

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, 2018 - June 30, 2019

Submit this form to Lgteam@ncdenr.gov by September 1, 2019.

On the following pages, you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2018-2019. 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

You can download a blank copy of this form from this web site: http://deq.nc.gov/about/divisions/waste-management/solidwaste-section/annual-reporting

This form must be completed electronically using Adobe Reader. It is suggested that you complete the form using the latest version of Adobe Reader which can be downloaded for free at: https://get.adobe.com/reader/. Please DO NOT 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. Name the file Community Name LGAR 2018-19. For example, Aberdeen LGAR 2018-19.

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:

Sandy Skolochenko, phone: 919-707-8147, email: sandy.skolochenko@ncdenr.gov Matt James, phone: 919-707-8133, email: matt.james@ncdenr.gov

Form Year

2019



Local Government Report Form

Required: Select your Local Government Name BURLINGTON

State of North Carolina

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

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 September 1, 2019. If you have questions or need assistance completing this form, please call 919-707-8147 or 919-707-8133. Person Completing This Report: Chris Felts Title: Solid Waste Superintendent Mailing Address: 206 East Summit Ave City: Burlington Zip: 27215 Phone: 336-222-5111 Date: 10/25/2019 Email: cfelts@burlingtonnc.gov **General Instructions** Please remember that the time period for the report is JULY 1, 2018 through JUNE 30, 2019. Please check "No" if you have nothing to report for a specific question. Did your local government have a Recycling Coordinator or similar position for FY 18-19? No Name Recycling Coordinator (if different from person completing this report.) Name: Title: Address: Citv: Zip: Telephone: Email: Did your local government have a Solid Waste Director or similar position for FY 18-19? 2. X Yes No If Yes, Name: Chris Felts Title: Solid Waste Superintendent Address: 206 East Summit Ave City: Burlington Zip: 27215 Telephone: 336-222-5111 Email: cfelts@burlingtonnc.gov Did your local government have **dedicated or part-time** Solid Waste Enforcement Staff for FY 18-19? If Yes, Name: Address: City: Zip: Telephone: Email: Did your local government have solid waste ordinances in place addressing any of the following during FY 18-19? (if yes, please check all that apply) Illegal Dumping ∠ Littering Construction & Demolition Disposal Bans Other: Did your local government manage, provide or contract for any solid waste services in FY 18-19 (e.g., collection, disposal, recycling, 5.

If you answer "No" to question 5, the report is complete, please email to Lgteam@ncdenr.gov.

X Yes

mulching, composting)?

No

	Part I. Waste Reduction and Recycling Programs Serving Government Facilities
6.	Did your local government have a recycling program in place for collecting recyclable materials generated at public buildings in FY 18-19? Yes No
7.	Did your local government have any program or policy encouraging or requiring local agencies to purchase products with recycled content? Yes No
8.	Did your local government have a program in place to collect and recycle spent fluorescent lights generated from the public buildings and facilities that were operated by your government in FY 18-19? Yes No
	Part II. Waste Reduction and Recycling Programs Serving the Public
SO	URCE REDUCTION / REUSE
9.	Did your local government have a backyard composting program? Yes No
10.	If yes, please check all backyard composting activities that apply:
	☐ Education ☐ Demonstration site(s) ☐ Bin distribution/sales Number of Bins distributed?
11.	Did your local government operate a program to promote source reduction efforts such as junk mail reduction, reduction of single use plastics, food waste reduction, or promoting reuse and donation? Yes No
12.	Did your local government offer a waste exchange or reuse program? Yes No
13.	If you answered "yes" in question 12, 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.)
PU	BLIC RECYCLING SERVICES
14.	Which of the following responses best describes your recyclables recovery activities for the period July 1, 2018 through June 30, 2019? Choose ONE option that best applies.
	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 .)
CU	RBSIDE RECYCLING PROGRAM
15.	Did your government operate a Curbside Recycling Program? X Yes No, skip to question # 25
16.	Who collected the recyclable materials for your local government's curbside recycling program?
	Local government employees
	Private contractor (please specify) Waste Industries
	Franchised hauler (please specify)
	Other (please specify)

17.	a. Total number of households in your jurisdiction? 17,688
	b. Number of households eligible to participate in the curbside recycling program: 17,688
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 9,020
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: 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:
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)
DR	OP-OFF RECYCLING PROGRAM
24.	Did your government operate a Drop-off Recycling Program? Yes No, skip to question # 31
25.	Who collected the recyclable materials for your local government's drop-off recycling program? Local government employees Private contractor
	Other (please specify)
26.	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
27.	Please estimate the number of households served by your drop-off recycling program.
28.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial
29.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:
30.	How many of these locations were staffed with attendants? All None Some please list # of staffed sites:
EL]	ECTRONICS RECYCLING PROGRAM
31.	Did your community operate an electronics recycling program in FY 18-19? Yes No, skip to question # 37
	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:

32.	Did your electronics recycling program collect or accept televisions from (check all that apply): Residences Businesses
33.	Did your electronics recycling program collect or accept computer equipment from (check all that apply): 🔀 Residences 🗀 Businesses
34.	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, 2018: \$
	Electronics Management Funds received from DEQ during FY 18-19 (Feb 2019 distribution): \$
	Electronics Management Funds spent during FY 18-19: \$
	Electronics Management Fund balance as of June 30, 2019: \$
35.	Briefly explain how Electronics Management Funds were spent during FY 2018-19 (please list items purchased if applicable):
36.	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 18-19: Synergy
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? Xes No
OT	THER PUBLIC RECYCLING PROGRAMS
	only programs operated or contracted for <u>by the local government</u> . The tonnage of any materials collected by the following programs uld be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.
37.	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
38.	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
39.	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
40.	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
41.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 18-19. (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
42.	Please identify all "Other" programs or services operated by your government during FY 18-19. (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

- 43. 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, 2018 through JUNE 30, 2019. 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 on page 6 in the SPECIAL WASTE section of this report.
 - c. 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.

PDOCD AM	Curbside			Drop-off	All "(Other" Programs	Total Tons	
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)	
GLASS:								
Clear								
Brown								
Green								
Mixed	\boxtimes							
PLASTIC:								
PET #1								
HDPE #2								
All Plastic Bottles	\boxtimes							
Other Plastic Containers								
Bulky Rigid Plastics								
METAL:								
Aluminum Cans								
Steel Cans								
PAPER:								
Newsprint (ONP)	\boxtimes							
Cardboard (OCC)	\boxtimes							
Magazines (OMG)								
Office Paper								
Mixed / Other Paper								
Cartons / Aseptic Containers								
WOOD:								
Pallets								
Other Wood - DO NOT		Report all tons	in Other c	olumn				
report yard waste tons here								
OTHER MATERIALS:								
Textiles (clothes etc)								
Televisions						46.22	46.22	
Other Electronics						14.17	14.17	
C&D Materials Recycling		Report all tons	in Other c	olumn				
White Goods								
Other Metal						29.96	29.96	
Commingled tons-check all items collected above*		3,604.75					3,604.75	
TOTAL TONS:		3,604.75				90.35	3,695.1	

44. *If you checked commingled, which material recovery facility does your community use: Waste Industries

45. 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 cardboard disposal ban results in private cardboard recycling (and you have a way to track the tons collected)

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

Part III. Special Waste Collections

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 46 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 # 46 but instead report with HHW materials in question # 47.

	Did program collect this	# of	Data on quantities colle	9
Materials from Citizens by Material Type	material from the public?	sites	Please report in ind	
Used Motor Oil	Yes		<u> </u>	gallons
Used Oil Filters	Yes		barrels, or	lbs
Used Antifreeze	Yes			gallons
Batteries, Lead Acid	Yes		# batteries, or	r lbs
Batteries, Dry Cell	Yes			lbs
Fluorescent Bulbs/Lights Containing Mercury	Yes		lbs, or	# bulbs
Propane Tanks	Yes		lbs, or	# tanks
Used Cooking Oil / Waste Vegetable Oil	Yes		lbs, or	gallons
Other Special Wastes - please provide waste type here:	Yes			lbs
Pesticide Containers (NCDA Program, not pesticides themselves)	Yes		lbs, or	# containers
NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)	Yes			lbs
Latex Paint (do not include paint collected at HHW event or by a paint exchange program)	Yes Yes		gals, or	lbs
	S:			
If Yes, please respond to the following question: a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op	ry Event or at a Permanent		• —	Permanent Tem
a. Was HHW collected at a permitted Tempora	ry Event or at a Permanent een to accept materials durin	ng this F	iscal Year?	Permanent
 a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW pr Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma 	ry Event or at a Permanent pen to accept materials during ogram with another local granticipated in your HHW all businesses (Very Exemp	ng this F overnme	nt? Yes No on program this Fiscal Ye Quantity Generators)?	
 a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program elements d. Provide number of citizens / households that 	ry Event or at a Permanent pen to accept materials during ogram with another local granticipated in your HHW all businesses (Very Exemples material managed HHW Program: if totals follows simply provide total quality for the simply for the simply provide total quality fo	overnme collection t Small (on program this Fiscal Ye Quantity Generators)? pounds dual materials are known of materials collected by I	ar? Yes please itemize below HHW program in 47g
 a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program elist partner(s) d. Provide number of citizens / households that e. Did your program accept materials from smalf yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, please, materials listed here should only be the 	participated in your HHW all businesses (Very Exempts material managed HHW Program: if totals foliase simply provide total questions of the collected at an HHW Program if the collected at an HHW Program is the collected at an HHW Program if the collected at an HHW Program is the collected at an	collection t Small (corrindity) or individuantity or ogram a	on program this Fiscal Ye Quantity Generators)? pounds dual materials are known of materials collected by I nd should not include ma	ar? Yes please itemize below HHW program in 47g terials listed in questi
a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW pr Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma If yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, pl	participated in your HHW all businesses (Very Exempts material managed HHW Program: if totals foliase simply provide total goese collected at an HHW Program: Used Oil Filters	overnme collection t Small (or indivi- quantity (rogram a	on program this Fiscal Ye Quantity Generators)? pounds dual materials are known of materials collected by I nd should not include ma # of Barrels, or	ar? Yes please itemize below HHW program in 47g terials listed in questi
a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW pr Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma If yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, pl Note, materials listed here should only be the Used Motor Oil (gal)	participated in your HHW all businesses (Very Exempts material managed HHW Program: if totals foliase simply provide total goese collected at an HHW Program: Lead Acid Batterial managed Lead Acid Batterial Lead Acid Batterial managed Lead Acid Batterial materials during materials materia	collectic t Small (or indivi- quantity (rogram a	on program this Fiscal Ye Quantity Generators)? pounds dual materials are known of materials collected by I nd should not include ma # of Barrels, or Other Batte	ar? Yes please itemize below HHW program in 47g terials listed in questi
a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW pr Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma If yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, pl Note, materials listed here should only be the Used Motor Oil (gal) Used Antifreeze (gal)	participated in your HHW all businesses (Very Exempts material managed with HHW Program: if totals foliase simply provide total goese collected at an HHW Program: Lead Acid Battering Mercury (lbs) I by HHW Program. If indice materials out of the total in the content of the materials out of the total in the content of the materials out of the total in the content of the materials out of the total in the content of the materials out of the total in the content of the materials out of the total in the content of the content of the content of the materials out of the total in the content of the content	collection to Small (continuantity of cogram and cogram	on program this Fiscal Ye Quantity Generators)? pounds dual materials are known of materials collected by I nd should not include ma # of Barrels, or Other Batte naterials were	ar? Yes please itemize below HHW program in 47g terials listed in questi lbs. eries (lbs)

2018-2019 Local Government Annual Report *Report Due Date: September 1, 2019* Submit to: Lgteam@ncdenr.gov

which are for Counties only.

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										g Managem		
	l waste may not ood waste or nor						rs, or in unpe	ermi	tted sites and i	t is illegal to burn	n. Do not include informat	io
1 8.	Does your local government operate a yard waste program? Yes No If yes please indicate how yard waste is managed by checking all that apply: Collected curbside Collected at convenience center Received at yard waste, compost, or LCID facil											
19.	Did a storm ev	ent signif	icantly	impact the a	mount	of yard	waste your go	over	nment manage	d during FY 18-19	9? Yes No	
50.										ation in TONS Cooses, use 400 lbs.	DR CUBIC YARDS of /cubic yd.	
		Dest	ination	n		Check if used	Tons		Cubic Yards	Facility	Name and Location	
	End user (to fa	rmer or h	ome-o	wner)				or				
	Your local gov	ernment's	s mulch	n or compost	facility			or		Northfield, Anthony Rd,	Southplant	
	Other public m	ulch or c	ompost	t facility				or				
	Private mulch	or compo	st facil	ity		\boxtimes	71.18	or				
	Land clearing a	and inert	debris l	landfill (LCI	D)			or				
	Energy / Fuel U	Use (e.g. 1	boiler f	fuel market)				or				
		Т	otal				71.18	or				
	volume manag	ed by pro	ogram ii	n the approp	riate bo	xes abo	ve. Ex. 10 c	ubic	yard truck x 3	days/wk x 16 wks	en enter the grand total $z = 480 \text{ cubic yards}$ $cubic yard$	ls
	Size of Truc	k (in yards))						ruck is used during		TOTAL	
				Part	V. Se	olid V	Vaste Col	llec	tion Servi	ces		
51.	Please complet	te the foll	owing	table about y	our gov	vernmen	ıt's solid wast	e (ga	arbage) collect	ion system.		
	Sector				olid Waste C		77110 C0	llects Solid Waste?	How is Solid Waste Collected	1?		
	Residential	Insert Le	I.c.	see codes at r		Insert #	- see codes a	it rig	a. Local b. By Co		s 1. Once a week at household 2. Twice a week at household	
		Primary	Λ	Secondary		mary	Secondary		c. Francl	nise haulers government not	Convenience center/greenbo As needed or by request	K
	Commercial Industrial	Primary	D	Secondary		mary	Secondary			ed in provision of	5. Daily 6. Other	
52.	If you provide	residentia	al waste	e collection a	nt single	e-family	households i	n vo	ur iurisdiction.	please answer the	e following questions:	
	What type of c				_	•	tomated	_	emi-Automated	·	Don't know	
	What is the sta					Veekly		_	es per week	Other	Bon t kno w	
	What is the typ					•	<u>—</u>		Curbside	Back yard / Ba	ck door	
	What type of c		•		•		ent-provided			ent-provided conta	<u></u>	
	Do you offer b					≺ Yes	□ No		i resido	one provided cont	inici Dugo	
53.	For municipali	•							⊠ Yes □	No		
	If so, were whi					_	. —	es	No No			
		P	Part V	VI. Solid	Was	te and	d Recycli	ng	Education	nal Activities	S	
54.	Did your local issues / activiti	_	nent ha		-	_	inform citize to Part VII, pa			ut solid waste ma	nagement and / or recyclin	g
55.	Please estimate	your ann	nual bu	dget for soli	d waste	related	education and	d out	treach activitie	s: \$		
56.	Does your com	munity p	roduce	e recycling ed	lucation	and ou	treach materi	als i	n languages be	sides English?	Yes No	
	If YES, please	list other	langua	ages used: _								

	Part VII	. Resources f	or Solid Was	te Manageme	ent and Full C	ost Accounti	ng	
57.	Did your local government	nent operate an Ent	erprise Fund for sol	lid waste services in	FY 18-19?	Yes No)	
58.	NC Solid Waste Dispo							
	According to GS 105-1		•					
	Did your local government		=			Yes No	1	
	If yes, how are disposa				ating Budget Funds			
59.	What other funding so	•	•					
	☐ Tipping fee	s kes / general fund		eight-based fees (e.g	· —	rire tax		
	Per househo	- C	Sale of rec	yciables	V	Vhite Goods tax		
60.	If applicable, please pr	•		follow example form	at):			
	ex: \$ \$75.00	•		per	household	for solid waste	,	
	3.71	per Month			old			
		-		•		for solid waste	;	
	b. \$ \frac{2.29}{	per Month	1	per Househ	old	for recycling		
	c. \$	per		per		for yard waste		
	d. \$	per		per		for bulky wast	e	
	e. \$	per		per		availability fee	<u>:</u>	
	f. \$ 6	per Montl	1	per Househ	old	total charge		
61	Did your local government						where residents	
01.	are charged a fee by we					10 17. (a system)	viiere residents	
	cording to GS 130A-30 orm users of such costs		ments are required	to conduct full cos	st accounting annua	lly and to develop	a system to	
			1					
62.	If your local governme		•	_	port the annual cont	ract amount.		
	\$ For solid waste services per year							
	\$238,576.81		_ For recycling pe	r year				
		OR						
	\$		_ Combined Conti	ract (solid waste, and	d recycling)			
63.	Collection Programs: F							
	collection programs for				llected from conveni	ience centers. If fu	ll cost analysis is	
	not available, please r		dget in Total Cost	column.		Total Cost	Cost Per Ton	
		# of Households	Tons Collected	Collection Cost	Disposal Cost	including	Managed	
		served			(tipping fees paid)	overhead	(calculated by form)	
N	Iunicipal Solid Waste*	17,688	14,164.88	1,047,541.25	606,242.65	1,653,783.88	110	
	Recycling Program**	17,688	3,604.75	238,576.81		238,576.81	6	
	Yard Waste Program		4,067.7			861,615.05	21	
		s (calculated by form):	21,837.33			2,753,975.74	120	
	*for materials collected and							
61	**for materials collected b If your government ope							
04.	facility operations (rou							
	proportionately. Land		\$ \$		Territoria, product de	_	.500	
	Tran	sfer Station Budget	:: \$					
		l Waste / Compost l						
		ycling Facility Budg	, ,					
65.	What was your govern				d recycling services	in 18-19? \$		

Part VIII. Mandated Programs

The following questions pertain to programs mandated by NC statute. <u>Only Counties</u> need to complete questions 66 through 88. Failure to complete Part VIII may result in non-eligibility for grant funding. <u>Municipalities</u> should skip to question 89 on page 10.

WH	ITE GOODS						
66.	Please provide name, address, phone number		1	•	Title.	s program.	
						Zip:	
	Telephone: Fax:						
67.	Please provide the physical address of the pri						
	Street 1:	-	_				
	Street 2:						
	City:			State:	North Carolina	Zip:	
68.	Please provide the name of the business or pe			_	• • •	•	
	Street:						
	City:					Zip:	
	Phone: Fax:			Email	:		
69.	Give amounts / types of CFCs removed. Atta		ds of CFC remo	oval, ar	nd copy of certificat	. ,,,,	ming extraction.
	Type of CFC Remove	d				Amount	
70.	CFCs may be recycled or sent for destruction	Give n	ame of firm di	l snosal :	method and amount	earned / spent for CFI	C disnosal
, 0.	Firm				f Disposal	Amount Earned	Amount Spent
71.	Please report the tonnage of white goods collewhite goods tonnage reported on page 5?	ected du	ring FY 2018-1	9 in th	e Recycling Tonnag	ges table on page 5 (qu	testion # 43). Was
72.	List the amount of revenue for the white good	ds progra	am by source:				
	Revenue collected from sale of scrap:		\$				
	Revenue collected from White Goods Tax Di	istributio	ons: \$				
	Revenue from other source (e.g. grants):		\$				
	Total Revenue:		\$				
73.	According to the White Goods Law, White C expenditures White Good Tax Distributions v						mounts and types of
	Capital Improvements: \$						
	Clean-up of Illegal White Goods Dumps: \$						
	Total Expenditures: \$						

	RAPTIRES	'1 C	71.1.0								
/4.	Name:	d e-mail of person responsible for scrap tires program. Title:									
	Address:		City:		Zip:						
	Telephone: Fax:		Email	:							
75.	Please provide the physical address of the primary cour Street 1:										
	Street 2:										
	City:		State: North	Carolina	Zip:						
76	Tonnage/Number of scrap tires disposed July 1, 2018-June 30, 2019 (excluding tires from cleanup of nuisance sites) Tons or Number of tires										
77.	Tonnage/Number of scrap tires disposed from cleanup Tons or	aber of scrap tires disposed from cleanup of state or county designated nuisance sites Tons or Number of tires									
78.	Indicate the types of tires collected by the county: Passenger % Heavy Truck		Large Off-Road	%	Agricultural	%					
79.	List the amount of revenue for the scrap tire program b Revenue from Scrap Tire Tax Distributions:										
	Revenue from Scrap Tire Fees:	\$									
	Revenue from Scrap Tire Clean-up Reimbursements:										
	Revenue from Scrap Tire Cost-Overrun Grants:	\$									
	Total Revenue:	\$									
80.	County's total scrap tire program contract expenditure (excluding costs of nuisance tire cleanups, for FY 18-19	(contract o	lisposal/hauling co	osts), \$							
81.	County's additional scrap tire program expenditure (i.e. Labor \$		nvenience center	cost), if any.							
	Site Cost \$										
	Other \$		describe Other: _								
82.	County's contract cost for scrap tire disposal. \$		/ Ton; \$	/ Tire							
83.	Hauling cost or fuel surcharge, if not included in contra	act cost a	bove. \$	/ Ton; \$	/ Tire						
84.	Total tipping fees collected for tires not eligible for fre	e disposal	. \$								
85.	Total number of tires collected not eligible for free dis-										
86.	If scrap tires were not hauled off site by contracted serv	vice provi									
87.	Name of tire disposal/recycling firm(s):			- -							
MA	NAGEMENT OF ABANDONED MANUFA	ACTUR	ED HOMES E	BY COUNTIE	ES						
88.	Has your county considered whether to implement a pr	ogram for	the management	of abandoned ma	nufactured homes?	Yes No					
	If yes, has your county developed a written plan for the	managen	nent of abandoned	l manufactured h	omes? Yes	No					
TE	MPORARY DISASTER DEBRIS STAGINO	G SITES	S - Counties ar	nd Municipali	ties						
89.	Does your local government have a plan in place for m	•			☐ No						
	If yes, indicate if the plan is a stand-alone plan or in co	•			Stand-alone	_					
90.	If you indicated having a plan, has the plan been review requirements for public assistance reimbursement in a			nagement or FEN Yes	IA to ensure it meets t No	he basic					

, 1.	your local government:	.	pe	()	he disaster debris management program for		
	Name: Al Cablay	Name:			Name:		
	Phone: <u>336-222-5009</u>	Phone:			Phone:		
	E-mail: acablay@burlington	nnc.gov E-mail:		·	E-mail:		
Please list the temporary disaster debris staging sites in your county or municipality which have been reviewed for conflicts with Natural Heritage Program (NHP) and the State Historic Preservation Office (SHPO) through coordination with the Solid Waste S 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 or star 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		Disaster Site #	Site Name		
	YN-01-003	Anthony Road					
	YN-01-004	Indian Valley					
	YN-01-005	Northside				_	
						_	
93.	Does your plan address the	e management of: Household hazard	ou	s waste Mass anim	mal mortality		
		Abandoned vessel	S	White go	ods		
94.	Does your plan include co	ordination with NC DOT on clearing roa	ds	and waste in the right of	of way?		
		Part IX. C	01	mments			

Use this section to elaborate on any info provided in your report as necessary. We would appreciate your comments about this report or other matters regarding solid waste management in North Carolina. Thank you for your time. You may submit additional sheets if needed.

This form is to be submitted electronically. If you require assistance, please contact one of these NC DEACS staff members: Sandy Skolochenko, email: sandy.skolochenko@ncdenr.gov phone: 919-707-8147

Matt James, email: matt.james@ncdenr.gov phone 919-707-8133

THIS FORM IS DUE SEPTEMBER 1, 2019

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 https://deq.nc.gov/conservation/recycling-assistance or e-mail us at Lgteam@ncdenr.gov

