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: <u>http://deq.nc.gov/about/divisions/waste-management/solid-waste-section/annual-reporting</u>
- 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: <u>https://get.adobe.com/reader/</u> - it is suggested that you complete the form using the latest version of Adobe Reader. Please **DO NOT** complete this form using Adobe Acrobat Pro.

Complete the form by entering responses in the appropriate fields using Adobe Reader. Please save a copy of the completed form to your computer for your records by using the "Save As" option 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



Local Government Report Form

Required - Enter Your Local Government Name: Pamlico County

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 sub	omit this	form to Lg	gteam@ncd	enr.gov by	September	1, 2018.	

If you have questions or need assistance completing this form, please call 919-707-8136 or 919-707-8133.

Person Completin	g This Repor	t: Garry Cooper		Title: Public Services Director					
Mailing Address:	P. O. Box 48	8	City: Baybo	oro	Zip: 28515				
Phone: (252)745-4	4240	Fax: (252)745-	2301		Date: July 3	0,2018			
Email: garry.coop	er@pamlicoo	county.org							
			General Instructions						
Please remember to for a specific ques		period for the report is JULY	1, 2017 through JUNE	30, 2018. Ple	ase check "No	o" if you have nothing to report			
1. Did your loc	al governme	nt have a Recycling Coordina	or or similar position f	for FY 17-18?	Xes Yes	No			
Name Recyc	ling Coordin	ator (if different from person	completing this report.)					
Name: Jesse	e Bloomberg			Title	e: Recycling S	Supervisor			
Address: P. 0	O. Box 488		City: Baybo	oro		Zip: 28515			
Telephone: ((252)745-328	Fax: (252)745-2	301 E	Email: recyclin	ng@centurylin	ık.net			
2. Did your loc	al governme	nt have a Solid Waste Directo	r or similar position for	r FY 17-18?	Yes	No			
If Yes, Nam	e:			Title:					
Address:			City:			Zip:			
Telephone:		Fax:	E	Email:					
3. Did your loc	al governme	nt have dedicated or part-tin	e Solid Waste Enforce	ement Staff for	FY 17-18?	Yes No			
If Yes, Nam	e:			Title	e:				
Address:			City:			Zip:			
Telephone:		Fax:	E	Email:					
4. Did your loc all that apply		nt have solid waste ordinance:	in place addressing ar	ny of the follow	wing during F	Y 17-18? (if yes, please check			
Dis	posal Bans	\boxtimes Illegal Dumping \boxtimes I	Littering 🛛 Other, F	Please Describe	e: Recycling				
5. Did your loc mulching, co		nt manage, provide or contrac	t for any solid waste se	ervices in FY 1	7-18 (e.g., co Ves	llection, disposal, recycling,			
	If you and	swer "No" to question 5, th	e report is complete, p	olease email t					

	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.
6.	Did your local government have a recycling program in place for collecting recyclable materials generated at Yes INO public buildings in FY 17-18?
7.	Did your local government have any program or policy encouraging or requiring local agencies to Yes No purchase products with recycled content?
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 17-18?
	Part II. Waste Reduction and Recycling Programs Serving the Public
SO	URCE REDUCTION / REUSE
9.	Did your local government have a backyard composting program? Yes No
10.	If yes, please check all backyard composting activities that apply:
	Education Demonstration site(s) Bin distribution/sales Number of Bins distributed?
11.	Did your local government operate a program to promote source reduction efforts such as junk mail reduction, 🗌 Yes 🕅 No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives?
12.	Did your local government offer a waste exchange or reuse program? Yes No
13	If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public:
	Swap shop/shed Number of sheds in use? Paint exchange Number of gallons recovered?
	Other (e.g. pallet exchange, etc.)
PU	BLIC RECYCLING SERVICES
14.	Which of the following responses best describes your recyclables recovery activities for the period July 1, 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 .)
-	our local government DID operate or contract for a recyclables recovery program, please indicate in the owing sections the type of program in operation and provide specifics about your program(s).
CU	RBSIDE RECYCLING PROGRAM
15.	Did your government operate a Curbside Recycling Program? 🗌 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)

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction?										
	b. Number of households eligible to participate in the curbside recycling program:										
	c. Provide the number of households 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										
19.	What sector(s) of your community was served by the curbside recycling program?										
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served:										
21.	How frequently were the curbside recyclables collected? Once a week Every other week / biweekly Other										
22.	Please describe the collection containers used: Bins Blue bags Multi-bin system Roll-out carts										
23.	Please describe the method / style of recyclable materials handling: Curb-sort (collector separates material as collected) single stream / commingled dual / two stream don't know / other										
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used: Iss than 50 gallon cart 65 gallon cart 95 gallon cart multiple sizes of cart available										
DR	OP-OFF RECYCLING PROGRAM										
25.	Did your government operate a Drop-off Recycling Program? X 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. 7,000										
29.	What sector(s) of your community are served by the drop-off recycling program? \square Residential \square Commercial \square Industrial										
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites: 11										
31.	How many of these locations were staffed with attendants? \square All \square None \boxtimes Some please list # of staffed sites: 1										
EL	ECTRONICS RECYCLING PROGRAM										
	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.	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: 2										

33.	Did your electronics	recycling program co	llect or accept televisions fr	com (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: \$11,460

Electronics Management Funds received from DEQ during FY 17-18 (Feb 2018 distribution): \$744.71

Electronics Management Funds spent during FY 17-18: \$ 16,666.94

Electronics Management Fund balance as of June 30, 2018: \$0

36. Briefly explain how Electronics Management Funds were spent during FY 2017-18 (please list items purchased if applicable): Funds were spent for the proper disposal of television and electronics through an certified hauler.

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:POWERHOUSE RECYCLING

Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? Xes

OTHER PUBLIC RECYCLING PROGRAMS

<u>the l</u>	lease answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for <u>by</u> <u>the local government</u> . The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ecycling Tonnages Chart on pg 5.									
38.	. Did your local government operate a multifamily recycling collection program that provides on-property recycling service for residents of multifamily properties in a manner other than through your curbside or dropoff recycling programs? Yes No									
39.	. Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner other than through your curbside or dropoff recycling programs? Xes No									
40.	 Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes No On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served: 									
	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? \Box Yes									
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 each individual material type that was commingled.

DDOCDAM	Curbside		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			\square					
Brown			\square					
Green			\square					
Mixed			\square					
PLASTIC:								
PET #1								
HDPE #2								
All Plastic Bottles			\square					
Other Plastic Containers			\square					
Bulky Rigid Plastics								
METAL:								
Aluminum Cans			\square					
Steel Cans			\square					
White Goods					\square	56.18	56.18	
Other Metal					\square	73.47	73.47	
PAPER:								
Newsprint (ONP)			\square					
Cardboard (OCC)			\square					
Magazines (OMG)			\square					
Office Paper			\square					
Mixed / Other Paper								
Cartons / Aseptic Containers			\square					
WOOD:								
Pallets								
Other Wood - DO NOT								
report yard waste tons here								
OTHER MATERIALS:								
Textiles (clothes etc)								
Televisions						22.4	22.4	
Other Electronics						2	2	
C&D Materials Recycling								
Comminal of town - how 1 - 11								
Commingled tons-check all items collected above			\boxtimes	175.69			175.69	
TOTAL TONS:				175.69		154.05	329.74	

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 <u>only</u> 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.

a		**7 4	A H U			36 / 13				A H H	D	
S	pecial	Waste	Collections	(Do No	t Include	Materials	Collected	as part of	t an HHW	Collection	Program	or Event)

47. Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		n collect this n the public?	# of sites					
Used Motor Oil	Xes Yes	🗌 No	1		574 gallons			
Used Oil Filters	Xes	🗌 No	1	4 barrels, or	lbs			
Used Antifreeze	Xes	🗌 No	1		69 gallons			
Batteries, Lead Acid	Xes	🗌 No	1	# batteries	, or850 lbs			
Batteries, Dry Cell	Yes	No No			lbs			
Fluorescent Bulbs/Lights Containing Mercury	Yes	No No		lbs, or	# bulbs			
Propane Tanks	Yes	No No		lbs, or	# tanks			
Used Cooking Oil / Waste Vegetable Oil	Yes	🗌 No	_1	lbs, or	100 gallons			
Other Special Wastes - please provide waste type here:	Yes	No No		· ·	lbs			
Pesticide Containers (NCDA Program, not pesticides themselves)	Xes Yes	🗌 No	1	lbs, or	# con- tainers			
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 No		gals, or	lbs			
 If Yes, please respond to the following question a. Was HHW collected at a permitted Tempor b. How many days was your HHW Program o c. Did you partner or co-sponsor your HHW p Please list partner(s) <u>CRSWMA</u> d. Provide number of citizens / households that e. Did your program accept materials from sm If yes, please estimate the amount of busine f. Amounts of individual materials collected b about individual materials is not available, p Note, materials listed here should only be the 	ary Event or a pen to accept r rogram with a t participated all businesses ss material ma y HHW Progr please simply p ose collected	materials duri nother <u>local g</u> in your HHW (Conditionall maged ram: if totals f provide total o at an HHW P	ng this I collecti y Exem for indiv quantity rogram	Fiscal Year? 1 ent? Yes N on program this Fiscal pt Small Quantity Gene pounds idual materials are know of materials collected b and should not include	No Year? <u>1,000</u> rators)? Yes wn please itemize below by HHW program in 48 materials listed in quest	g below.		
Used Motor Oil (gal)								
Used Antifreeze (gal)				Other B	atteries (lbs)			
Fluorescent Bulbs / Lights Containi								
g. Provide Total Quantity of materials collected reported in 48f, please net the weight of thoh. Please list HHW Collection Contractor C	se materials or	ut of the total	listed he	ere	01.1	pounds		
_			Services	5				
i. Estimated cost of HHW / CESQG program			ting in	an action # 14 41 -4 41	DO monida and "			

Pages 3 through 6 should have only been completed by governments indicating in question # 14 that they DU provide recycling services. 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, Mulching and Composting Management

This section concerns management of vegetative materials. Yard waste may not be disposed in sanitary landfills, incinerators, or in unpermitted sites and it is illegal to burn. Composting and mulching are popular management options. Please answer the questions below about your management of vegetative materials. Do not include information on food waste or non-vegetative materials in this section.

- 49. Does your local government operate a yard waste program? Yes No If yes please indicate how yard waste is managed by checking all that apply: Collected curbside Collected at convenience center Received at yard waste, compost, or LCID facil.
- 50. Did a storm event significantly impact the amount of yard waste your government managed during FY 17-18? Yes No
- 51. What quantities of materials were managed by your yard waste program? Provide information in TONS OR CUBIC YARDS of
 - organic material (yard waste, brush, limbs, leaves, etc.) managed. For conversion purposes, use 400 lbs./cubic yd.

Destination	Check if used	Tons	Cubic Yards	Please Provide Name and Location of Facility Receiving Vegetative Materials
End user (to farmer or home-owner)				
Your local government's mulch or compost facility				
Other public mulch or compost facility				
Private mulch or compost facility				
Land clearing and inert debris landfill (LCID)				
Energy / Fuel Use (e.g. boiler fuel market)				
Total				

YARD WASTE MANAGEMENT FORMULA: If yard waste quantities are not tracked, you may use this formula below to help you estimate yard waste volume. Calculate for each truck used in your yard waste management program, and then enter the grand total volume managed by program in the appropriate boxes above. *Ex.* 10 yd³ truck x 3 days/wk x 16 wks = 480 yd³

			X			X			_ =		\yd^3
	Size of Truc	k (in yards)	Avg. no	o. of times truck fi	ills each week	# of weel	ks truck is	used during yea	r	TOTAL	
			Р	art V. Sol	lid Was	te Coll	ection	Services	S		
This s	section concern	s your loca	l governmen	t's provision o	f solid was	te (garbag	e) colled	ction services	5.		
52.	Please complete	e the follow	ving table ab	out your gove	rnment's so	olid waste	collectio	on system.			
	Sector			Waste? Hov s at right In				<u>will Collect</u>	s Solid Waste?	How is Solid Wa	
		Primary	- Secondary	Drime		Secondary		h By Control		2 Twice a week of	housahold

	Residential	Primary	d	Secondary	Primary	1	Secondary		b. By Contract c. Franchise haulers	 Twice a week at household Convenience center/greenbox 	v
	Commercial	Primary	d	Secondary	Primary	1	Secondary		d. Local government not	4. As needed or by request	/
	Industrial	Primary	d	Secondary	Primary	1	Secondary		involved in provision of service	5. Daily 6. Other	
53.	If you provide	residenti	<u>al</u> was	ste collection	at single-fami	ly ho	useholds in y	your jur	isdiction, please answer th	e following questions:	
	What type of collection method is used? 🗌 Fully Automated 🗌 Semi-Automated 🗌 Manual 🗌 Don't know										
What is the standard collection frequency? Weekly Two times per week Other											
	What is the typical service point for single family household waste?										
	What type of collection container is used? Government-provided carts Resident-provided container Bags										
	Do you offer bulky waste collection services?										
54.	For municipalities - did your government collect white goods at the curb? Yes No If so, were white goods delivered to the county for marketing? Yes No										
]	Part	VI. Soli	d Waste a	nd]	Recycling	g Edı	acational Activitie	S	
55.	Did your local issues / activiti	-	nent I				form citizens Part VII, page	-	cally about solid waste ma	anagement and / or recyclin	ng
56.	Please estimate	e your an	nual t	oudget for so	lid waste relate	ed edu	acation and o	outreach	activities: \$500		
57.	Does your com	munity p	oroduc	ce recycling	education and	outrea	ach materials	s in lang	guages besides English? [Yes 🛛 No	
	If YES, please	list other	lang	ages used:							
58.	Please provide	your rec	ycling	g website add	lress and publi	c info	ormation pho	ne num	ber if applicable.		
	Website: www	.co.pam	lico.no	c.us/recyclin	g-solid-waste.a	aspx			Phone #: (252)	745-3283	

	Part VII	. Resources f	or Solid Was	te Manageme	ent and Full C	ost Accounti	ng			
	ficient resources availab estions deal with funding					these programs.	The following			
•	Did your local governm	0 2 2		6	1 0	Yes 🖂 No	,			
	With regards to funding	-	-		IFI 1/-10:)			
00.	Tipping fees			eight-based fees (e.s	g. PAYT) 🕅 T	ire tax				
			Sale of rec	0		hite Goods tax				
	Per househo	U	Grants			isposal Tax				
61.	NC Solid Waste Dispos According to GS 105-1									
	How are disposal tax d	istributions being u	used?Clean up illeg	al dumping at the R	ecycling Convenience	e Sites, education	al signs			
62.	If applicable, please pr	ovide your FY 17-1	8 household fees.	e.g., a. <u>\$45.00</u> per	<u>year</u> per <u>household</u> j	for solid waste)				
	a. \$	per	per			for solid waste	2			
	b.\$	per		per		for recycling				
	c. \$	per		per		for yard waste	;			
	d. \$	per		per		for bulky wast	te			
	e. \$	per		per		availability fee	2			
	f. \$	per		per		total charge				
63.	Did your local governm are charged a fee by we					17-18? (a system)] No	where residents			
Aco	cording to GS 130A-309	9.08. local governi	ments are required	to conduct full cos	st accounting annual	lly and to develop	a system to			
	orm users of such costs.	•	1		U	, 1	č			
64.	If your local government	nt contracts for soli	d waste or recyclin	g services, please re	eport the annual contr	act amount.				
	\$18,500		For solid waste	-	·r ··· ···					
	φ20,τ2τ		_ For recycling per year OR							
	\$46,924			act (solid waste, an	d recycling)					
				х · ·						
65.	Collection Programs: P collection programs for									
	not available, please r					ence centers. If Iu	in cost analysis is			
		# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	<u>Total Cost</u> including overhead	Cost Per Ton Managed (calculated by form)			
N	funicipal Solid Waste*									
	Recycling Program**	7,000	305.34			235,199	770			
	Yard Waste Program									
	Totals	(calculated by form):	305.34			235,199	770			
	*for materials collected and	-	-							
	** for materials collected by									
66.	If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide total budget for facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate costs proportionately. Landfill Budget: \$									
	Tran	Transfer Station Budget: \$								
	Yard	Waste / Compost 1	Facility Budget: \$							
	Recy	cling Facility Budg	get: \$	235,199						
67.	What was your governme	ment's total combin	ed annual budget fo	or all solid waste an	d recycling services	in 17-18? \$ <u>235,19</u>	9			

2017-2018 Local Government Annual Report *Report Due Date: September 1, 2018* Submit to: Lgteam@ncdenr.gov

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The	following questions pertain to programs mandated		y Mandated Program		nments need to						
<u>com</u>	plete this section (questions 68 through 96). Mun result in non-eligibility for grant requests.										
	ITE GOODS										
68.	Please provide name, address, phone number, and e-mail of person responsible for white goods program.										
	Name: Garry Cooper		Title: Public Services Director								
	Address: P. O. Box 488		City: Bayboro	Zip: 28	Zip: <u>28515</u>						
	Telephone: (252)745-4240 Fax: (252)	745-2301	Email: garry.coo	oper@pamlicocounty.or	g						
69.	Please provide the physical address of the primary Street 1: 3291 HWY 306 North Street 2:										
	City: Grantsboro			Zip: 285	527						
70.	Please provide the name of the business or person	n that remove	s the refrigerant gases (CFCs) f	from white goods.							
	Name: Scott Plumbing & Heating Street: 6690 HWY 55 East										
	Street: 6690 HWY 55 East		State: North Carolina	Zip: 285	15						
	Street: 6690 HWY 55 East City: Bayboro	745-5551	State: North Carolina Email:	Zip: 285							
71	Street: 6690 HWY 55 East City: Bayboro Phone: 745-5135 Fax:		Email:								
71.	Street: 6690 HWY 55 East City: Bayboro		Email:								
71.	Street: 6690 HWY 55 East City: Bayboro Phone: 745-5135 Fax: Give amounts / types of CFCs removed. Attach removed.		Email:	ation of person(s) perfo							
71.	Street: 6690 HWY 55 East City: Bayboro Phone: 745-5135 Fax: 7 Give amounts / types of CFCs removed. Attach re Type of CFC Removed		Email: C removal, and copy of certifica	ation of person(s) perfo							
71.	Street: 6690 HWY 55 East City: Bayboro Phone: 745-5135 Fax: 7 Give amounts / types of CFCs removed. Attach re Type of CFC Removed		Email: C removal, and copy of certifica	ation of person(s) perfo							
71.	Street: 6690 HWY 55 East City: Bayboro Phone: 745-5135 Fax: 7 Give amounts / types of CFCs removed. Attach re Type of CFC Removed		Email: C removal, and copy of certifica	ation of person(s) perfo							
	Street: 6690 HWY 55 East City: Bayboro Phone: 745-5135 Fax: 7 Give amounts / types of CFCs removed. Attach re Type of CFC Removed	ecords of CF	Email: C removal, and copy of certifica 156.93 lbs.	ation of person(s) perfo Amount	rming extraction.						
71.	Street: 6690 HWY 55 East City: Bayboro Phone: 745-5135 Fax: 7 Give amounts / types of CFCs removed. Attach removed Freon (134-A)	ecords of CF	Email: C removal, and copy of certifica 156.93 lbs.	ation of person(s) perfo Amount the arned / spent for CF	rming extraction.						

Please report the tonnage of white goods collected during FY 2017-18 in the Recycling Tonnages table on page 5 (question # 45). Was white goods tonnage reported on page 5? Xes No

 74. List the amount of revenue for the white goods program by source:

 Revenue collected from sale of scrap:
 \$ 5,374.95

 Revenue collected from White Goods Tax Distributions:
 \$ 8,519.55

 Revenue from other source (e.g. grants):
 \$ 5,500

 Total Revenue:
 \$ 19,394.5

75. According to the White Goods Law, White Good Tax Distributions must be spent on white goods activities. Give amounts and types of expenditures White Good Tax Distributions were used for (do not include funds received from grants).

Operational Expenses: \$		22,000
Capital Improvements: \$		
Clean-up of Illegal White Goods Dumps: \$		
Total Expenditures:	\$	22,000

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SC	RAP TIRES										
76.	Please provide name, address, phone number, and	-									
	Name: Bobby Darden										
	Address: P. O. Box 128										
					bdarden@crswma.c	om					
77.	Please provide the physical address of the primary Street 1: 3291 HWY 306 North										
	Street 2:										
	City: Grantsboro		State: No.	orth (Carolina	Zip: 28529					
78.	Tonnage/Number of scrap tires disposed July 1, 20 Tons		2018 (<u>excluding</u>		s from cleanup of nu Number of tires	isance sites)					
79.	Tonnage/Number of scrap tires disposed from clea	-	r county design		nuisance sites Number of tires						
80.	Indicate the types of tires collected by the county: Passenger % Heavy	Fruck		%	Large Off-Road		%				
81.	List the amount of revenue for the scrap tire progra										
	Revenue from Scrap Tire Tax Distributions:	\$ 17,7	/09.35								
	Revenue from Tire Fees:										
	Revenue from Scrap Tire Clean-up Reimbursemer										
	Revenue from Scrap Tire Cost-Overrun Grants:	\$ 0									
	Total Revenue:		/09.35								
82.	County's total scrap tire program contract expendit excluding costs of nuisance tire cleanups, for FY 1	ure (contract 7-18.	disposal/haulin	ig cos	sts), \$ 17,709.35						
83.	County's additional scrap tire program expenditure Labor \$	· · · · · ·	onvenience cen	ter co	ost), if any.						
	Site Cost \$										
	Other \$		describe Other	::							
84.	County's contract cost for scrap tire disposal. \$		/ Ton; \$		/ Tire						
85.	Hauling cost or fuel surcharge, if not included in c	ontract cost	above. \$		/ Ton; \$	/ Tire					
86.	Total tipping fees collected for tires not eligible fo	r free disposa	1. \$								
87.	Total number of tires collected not eligible for free	e disposal:									
88.	If scrap tires were not hauled off site by contracted	service prov	ider, were they	cut a	nd disposed in a loc	al landfill? 🔲 Yes	No				
89.	Name of tire disposal/recycling firm(s): Coastal R	egional Solid	Waste Manage	emen	t Authority (CRSW)	MA)					
TE	MPORARY DISASTER DEBRIS STAG	ING SITE	S								
90.	Does your local government have a plan in place for	•				No					
	If yes, indicate if the plan is a stand-alone plan or i	·	•				o conjunction				
91.	If you indicated having a plan, has the plan been re requirements for public assistance reimbursement i			Man	agement or FEMA to	o ensure it meets th	e basic				
92.	Please list the name, contact numbers(s), and e-ma your local government:		- · · ·	char	-	bris management pr	ogram for				
		me: <u>Tim Buc</u>			Name:						
		one: $(252)745$	5-3133		Phone:						
	E-mail: E-r	nail:			E-mail:						

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93. Please list the temporary disaster debris staging sites in your county or municipality which have been reviewed for conflicts with the Natural Heritage Program (NHP) and the State Historic Preservation Office (SHPO) through coordination with the Solid Waste Section. *Please note that the vetting of a site prior to a disaster is advantageous to local governments because a staging site which is found to have impacted federal or state resources after a disaster may cause difficulty for local governments when attempting to obtain FEMA reimbursement.* Attach extra sheets, if needed.

Disaster Site # Site Name		Disaster Site #	Site Name
1	Pamlico County Recycling Center/Grantsboro Transf		

94.	Does your plan address the management of household hazardous waste and white goods following a disaster? 🛛 Yes 🗌 No					
95.	Does your plan address mass animal mortality? 🗌 Yes 🛛 No					
MA	MANAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES					
96.	Has your county considered whether to implement a program for the management of abandoned manufactured homes? 🗌 Yes 🔀 No					
	If yes, has your county developed a written plan for the management of abandoned manufactured homes? Yes No					

Part IX. Comments

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

This form is to be submitted electronically. If you require assistance, please contact one of these NC DEACS staff members: 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 <u>https://deq.nc.gov/conservation/</u>recycling/local-government-recycling-assistance or e-mail us at Lgteam@ncdenr.gov

