

### State of North Carolina

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

# Solid Waste and Materials Management Annual Report July 1, 2017 -- June 30, 2018

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

On the following pages you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2017-2018. Each North Carolina County and Municipality is required to complete this report annually. Completion and submission of this report will fulfill the annual reporting mandate to the state as required by G.S. 130A-309.09A. Failure to complete and submit this report could result in the local government being excluded from distributions of Solid Waste Disposal Tax Proceeds and other Department of Environmental Quality grants.

#### **Instructions:**

Each local government should determine which staff member is responsible for preparing and submitting the annual report and ensure that the report is completed and submitted before the reporting deadline on September 1, 2018.

Options for obtaining a blank copy of this form:

- $1-download\ a\ copy\ of\ the\ form\ from\ this\ web\ site:\ \underline{http://deq.nc.gov/about/divisions/waste-management/solid-waste-section/annual-reporting}$
- 2 call the Division of Environmental Assistance and Customer Service at 877-623-6748
- 3 request a copy of the form by sending an email to Lgteam@ncdenr.gov.

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

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

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

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

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

Form Year

2018



Local Government Report Form

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

## **State of North Carolina**

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

# Solid Waste and Materials Management Annual Report July 1, 2017 -- June 30, 2018

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

		Please submit this forn	n to Lgteam@ncdenr.gov by <b>Septembe</b>	r 1, 2018.
	If you have que.	stions or need assistance	completing this form, please call 919	9-707-8136 or 919-707-8133.
Per	son Completing This Repo	ort:	Title	e:
Ma	iling Address:		City:	Zip:
Pho	one:	Fax:		Date:
Em	aail:			
			General Instructions	
	ase remember that the time a specific question.	period for the report is JUL	Y 1, 2017 through JUNE 30, 2018. Ple	ase check "No" if you have nothing to report
1.	Did your local governme	ent have a Recycling Coordi	nator or similar position for FY 17-18?	⊠ Yes □ No
	Name Recycling Coordi	nator (if different from perso	on completing this report.)	
	Name:		Title	o:
	Address:		City:	Zip:
	Telephone:	Fax:	Email:	
2.	Did your local governme	ent have a Solid Waste Direc	etor or similar position for FY 17-18?	∑ Yes □ No
	If Yes, Name:		Title	2:
	Address:		City:	Zip:
	Telephone:	Fax:	Email:	
3.	Did your local governme	ent have <b>dedicated or part-</b>	time Solid Waste Enforcement Staff for	FY 17-18?
	If Yes, Name:		Title	o:
	Address:		City:	Zip:
	Telephone:	Fax:	Email:	
4.	Did your local governme all that apply)	ent have solid waste ordinand	ces in place addressing any of the follow	ving during FY 17-18? (if yes, please check
	Disposal Bans		Littering Other, Please Describe	e:
5.	Did your local government mulching, composting)?	ent manage, provide or contr	act for any solid waste services in FY 1	7-18 (e.g., collection, disposal, recycling, Yes No
	If you an	swer "No" to question 5,	the report is complete, please email to	o Lgteam@ncdenr.gov.

### Part I. Waste Reduction and Recycling Programs Serving Government Facilities The following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. Did your local government have a recycling program in place for collecting recyclable materials generated at X □ No public buildings in FY 17-18? 7. Did your local government have any program or policy encouraging or requiring local agencies to X No purchase products with recycled content? Did your local government have a program in place to collect and recycle spent fluorescent lights X No | Yes generated from the public buildings and facilities that were operated by your government in FY 17-18? Part II. Waste Reduction and Recycling Programs Serving the Public SOURCE REDUCTION / REUSE Did your local government have a backyard composting program? Yes X No If yes, please check all backyard composting activities that apply: Education Demonstration site(s) Bin distribution/sales Number of Bins distributed? Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes X No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives? Did your local government offer a waste exchange or reuse program? Yes X No 13 If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public: Paint exchange Number of gallons recovered? Swap shop/shed Number of sheds in use? Other (e.g. pallet exchange, etc.) PUBLIC RECYCLING SERVICES Which of the following responses best describes your recyclables recovery activities for the period July 1, 2017 through June 30, 2018? My local government **DID operate or contract** for a recyclables recovery program. (please continue to question 15) My local government DID NOT operate or contract for recyclables recovery BUT DID participate in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; then go to Part IV on page 7.) With which local government did you participate? My local government **DID NOT operate**, contract or participate in a recycling program. (Go to Part IV on page 7.) If your local government **DID** operate or contract for a recyclables recovery program, please indicate in the following sections the type of program in operation and provide specifics about your program(s). **CURBSIDE RECYCLING PROGRAM** Did your government operate a Curbside Recycling Program? X Yes No, skip to question # 25 Who collected the recyclable materials for your local government's curbside recycling program? 16. Local government employees Private contractor (please specify) **WASTE INDUSTRIES** Franchised hauler (please specify) Other (please specify)

1/.	Please provide the following information about your community:
	a. Total number of households in your jurisdiction? 450
	b. Number of households eligible to participate in the curbside recycling program: 450
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 450
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: 15
21.	How frequently were the curbside recyclables collected?  Once a week  Every other week / biweekly  Other
22.	Please describe the collection containers used:  ☐ Bins ☐ Blue bags ☐ Multi-bin system ☐ Roll-out carts
23.	Please describe the method / style of recyclable materials handling:  curb-sort (collector separates material as collected)
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used:
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
mate	use answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any erials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.
32.	
	If you did operate an electronics recycling program, please indicate style of program:
	Permanent - Curbside Collection Permanent - Drop-off Scheduled Collection Day or Event Part of HHW Program  If you offer surficide collection of electronics is it. The encirclement or The encirclement of th
	If you offer curbside collection of electronics is it:  by appointment or  unscheduled
	If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:

33.	Did your electronics recycling program collect or accept televisions from (check all that apply):   Residences   Businesses
34.	Did your electronics recycling program collect or accept computer equipment from (check all that apply):   Residences  Businesses
35.	DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was eligible to receive proceeds from the State Electronics Management Fund in February of 2018, please provide the following information:
	Electronics Management Fund balance as of July 1, 2017: \$
	Electronics Management Funds received from DEQ during FY 17-18 (Feb 2018 distribution): \$
	Electronics Management Funds spent during FY 17-18: \$
	Electronics Management Fund balance as of June 30, 2018: \$
36.	Briefly explain how Electronics Management Funds were spent during FY 2017-18 (please list items purchased if applicable):
37.	If you did operate an electronics recycling program, please provide the following information about your vendor / contractor:  Name of electronics recycling vendor(s) during FY 17-18:
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?
OT	THER PUBLIC RECYCLING PROGRAMS
the	ase answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ycling Tonnages Chart on pg 5.
38. 39.	Did your local government operate a multifamily recycling collection program that provides on-property recycling service for residents of multifamily properties in a manner other than through your curbside or dropoff recycling programs? $\  \  \  \  \  \  \  \  \  \  \  \  \ $
	other than through your curbside or dropoff recycling programs? Yes No
40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served:
	Public drop-off recycling sites available for ABC On Premises Permit holders to use
41.	Does your local government operate a program to recycle Construction and Demolition materials?  Yes  No If yes, please check all materials that were recycled and report tonnages in tonnage table on page 5:
	☐ Clean Wood ☐ Brick, concrete, etc. ☐ Sheetrock ☐ Vinyl siding ☐ Shingles ☐ Metals ☐ Other
42.	Does your local government have an ordinance regulating the construction and demolition waste stream with the intention of encouraging or requiring waste reduction or recycling of these materials?
43.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 17-18. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	☐ Public Parks Recycling Program ☐ Athletic Field /Venue Recycling Program
	Pedestrian Recycling Program Recycling Service for Special Events / Festivals
44.	Please identify all "Other" programs or services operated by your government during FY 17-18. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	Public School Recycling Program
	Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)
	Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events
	Organics / Food Waste Recycling other than yard waste program
	Oyster Shell Recycling Program
	Other Programs (please specify)
	Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.

#### RECYCLING TONNAGES FROM PUBLIC PROGRAMS

- 45. a. Enter data in the table below for ALL recycling programs operated or contracted for by your local government. Provide TONNAGES (or estimates) for each material collected for the period JULY 1, 2017 through JUNE 30, 2018. DO NOT include materials that were not collected or managed by your local government either directly or under contract to a private service provider.
  - b. Do NOT report YARD WASTE, TIRES, HHW, USED OIL, OIL FILTERS, ANTI-FREEZE, BATTERIES or other SPECIAL WASTE tonnages on this page - these items should be reported in other sections of report form. See page 6 for SPECIAL WASTES.
  - c. Please report materials collected in tons only. Please only extend numbers to two decimal places (x.xx).
  - d. If you collected single stream or other commingled materials, record Tons in the "Commingled tons" row and then check the box for

DD OCT 135	Cu	ırbside		Drop-off	All "C	Other" Programs	<b>Total Tons</b>
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear							
Brown							
Green							
Mixed							
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans					ΙП		
Steel Cans							
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)							
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper							
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled tons-check al items collected above		208					208
TOTAL TONS:		208					208
					•		

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

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

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

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

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

47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type	1 0	n collect this m the public?	# of sites	Data on quanti Please repo	ties collected ort in indicat		
	Used Motor Oil	Yes	⊠ No				gallons	
	Used Oil Filters	Yes	⊠ No		barrel	s, or	lbs	
	Used Antifreeze	Yes	⊠ No			-	gallons	
	Batteries, Lead Acid	Yes	⊠ No		# bat	teries, or	lbs	
	Batteries, Dry Cell	Yes	⊠ No				lbs	
	Fluorescent Bulbs/Lights Containing Mercury	Yes	⊠ No		lb	os, or	# bulbs	
	Propane Tanks	Yes	⊠ No		lb	os, or	# tanks	
	Used Cooking Oil / Waste Vegetable Oil	Yes	⊠ No		lb	os, or	gallons	
	Other Special Wastes - please provide waste type here:	Yes	⊠ No			·	lbs	
	Pesticide Containers (NCDA Program, not pesticides themselves)	Yes	⊠ No		lb	os, or	# containers	
	NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)	Yes	⊠ No				lbs	
	Latex Paint (do not include paint collected at HHW event or by a paint exchange program)	Yes	⊠ No		ا ا	als, or	lbs	
	Did your local government operate a household If Yes, please respond to the following question a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program of c. Did you partner or co-sponsor your HHW program of the collected at a permitted Tempora of the collected	s: ary Event or a pen to accept i	t a Permanent materials duri	HHW (	Collection Facility Fiscal Year?		Yes No	mp. Event
	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 business	all businesses	(Conditionall	y Exem	pt Small Quantity		? Yes	No
	<ul> <li>f. Amounts of individual materials collected by about individual materials <u>is not</u> available, p Note, materials listed here should only be the</li> </ul>	lease simply	provide total c	quantity	of materials colle	cted by HHV	W program in 48	g below.
	Used Motor Oil (gal)	Use	ed Oil Filters		_ # of Barrels, or	:	lbs.	
	Used Antifreeze (gal)	Lea	d Acid Batter	ies (lbs)	Ot	her Batteries	s (lbs)	
	Fluorescent Bulbs / Lights Containing	ng Mercury (l	bs)					
	<ul><li>g. Provide Total Quantity of materials collected reported in 48f, please net the weight of thos</li><li>h. Please list HHW Collection Contractor</li></ul>	e materials or	ut of the total	listed he	ere.			pound —
	_							_
	i. Estimated cost of HHW / CESQG program of es 3 through 6 should have only been complet					t they DO n	rovide recycline	o sprvicos
· ug	os o monagni o snoum nuve omy ocen complet	on by govern	mones mucu	verig ere (	Incomon # 17 mm	i incy DO P	rorius recycilliz	, DUI VILLE

All governments answering "Yes" to question # 5 on page 1 should complete the rest of the report with the exception of PART VIII which is only to be completed by Counties.

		Part IV. Yard Waste,	, Mul	ching and <b>(</b>	Compostin	g Managem	ent
ипре	ermitted sites an	rns management of vegetative mat nd it is illegal to burn. Composting nent of vegetative materials. Do not	and mi	ılching are popi	ılar manageme	nt options. Please	e answer the questions below
49. 50. 51.	checking all the Did a storm ev What quantitie	al government operate a yard waste p at apply:  Collected curbside ent significantly impact the amount of as of materials were managed by your rial (yard waste, brush, limbs, leave	Collectof yard w	ted at convenien waste your gove vaste program?	ce center Rrnment manage	eceived at yard w d during FY 17-18 ation in TONS <u>C</u>	8? Yes No  OR CUBIC YARDS of
		Destination	Check if used	Tons	Cubic Yards		Name and Location of Facility g Vegetative Materials
	End user (to fa	armer or home-owner)	$\boxtimes$	24			
	Your local gov	vernment's mulch or compost facility	$\boxtimes$	62.4		OLD LAGOON YARD	WASTE SITE HAWKS RD.
	Other public m	nulch or compost facility					
	Private mulch	or compost facility					
	Land clearing a	and inert debris landfill (LCID)					
	Energy / Fuel U	Use (e.g. boiler fuel market)					
		Total		86.4			
	estimate yard v	E MANAGEMENT FORMULA: If waste volume. Calculate for each trued by program in the appropriate box	ck used	in your yard wave. Ex. $10 \text{ yd}^3$	ste managemen	t program, and the	en enter the grand total $yd^3$
	Size of Truc	x Avg. no. of times truck	fills each	XX	truck is used during	=	TOTAL $yd^3$
	Size of True			Vaste Colle			
This	section concern	as your local government's provision					
52.		te the following table about your gov					
	Sector	Who Collects Solid Waste? Ho Insert Letter - see codes at right	Insert #	- see codes at ri	ght a. Local		How is Solid Waste Collected?
	Residential			1 Secondary	b. By Co	ontract nise haulers	<ul><li>2. Twice a week at household</li><li>3. Convenience center/greenbox</li></ul>
	Commercial Industrial		nary nary	Secondary  Secondary		government not red in provision of	<ul><li>4. As needed or by request</li><li>5. Daily</li><li>6. Other</li></ul>
<b>~</b> 0							
53.	• •	residential waste collection at single	•		v	•	
	* *	_	•		Semi-Automated		Don't know
		1 2	eekly		es per week	Other	
	• •	pical service point for single family h		<u>-</u>	Curbside [		
		ollection container is used?	overnm	•	ts Reside	ent-provided conta	ainer Bags
	Do you offer b	ulky waste collection services?	Yes	No No			
54.		ties - did your government collect wite goods delivered to the county for			Yes No	No	
		Part VI. Solid Was		• •	•		
55.	Did <b>your local</b> issues / activiti	<b>I government</b> have an education profes? $\square$ Yes $\square$ No (If N	_	inform citizens to Part VII, page		ut solid waste ma	nagement and / or recycling
56.	Please estimate	e your annual budget for solid waste	related o	education and or	itreach activitie	s: \$	
57.	Does your com	nmunity produce recycling education	and out	treach materials	in languages be	sides English?	Yes No
	If YES, please	list other languages used:					
58.	Please provide	your recycling website address and	public ii	nformation phon	e number if app	olicable.	
	Website:					Phone #:	

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

	ficient resources availab stions deal with funding				-	these programs. T	The following
	Did your local governm With regards to funding Tipping fees Property tax Per househo	g sources, check all s es / general fund	that apply to your  Volume/we  Sale of rec	local government: eight-based fees (e.g	g. PAYT)	Yes	,
61.	NC Solid Waste Dispos According to GS 105-1	87.63 these funds r	must be used by a c				
<b>60</b>	How are disposal tax d	_		4.5.00	, , , , ,	C 1.1	
62.	If applicable, please properties $\frac{60}{}$			-			;
	c. \$	per		per		for yard waste	
	e. \$	per		per		availability fee	2
63.	Did your local governmare charged a fee by we	nent operate a Pay-	As-You-Throw pro	gram for residential	garbage during FY		where residents
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full cos	st accounting annual	lly and to develop	a system to
64.	If your local government \$80,000	nt contracts for soli	d waste or recycling For solid waste s	-	eport the annual conti	ract amount.	
	\$25,000		For recycling pe				
			OR				
	\$105,000		_ Combined Contr	ract (solid waste, an	d recycling)		
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials co		•	0
	, <u> </u>	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
M	Iunicipal Solid Waste*	450	1,200			80,000	6
	Recycling Program**	450	208			25,000	120
	Yard Waste Program	450					-
		(calculated by form):	-		_	105,000	7
66.	*for materials collected and **for materials collected by If your government ope facility operations (roun proportionately. Lan	y public recycling progr erates a landfill, trai	rams including those serves ransfer station, yard v ). If budgets for dif	vices offered to commercy vaste /compost facil fferent facilities are	cial and industrial generate	ity, please provide empt to allocate co	total budget for
	Trans	sfer Station Budget	: \$				
	Yard	Waste / Compost l	Facility Budget: \$				
		cling Facility Budg					
67.	What was your government	ment's total combin	ed annual budget fo	or all solid waste an	d recycling services	in 17-18? \$ <u>110,000</u>	)

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

The following questions pertain to programs mandated by N.C. statute to be provided by each county. Only county governments need to complete this section (questions 68 through 96). Municipalities should skip to Part IX on page 11. Counties - failure to complete Part VIII may result in non-eligibility for grant requests.

WH	ITE GOODS						
68.	Please provide name, address, phon	e number, and e-	mail of person	respons	•	program.	
	Name:				Title: _		
	Address:			City:		Zip:	
	Telephone:						
69.	Please provide the physical address	of the primary co	ounty white go	ods coll	ection site.		
	Street 1:						
	Street 2:						
	City:						
70.	Please provide the name of the busing Name:	-				om white goods.	
	Street:						
	City:			State:	North Carolina	Zip:	
	Phone: F	ax:		Email:	:		
71.	Give amounts / types of CFCs remo		ords of CFC rer	noval, aı	nd copy of certificati		rming extraction.
	Type of CFC	Removed				Amount	
				+			
				+			
72.	CFCs may be recycled or sent for de	estruction Give:	nama of firm	disposal	mothod and amount	parned / spont for CE	C disposal
12.	Firm	zaruction. Give			f Disposal	Amount Earned	
73.	Please report the tonnage of white g white goods tonnage reported on pa		uring FY 2017	-18 in th	e Recycling Tonnag	ges table on page 5 (qu	nestion # 45). Was
74.	List the amount of revenue for the v	white goods prog	ram by source:				
	Revenue collected from sale of scra	p:	\$				
	Revenue collected from White Goo	ds Tax Distribut	ions: \$				
	Revenue from other source (e.g. gra	unts):	\$				
	Total Revenue:		\$				
75.	According to the White Goods Law expenditures White Good Tax Distr						mounts and types of
	Operational Expenses:	\$					
	Capital Improvements:						
	Clean-up of Illegal White Goods D						
	Total Expenditures:	\$					

SC.	RAP TIRES				
76.	Please provide name, address, phone number, and e Name:	-	•		
	Address:				
	Telephone: Fax:		Emai	1:	
77.	Please provide the physical address of the primary of	ounty scrap tire	es collection sit	e.	
	Street 1:				
	Street 2:				
	City:		State: North	n Carolina	Zip:
78.	Tonnage/Number of scrap tires disposed July 1, 201  Tons of	7-June 30, 201 or	8 ( <u>excluding</u> ti	res from cleanup of nu _Number of tires	isance sites)
79.	Tonnage/Number of scrap tires disposed from clean Tons of		ounty designate	ed nuisance sites Number of tires	
80.	Indicate the types of tires collected by the county: Passenger % Heavy T	ruck	%	Large Off-Road	%
81.	List the amount of revenue for the scrap tire program	•			
	Revenue from Scrap Tire Tax Distributions:				
	Revenue from Tire Fees:				
	Revenue from Scrap Tire Clean-up Reimbursement	s: \$			
	Revenue from Scrap Tire Cost-Overrun Grants:				
	Total Revenue:	\$			
82.	County's total scrap tire program contract expenditue excluding costs of nuisance tire cleanups, for FY 17	re (contract dis -18.	posal/hauling c	costs), \$	
83.	County's additional scrap tire program expenditure (Labor \$		renience center	cost), if any.	
	Site Cost \$				
	Other \$	de	scribe Other: _		
84.	County's contract cost for scrap tire disposal. \$		/ Ton; \$	/ Tire	
85.	Hauling cost or fuel surcharge, if not included in co	ntract cost abo	ove. \$	/ Ton; \$	/ Tire
86.	Total tipping fees collected for tires not eligible for	free disposal.	S		
87.	Total number of tires collected not eligible for free	disposal:			
88.	If scrap tires were not hauled off site by contracted	service provide	r, were they cu	t and disposed in a loca	al landfill? Yes No
89.	Name of tire disposal/recycling firm(s):				
TE	MPORARY DISASTER DEBRIS STAGI	NG SITES			
90.	Does your local government have a plan in place for	r management o	of disaster debr	is? Yes	No
	If yes, indicate if the plan is a stand-alone plan or in	conjunction w	ith local goverr	nment agencies:	Stand-alone In conjunction
91.	If you indicated having a plan, has the plan been rev requirements for public assistance reimbursement in			anagement or FEMA to	o ensure it meets the basic  No
92.	Please list the name, contact numbers(s), and e-mail	address of the	person(s) in ch	arge of the disaster del	bris management program for
	your local government:  Name: Name: Name	ne:		Name:	
		-			
	E-mail: E-m				

	Disaster Site #	Site Name		Disaster Site #	Site Name
94. 1	Does your plan address the m	nanagement of household hazardo	ous waste	and white goods follow	ing a disaster? Yes No
	Does your plan address mass		□ No		
	• •				DIEG
		NDONED MANUFACTU			
96. I		whether to implement a program	for the m	anagement of abandoned	d manufactured homes?  Yes  No
]	If yes, has your county devel	oped a written plan for the manag	gement of	abandoned manufacture	ed homes? Yes No
]	If yes, has your county development	oped a written plan for the manas  Part IX			ed homes? Yes No
Use th	nis section to elaborate on any	Part IX y info provided in your report as	Com	ments . We would appreciate	ed homes? Yes No  your comments about this report or other abmit additional sheets if needed.
Use th	nis section to elaborate on any	Part IX y info provided in your report as	Com	ments . We would appreciate	your comments about this report or other
Use th matter Failed	nis section to elaborate on any rs regarding solid waste manal to submit report.	Part IX y info provided in your report as a agement in North Carolina. Than	Com	ments . We would appreciate	your comments about this report or other
Use th matter Failed	nis section to elaborate on any	Part IX y info provided in your report as a agement in North Carolina. Than	Com	ments . We would appreciate	your comments about this report or other
Use th matter Failed	nis section to elaborate on any rs regarding solid waste manal to submit report.	Part IX y info provided in your report as a agement in North Carolina. Than	Com	ments . We would appreciate	your comments about this report or other
Use th matter Failed	nis section to elaborate on any rs regarding solid waste manal to submit report.	Part IX y info provided in your report as a agement in North Carolina. Than	Com	ments . We would appreciate	your comments about this report or other

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

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

The Division of Environmental Assistance and Customer Service Local Government Assistance Team is ready to assist you in any way we can. Please visit our Web site at <a href="https://deq.nc.gov/conservation/recycling/local-government-recycling-assistance">https://deq.nc.gov/conservation/recycling-assistance</a> or e-mail us at Lgteam@ncdenr.gov

