

#### 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



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

North Wilkesboro

## **State of North Carolina**

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

## Local Government Report Form

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

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

Please submit this form to	Lgteam@ncdenr.gov by September 1,	2018.
If you have questions or need assistance con	mpleting this form, please call 919-70	07-8136 or 919-707-8133.
Person Completing This Report: Steve Shumate	Title: S	anitation Supervisor
Mailing Address: P O Box 218	City: North Wilkesboro	Zip: 28659
Phone: 336-667-7120 ext.3302 Fax: 336-838-17	779 Da	ate: 8/2/18
Email: sshumate@north-wilkesboro.com		
	General Instructions	
Please remember that the time period for the report is JULY for a specific question.	1, 2017 through JUNE 30, 2018. Please	check "No" if you have nothing to report
1. Did your local government have a Recycling Coordinate	or or similar position for FY 17-18?	Yes No
Name Recycling Coordinator (if different from person of	completing this report.)	
Name:	Title:	
Address:	City:	Zip:
Telephone: Fax:	Email:	
2. Did your local government have a Solid Waste Director	or similar position for FY 17-18?	Yes No
If Yes, Name: Steve Shumate	Title: Sa	anitation Supervisor
Address: P O Box 218	City: North Wilkesboro	Zip: 28659
Telephone: 336-667-7120 ext. 3302 Fax: 336-838-17	Email: sshumate@	north-wilkesboro.com
3. Did your local government have <b>dedicated or part-tim</b>	ne Solid Waste Enforcement Staff for FY	17-18?
If Yes, Name:	Title:	
Address: Same as above	City:	Zip:
Telephone: Fax:	Email:	
4. Did your local government have solid waste ordinances all that apply)	in place addressing any of the following	g during FY 17-18? (if yes, please check
	ittering Other, Please Describe: _	
5. Did your local government manage, provide or contract mulching, composting)?	•	8 (e.g., collection, disposal, recycling,  Yes No
If you answer "No" to question 5, the	e report is complete, please email to L	gteam@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 Yes No generated from the public buildings and facilities that were operated by your government in FY 17-18? Part II. Waste Reduction and Recycling Programs Serving the Public SOURCE REDUCTION / REUSE Did your local government have a backyard composting program? Yes X No If yes, please check all backyard composting activities that apply: Education Demonstration site(s) Bin distribution/sales Number of Bins distributed? Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes X No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives? Did your local government offer a waste exchange or reuse program? Yes X No 13 If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public: Swap shop/shed Number of sheds in use? Paint exchange Number of gallons recovered? 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) Franchised hauler (please specify) Other (please specify)

17.	Please provide the following information about your community:  a. Total number of households in your jurisdiction? 1,240
	b. Number of households eligible to participate in the curbside recycling program: 1,240
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 1,240
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: 190
21.	How frequently were the curbside recyclables collected?  Once a week  Every other week / biweekly  Other
22.	Please describe the collection containers used:  Bins  Multi-bin system  Blue bags  Roll-out carts
23.	Please describe the method / style of recyclable materials handling:  curb-sort (collector separates material as collected)
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used:    less than 50 gallon cart
DR	OP-OFF RECYCLING PROGRAM
25.	Did your government operate a Drop-off Recycling Program?
26.	Who collected the recyclable materials for your local government's drop-off recycling program?  Local government employees  Private contractor foothills Sanitation and Recycling
	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)  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. 1,270
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: 1
31.	How many of these locations were staffed with attendants?
EL	ECTRONICS RECYCLING PROGRAM
mate	Is answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any perials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.  Did your community operate an electronics recycling program in FY 17-18? 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.	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? Yes
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?   Yes  No  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
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.)
	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

DDOCD AND	Cı	ırbside		Drop-off	All "C	Other" Programs	Total Tons
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							
Steel Cans							
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)			$\boxtimes$				
Cardboard (OCC)							
Magazines (OMG)							
Office Paper			$\boxtimes$				
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		321.3	$\boxtimes$	168.13			489.43
TOTAL TONS:		321.3		168.13			489.43
TOTAL TONS.		521.5		108.13			407.43

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 quant Please rep	ities collecte ort in indicat		
	Used Motor Oil	Yes	⊠ No				gallons	
	Used Oil Filters	Yes	⊠ No		barre	ls, or	lbs	
	Used Antifreeze	Yes	⊠ No			'	gallons	
	Batteries, Lead Acid	Yes	⊠ No		# ba	tteries, or	lbs	
	Batteries, Dry Cell	Yes	⊠ No				lbs	
	Fluorescent Bulbs/Lights Containing Mercury	Yes	⊠ No		11	bs, or	# bulbs	
	Propane Tanks	Yes	⊠ No		11	bs, or	# tanks	
	Used Cooking Oil / Waste Vegetable Oil	Yes	⊠ No		11	bs, or	gallons	
	Other Special Wastes - please provide waste type here:	Yes	⊠ No			·	lbs	
	Pesticide Containers (NCDA Program, not pesticides themselves)	Yes	⊠ No		11	bs, 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	gals, 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 busines	all businesses	(Conditionall	y Exem	pt Small Quantity			No
	f. Amounts of individual materials collected by about individual materials <u>is not</u> available, p Note, materials listed here should only be the	y HHW Progr lease simply	ram: if totals f provide total c	quantity	idual materials ar of materials colle	e known plea ected by HHV	W program in 48	g below.
	Used Motor Oil (gal)	Use	ed Oil Filters		_ # of Barrels, o	r	lbs.	
	Used Antifreeze (gal)	Lea	d Acid Batter	ies (lbs)	0	ther Batteries	s (lbs)	
	Fluorescent Bulbs / Lights Containing							
	<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
	_							
	<ul> <li>i. Estimated cost of HHW / CESQG program of should have only been complete</li> </ul>					at they DO n	provide recycline	g sprvices
· ug	os s misougii o snoum nuve oniy ocen complet	on by govern	month circuit	ving in t	juosiivii # 17 III	u may DO p	normo recyclili)	Source

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	V. Yard Wasto	e, Mul	ching and (	Compostin	g Managem	ent
ипре	rmitted sites an	ed it is illegal t	o burn. Compostin	g and mi	ılching are popi	ular manageme	nt options. Please	landfills, incinerators, or in answer the questions belowerials in this section.
49. 50. 51.	Does your loca checking all th Did a storm ev What quantitie	al government of at apply: \( \sum \) Cent significantly of materials v	operate a yard waste Collected curbside [ y impact the amoun were managed by yo	program' Collect t of yard w	? Yes ted at convenien waste your gove raste program?	No If yes ace center Remarks R	please indicate ho eceived at yard w d during FY 17-18 ation in TONS C	ow yard waste is managed by aste, compost, or LCID facil.  8? Yes No  DR CUBIC YARDS of
	organic mater		e, brush, limbs, lea		1			Name and Location of Facility
		Destination	on	Check if used	Tons	Cubic Yards		g Vegetative Materials
	End user (to fa	rmer or home-	owner)			25		
	Your local gov	ernment's mul	ch or compost facilit	y 🗵		5,625		
	Other public m	ulch or compo	st facility					
	Private mulch or compost facility							
	Land clearing	and inert debris	landfill (LCID)					
	Energy / Fuel V	Use (e.g. boiler	fuel market)					
		Total				5650		
	estimate yard v	vaste volume. ed by program	Calculate for each to in the appropriate b	ruck used	in your yard wa	aste managemen	t program, and the	ormula below to help you en enter the grand total $yd^3$
	20		X 6		X 50		= 6000	$yd^3$
	Size of Truc	ck (in yards)	Avg. no. of times true					TOTAL
This	anding one or	a vous local oc	Part V. S overnment's provisio		Vaste Colle			
1 nis 52.			g table about your go					
	Sector	Who Collec	ts Solid Waste?	How is So	lid Waste Colle	ected? Who Co	ellects Solid Waste?	How is Solid Waste Collected?
	Residential Commercial Industrial	Insert Letter - Primary A Primary A Primary D	Secondary C P	rimary	1 Secondary 4 Secondary Secondary	b. By Co c. Francl d. Local	ontract nise haulers government not red in provision of	es 1. Once a week at household 2. Twice a week at household 3. Convenience center/greenbox 4. As needed or by request 5. Daily 6. Other
53.	If you provide	residential was	te collection at sing	le-family	households in v	our jurisdiction.	please answer the	e following questions:
	What type of c What is the sta What is the typ What type of c	ndard collectio	n frequency?		Two tim	Semi-Automated nes per week  ☐ Curbside  ☐ rts	Manual Other Back yard / Ba	<u></u>
	Do you offer b	ulky waste coll	ection services?	X Yes	□No			
54.	For municipali	ties - did your	government collect vered to the county fo	white goo		∑ Yes ☐ No	No	
		Part	VI. Solid Wa	ste and	d Recycling	g Education	nal Activities	s
55.	Did <b>your local</b> issues / activiti		-	_	inform citizens o Part VII, page		out solid waste ma	nagement and / or recycling
56.	Please estimate	e your annual b	udget for solid wast	e related	education and or	utreach activitie	s: \$	
57.	Does your com	nmunity produc	e recycling education	on and out	treach materials	in languages be	sides English?	Yes No
	If YES, please	list other langu	ages used:					
58.	Please provide	your recycling	website address and	d public ii	nformation phor	ne number if app	olicable.	
	Website:						Phone #:	

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

00				anagement progran y's solid waste and n		·	continued success of ent programs.	these programs.	The following
59. 60.	Did yo With r	our local governmegards to funding Tipping fees Property tax Per househo	nent operate an Ent g sources, check all s ses / general fund old charges	erprise Fund for sol	iid waste ser local govern eight-based yclables	rvices in nment: fees (e.g	FY 17-18?	Yes	
61.							ents on a quarterly ba for solid waste mana		
		-	istributions being u						
62.					_	_	<u>year</u> per <u>household j</u> old		ste
	f. \$	120	per Year		per	Househ	old	total charge	
63.	Did yo	our local governn	nent operate a Pay-		gram for res	sidential	garbage during FY		
		g to GS 130A-309 ers of such costs.		ments are required	to conduct	full cos	st accounting annual	ly and to develo	pp a system to
64.	•		nt contracts for soli		-		port the annual contr	ract amount.	
	\$			<del>_</del>	•	,			
				OR	- J				
	\$	<u> </u>		Combined Contr	act (solid w	aste, an	d recycling)		
65.	collect	tion programs for	waste, recyclables		luding mate		ity to display the full llected from convenio		
		, <b>.</b>	# of Households served	Tons Collected	Collectio	n Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
M	lunicip	al Solid Waste*	1,240				130,766.4		
	Recyc	ling Program**	1,240	321.3					
	Yard	Waste Program	1,240	1,200					
		Totals	(calculated by form):	1,521.3			130,766.4		
66.	**for  If your facility	materials collected by r government ope y operations (roun	y public recycling progrerates a landfill, tra	nsfer station, yard w r). If budgets for dif	vices offered to vaste /comp fferent facil	ost facil ities are	and Demolition Landfill.  cial and industrial generate ity or recycling facili combined, please att	ty, please providempt to allocate	le total budget for
			sfer Station Budge						
		Yard	Waste / Compost	Facility Budget: \$					_
			cling Facility Budg						_
67.	What	was your governi	ment's total combin	ed annual budget fo	or all solid v	vaste an	d recycling services i	in 17-18? \$ <u>130,7</u>	66.4

### **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, phor	ne number, and e	-mail of persor	respons	•	program.	
	Name:				Title: _		
	Address:		(	City:		Zip:	
	Telephone:						
69.	Please provide the physical address	of the primary of	county white go	ods coll	ection site.		
	Street 1:						
	Street 2:						
	City:						
70.	Please provide the name of the bus Name:	-				om white goods.	
	Street:						
	City:			State:	North Carolina	Zip:	
	Phone:	Fax:		_ Email	:		
71.	Give amounts / types of CFCs reme		ords of CFC rea	moval, aı	nd copy of certificati		rming extraction.
	Type of CF(	Removed				Amount	
				-			
				-			
72	CECs man be married an east for a	lastmatica Cias		d:1		and for CE	C diamana1
72.	CFCs may be recycled or sent for o	lestruction. Give			f Disposal	Amount Earned	
					•		
73.	Please report the tonnage of white white goods tonnage reported on pa		_		e Recycling Tonnag	ges table on page 5 (qu	nestion # 45). Was
74.	List the amount of revenue for the	white goods prog	gram by source				
	Revenue collected from sale of scr	ap:	\$				
	Revenue collected from White Goo	ods Tax Distribut	tions: \$				
	Revenue from other source (e.g. gr	ants):	\$				
	Total Revenue:		\$				
75.	According to the White Goods Law expenditures White Good Tax Dist						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	il:	
77.	Please provide the physical address of the primary c	ounty scrap tires	collection sit	te.	
	Street 1:				
	Street 2:				
	City:		State: North	n Carolina	Zip:
78.	Tonnage/Number of scrap tires disposed July 1, 201  Tons o	7-June 30, 2018 (	excluding tin	res from cleanup of nu _Number of tires	isance sites)
79.	Tonnage/Number of scrap tires disposed from clean Tons o		nty designate	ed nuisance sites _Number of tires	
80.	Indicate the types of tires collected by the county: Passenger % Heavy To	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 expenditu excluding costs of nuisance tire cleanups, for FY 17	re (contract dispo	sal/hauling c	costs),	
83.	County's additional scrap tire program expenditure ( Labor \$		ience center	cost), if any.	
	Site Cost \$				
	Other \$	descr	ribe Other: _		
84.	County's contract cost for scrap tire disposal. \$	/ T	on; \$	/ Tire	
85.	Hauling cost or fuel surcharge, if not included in co	ntract cost above	.\$	/ Ton; \$	/ Tire
86.	Total tipping fees collected for tires not eligible for	free disposal. \$ _			
87.	Total number of tires collected not eligible for free				
88.	If scrap tires were not hauled off site by contracted s	service provider,	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	management of	disaster debr	ris? Yes	No
	If yes, indicate if the plan is a stand-alone plan or in	conjunction with	local govern	nment agencies:	Stand-alone
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 pe	rson(s) in ch	arge of the disaster del	bris management program for
	your local government:  Name: Name	ie:		Name:	
		ne:		<del></del>	
	E-mail: E-m				

95. Do MANA 96. Ha	es your plan address mass	animal mortality?  NDONED MAN whether to implement	Yes   NUFACTURE	raste and white goods follo No  D HOMES BY COUL  The management of abandon	NTIES
95. Do MANA 96. Ha	s your county considered	animal mortality?  NDONED MAN whether to implement	Yes   NUFACTURE	No  D HOMES BY COU	NTIES
MANA 96. Ha	AGEMENT OF ABA s your county considered	NDONED MAN whether to implement	NUFACTURE	D HOMES BY COU	
96. Ha	s your county considered	whether to implemen			
If		•	nt a program for th	ne management of abandon	
	yes, has your county devel	oped a written plan f		•	
Use this			for the managemen	nt of abandoned manufactu	ured homes? Yes No
<b>Jse</b> this			Part IX. C	omments	
					te your comments about this report or othe submit additional sheets if needed.
	s (post data download) - no	_	_		submit additional sheets if fleeded.
SS Hote	(post data do vinoud) in	o dropoir tomage rep	ported. Osed tons	from fast year (100.12).	

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

