

### 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: <a href="http://deq.nc.gov/about/divisions/waste-management/solidwaste-section/annual-reporting">http://deq.nc.gov/about/divisions/waste-management/solidwaste-section/annual-reporting</a>

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 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 **ERWIN** 

### **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.

Peı	rson Completing This Report: MARK BYR	Title	Title: PUBLIC WORKS DIRECTOR			
Ma	niling Address: PO BOX 459		City: ERWIN			Zip: 28339
Pho	one: 910-897-5876				Date: 9-9-1	9
Em	nail: mbyrd@erwin-nc.org					
		Gene	eral Instructions			
	ase remember that the time period for the repart a specific question.	port is JULY 1, 20	18 through JUNE 30, 20	19. Ple	ase check "N	o" if you have nothing to report
1.	Did your local government have a Recycli	ing Coordinator or	similar position for FY	18-19?	Yes	⊠ No
	Name Recycling Coordinator (if different	from person comp	oleting this report.)			
	Name:			e:		
	Address:		City:	_		Zip:
	Telephone:	Email:				
2.	Did your local government have a Solid V	Vaste Director or s	imilar position for FY 18	3-19?	Yes	No No
	If Yes, Name:			Title	e:	
	Address:		City:			Zip:
	Telephone:	Email:				
3.	Did your local government have <b>dedicate</b>	d or part-time So	lid Waste Enforcement S	Staff for	FY 18-19?	Yes No
	If Yes, Name:			Title	e:	
	Address:		City:	_		Zip:
	Telephone:	Email:				
4.	Did your local government have solid was all that apply)					
	☐ Disposal Bans ☐ Illegal Dumping	Littering	Construction & Der	molitio	n Othe	r:
5.	Did your local government manage, provi mulching, composting)?	de or contract for a	any solid waste services	in FY 1	8-19 (e.g., co	ollection, disposal, recycling,

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

	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?							
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? $\square$ Yes $\bowtie$ No							
12.	Did your local government offer a waste exchange or reuse program?							
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 <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 participate</b> in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; <b>then go to Part IV on page 7</b> .)							
	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)							
	Franchised hauler (please specify)							
	Other (please specify)							

1/.	Please provide the following information about your community:							
	a. Total number of households in your jurisdiction? 2,013							
	b. Number of households eligible to participate in the curbside recycling program: 1,923							
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary):							
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  Description:  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 / 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							
J1.	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:							
	, i i i g /y							

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):
2.6	
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:
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?
OT	HER 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? $\  \  \  \  \  \  \  \  \  \  \  \  \ $
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.

PD 0 CD 115	Curbside  ⊠ if Yes Tons		D	rop-off	All "Oth	er" Programs	<b>Total Tons</b>
PROGRAM			⊠ 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:							
Aluminum Cans							
Steel Cans							
PAPER:							
Newsprint (ONP)							
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper							
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT		Report all tons	in Other coli	ımn			
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc)	-						
Televisions	-						
Other Electronics	-						
C&D Materials Recycling	-	Report all tons	in Other coli	ımn			
White Goods	-						
Other Metal							
G 111 1 1 1							
Commingled tons-check all items collected above*	· 🖂	175.23					175.23
TOTAL TONS:		175.23					175.23

If you checked commingled, which material recovery facility does your community use: harnett county landfill

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.

Special Waste Collections (Do Not Include Materials Collected as part of an HHW Collection Program or Event) Did program collect this **Special Waste Programs for Collecting** # of Data on quantities collected / managed. material from the public? Materials from Citizens by Material Type Please report in indicated units. sites Used Motor Oil Yes gallons Used Oil Filters barrels, or lbs Yes Used Antifreeze Yes gallons # batteries, or Batteries, Lead Acid Yes 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 Yes llbs type here: Pesticide Containers (NCDA Program, not # con-Yes lbs, or pesticides themselves) tainers NCDA Pesticide Disposal Assistance Program Yes lbs (for management of pesticides, not containers) Latex Paint (do not include paint collected at gals, Yes lbs HHW event or by a paint exchange program) Household Hazardous Waste (HHW) and Very Small Quantity Generator (VSQG) Program or Event 47. Did your local government operate a household hazardous waste collection program or event in FY 18-19? No No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event b. How many days was your HHW Program open to accept materials during this Fiscal Year? c. Did you partner or co-sponsor your HHW program with another <u>local government?</u> Yes Please list partner(s) 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 (Very Exempt Small Quantity Generators)? If yes, please estimate the amount of business material managed f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize below. If data about individual materials is not available, please simply provide total quantity of materials collected by HHW program in 47g below. Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in question 46. Used Motor Oil (gal) \_\_\_\_\_ Used Oil Filters \_\_\_\_ # of Barrels, or \_\_\_\_ lbs. Used Antifreeze (gal) Lead Acid Batteries (lbs) Other Batteries (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs) g. Provide Total Quantity of materials collected by HHW Program. If individual materials were pounds reported in 47f, please net the weight of those materials out of the total listed here. h. Please list HHW Collection Contractor i. Estimated cost of HHW / VSQG program or event(s) \$ Pages 3 through 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling services. All governments answering "Yes" to question #5 on page 1 should complete the rest of the report with the exception of Questions #66 - #88

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

which are for Counties only.

		Part I	V. Yard Waste	, Mul	ching and	l C	Composting	g Managemo	ent	
			in sanitary landfills, in naterials in this section		rs, or in unpe	rmi	tted sites and i	t is illegal to burn	n. Do not include informati	0
18.	•	-	t operate a yard waste : Collected curbside						w yard waste is managed baste, compost, or LCID fac	-
19.	Did a storm ev	ent significar	ntly impact the amount	of yard v	waste your go	ver	nment managed	d during FY 18-19	9? Yes No	
50.			s were managed by you ste, brush, limbs, leav						DR CUBIC YARDS of /cubic yd.	
		Destina	tion	Check if used	Tons		Cubic Yards	Facility	Name and Location	
	End user (to fa	rmer or home	e-owner)			or				
	Your local gov	ernment's mu	alch or compost facility	у		or				
	Other public m	ulch or comp	oost facility			or				
	Private mulch	or compost fa	acility			or				
	Land clearing a	and inert deb	ris landfill (LCID)			or				
	Energy / Fuel U	Jse (e.g. boil	er fuel market)			or				_
		Tota	l			or				
	volume manag	ed by progra	m in the appropriate bo	oxes abov	Ye. Ex. 10 c	ubic	yard truck x 3	days/wk x 16 wks	cubic yard	!s
	Size of Truc	k (in yards)	Avg. no. of times truc						TOTAL	
			Part V. S	olid V	Vaste Col	lec	tion Servi	ces		
51.	Please complet	e the followi	ng table about your go	vernmen	t's solid waste	e (ga	arbage) collecti	on system.		
	Sector		ll ll		ow is Solid Waste Collected?  Insert # - see codes at right  a Local government amployees 1. Once a					
	Residential	Primary b	- see codes at right	imary imary	- see codes a	ı rıg	a. Local g		s 1. Once a week at household 2. Twice a week at household	
	Commercial	Primary		imary	Secondary	+		ise haulers government not	<ul><li>3. Convenience center/greenbox</li><li>4. As needed or by request</li></ul>	í
	Industrial	Primary	Secondary Pr	imary	Secondary			ed in provision of	5. Daily 6. Other	
52.	If you provide	residential w	aste collection at single	e-family	households in	ı yo	ur jurisdiction,	please answer the	e following questions:	
	What type of c	ollection met	thod is used?	Fully Aut	omated	] Se	emi-Automated	Manual	Don't know	
	What is the sta	ndard collect	ion frequency? 🔀 V	Weekly	Two t	ime	s per week	Other		
	What is the typ	ical service p	point for single family	househol	d waste?	$\boxtimes$	Curbside	Back yard / Ba	ck door	
	What type of c	ollection con	tainer is used?	Governme	ent-provided	cart	s Reside	nt-provided conta	ainer Bags	
	Do you offer b	ulky waste co	ollection services?	X Yes	☐ No					
53.	-	•	r government collect w vered to the county for	_			Yes No	]No		
		Par	t VI. Solid Was	ste and	,			al Activities	S	
54.	Did <b>your local</b> issues / activiti	governmen	t have an education pro	ogram to	<u> </u>	ns s	pecifically abo		nagement and / or recycling	g
55.		ш	budget for solid waste	_	-	_	Ť.	s: \$		
56.	Does your com	munity prod	uce recycling education	n and out	treach materia	als i	n languages be	sides English?	Yes No	
	·	• •	guages used: spanish						_	
	-		- <u>-</u>							

57					ement and Fun C						
	57. Did your local government operate an Enterprise Fund for solid waste services in FY 18-19? Yes No. NC Solid Waste Disposal Tax proceeds are distributed to eligible local governments on a quarterly basis by the Department of Revenue.										
50.	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 governm	nent receive Solid V	Waste Disposal Tax	distributions?	$\boxtimes$	Yes N	lo				
	If yes, how are disposa	l tax distributions b	eing used?								
59.	What other funding sou	irces does your loca	al government use?								
	Tipping fees		∑ Volume/we	•		Tire tax					
	☐ Property tax ☐ Per househo	tes / general fund	Sale of recy Grants	yclables		White Goods tax					
60.	If applicable, please pr	$\mathcal{C}$		follow example	format):						
00.	ex: \$ \$75.00	per	year per		household	for solid was	te				
	a. \$ 7.22		1		usehold	 for solid was	te				
			1		usehold	for recycling					
	c. \$ 7.5	per month	1		usehold	for yard wast					
				per		for bulky was	ste				
	e. \$	per		per		availability fo	ee				
	f. \$ 18.14				usehold		_				
61.	Did your local governm	nent operate a Pay-A	As-You-Throw pro	gram for reside	ential garbage during FY	18-19? (a system	where residents				
	are charged a fee by we	-		-							
	cording to <i>GS 130A-309</i> form users of such costs.		ments are required	to conduct ful	ll cost accounting annua	ally and to develo	p a system to				
62.		nt contracts for soli	•		ase report the annual cont	ract amount.					
	\$		_ For solid waste s		ar						
	\$		_ For recycling per	r year							
	0000		OR								
	\$209,721 Combined Contract (solid waste, and recycling)										
63.	Collection Programs: Please complete the following table to the best of your ability to display the full costs of your local government's collection programs for waste, recyclables and yard waste including materials collected from convenience centers. If full cost analysis is										
	not available, please r				ls collected from conven	ience centers. If f	ull cost analysis is				
		# of Households served	Tons Collected	Collection C	Cost Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)				
M	Iunicipal Solid Waste*		1,467.5			0.0111000					
	Recycling Program**		175.23				(				
	Yard Waste Program		1,600				(				
		(calculated by form):	3,242.73				_ (				
_					ction and Demolition Landfill.						
61			_		mmercial and industrial general facility or recycling facil	_					
04.		nd to nearest dollar	). If budgets for dif	fferent facilities	s are combined, please at	tempt to allocate of					
		sfer Station Budget			-						
		_	: \$ Facility Budget: \$								
		cling Facility Budg					-				
65.	-		,		te and recycling services	in 18-19? \$209,00	-00				

# 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	Title:					
	Name:					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	. ,,,,	rming 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 CF0	⊂ disnosal
70.	Firm	a. Give in			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 Tonnaş	ges table on page 5 (qu	estion # 43). Was
72.	List the amount of revenue for the white good	ds progra	nm 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
	Clean-up of Illegal White Goods Dumps: \$						
	Total Expenditures: \$						

	Please provide name, address, phone number, and e-ma	ail of ners	on responsible for	r scran tires nroor:	am			
/ <b>T.</b>	Name:							
	Address:				Zip:			
	Telephone: Fax:							
75.	Please provide the physical address of the primary cour Street 1:							
	Street 2:							
	City:		State: North	n Carolina	Zip:			
76	Tonnage/Number of scrap tires disposed July 1, 2018-J	June 30, 20	019 ( <u>excluding</u> tir	res from cleanup of Number of tires	of nuisance sites)			
77.	Tonnage/Number of scrap tires disposed from cleanup  Tons or	of state or	county designate	ed nuisance sites Number of tires				
78.	Indicate the types of tires collected by the county:  Passenger % Heavy Truck	<u>%</u>	Large Off-Road	d %	Agricultural	%		
79.	List the amount of revenue for the scrap tire program b Revenue from Scrap Tire Tax Distributions:							
	Revenue from Scrap Tire Fees:	\$			<u></u>			
	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 c	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 contr	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 I	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	e managen	nent of abandoned	d manufactured h	nomes? Yes	No		
TE	MPORARY DISASTER DEBRIS STAGINO	G SITES	S - Counties a	nd Municipali	ities			
89.	Does your local government have a plan in place for m	•		<del></del>	☐ 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			anagement or FEN Yes	MA to ensure it meets t	he basic		

91.	Please list the name, co your local government: Name:	ntact numbers(s), and e-mail address of the Name:	pei	, ,	ne disaster debris management program for  Name:			
	Phone:	Phone:			Phone:			
	E-mail:	E-mail:			E-mail:			
92.	Natural Heritage Progra Please note that the vetting of	y disaster debris staging sites in your count am (NHP) and the State Historic Preservati f a site prior to a disaster is advantageous to local go y cause difficulty for local governments when attempt	on ( verni	Office (SHPO) through ments because a staging site	gh coordination with the Solid Waste Section. ite which is found to have impacted federal or state			
	Disaster Site #	Site Name		Disaster Site #	Site Name			
93.	Does your plan address the management of:   Household hazardous waste   Mass animal mortality							
		Abandoned vesse	S	White go	ods			
94.	Does your plan include	coordination with NC DOT on clearing roa	ads	and waste in the right of	of way? Yes No			
		Part IX. C	or	nments				

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.

Editor (EB): Emailed Mark Byrd, received yard waste tonnage and total combined annual budget for all solid waste and recycling services.

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/local-government-recycling-assistance or e-mail us at Lgteam@ncdenr.gov

