the following:  Is public participation in the franchise:    Voluntary or   Mandatory   Does your franchise consist of:   One service district or   Multiple service districts
19.	What sector(s) of your community was served by the curbside recycling program?  ☐ Residential ☐ Commercial ☐ Industrial
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served: 2
21.	How frequently were the curbside recyclables collected?  Once a week  Every other week / biweekly
	Other
22.	Please describe the collection containers used:  ☐ Bins ☐ Blue bags ☐ Multi-bin system ☐ Roll-out carts
23.	Please describe the method / style of recyclable materials handling:  curb-sort (collector separates material as collected) single stream / commingled dual / two stream don't know / other
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used:  ☐ less than 50 gallon cart ☐ 65 gallon cart ☐ multiple sizes of cart available
25.	If you use roll-out carts for curbside recycling, please indicate the calendar year you implemented service with carts: 2013
DR	OP-OFF RECYCLING PROGRAM
26.	Did your government operate a Drop-off Recycling Program? Yes No, skip to question # 33
27.	Who collected the recyclable materials for your local government's drop-off recycling program?  Local government employees  Private contractor
	Other (please specify)
28.	Please describe the method / style of recyclable materials handling for your drop-off recycling program:  source-separated (citizens separate materials by type) single stream / commingled dual / two stream (paper separated from cans/bottles) don't know / other
29.	Please estimate the number of households served by your drop-off recycling program.
30.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial
31.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:
32.	How many of these locations were staffed with attendants?
EL	ECTRONICS RECYCLING PROGRAM
	ase answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any erials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.
33.	Did your community operate an electronics recycling program in FY 15-16? Yes No, skip to question # 39
	If you did operate an electronics recycling program, please indicate style of program:
	☐ Permanent - Curbside Collection ☐ Permanent - Drop-off ☐ Scheduled Collection Day or Event ☐ Part of HHW Program
	If you offer curbside collection of electronics is it:  by appointment or  unscheduled
	If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:

34.	Did your electronics recycling program collect or accept televisions from (check all that apply): Residences							
35.	Did your electronics recycling program collect or accept computer equipment from (check all that apply): Residences Businesses							
36.	DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was eligible to receive proceeds from the State Electronics Management Fund in February of 2016, please provide the following information							
	Electronics Management Fund balance as of July 1, 2015: \$							
	Electronics Management Funds received from DENR during FY 15-16: \$							
	Electronics Management Funds spent during FY 15-16: \$							
	Electronics Management Fund balance as of June 30, 2016: \$							
37.	Please explain how Electronics Management Funds were spent during FY 2015-16 (please list items purchased if applicable):							
38.	If you did operate an electronics recycling program, please provide the following information about your vendor / contractor:  Name of electronics recycling vendor(s) during FY 15-16:							
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?							
OT	THER PUBLIC RECYCLING PROGRAMS							
the i	ase answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ycling Tonnages Chart on pg 5.							
39. 40.	Did your local government operate a multifamily recycling collection program that provides on-property recycling service for residents of multifamily properties in a manner other than through your curbside or dropoff recycling programs? Yes No Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner							
	other than through your curbside or dropoff recycling programs?   Yes   No							
41.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders?   Yes   No  On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served:							
	Public drop-off recycling sites available for ABC On Premises Permit holders to use							
42.	Does your local government operate a program to recycle Construction and Demolition materials? Yes No If yes, please check all materials that were recycled and report tonnages in tonnage table on page 5):							
	☐ Clean Wood ☐ Brick, concrete, etc. ☐ Sheetrock ☐ Vinyl siding ☐ Shingles ☐ Metals ☐ Other							
43.	Does your local government have an ordinance regulating the construction and demolition waste stream with the intention of encouraging or requiring waste reduction or recycling of these materials?							
44.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 15-16. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)							
	□ Public Parks Recycling Program     □ Athletic Field / Venue Recycling Program							
	☐ Pedestrian Recycling Program ☐ Recycling Service for Special Events / Festivals							
45.	Please identify all "Other" programs or services operated by your government during FY 15-16. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)							
	□ Public School Recycling Program							
	Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)							
	Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events							
	Organics / Food Waste Recycling other than yard waste program							
	Oyster Shell Recycling Program							
	Other Programs (please specify)							
	Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.							

#### RECYCLING TONNAGES FROM PUBLIC PROGRAMS

- 46. a. Enter data in the table below for ALL recycling programs operated or contracted for by your local government. Provide TONNAGES (or estimates) for each material collected for the period JULY 1, 2015 through JUNE 30, 2016. DO NOT include materials that were not collected or managed by your local government either directly or under contract to a private service provider.
  - b. Do NOT report YARD WASTE, TIRES, HHW, USED OIL, OIL FILTERS, ANTI-FREEZE, BATTERIES or other SPECIAL WASTE tonnages on this page - these items should be reported in other sections of report form. See page 6 for SPECIAL WASTES.
  - c. Please report materials collected in tons only. Please only extend numbers to two decimal places (x.xx).
  - d. If you collected single stream or other commingled materials, record Tons in the "Commingled tons" row and then check the box for

DD CCD AM	Curbside		Drop-off		All "Oth	er'' Programs	<b>Total Tons</b>	
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)	
GLASS:							IOIII)	
Clear								
Brown								
Green								
Mixed								
PLASTIC:								
PET #1								
HDPE #2								
All Plastic Bottles								
Other Plastic Containers								
Bulky Rigid Plastics								
METAL:								
Aluminum Cans								
Steel Cans								
White Goods								
Other Metal								
PAPER:								
Newsprint (ONP)								
Cardboard (OCC)		60.24					60.24	
Magazines (OMG)								
Office Paper								
Mixed / Other Paper								
Cartons / Aseptic Containers								
WOOD:								
Pallets								
Other Wood - DO NOT								
report yard waste tons he								
OTHER MATERIALS:								
Textiles (clothes etc)								
Televisions								
Other Electronics								
C&D Recovery								
Commingled tons-check items collected above	all 🔀	103.64					103.64	
TOTAL TONS:		163.88					163.88	

47. RECYCLING TONNAGE AS A RESULT OF POLICY OR ORDINANCE: complete this section for materials that were recycled as a result of local government ordinances or policies but that were NOT collected or managed directly by your local government recycling program. E.g. a corrugated cardboard disposal ban supported by a reporting mechanism for collecting data on private recycling tonnages.

Material Type	Tons Diverted	Describe the mechanism that caused these materials to be recovered and data collection method

## **Part III. Special Waste Collections**

This section concerns local government programs for managing materials that require special handling or that are banned from landfilling. Please answer the questions and provide data as indicated below considering services provided to the public for recycling. Please do not include materials that were accepted and then disposed of in a landfill. Do not include materials generated exclusively by government operations (e.g. motor-fleet services). If special wastes were only accepted as a part of an Household Hazardous Waste (HHW) Program or HHW event and were not collected by separate recycling efforts then do not record materials in question # 48 but instead report with HHW materials in question #49.

#### Special Waste Collected Separately From HHW Collection Program or Event

8.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		m collect this m the public?	# of sites	Data on quantities Please report		_	1	businesses rticipate?	
U	sed Motor Oil	Yes	⊠ No				gallons		Yes	
U	sed Oil Filters	Yes	⊠ No		Barrels	or	lbs		Yes	
U	sed Antifreeze	Yes	⊠ No			·	gallons		Yes	
В	atteries, Lead Acid	Yes	⊠ No		# batter	ies, or	lbs		Yes	
В	atteries, Dry Cell	Yes	⊠ No			·	lbs		Yes	
F	luorescent Bulbs/Lights Containing Mercury	Yes	⊠ No		lbs,	or	# bulbs		Yes	
P	ropane Tanks	Yes	⊠ No		lbs,	or	# tanks		Yes	
U	sed Cooking Oil / Waste Vegetable Oil	Yes	⊠ No		lbs,	or	gallons		Yes	
O	ther Special Wastes - please provide waste type here:	Yes	⊠ No				lbs		Yes	
	esticide Containers (NCDA Program, not esticides themselves)	Yes	⊠ No		lbs, (	or	# con- tainers		n/a	
	CDA Pesticide Disposal Assistance Program for management of pesticides, not containers)	Yes	⊠ No				lbs		n/a	
	atex Paint (do not include paint collected at HW event or by a paint exchange program)	Yes	⊠ No		gals, or		lbs		Yes	
Iff a. b. c. d. e.	Did your local government operate a household hazardous waste collection program or event in FY 15-16? Yes No If Yes, please respond to the following questions:  a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event b. How many days was your HHW Program open to accept materials during this Fiscal Year?  c. Did you partner or co-sponsor your HHW program with another local government? Yes No Please list partner(s)  d. How many citizens / households participated in your HHW collection program this Fiscal Year?  e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? Yes No If yes, please estimate the amount of business material managed pounds  f. Materials collected by HHW Program: if totals for individual materials are known please indicate below. If individual material totals are not known, please simply provide total quantity of materials collected by HHW program in Total Quantity row below.									
	Used Motor Oil (Gal)									
	Used Antifreeze (gal)					er Batteries (lb	os)			
	Fluorescent Bulbs / Lights Containing Mercury (lbs)									
	Provide Total Quantity of materials collected in 49f, please net materials reported separate								_ pounds	
g	Contractor(s) involved									
h	Estimated cost of HHW / CESQG program of	or event(s) \$								
	3 through 6 should have only been complete					than DO man	ida maan	alina	r compiees	

Pages 3 through 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling services. All governments answering "Yes" to question # 5 on page 1 should complete the rest of the report with the exception of PART VIII which is only to be completed by Counties.

		Part IV	V. Yard Wast	e, Mul	ching and (	Compostin	g Managem	ent	
ипре	rmitted sites an	ed it is illegal t	o burn. Compostin	ng and mi	alching are pop	ular manageme	nt options. Please	landfills, incinerators, or it answer the questions beloverials in this section.	
50. 51. 52.	Does your loca checking all th Did a storm ev What quantitie	al government of at apply: \( \sum \) Cent significantly s of materials v	operate a yard waste collected curbside [ y impact the amoun	e program' Collect t of yard wour yard w	? Yes	No If yes ace center Remarks R	please indicate ho ecceived at yard ward during FY 15-16 action in TONS Q	w yard waste is managed by aste, compost, or LCID facil from Yes No No No CUBIC YARDS of	
	organic mater			Check if				Name and Location of Facility	_
		Destination	' <b>n</b>	used	Tons	Cubic Yards		g Vegetative Materials	_
	End user (to fa	rmer or home-	owner)						
	Your local gov	ernment's mulc	ch or compost facili	ty 🗵		9,360	Ahoskie Yard Waste Sit	te, Old Sewer Plant Site	
	Other public m	ulch or compos	st facility						
	Private mulch	or compost faci	lity						
	Land clearing a	and inert debris	landfill (LCID)						
	Energy / Fuel U	Use (e.g. boiler	fuel market)						
		Total				9360			
	estimate yard v volume manag	vaste volume. ed by program	Calculate for each t in the appropriate b	ruck used oxes abov	in your yard wave. Ex. $10 \text{ yd}^3$	aste managemen	at program, and the $wk \ x \ 16 \ wks = 480$		•
	15cy (3 times )	•	X 4 days per week		X 52	. 1: 11:	= 13440	TOTAL $yd^3$	
	Size of Truc	ck (in yards)	Avg. no. of times tru		aste Collect		5 Jean	TOTAL	
Plea	se answer the fo	ollowing auestic	ons regarding your				•	disposal services.	
53.		~ .		_	•			nd disposal program.	
	Sector				lid Waste Coll	WIIO CO	ollects Solid Waste?	How is Solid Waste Collected?	
	Residential Commercial Industrial		Secondary P	Primary	1 Secondary 1 Secondary 1 Secondary 2 Secondary	b. By Co c. Francl d. Local	ontract hise haulers government not yed in provision of	s 1. Once a week at household 2. Twice a week at household 3. Convenience center/greenbox 4. As needed or by request 5. Daily 6. Other	
~ .									
54.	What type of c What is the sta	ollection methondard collectionical service po	od is used?	Fully Aut Weekly househol	omated S	Semi-Automatednes per week		<u></u>	
	Do you offer b	ulky waste coll	ection services?	X Yes	☐ No				
55.	-		government collect ered to the county for	_		Yes No	No		
		Part	VI. Solid Wa	ste and	d Recycling	g Education	nal Activities	S	
56.	Did <b>your local</b> issues / activiti			_	inform citizens o Part VII, page		ut solid waste man	nagement and / or recycling	
57.	Please estimate	your annual b	udget for solid wast	te related o	education and or	utreach activitie	s: \$		
58.	Does your com	nmunity produc	e recycling education	on and out	treach materials	in languages be	sides English?	Yes No	
	If YES, please	list other langu	ages used:						
59.	Please provide	your recycling	website address and	d public ii	nformation phor	ne number if app	olicable.		
	Website:						Hotline:		

# Part VII. Resources for Solid Waste Management and Full Cost Accounting

	ficient resources availab stions deal with resource				continued success o	f these programs. T	The following				
-	Did your local govern		_		n FY 15-16?	Yes No					
	With regards to funding	-	_		<u>-</u>						
011	☐ Tipping fees	<b>.</b>	Volume/we	eight-based fees (e.g	. PAYT)	Tire tax					
	Property tax	es / general fund	Sale of rec	yclables		White Goods tax					
	Per househo	ld charges	Grants			Disposal Tax					
62.	I .										
	According to GS 105-	187.63 these funds	must be used by a	city of county solely	for solid waste ma	nagement programs	and services.				
	How are disposal tax	distributions being	used?								
63.	If applicable, please p	rovide your FY 15-	16 household fees.	(e.g., a. \$45.00 per	<u>year</u> per <u>househol</u>	<u>d</u> for solid waste)					
	a. \$ 21	ner month	ı	ner containe	er	for solid waste					
	<u> </u>	Per		por		101 50114 ***					
	b. \$	per		per		for recycling					
	c. \$	ner		per		for yard waste					
	С. ф	per		pcr		for yard waste					
	d. \$	per		per		for bulky wast	e				
	o \$	****		***		ovoilobility foo					
				per			; 				
	f. \$ 21	per month	1	per containe	er	total charge					
64.	Did your local govern						ght or volume for				
	the amount of trash dis						8				
Acc	cording to GS 130A-309		<u> </u>	to conduct full cos	t accounting annua	ally and to develon	a system to				
	orm users of such costs.		nents are required	to conduct full cos	t accounting annua	my and to develop	a system to				
			P. 1								
65.	If your local government				eport the annual col	ntract amount.					
	\$		_ For solid waste s	services per year							
	\$		_ For recycling pe	r year							
			OR								
	\$281,335		Combined Contr	act (solid waste, and	l recycling)						
66	Collection Programs:	Plassa complete the	— a following table to	the best of your abil	lity to display the fu	all costs of your loss	al government's				
00.	Collection Programs: Please complete the following table to the best of your ability to display the full costs of your local government's programs for collecting waste, recyclables and yard waste including services at convenience centers. <b>If full cost analysis is not</b>										
	available, please repo	•	•	_							
		# of Households			Disposal Cost	Total Cost	Calculated				
		served	Tons Collected	Collection Cost	(tipping fees paid)	including	Cost Per Ton				
10.0	Innisimal Calid Wastak	1 026	1 676 06	201 225	85,944	overhead 367,279	Managed				
[V]	Iunicipal Solid Waste*	1,926	1,676.96	281,335	03,944	301,219	219				
	Recycling Program**	1,926	163.88								
	Yard Waste Program	1,926	13,440								
	(	Calculated Totals:	15,280.84	281,335	85,944	367,279	24				
	*for materials collected and	sent for eventual dispo	sal in a Municipal Solid	Waste or Construction as	nd Demolition Landfill,	or through incineration					
	**for materials collected by	=	=			-	cial waste services				
67.	If your government op	erates a landfill, tra	ansfer station, yard	waste /compost faci	lity or recycling fac	ility, please provide	total budget for				
	facility operations. If	budgets are combir	ned, please attempt	to allocate costs pro	portionately.						
	Landfill Budget:		\$								
	Transfer Station Budget: \$										
	Yard Waste / Cor	npost Facility Budg	get: \$110,000								
	Recycling Facility		\$								
60			' <del></del>	a all a alid reseate and	ma avvalim a1-t-d						
68.	What is your governm	ent s total combine	u amuan duaget foi	an some waste and	recycling related se	1 vices: \$4/1,2/3					

## **Part VIII. County Mandated Programs**

The following questions pertain to programs mandated by N.C. statute to be provided by each county. Only county governments need to complete this section (questions 69 through 97). Municipalities should skip to Part IX on page 11. Counties - failure to complete Part VIII may result in non-eligibility for grant requests.

WH	ITE GOODS						
69.	Give name, address, phone number, and Name:	•	Title:				
	Address:		City:		Zip:		
	Telephone: Fa	nx:		Email:			
70.	Please provide the physical address of the Street 1:		_				
	Street 2:						
	City:				Zip:		
71.	Please provide the name of the business Name:	or person that remo	ves the refriger	ant gases (CFCs) fr	om white goods.		
	Street:						
	City:			North Carolina			
	Phone: Fax:		Email	:			
72.	Give amounts / types of CFCs removed.				tion of person(s) perfor		
	Type of CFC Ren	noved			Amount		
73.	CFCs may be recycled or sent for destruc	ction. Give name of					
	Firm		Method o	f Disposal	Amount Earned	Amount Spent	
74	Tonnage of White Goods Collected (inc.	luda caran matal):					
74.		· -					
75.	List the amount of revenue for the white						
	Revenue collected from sale of scrap:	\$ Distributions (					
	Revenue collected from White Goods Ta						
	Revenue from other source (e.g. grants):						
	Total Revenue:	\$					
76.	According to the White Goods Law, Wheexpenditures White Good Tax Distribution					mounts and types of	
	Operational Expenses:	\$					
	Capital Improvements:	\$					
	Clean-up of Illegal White Goods Dumps	s: \$					
	Total Expenditures:						

SC	KAP TIKES						
77.	Give name, address, phone number, and e-mail of per Name:	-					
	Address:				Zip:		
	Telephone: Fax:						
78.	Please provide the physical address of the primary co Street 1:	unty scrap tire	es collection sit	e.			
	Street 2:						
	City:		State: North	n Carolina	Zip:		
79.	Tonnage/Number of scrap tires disposed July 1, 2015  Tons or	-June 30, 201	6 (excluding ti				
80.	Tonnage/Number of scrap tires disposed from cleanu Tons or		ounty designate	ed nuisance sites Number of tires			
81.	Indicate the types of tires collected by the county: Passenger % Heavy Tru	ıck	%	Large Off-Road	%		
82.	List the amount of revenue for the scrap tire program	•					
	Revenue from Scrap Tire Tax Distributions:						
	Revenue from Tire Fees:						
	Revenue from Scrap Tire Clean-up Reimbursements:	\$					
	Revenue from Scrap Tire Cost-Overrun Grants:	\$					
	Total Revenue:	\$					
83.	County's total scrap tire program contract expenditure excluding costs of nuisance tire cleanups, for FY 15-	e (contract dis 16.	posal/hauling c	costs), \$			
84.	County's additional scrap tire program expenditure (i. Labor \$		enience center	cost), if any.			
	Site Cost \$						
	Other \$	des	scribe Other: _				
85.	County's contract cost for scrap tire disposal. \$	/	Ton; \$	/ Tire			
86.	Hauling cost or fuel surcharge, if not included in con	tract cost abo	ve. \$	/ Ton; \$	/ Tire		
87.	Total tipping fees collected for tires not eligible for fa	ree disposal. \$					
88.	Total number of tires collected not eligible for free d						
89.	If scrap tires were not hauled off site by contracted se	rvice provide	r, were they cu	t and disposed in a loc	eal landfill? Yes No		
90.	Name of tire disposal/recycling firm(s):						
TE	MPORARY DISASTER DEBRIS STAGIN						
91.	Does your local government have a plan in place for	management o	of disaster debr	is? Yes	No		
	If yes, indicate if the plan is a stand-alone plan or in c	conjunction wi	th local govern	nment agencies:	Stand-alone In conjunction		
92.	If you indicated having a plan, has the plan been revier requirements for public assistance reimbursement in a			anagement or FEMA t	to ensure it meets the basic No		
93.	Please list the name, contact numbers(s), and e-mail a	address of the	person(s) in ch	arge of the disaster de	ebris management program for		
	your local government:  Name: Name	nme: Name:					
		•		<del></del>			
	E-mail: E-mai						

94.	Natural Heritage Program		ion Office (SHPO) through co	ordination with the Solid Waste Section
	resources after a disaster may co	site prior to a disaster is advantageous to local gouse difficulty for local governments when attemp	ting to obtain FEMA reimbursement.	Attach extra sheets, if needed.
	Disaster Site #	Site Name	Disaster Site #	Site Name
95.	Does your plan address the	e management of household hazardous	waste and white goods follow	ing a disaster? Yes No
96.	Does your plan address ma		] No	
MA	NAGEMENT OF AB	BANDONED MANUFACTURI	ED HOMES	
97.	Has your county considered	ed whether to implement a program for	the management of abandoned	d manufactured homes? Yes No
	If yes, has your county dev	veloped a written plan for the managem	nent of abandoned manufacture	ed homes? Yes No
		Part IX.	Comments	
				your comments about this report or other
	0 0	anagement in North Carolina. Thank y	•	
_		from Waste Industries staff.	ed from residential customers (	only and is part of the normal collection
Their Prim	re are two schools on the co nary School, They collect on	*	ing services. These schools are nmingled with other customers	e Ahoskie Elementary and Barefoot
Road incre rease	d, Ahoskie, NC 27910 at the eased this year over last year on is that there was an error	e South end of Rhue Street. GPS Coordur due to two factors. The first one is an	ordinates: GPS N36.27327 E expansion of an additional 4 a the previous year. In the last the	aste Site located on the Old Sewer Plant 76.99193. The yard waste numbers have acres at the current location. The second fiscal year the town used 26 weeks as its ll 52 weeks as its collection period.
_	stion # 66: Full Cost Accourmation to fill in this part of	nting Information for Yard-wastes: Th the table.	ne town could not provide colle	ection cost information or total cost
**A	ll notes shown above were	discussed with Tony Hammond in a ph	one call on August 18, 2016. (	(David Hance)
		itted electronically. If you require as Joseph Fitzpatrick, email: joseph.fitzpa Rob Taylor, email: rob.taylor@1	trick@ncdenr.gov phone 919	-707-8121
The 1	Division of Environmental	Assistance and Customer Service Loca	• •	

can. Please visit our Web site at <a href="https://deq.nc.gov/conservation/recycling/local-government-recycling-assistance">https://deq.nc.gov/conservation/recycling/local-government-recycling-assistance</a> or e-mail us at

Lg team@ncdenr.gov