

## 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, 2020 - June 30, 2021

# Submit this form to Lgteam@ncdenr.gov by September 1, 2021.

On the following pages, you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2020-2021. 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**

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: <a href="https://get.adobe.com/reader/">https://get.adobe.com/reader/</a>. Please <a href="https://get.adobe.com/reader/">DO NOT complete this form using Adobe Acrobat Pro.</a>

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 2020-21. For example, Aberdeen LGAR 2020-21.

You can find your reports from previous years at: <a href="https://deq.nc.gov/conservation/recycling/local-government-recycling-assistance/LGAR">https://deq.nc.gov/conservation/recycling/local-government-recycling-assistance/LGAR</a>

After completing and saving the report, please email the report 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:

Tara Nattress, phone: 919-707-8123, email: <u>tara.nattress@ncdenr.gov</u> Carol Abken, phone: 919-707-8138, email: <u>carol.abken@ncdenr.gov</u>

Form Year

2021



Local Government Report Form

**Required:** Select your Local Government Name

**FARMVILLE** 

## 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, 2021. If you have questions or need assistance completing this form, please call 919-707-8123 or 919-707-8138. Title: Public Works Director Person Completing This Report: Daniel "Wes" Thomas City: Farmville Zip: 27828 Mailing Address: P.O. Box 86 Date: 08/30/2021 Phone: 252-341-8249 Email: wthomas@farmvillenc.gov **General Instructions** Please remember that the time period for the report is JULY 1, 2020 through JUNE 30, 2021. Please check "No" if you have nothing to report for a specific question. Did your local government have a staff member who managed the recycling program for FY 20-21? Yes X No If Yes, is recycling program management a full-time or part-time responsibility? Full Time ☐ Part Time If Yes, Name: Title: City: Address: Zip: Telephone: Email: 2. Did your local government have a Solid Waste Director or similar position for FY 20-21? No. If Yes, Name: Address: City: Zip: Email: Telephone: Did your local government have **dedicated or part-time** Solid Waste Enforcement Staff for FY 20-21? 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 20-21? (if yes, please check all that apply) Other: Yard Debris ☐ Illegal Dumping Littering X Construction & Demolition Disposal Bans Did your local government manage, provide or contract for any solid waste services in FY 20-21 (e.g., collection, disposal, recycling, 5. mulching, composting)? X Yes ∏ No

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

|     | Part 1. 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 20-21? Xes No   |  |  |  |  |  |  |  |
| 7.  | Did your local government have any program or policy encouraging or requiring local agencies to purchase products with recycled content in FY 20-21? 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 20-21? 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?   |  |  |  |  |  |  |  |
| 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? Yes No  If yes, please check all source reduction programs that apply:  Junk Mail Reduction Single Use Plastics Reduction Food Waste Reduction   |  |  |  |  |  |  |  |
|     | Promoting Reuse and Donation Other  |  |  |  |  |  |  |  |
| 12. | Did your local government offer a waste exchange or reuse program? Yes No   |  |  |  |  |  |  |  |
| 13. | If yes, please check all waste exchange and/or reuse programs that apply:   |  |  |  |  |  |  |  |
|     | 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, 2020 through June 30, 2021? Choose <b>ONE</b> option that best applies.   |  |  |  |  |  |  |  |
|     | My local government DID operate or contract for a recyclables recovery program. (please continue to question 15)  |  |  |  |  |  |  |  |
|     | My local government <b>DID NOT operate or contract</b> for recyclables recovery <b>BUT DID partner</b> with another local government to operate or contract a recyclables recovery program. (Please identify the local government responsible for its operation and briefly explain the partnership; <b>then go to Part IV on page 7</b> .) |  |  |  |  |  |  |  |
|     | With which local government did you partner and what is the arrangement?  |  |  |  |  |  |  |  |
|     | 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) GFL   |  |  |  |  |  |  |  |
|     | Franchised hauler (please specify)  |  |  |  |  |  |  |  |
|     | Other (please specify)  |  |  |  |  |  |  |  |
|     |   |  |  |  |  |  |  |  |

| 1/. | Please provide the following information about your community:   |
|-----|--|
|     | a. Total number of households in your jurisdiction? 1,951  |
|     | b. Number of households eligible to participate in the curbside recycling program: 1,951   |
|     | c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 976   |
| 18. | If your curbside recycling program is operated by a <b>franchised hauler</b> 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  Other  Every other week / biweekly   |
| 22. | Please describe the collection containers used:  Bins Blue bags Multi-bin system Roll-out carts  |
| 23. | Please describe the method of recycling collection:  Curb-sort (collector separates material as collected)  dual / two stream  Single stream / commingled  don't know / other  |
| 24. | Do residents sign up for curbside recycling service or are they automatically included?  Sign up  Automatically included   |
| 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  |
| 32. | Did your community operate an electronics recycling program in FY 20-21?  Yes No, skip to question # 38  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. | Annually, DEQ distributes funds to eligible units of local government. If your unit of local government received a distribution from the  |  |  |  |  |  |  |
|     | Electronics Management Fund in February 2021, please provide the following information:   |  |  |  |  |  |  |
|     | Electronics Management Fund balance as of July 1, 2020: \$  |  |  |  |  |  |  |
|     | Electronics Management Funds received from DEQ during FY 20-21 (Feb 2021 distribution): \$  |  |  |  |  |  |  |
|     | Electronics Management Funds spent during FY 20-21: \$  |  |  |  |  |  |  |
|     | Electronics Management Fund balance as of June 30, 2021: \$   |  |  |  |  |  |  |
|     | Total spent on electronics recycling program FY 20-21 (Electronics Management Funds plus additional funds): \$  |  |  |  |  |  |  |
| 36. | Explain how Electronics Management Funds were used during FY 20-21 (list items purchased if applicable):  |  |  |  |  |  |  |
|     |   |  |  |  |  |  |  |
| 37  | Name of all strengths are real surface (a) and during EW 20.21.   |  |  |  |  |  |  |
| 51  | Name of electronics recycler(s) used during FY 20-21:  Does the electronics recycler(s) used have either the e-Steward or R2 certification?  Yes  No  |  |  |  |  |  |  |
|     |   |  |  |  |  |  |  |
| OT  | HER PUBLIC RECYCLING PROGRAMS   |  |  |  |  |  |  |
|     | only programs operated or contracted for <u>by</u> <u>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.                      |  |  |  |  |  |  |
| 38. | 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 drop-off recycling programs?   Yes |  |  |  |  |  |  |
| 39. | 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 drop-off recycling programs?   Yes No  |  |  |  |  |  |  |
| 40. | 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:  |  |  |  |  |  |  |
| 4.1 | 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. | Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 20-21. (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   |  |  |  |  |  |  |
| 43. | Please identify all "Other" programs or services operated by your government during FY 20-21. (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   |  |  |  |  |  |  |
|     | If yes, what type? Drop-off Curbside Pilot Other:   |  |  |  |  |  |  |
|     | 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

- 44. 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, 2020 through JUNE 30, 2021.
  - b. Do NOT report yard waste, tires, HHW, used oil, batteries or other special wastes on this page these are covered later in the report.
  - c. If you collected single stream or other commingled materials, record tons in the "Commingled tons" row and then X the boxes beside each material type above for all items included.

| (totals are calculated b |
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|      | Material Type   | I ons Diverted      | Describe t | sed these materials to be recovered and data collection metho |           |   |              |                   |  |  |  |  |  |  |  |
|------|---|---------------------|------------|---|-----------|---|--------------|-------------------|--|--|--|--|--|--|--|
|      |   |                     |            |   |           |   |              |                   |  |  |  |  |  |  |  |
|      |   |                     |            |   |           |   |              |                   |  |  |  |  |  |  |  |
|      |   |                     | Part       | III. Special Waste  | Coll      | ections   |              |                   |  |  |  |  |  |  |  |
| га.  | se provide data bei   | low for services pr |            | he public. Please do not in                                   |           |   | accepted and | d then disposed   |  |  |  |  |  |  |  |
|      |   |                     |            | vely by government operation                                  |           |   |              |                   |  |  |  |  |  |  |  |
|      |   |                     |            | dous Waste (HHW) Program<br>separate recycling efforts th     |           |   |              | accepted as a     |  |  |  |  |  |  |  |
|      | Ü   |                     | •          |   | •         | <del></del>   |              |                   |  |  |  |  |  |  |  |
|      |   |                     |            | nce centers, transfer station on facilities or household      |           |   |              |                   |  |  |  |  |  |  |  |
| '. [ |   | Programs for Co     |            | Did program collect this                                      | # of      | Data on quantiti  |              |                   |  |  |  |  |  |  |  |
|      |   | Citizens by Mate    |            | material from the public?                                     | sites     | Please repor  |              |                   |  |  |  |  |  |  |  |
|      | Used Motor Oil  |                     |            | Yes   |           |   |              | gallons           |  |  |  |  |  |  |  |
|      | Used Oil Filters  |                     |            | Yes   |           | barrels,  | , or         | lbs               |  |  |  |  |  |  |  |
|      | Used Antifreeze   |                     |            | Yes   |           |   |              | gallons           |  |  |  |  |  |  |  |
|      | Batteries, Lead Ac  | id (Auto)           |            | Yes   |           | # batte   | eries, or    | lbs               |  |  |  |  |  |  |  |
|      | Batteries, Dry Cell   | (Household)         |            | 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   |                     |            | Yes   |           |   |              | lbs               |  |  |  |  |  |  |  |
|      | type here:  Pesticide Containers (NCDA Program, not   |                     |            |   |           |   |              |                   |  |  |  |  |  |  |  |
|      | pesticide Containe pesticides themselv  |                     | m, not     | Yes   |           | lbs   | , or         | # con-<br>tainers |  |  |  |  |  |  |  |
| - 1  | NCDA Pesticide Disposal Assistance Program  |                     |            | ☐ Yes   |           |   | l -          | lbs               |  |  |  |  |  |  |  |
| L    | (for management of pesticides, not containers)  Latex Paint (do not include paint collected at  |                     |            |   |           | <u> </u>  |              |                   |  |  |  |  |  |  |  |
|      | Latex Paint (do not<br>HHW event or by a  |                     |            | Yes   |           | gal<br>oi   |              | lbs               |  |  |  |  |  |  |  |
| L    |   |                     |            | Program - Fiscal Year 202                                     | 0-2021    |   |              |                   |  |  |  |  |  |  |  |
|      |   |                     |            | HHW collection facility or                                    | tempor    | ary collection ever   | nt? Yes      | ⊠ No              |  |  |  |  |  |  |  |
|      | If Yes, please response   |                     |            |   | laatian ( | nyamt? Damman   | t            | oma Event         |  |  |  |  |  |  |  |
|      | a. Was HHW collected at a permanent collection facility or temporary collection event? Permanent Temp. Event  |                     |            |   |           |   |              |                   |  |  |  |  |  |  |  |
|      | How many permanent collection facilities (sites) do you operate? How many temporary events? b. How many days did all HHW collection programs operate (number of days operated out of 365)?  |                     |            |   |           |   |              |                   |  |  |  |  |  |  |  |
|      | c. Did your local government partner the HHW program or event with another local government or business? Yes No   |                     |            |   |           |   |              |                   |  |  |  |  |  |  |  |
|      | Please list partner(s)  |                     |            |   |           |   |              |                   |  |  |  |  |  |  |  |
|      | d. How many households/residences participated in your HHW collection program?  |                     |            |   |           |   |              |                   |  |  |  |  |  |  |  |
|      | e. Did your program accept materials from VSQG (Very Small Quantity Generators) businesses?  \[ \subseteq \text{Yes} \] No  |                     |            |   |           |   |              |                   |  |  |  |  |  |  |  |
|      | If yes, please provide or estimate the amount of VSQG material collected:   |                     |            |   |           |   |              |                   |  |  |  |  |  |  |  |
|      | f. Provide the amount of materials collected by the HHW program for the fiscal year pounds  Do not include (subtract out) any tons that are included elsewhere in this report (e.g., electronics reported in #44 or special waste reported in |                     |            |   |           |   |              |                   |  |  |  |  |  |  |  |
|      |   |                     |            |   |           | g. List all the HHW disposal and HHW recycling contractors: |              |                   |  |  |  |  |  |  |  |
|      | g. List all the HHV   | W disposal and HI   | HW recycli | ng contractors:   |           |   |              |                   |  |  |  |  |  |  |  |

|     | Part IV. Yard waste<br>waste may not be disposed in sanitary landfills, ind<br>ood waste or non-vegetative materials in this section   | cinerator     |                               |       | <u> </u>           |                     |   |
|-----|--|---------------|-------------------------------|-------|--------------------|---------------------|---|
| 49. | Does your local government operate a yard waste prochecking all that apply:   Collected curbside   | _             |                               |       |                    |                     | v yard waste is managed by<br>ste, compost, or LCID facil                           |
| 50. | Did a storm event significantly impact the amount of yard waste your government managed during FY 20-21? Yes No  |               |                               |       |                    |                     |   |
| 51. | . What quantities of materials were managed by your yard waste program? <b>Provide information in TONS OR CUBIC YARDS of organic material (yard waste, brush, limbs, leaves, etc.) managed</b> . For conversion purposes, use 400 lbs./cubic yd. |               |                               |       |                    |                     |   |
|     | Destination  | Check if used | Tons                          |       | Cubic Yards        | Facility 1          | Name and Location   |
|     | End user (to farmer or home-owner)   |               |                               | or    |                    |                     |   |
|     | Your local government's mulch or compost facility  |               |                               | or    |                    |                     |   |
|     | Other public mulch or compost facility   | $\boxtimes$   |                               | or    | 2,600.00           | GFL hauls to        | Pitt County Land Fill   |
|     | Private mulch or compost facility  |               |                               | or    |                    |                     |   |
|     | Land clearing and inert debris landfill (LCID)   |               |                               | or    |                    |                     |   |
|     | Energy / Fuel Use (e.g. boiler fuel market)  |               |                               | or    |                    |                     |   |
|     | Total  |               | 0.00                          | or    | 2,600.00           |                     |   |
|     | YARD WASTE MANAGEMENT FORMULA: If estimate yard waste volume. Calculate for each tru   |               |                               |       |                    |                     |   |
|     | volume managed by program in the appropriate bo  | xes abov      |                               | ubic  | yard truck x 3     | -                   |   |
|     | 5 X 13.0   | C11 1         | X 40.0                        | 1 .   |                    | = 2,600.00          | Cubic yards TOTAL   |
|     | Size of Truck (in yards)  Avg. no. of times truck  |               |                               |       | tion Servi         | , , ,               | IOTAL   |
|     | Tait v. St   | ullu vv       | aste Col                      | iec   | tion servi         | ces                 |   |
| 52. | Please complete the following table about your gov   |               |                               |       |                    | on system.          |   |
|     | Sector   |               | lid Waste Co<br>- see codes a |       | ht Willo Co.       | llects Solid Waste? | How is Solid Waste Collected?   |
|     |  | mary 1        | Secondary                     |       | b. By Co           | ntract              | <ol> <li>Once a week at household</li> <li>Twice a week at household</li> </ol>     |
|     |  | mary 6        | Secondary                     |       |                    |                     | <ul><li>3. Convenience center/greenbox</li><li>4. As needed or by request</li></ul> |
|     |  | mary 6        | Secondary                     |       | involve<br>service | *                   | 5. Daily<br>6. Other  |
| 53. | If you provide <u>residential</u> waste collection at single   | e-family l    | nouseholds in                 | ı yo  | ur jurisdiction,   | please answer the   | following questions:  |
|     | What type of collection method is used?  | ully Auto     | omated [                      | Se    | mi-Automated       | Manual              | Don't know  |
|     | _  | Veekly        |                               | ime   | s per week         | Other               | _   |
|     | What is the typical service point for single family h  | •             | _                             |       | Curbside           | Back yard / Bac     | k door  |
|     | What type of collection container is used?   | overnme       | ent-provided                  |       |                    | nt-provided contai  |   |
|     | Do you offer bulky waste collection services?  | Yes           | ☐ No                          |       |                    |                     |   |
| 54. | For municipalities - did your government collect w<br>If so, were white goods delivered to the county for  | _             |                               |       | X Yes ☐            | No                  |   |
|     | Part VI. Solid Was   | te and        | Recyclin                      | ng    | Education          | nal Activities      |   |
| 55. | Does your local government have an education pro<br>If yes, do you utilize any of the DEACS-provided t   |               |                               |       |                    | program/activities  | s? X Yes No   |
|     | Available at https://deq.nc.gov/conservation/recycling/ge  |               |                               |       | _                  | _                   |   |
|     | Do you use any recycling educational enforcement   | strategie     | s?                            |       |                    |                     |   |
|     | Cart tagging Collection App  | · <u></u>     | _                             | lesci | ribe): Utility N   | ewsletter           |   |
|     | 751  |               |                               |       |                    |                     |   |
| 56. | Please estimate your annual budget for solid waste   | and recy      | cling educati                 | ion/  | outreach activi    | ties: \$ 200.00     |   |

|   | Part VI   | I. Resources f          | for Solid      | Was                 | ste Mana        | ageme     | ent and                           | d Full C    | Cost Account                        | ting                                     |
|---|---|-------------------------|----------------|---------------------|-----------------|-----------|-----------------------------------|-------------|-------------------------------------|--|
| 58.   | Did your local govern   | ment operate an En      | terprise Fund  | for so              | lid waste se    | rvices in | FY 20-2                           | 21?         | Yes                                 | No                                       |
| 59. NC Solid Waste Disposal Tax proceeds are distributed to eligible local governments on a quarterly basis by the De |   |                         |                |                     |                 |           |                                   |             |                                     |  |
|   | According to GS 105-187.63 these funds must be used by a city or county solely for solid waste management programs and services.  Did your local government receive Solid Waste Disposal Tax distributions?    X   Yes   No   |                         |                |                     |                 |           |                                   |             |                                     |  |
|   | •   |                         | -              |                     |                 |           |                                   | X           | Yes                                 | NO                                       |
| <i>c</i> 0  | If yes, how are dispos  |                         |                |                     |                 | 5         |                                   |             |                                     |  |
| 60.   | What other funding so   | •                       | _              |                     | eight-based     | foos (o s | DAVT                              |             | Tire tax                            |  |
|   | _   | xes / general fund      |                |                     | _               | ices (e.g | 3. I A I I )                      | _           | White Goods tax                     |  |
|   | ☐ Per househ  | •                       | Gran           |                     | .,, -14-1-15    |           |                                   |             |                                     |  |
| 61.   | If applicable, please p   | -                       |                |                     | follow exam     | ple form  | at):                              |             |                                     |  |
|   | ex: \$ \$75.00  | per                     | year           |                     | per             |           | house                             | hold        | for solid was                       | rte                                      |
|   | a. \$ 20.78   | per mon                 | th             |                     | per             | housel    | hold                              |             | for solid was                       | te                                       |
|   | b. \$   | per inclu               | ded            |                     | per             |           |                                   |             | for recycling                       | 5  |
|   | c. \$   | per inclu               | ded            |                     | per             |           |                                   |             | for yard was                        | te                                       |
|   | d. \$ 15.00   | per load                |                |                     | per             | housel    | hold                              |             | for bulky wa                        | ste                                      |
|   | e. \$   | per                     |                |                     | per             |           |                                   |             | availability f                      | <u>`ee</u>                               |
|   | f. \$   | per                     |                |                     | per             |           |                                   |             | total charge                        |  |
| 62.   | Did your local govern   | ment operate a Pay-     | As-You-Thro    | w pro               | ogram for re    | sidential | garbage                           | during FY   | 20-21? (a system                    | where residents                          |
|   | are charged a fee by w  |                         |                |                     |                 |           | 4                                 | X No        |                                     |  |
| Aco   | cording to GS 130A-30   | 09.08, local govern     | ments are rec  | quirec              | to conduct      | full cos  | st accour                         | nting annua | ally and inform u                   | sers of such costs.                      |
| 63.   | If your local governm   | ent contracts for sol   | id waste or re | cyclir              | ng services:    |           |                                   |             |                                     |  |
|   |   |                         |                | An                  | nual Contra     | ct Amou   | ınt                               | Month/Ye    | ar of Contract Ex                   | piration                                 |
|   | Solid Waste Services Contract   |                         |                |                     |                 |           |                                   |             |                                     |  |
|   | Recycling Contract  |                         | \$             | \$                  |                 |           |                                   |             |                                     |  |
|   | OR: Combined Contract (solid waste & recycling)   |                         |                | \$ 552,000.00 6/202 |                 |           |                                   | 6/2025      |                                     |  |
| 64  | Collection Programs: Please complete the following table to the best of your ability to display the full costs of your local government's   |                         |                |                     |                 |           |                                   |             |                                     |  |
| 0 11  | collection programs for   |                         |                |                     |                 |           |                                   |             |                                     |  |
|   | not available, please   | report program bu       | ıdget in Tota  | l Cos               | t column.       |           | T                                 |             | T . 1 C .                           |  |
|   | # of Households served  |                         | Tons Collected |                     | Collection Cost |           | Disposal Cost (tipping fees paid) |             | Total Cost<br>including<br>overhead | Cost Per Ton Managed (calculated by form |
| N   | Iunicipal Solid Waste   | * 1,967                 | 1,900.00       |                     |                 |           |                                   |             |                                     | 0.00                                     |
|   | Recycling Program*  | * 1,967                 | 190.00         |                     |                 |           |                                   |             |                                     | 0.00                                     |
|   | Yard Waste Program  | n                       | 415.00         |                     |                 |           |                                   |             |                                     | 0.00                                     |
|   |   | s (calculated by form): |                |                     | 0.00            |           | 0.00                              |             | 0.00                                | 0.00                                     |
|   | *for materials collected and sent for eventual disposal in a Municipal Solid Waste or Construction and Demolition Landfill.   |                         |                |                     |                 |           |                                   |             |                                     |  |
|   | **for materials collected by public recycling programs, reported in the Table on page 5. Do not include special waste services.   |                         |                |                     |                 |           |                                   |             |                                     |  |
| 65.   | If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide the total budget for facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate costs proportionately. Landfill Budget: |                         |                |                     |                 |           |                                   |             |                                     |  |
|   | Tra   | t:                      | \$             | S                   |                 |           |                                   |             | _                                   |  |
|   | Yar   | d Waste / Compost       | Facility Budg  | et: \$              |                 |           |                                   |             |                                     | _  |
|   | Rec   | ycling Facility Bud     | get:           | 9                   | \$              |           |                                   |             |                                     | _  |
| 66.   | What was your govern  | nment's total combin    | ned annual bu  | dget f              | or all solid v  | vaste an  | d recycli                         | ng services | in 20-21? \$_560,                   | 000.00                                   |

# Part VIII. Mandated Programs

Only Counties need to complete questions 67 through 85. Part VIII is applicable to NCGS Chapter 130A - Article 9, Part 2D, "Management of Discarded White Goods" and Part 2B, "Scrap Tire Disposal Act." <u>Municipalities</u> should skip to Part IX on page 11.

|     | ITE GOODS  |                     |                  |                                     |             |  |  |  |  |
|-----|--|---------------------|------------------|-------------------------------------|-------------|--|--|--|--|
| 67. | Please provide contact information for the person responsible  | for the white goods | 1 0              |                                     |             |  |  |  |  |
|     | Name:  |                     | Title:           |                                     |             |  |  |  |  |
|     | Mailing Address:   | City:               |                  | Zip:                                |             |  |  |  |  |
|     | Phone: Email:  |                     |                  |                                     |             |  |  |  |  |
| 68. | Please provide the physical address of the primary County wh<br>Physical Address:  |                     |                  |                                     |             |  |  |  |  |
|     | GPS Coordinates (decimal degree system):   |                     |                  |                                     |             |  |  |  |  |
| 69. | Please provide contact information and license number of the   |                     |                  |                                     |             |  |  |  |  |
|     | Name:  |                     |                  |                                     |             |  |  |  |  |
|     | Refrigerant Extraction License #:  | Refrigerar          | nt Extraction Li |                                     |             |  |  |  |  |
|     | Mailing Address:   |                     | ddress:          |                                     |             |  |  |  |  |
|     | Phone: Email:  | Phone:              |                  | Email:                              |             |  |  |  |  |
| 70. | Provide the types and amounts of refrigerants removed from v   | white goods.        |                  |                                     |             |  |  |  |  |
|     | Type of Refrigerants Removed   | Amount              |                  |                                     |             |  |  |  |  |
|     |  |                     |                  |                                     |             |  |  |  |  |
|     |  |                     |                  |                                     |             |  |  |  |  |
|     |  |                     |                  |                                     |             |  |  |  |  |
|     |  |                     |                  |                                     |             |  |  |  |  |
| 71. | Refrigerants may be recycled or sent for destruction. Provide  Business Name and Phone Number  | Method of I         |                  | nd amount earned / p  Amount Earned |             |  |  |  |  |
|     | Dusiness Ivaine and Filone Ivainder  | Method of 1         | Disposai         | Amount Earned                       | Amount Faiu |  |  |  |  |
|     |  |                     |                  |                                     |             |  |  |  |  |
|     |  |                     |                  |                                     |             |  |  |  |  |
| 72. | Tons of white goods received:  |                     |                  |                                     |             |  |  |  |  |
| ,   | Tons of white goods from cleanup activities:   |                     |                  |                                     |             |  |  |  |  |
|     | Total Tons (also list in #44 on page 5):  0.00   | Rep                 | oorted in #44 or | n page 5? Yes                       | ☐ No        |  |  |  |  |
| 73. |  | \$                  |                  |                                     |             |  |  |  |  |
|     | Monies earned from the sale of white goods   | \$                  |                  |                                     |             |  |  |  |  |
|     | Monies earned from the sale of extracted refrigerants  |                     |                  |                                     |             |  |  |  |  |
|     | Monies from other sources  |                     |                  |                                     |             |  |  |  |  |
|     | Total Revenue:   | \$ 0.00             |                  |                                     |             |  |  |  |  |
| 74. | The NCGS Management of Discarded White Goods requires that the white goods tax proceeds distributions be used for the management of discarded white goods. Provide the amounts and types of expenditures the white goods tax proceeds distributions were used for: |                     |                  |                                     |             |  |  |  |  |
|     | Capital Improvements: \$   |                     |                  |                                     |             |  |  |  |  |
|     |  |                     |                  |                                     |             |  |  |  |  |
|     |  |                     |                  |                                     |             |  |  |  |  |
|     |  |                     | describe:        |                                     |             |  |  |  |  |
|     |  |                     | <br>,            |                                     |             |  |  |  |  |
|     |  |                     |                  |                                     |             |  |  |  |  |

| 75.        | •  | mation for the person responsible fo    |               |            |                    |
|------------|--|---|---------------|------------|--------------------|
|            |  |   |               | 7'         |                    |
|            |  | Emaile                                  |               |            | Zip:               |
| <b>5</b> . |  | ·                                       |               |            |                    |
| 76.        |  | address of the primary scrap tire col   |               |            |                    |
|            | Physical Address:  GPS Coordinates (decimal d                  | egree system):                          |               |            |                    |
| 77.        |  | gram - Tons Collected July 1, 2020      |               |            |                    |
| //.        |  | as originated in NC in the normal co    |               |            | Tons               |
|            | *  | unup activities - costs reimbursed by   |               |            | Tons               |
|            | Tons of scrap tires from fees                                  | •                                       |               |            | Tons               |
|            | *  | harged - costs not reimbursed by DI     | EO            | -          | Tons               |
|            | Total Tons:  | 5                                       |               | 0.00       | Tons               |
| 78.        | Indicate the types of scrap ti                                 | res received                            |               | 0.00       | 10118              |
| 70.        | •                        | k % Off-Road %                          | Agricultural  | % Cleanu   | p % Out of State % |
| 79.        |  | gram - Revenue July 1, 2020 - June      |               | ,,         | r , ,              |
| 19.        |  |   |               | May) \$    |                    |
|            |  | t Fund Grants (if applicable: Jul and   |               |            |                    |
|            | Scrap Tire Cleanup Reimbu                                      | ` **                                    | ,             | Φ.         |                    |
|            | Scrap Tire fees collected:                                     |   |               | Ф          |                    |
|            | Total Revenue:   |   |               | \$ 0.00    |                    |
| 80.        | Saran Tira Managamant Pro                                      | gram - Expenditures July 1, 2020        | Juna 30, 2021 |            |                    |
| 80.        | FY contract cost for disposa                                   |   | June 30, 2021 |            |                    |
|            | FY contract cost for shippin                                   |   |               |            |                    |
|            | Additional scrap tire manage                                   |   | describe:     |            |                    |
|            | Total Expenditures:  | 0.00                                    | describe.     |            |                    |
|            | •  |   |               |            |                    |
|            | -  | sposal/processing:                      |               |            |                    |
| 81.        | Scrap Tire Disposal/Process                                    | ing Company                             |               |            |                    |
|            | Company Name:  | · · · · · · · · · · · · · · · · · · ·   | Phone:        | Emai       | il:                |
|            | Physical Address:  |   |               |            |                    |
| 82.        | If scrap tires were not hauled in a MSW landfill? Ye           | d off site for treatment or disposal in | •             | •          | disposed of        |
| 83.        | Suggestions for scrap tire di<br>proceeds distribution alterna |   |               |            |                    |
| 84.        | Scrap tire management proglimitations, other than mone         |   |               |            |                    |
| MA         | NAGEMENT OF ARA  | ANDONED MANUFACTUR                      | RED HOMES     | BY COUNTIF | NS                 |
|            |  | whether to implement a program fo       |               |            |                    |
|            |  | loped a written plan for the manager    | •             |            |                    |

# Part IX. Disaster Preparedness - COUNTIES and MUNICIPALITIES TEMPORARY DISASTER DEBRIS STAGING SITES Does your local government have a plan in place for management of disaster debris? 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? 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: WES THOMAS Phone: 252-341-8249 Phone: Phone: E-mail: WTHOMAS@FARMVILLENC. E-mail: E-mail: Please list the temporary disaster debris staging sites in your county or municipality which have been reviewed for conflicts with the Natural Heritage Program (NHP) and the State Historic Preservation Office (SHPO) through coordination with the Solid Waste Section. 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 state resources after a disaster may cause difficulty for local governments when attempting to obtain FEMA reimbursement. Attach extra sheets, if needed. Disaster Site # Disaster Site # Site Name Site Name 001 WEST PINE STREET COMPLEX 90. Does your plan address the management of: X Household hazardous waste Mass animal mortality Abandoned vessels X White goods 91. Does your plan include coordination with NC DOT on clearing roads and waste in the right of way? Yes No Part X. Comments Use this section to elaborate on any info provided in your report as necessary. Have there been major changes to your recycling or solid waste program since last year? Do you expect upcoming changes to your programs? How were your programs affected by COVID-19? Do you have new or updated ordinances that affect your programs? You may submit additional sheets if needed. Editor notes (SS): #46 reported 72 tons of cardboard collected by Town. Since Town collects, moved to cardboard Other column in #44. Editor Note (TN): Changed #11 from yes to no because they did not list a program for source reduction (QC).

This form is to be submitted electronically. If you require assistance, please contact one of these NC DEACS staff members:

Tara Nattress, email: tara.nattress@ncdenr.gov phone 919-707-8123 Carol Abken, email: carol.abken@ncdenr.gov phone: 919-707-8138

#### THIS FORM IS DUE SEPTEMBER 1, 2021

The Division of Environmental Assistance and Customer Service Local Government Assistance Team is ready to assist you in any way we can. Please visit <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 Lgteam@ncdenr.gov

