

### 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, 2017 -- June 30, 2018

Please submit this form to Lgteam@ncdenr.gov by September 1, 2018.

On the following pages you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2017-2018. 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, 2018.

Options for obtaining a blank copy of this form:

- $1-download\ a\ copy\ of\ the\ form\ from\ this\ web\ site:\ \underline{http://deq.nc.gov/about/divisions/waste-management/solid-waste-section/annual-reporting}$
- 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 the report file to an 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:

Wendy Worley, phone: 919-707-8136, email: wendy.worley@ncdenr.gov Matt James, phone: 919-707-8133, email: matt.james@ncdenr.gov

Form Year

2018



Local Government Report Form

Required - Enter Your Local Government Name:	
Burgaw	

## **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, 2017 -- June 30, 2018

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

		Please submit this form to	Lgteam@ncdenr.gov by <b>Se</b> p	otember 1, 2018.					
	If you have quest	ions or need assistance com	pleting this form, please o	call 919-707-8130	6 or 919-707-8133.				
Per	son Completing This Report	: Robert Alan Moore		Title: Public W	Vorks Director				
Ma	iling Address: 109 N Walker	St.	City: Burgaw		Zip: 28425				
Pho	one: 910-259-2901	Fax:		Date: 8/7/	/2018				
Em	ail: rmoore@townofburgaw.	com							
		G	eneral Instructions						
	ase remember that the time p a specific question.	eriod for the report is JULY 1,	2017 through JUNE 30, 20	18. Please check "	No" if you have nothing to report				
1.	Did your local governmen	No No							
	Name Recycling Coordinator (if different from person completing this report.)								
	Name:			Title:					
	Address:		City:		Zip:				
	Telephone:	Fax:	Email:						
2.	Did your local governmen	t have a Solid Waste Director of	or similar position for FY 17	7-18? Yes	⊠ No				
	If Yes, Name:			Title:					
	Address:		City:		Zip:				
	Telephone:	Fax:	Email:						
3.	Did your local governmen	t have <b>dedicated or part-time</b>	Solid Waste Enforcement S	Staff for FY 17-18?	Yes No				
	If Yes, Name:			Title:					
	Address:		City:		Zip:				
	Telephone:	Fax:	Email:						
4.	Did your local governmen all that apply)	t have solid waste ordinances is	n place addressing any of th	e following during	FY 17-18? (if yes, please check				
	Disposal Bans	Illegal Dumping Lit	tering Other, Please I	Describe:					
5.	Did your local governmen mulching, composting)?	t manage, provide or contract f	or any solid waste services i	in FY 17-18 (e.g., o	collection, disposal, recycling,  No				
	If you ansi	wer "No" to question 5, the i	report is complete, please o	email to Lgteam@	ncdenr.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. Did your local government have a recycling program in place for collecting recyclable materials generated at X No public buildings in FY 17-18? 7. Did your local government have any program or policy encouraging or requiring local agencies to 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 the public buildings and facilities that were operated by your government in FY 17-18? 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 you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public: Paint exchange Number of gallons recovered? Swap shop/shed Number of sheds in use? 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, 2017 through June 30, 2018? 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 which 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 your local government **DID** operate or contract for a recyclables recovery program, please indicate in the following sections 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 # 25 Who collected the recyclable materials for your local government's curbside recycling program? 16. Local government employees Private contractor (please specify) Waste Industries Franchised hauler (please specify) Other (please specify)

	a. Total number of households in your jurisdiction? 1,136							
	b. Number of households eligible to participate in the curbside recycling program: 1,136							
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 1,072							
18.	If your curbside recycling program is operated through a <u>public franchise granted to a private company</u> then please answer the following:  Is public participation in the franchise:  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: 127							
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)							
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							
DR	OP-OFF RECYCLING PROGRAM							
25.	Did your government operate a Drop-off Recycling Program?  Yes  No, skip to question # 32							
26.	Who collected the recyclable materials for your local government's drop-off recycling program?  Local government employees  Private contractor							
	Other (please specify)							
27.	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							
28.	Please estimate the number of households served by your drop-off recycling program.							
29.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial							
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:							
31.	How many of these locations were staffed with attendants?							
EL]	ECTRONICS RECYCLING PROGRAM							
Plea	se 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.							
32.								
	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:							

33.	Did your electronics recycling program collect or accept televisions from (check all that apply):   Residences   Businesses							
34.	Did your electronics recycling program collect or accept computer equipment from (check all that apply):   Residences  Businesses							
35.	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 2018, please provide the following information							
	Electronics Management Fund balance as of July 1, 2017: \$							
	Electronics Management Funds received from DEQ during FY 17-18 (Feb 2018 distribution): \$							
	Electronics Management Funds spent during FY 17-18: \$							
	Electronics Management Fund balance as of June 30, 2018: \$							
36.	Briefly explain how Electronics Management Funds were spent during FY 2017-18 (please list items purchased if applicable):							
37.	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 17-18:							
	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 <u>local government</u> . 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.							
38. 39.	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? $\  \  \  \  \  \  \  \  \  \  \  \  \ $							
	other than through your curbside or dropoff recycling programs? Yes No							
40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes 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							
41.	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							
42.	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?							
43.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 17-18. (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							
44.	Please identify all "Other" programs or services operated by your government during FY 17-18. (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

- 45. 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, 2017 through JUNE 30, 2018. 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 each individual material type that was commingled

DD OCD AND	Curbside			Drop-off	All "C	Other" Programs	<b>Total Tons</b>
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear							
Brown							
Green							
Mixed							
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:	<del></del>						
Aluminum Cans							
Steel Cans							
White Goods						145	145
Other Metal							
PAPER:							
Newsprint (ONP)							
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper							
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:				1			
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled tons-check al items collected above		190.22					190.22
TOTAL TONS:		190.22				145	335.22

46. 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 provide responses and data as indicated below considering services provided to the public. Please do not include data on materials that were accepted and then disposed of in a landfill. Do not include materials generated exclusively by government operations (e.g. motorfleet services). Question 47 is about materials accepted outside of any Household Hazardous Waste (HHW) Program or event. If special wastes were only accepted as a part of an HHW Program or HHW event and were not collected by separate recycling efforts then do not record materials in question #47 but instead report with HHW materials in question #48.

Special Waste Collections (Do Not Include Materials Collected as part of an HHW Collection Program or Event)

47. Special Waste Programs for Materials from Citizens by	0		n collect this m the public?	# of sites			ected / manage licated units.	ed.
Used Motor Oil		Yes	⊠ No				gallons	s
Used Oil Filters		Yes	⊠ No		barr	rels, or	<u>'</u>	lbs
Used Antifreeze		Yes	⊠ No			<u>'</u>	ga	allons
Batteries, Lead Acid		Yes	⊠ No		# 1	oatteries, o	r	lbs
Batteries, Dry Cell		Yes	⊠ No					lbs
Fluorescent Bulbs/Lights Conta	aining Mercury	Yes	⊠ No			lbs, or	# b	ulbs
Propane Tanks		Yes	⊠ No			lbs, or	# 1	tanks
Used Cooking Oil / Waste Veg	getable Oil	Yes	⊠ No			lbs, or	ga	allons
Other Special Wastes - please p type here:	provide waste	Yes	⊠ No				·	lbs
Pesticide Containers (NCDA P pesticides themselves)	rogram, not	Yes	⊠ No			lbs, or		con- ainers
NCDA Pesticide Disposal Assi (for management of pesticides,	_	Yes	⊠ No					lbs
Latex Paint (do not include pai HHW event or by a paint excha		Yes	⊠ No			gals, or		lbs
<ul> <li>a. Was HHW collected at a pe</li> <li>b. How many days was your F</li> <li>c. Did you partner or co-sponse Please list partner(s)</li> <li>d. Provide number of citizens</li> </ul>	d. Provide number of citizens / households that 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							
<ul> <li>f. Amounts of individual materials is about individual materials is Note, materials listed here s</li> </ul>	s not available, plandshould only be the	lease simply pose collected	provide total c at an HHW P	quantity rogram a	of materials co	llected by linclude ma	HHW progran	n in 48g below.
Used Motor Oil (ga								
Used Antifreeze (ga						Other Batte	eries (lbs)	
Fluorescent Bulbs /			-		_			
<ul><li>g. Provide Total Quantity of n reported in 48f, please net the</li><li>h. Please list HHW Collection</li></ul>	he weight of thos	e materials o	ut of the total	listed he	re.			pound
i. Estimated cost of HHW / C								
Pages 3 through 6 should have on						hat thev D	O provide red	cycling 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. Yard Waste	, Mul	ching and (	Composting	g Management
ипре	ermitted sites an	d it is illegal to burn. Composting	and mi	ılching are popi	ular manageme	sed in sanitary landfills, incinerators, or in nt options. Please answer the questions below on-vegetative materials in this section.
49. 50. 51.	checking all the Did a storm even What quantities	ent significantly impact the amount s of materials were managed by you	Collect of yard v	ted at convenien waste your gove raste program?	ce center Rernment manage	nation in TONS OR CUBIC YARDS of
	organic mater	ial (yard waste, brush, limbs, leav	1	1	conversion purp	·
		Destination	Check if used	Tons	Cubic Yards	Please Provide Name and Location of Facility Receiving Vegetative Materials
	`	rmer or home-owner)				
		ernment's mulch or compost facility			5,148	Burgaw Yard Debris Site
		ulch or compost facility				
	Private mulch	or compost facility				
	Land clearing a	and inert debris landfill (LCID)				
	Energy / Fuel U	Use (e.g. boiler fuel market)				
		Total			5148	
	estimate yard v	waste volume. Calculate for each trued by program in the appropriate bo	ick used	in your yard wave. Ex. $10 \text{ yd}^3$	aste managemen	ou may use this formula below to help you at program, and then enter the grand total $vk \times 16 \ wks = 480 \ yd^3$
		X		X		$\underline{} = \underline{} yd^3$
	Size of Truc					
TI.				Vaste Colle		
1 nis 52.		s your local government's provision to the following table about your government.				
<i>32</i> .	Sector	Who Collects Solid Waste?			ootod2	bllects Solid Waste? How is Solid Waste Collected?
	Residential	9		- see codes at ri	a. Local b. By Co	government employees 1. Once a week at household
	Commercial Industrial	o d	mary mary	1 Secondary 1 Secondary	d. Local	government not 4. As needed or by request 5. Daily
52			C1	1 1 1. 1		
53.	What type of co	ollection method is used?	g-rannry Tully Aut Veekly	omated 🔀 S	our jurisdiction, Semi-Automated ies per week	please answer the following questions:  I Don't know  Other
	What is the typ	pical service point for single family h	nousehol	ld waste?	Curbside	Back yard / Back door
	What type of c	ollection container is used?	overnm	_		ent-provided container Bags
			₹ Yes	No		
54.	For municipali	ties - did your government collect w te goods delivered to the county for	_		∑ Yes	No
		Part VI. Solid Was	te and			nal Activities
55.	Did <b>your local</b> issues / activities	government have an education pro	gram to	•	specifically abo	out solid waste management and / or recycling
56.	Please estimate	e your annual budget for solid waste	•			s: \$
57.		munity produce recycling education				
	·	list other languages used:				
58.	_	your recycling website address and	public ii	nformation phor	ne number if app	olicable.
	Website:					Phone #:

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

00			ole to solid waste mo of your community	0 1 0			continued success of ent programs.	these programs. T	The following
59.	59. Did your local government operate an Enterprise Fund for solid waste services in FY 17-18?  [A Yes of the services of the						<u> </u>		
61.	NC Soli	d Waste Dispos	sal Tax proceeds are	e distributed to elig			nts on a quarterly ba for solid waste mana	sis by the Departm	
		•	istributions being u						
62.							<u>year</u> per <u>household j</u> old		
							old		
							ove		
							ove		
	d. \$ _		per		per	incl. abo	ove	for bulky wast	e
	e.\$_		per		per			availability fee	<u>;</u>
							old		
63.	Did you	r local governn		As-You-Throw prog	gram for re	sidential	garbage during FY		where residents
		o GS 130A-309 s of such costs.		ments are required	to conduc	t full cos	t accounting annual	lly and to develop	a system to
64.	If your l	ocal governme	nt contracts for soli	d waste or recycling	g services,	please re	port the annual contr	ract amount.	
	\$	_		For solid waste s	services per	r year			
	\$			For recycling per	r year				
				OR					
	\$24	44,050		_ Combined Contr	ract (solid v	waste, and	d recycling)		
65.	collection	on programs for		and yard waste inc	luding mat	•	ty to display the full lected from conveni-	•	•
			# of Households served	Tons Collected	Collection	on Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
M	Iunicipal	Solid Waste*	1,136	1,003.4				209,185	200
	Recyclin	ng Program**	1,263	168.26				34,865	20
	Yard W	aste Program	1,263	1,029.6		61,730	47,700	109,430	100
			(calculated by form):	2,201.26		61,730		353,480	160
66.	**for m	aterials collected by government ope operations (roun	erates a landfill, trar	ams including those servansfer station, yard w  1. If budgets for dif	vices offered t vaste /comp ferent faci	o commerc post facili lities are	nd Demolition Landfill. ial and industrial generate ity or recycling facil combined, please att	ity, please provide empt to allocate co	total budget for
		Tran	sfer Station Budget	: \$					-
		Yard	Waste / Compost F	Facility Budget: \$					
		Recy	cling Facility Budg	get: \$					
67.	What wa	as your governi	ment's total combine	ed annual budget fo	or all solid	waste and	d recycling services	in 17-18? \$ <u>244,050</u>	)

## **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 68 through 96). 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					
68. Please provide name, address, phone number, and e-mail of person responsible for white goods program.						
	Name:			Title:		
	Address:	City	/:		Zip:	
	Telephone: Fax:			Email:		
69.	Please provide the physical address of the primary	county white good	s colle	ction site.		
	Street 1:					
	Street 2:					
	City:				Zip:	
70.	Please provide the name of the business or person to Name:			ant gases (CFCs) from	m white goods.	
	Street:					
	City:	S	State:	North Carolina	Zip:	
	Phone: Fax:					
71.	Give amounts / types of CFCs removed. Attach rec	cords of CFC remov	val, an	d copy of certification	on of person(s) perfor	ming extraction.
	Type of CFC Removed				Amount	
72.	CFCs may be recycled or sent for destruction. Give	e name of firm, disp	posal 1	nethod and amount	earned / spent for CFO	C disposal.
	Firm	Metl	hod of	Disposal	<b>Amount Earned</b>	<b>Amount Spent</b>
73.	Please report the tonnage of white goods collected white goods tonnage reported on page 5? $\qquad$ Yes	•	8 in the	e Recycling Tonnage	es table on page 5 (qu	estion # 45). Was
74.	List the amount of revenue for the white goods pro	gram by source:				
	Revenue collected from sale of scrap:	\$				
	Revenue collected from White Goods Tax Distribu	utions: \$				
	Revenue from other source (e.g. grants):	\$				
	Total Revenue:	\$				
75.	According to the White Goods Law, White Good of expenditures White Good Tax Distributions were used to the Cook of					mounts and types of
	Operational Expenses: \$					
	Capital Improvements: \$					
	Clean-up of Illegal White Goods Dumps: \$					
	Total Expenditures: \$					

Name:	<b>SC</b> .	RAP TIRES				
Address:    City:    Zip:    Telephone:    Farx:    Farail:    Telephone:    Farx:    Farail:    Telephone:    Farx:    Farail:    Telephone:    Street  :    State:    North Carolina    Zip:    Telephone:    Tonnage/Number of scrap tires disposed from cleanup of a tate or county designated antisance sites    Tons or    Number of tires    Number of tire disposal:    Number of tires    Number of tires    Number	76.	•	-	•		
Telephone: Fax:   Email:    77. Please provide the physical address of the primary county scrap tires collection site.    Street 1:   Street 2:   State:   State:   State:   Street 2:   State:   Street 3:   Street 3:   Street 3:   Street 3:   State:   Stat						Zip:
Street 1:  Street 2:  City:  State: North Carolina  Zip:  78. Tonnage/Number of scrap tires disposed July 1, 2017-June 30, 2018 (excluding tires from cleamp of nuisance sites)  Tons or  Number of tires  79. Tonnage/Number of scrap tires disposed from cleamp of state or county designated misance sites  79. Tonnage/Number of scrap tires disposed from cleamp of state or county designated misance sites  80. Indicate the types of tires collected by the county:  Passenger  Wheavy Truck  List the amount of revenue for the scrap tire program by source:  Revenue from Scrap Tire Tax Distributions:  Revenue from Scrap Tire Tax Distributions:  Revenue from Scrap Tire Clean-up Reimbursements:  Revenue from Scrap Tire Clean-up Reimbursements:  Revenue from Scrap Tire Clost-Overrun Grants:  Total Revenue:  S  County's total scrap tire program contract expenditure (contract disposal/hauling costs),  Scratchiding costs of nuisance tire cleanups, for FY 17-18.  83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any.  Labor  Site Cost  Other  describe Other:  44. County's contract cost for scrap tire disposal.  5 / Tor; \$ / Tire  85. Hauling cost or fuel surcharge, if not included in contract cost above. \$ / Tor; \$ / Tire  86. Total tipping fees collected for fires not eligible for free disposal.  87. Total number of tires collected not eligible for free disposal.  88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill?   Yes   No  Name of tire disposal/recycling firm(s):  TEMPORARY DISASTER DEBRIS STAGING SITES  90. Does your local government have a plan in place for management of disaster debris?   Yes   No  If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies:   Stand-alone   In conjunction your local governments to public assistance reimbursement in a declared disaster event?  91. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management				Emai	1:	
Street 2: City: State: North Carolina	77.	Please provide the physical address of the primar	y county scrap ti	res collection sit	e.	
City: State: North Carolina Zip:  78. Tonnage/Number of scrap tires disposed July 1, 2017-June 30, 2018 (excluding tires from cleanup of nuisance sites)  Number of tires  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites  Number of tires  80. Indicate the types of tires collected by the county;  Passenger		Street 1:				
78. Tonnage/Number of scrap tires disposed July 1, 2017-June 30, 2018 (excluding tires from cleanup of nuisance sites)  Tons or Number of tires  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites  Tons or Number of tires  80. Indicate the types of tires collected by the county:  Passenger						
Tons or Number of tires  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites   Tons or Number of tires  80. Indicate the types of tires collected by the county:     Passenger		City:		State: North	n Carolina	Zip:
Tons or   Number of tires	78.		2017-June 30, 20 as <b>or</b>	18 ( <u>excluding</u> tin	res from cleanup of nu _Number of tires	isance sites)
Passenger	79.	• • • • • • • • • • • • • • • • • • • •		county designate		
Revenue from Scrap Tire Tax Distributions:  Revenue from Tire Fees:  Revenue from Scrap Tire Clean-up Reimbursements:  Revenue from Scrap Tire Clean-up Reimbursements:  Revenue from Scrap Tire Cost-Overrun Grants:  Secounty's total Scrap tire program contract expenditure (contract disposal/hauling costs), seculuding costs of nuisance tire cleanups, for FY 17-18.  Solution Secounty's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any. Labor Secounty's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any. Labor Secounty's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any. Labor Secounty's additional scrap tire disposal. Secounty's additional scrap tire disposal. Secounty's contract cost for scrap tire disposal. Secounty's contract cost above. Secounty from the second disposed in a local landfill? Secounty from the second disposal free disposal. Second free disposal second disposed in a local landfill? Second for disposal/recycling firm(s):  TEMPORARY DISASTER DEBRIS STAGING SITES  Does your local government have a plan in place for management of disaster debris? Second in a local landfill? Second in Inconjunction with local government agencies: Stand-alone In conjunction If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Second in charge of the disaster debris management program for your local government:  Name: DRC-Tony Swain Name: Name:  Phone: S88-721-4DRC Phone: Phone:	80.	Indicate the types of tires collected by the county Passenger % Heavy		%	Large Off-Road	%
Revenue from Tire Fees: \$   Revenue from Scrap Tire Clean-up Reimbursements: \$   Revenue from Scrap Tire Cost-Overrun Grants: \$   Revenue from Scrap Tire Cost-Overrun Grants: \$   Total Revenue: \$   Revenue from Scrap Tire Cost-Overrun Grants: \$   Total Revenue: \$   S   Revenue from Scrap Tire Cost-Overrun Grants: \$   S   S   S   S   S   S   S   S   S	81.	1 1 0	•			
Revenue from Scrap Tire Clean-up Reimbursements: \$ Revenue from Scrap Tire Cost-Overrun Grants: \$ Total Revenue: \$ Scounty's total scrap tire program contract expenditure (contract disposal/hauling costs), \$ excluding costs of nuisance tire cleanups, for FY 17-18.  83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any. Labor \$ Site Cost \$ Other \$ describe Other:  84. County's contract cost for scrap tire disposal. \$ If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill? Yes No  89. Name of tire disposal/recycling firm(s):    Temporary Disastra Debris Staging of the person of disaster debris? Yes No   If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Yes No   Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:   Name:   DRC-Tony Swain   Name:   Name:     Phone:   Phone:   Phone:		•				
Revenue from Scrap Tire Cost-Overrun Grants: \$ Total Revenue: \$  Total Revenue: \$  Seconty's total scrap tire program contract expenditure (contract disposal/hauling costs), \$ excluding costs of nuisance tire cleanups, for FY 17-18.  Sounty's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any.  Labor \$ Site Cost \$ Other \$ County's contract cost for scrap tire disposal. \$ Total vipping fees collected for tires not eligible for free disposal. \$ Total tipping fees collected not eligible for free disposal. \$  Total number of tires collected not eligible for free disposal. \$  Name of tire disposal/recycling firm(s):  TEMPORARY DISASTER DEBRIS STAGING SITES  90. Does your local government have a plan in place for management of disaster debris? Yes No If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies: Stand-alone In conjunction  11. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Yes No  Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:  Name: DRC-Tony Swain Name: Name:  Phone: 888-721-4DRC Phone: Phone:						
82. County's total scrap tire program contract expenditure (contract disposal/hauling costs),  excluding costs of nuisance tire cleanups, for FY 17-18.  83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any.  Labor \$ Site Cost \$ Other \$ describe Other:  84. County's contract cost for scrap tire disposal. \$ Hauling cost or fuel surcharge, if not included in contract cost above. \$ / Ton; \$ / Tire  85. Hauling cost or fuel surcharge, if not included in contract cost above. \$ / Ton; \$ / Ton; \$ / Tore  86. Total tipping fees collected for tires not eligible for free disposal. \$ // Total number of tires collected not eligible for free disposal. \$ // Total number of tires collected not eligible for free disposal. \$ // Total number of tires swere not hauled off site by contracted service provider, were they cut and disposed in a local landfill? Yes No  // Yes No  // Yes No  If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies: Stand-alone In conjunction  // If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Yes No  Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:  Name: DRC-Tony Swain Name: Name:  Name: Phone:  Phone:  Phone:			ents: \$			
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Labor \$ Site Cost \$ Other \$ describe Other:  84. County's contract cost for scrap tire disposal. \$	82.	County's total scrap tire program contract expend excluding costs of nuisance tire cleanups, for FY	iture (contract di 17-18.	sposal/hauling c	costs), \$	
Other   \$   describe Other:	83.	T -1		venience center	cost), if any.	
84. County's contract cost for scrap tire disposal. \$/Ton; \$/Tire  85. Hauling cost or fuel surcharge, if not included in contract cost above. \$/Ton; \$/Tire  86. Total tipping fees collected for tires not eligible for free disposal. \$  87. Total number of tires collected not eligible for free disposal:  88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill?YesNo  89. Name of tire disposal/recycling firm(s):    TEMPORARY DISASTER DEBRIS STAGING SITES     90. Does your local government have a plan in place for management of disaster debris? Yes No  89. If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies: Stand-alone In conjunction  91. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Yes No  92. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:  Name: Name:		Site Cost \$				
85. Hauling cost or fuel surcharge, if not included in contract cost above. \$/ Ton; \$/ Tire  86. Total tipping fees collected for tires not eligible for free disposal. \$		Other \$	d	escribe Other: _		
86. Total tipping fees collected for tires not eligible for free disposal. \$  87. Total number of tires collected not eligible for free disposal:  88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill? Yes No  89. Name of tire disposal/recycling firm(s):    TEMPORARY DISASTER DEBRIS STAGING SITES	84.	County's contract cost for scrap tire disposal. \$ _		/ Ton; \$	/ Tire	
87. Total number of tires collected not eligible for free disposal:  88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill?  Yes  No  89. Name of tire disposal/recycling firm(s):    TEMPORARY DISASTER DEBRIS STAGING SITES	85.	Hauling cost or fuel surcharge, if not included in	contract cost ab	ove. \$	/ Ton; \$	/ Tire
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TEMPORARY DISASTER DEBRIS STAGING SITES  90. Does your local government have a plan in place for management of disaster debris?  Yes  No  If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies:  Stand-alone  In conjunction  91. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event?  Yes  No  92. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:  Name:  DRC-Tony Swain  Name:  Name:  Phone: 888-721-4DRC  Phone:  Phone:	88.	If scrap tires were not hauled off site by contracted	ed service provid	er, were they cu	t and disposed in a loc	al landfill? Yes No
90. Does your local government have a plan in place for management of disaster debris?    Yes    No  If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies:    Stand-alone    In conjunction  91. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event?    Yes    No  92. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:  Name:    Name:    Name:    Phone:    Phone:    Phone:    Phone:    Phone:    No	89.	Name of tire disposal/recycling firm(s):				
If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies:   Stand-alone  In conjunction  In you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event?   Yes   No  Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:  Name:   DRC-Tony Swain   Name:   Name:   Phone:   Phone:   Phone:   Phone:   Phone:   Name:   Phone:   Name:   Phone:   Name:   Name:   Name:   Phone:   Name:   Nam	TE	MPORARY DISASTER DEBRIS STAC	GING SITES			
91. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Yes No  92. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:  Name: DRC-Tony Swain Name:  Phone: Phone: Phone:	90.		_			No
requirements for public assistance reimbursement in a declared disaster event?			·	•	•	
your local government: Name: DRC-Tony Swain Name: Name: Name: Phone: 888-721-4DRC Phone: Phone:	91.					
Name:DRC-Tony SwainName:Name:Phone:888-721-4DRCPhone:Phone:	92.		ail address of the	e person(s) in ch	arge of the disaster de	bris management program for
Phone: 888-721-4DRC Phone: Phone:		•	ame:		Name:	
		Phone: 888-721-4DRC Pl				

93.	Please list the temporary disaster debris staging sites in your county or municipality which have been reviewed for conflicts of Natural Heritage Program (NHP) and the State Historic Preservation Office (SHPO) through coordination with the Solid Was Please note that the vetting of a site prior to a disaster is advantageous to local governments because a staging site which is found to have impacted federal resources after a disaster may cause difficulty for local governments when attempting to obtain FEMA reimbursement. Attach extra sheets, if needed.							
	Disaster Site #	Site Name	7	Disaster Site #	Site Name			
					2000 0 100000			
94.	Does your plan address the	e management of household hazard	dous waste	and white goods follows	ing a disaster? Yes No			
95.	Does your plan address ma	ass animal mortality? Yes	☐ No					
MA	NAGEMENT OF AB	ANDONED MANUFACTI	URED H	OMES BY COUN	TIES			
96.	Has your county considere	d whether to implement a program	n for the m	anagement of abandoned	I manufactured homes? Yes No			
	If yes, has your county dev	veloped a written plan for the mana	agement of	abandoned manufacture	ed homes? Yes No			
		Part I	X. Com	ments				
		• • •	•		your comments about this report or other			
		anagement in North Carolina. Tha	•	•				
Cart	-Container. (historical infor	mation from town -dh). This year's	s tonnage i		de Program in a 30 cubic yard Roll Off a decimal place mistake in it that should			
nave	e been 117 tons. (email disci	ussions with town staff - 8-16-2018	8-an)					
_	stion # 45: OCC Tons separ ussion with the town staff 8		separate co	mmercial cardboard coll	lected during this fiscal year (email			
	This form is to be submi	tted electronically. If you requir	re assistan	ce, please contact one o	of these NC DEACS staff members:			

Matt James, email: matt.james@ncdenr.gov phone 919-707-8133 Wendy Worley, email: wendy.worley@ncdenr.gov phone: 919-707-8136

The Division of Environmental Assistance and Customer Service Local Government Assistance Team is ready to assist you in any way we 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-assistance</a> or e-mail us at Lgteam@ncdenr.gov

