

#### **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, 2016 -- June 30, 2017

Please submit this form to Lgteam@ncdenr.gov by September 1, 2017.

On the following pages you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2016-2017. 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, 2017.

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:

Joseph Fitzpatrick, phone: 919-707-8121, email: joseph.fitzpatrick@ncdenr.gov Rob Taylor, phone: 919-707-8139, email: rob.taylor@ncdenr.gov

Form Year

2017



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

## **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, 2016 -- June 30, 2017

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 Lgtean or need assistance completing			or 919-707-8139.
Person	Completing This Report: R	ichard Haugen		Title: PWD	
Mailing	g Address: 514 Rockingham	rd	City: Rockingham		Zip: 28379
Phone:	910-895-2488	Fax: 910-895-2440		Date: 7/05/	2017
Email:	rockingham1@carolina.rr.co	m			
•		General	Instructions		
for a sp	ecific question.	d for the report is JULY 1, 2016 we a Recycling Coordinator or sin			<ul><li>fo" if you have nothing to report</li><li>☑ No</li></ul>
N	ame Recycling Coordinator (	(if different from person completi	ing this report.)		
N	lame:			Title:	
A	ddress:		City:		Zip:
Т	elephone:	Fax:	Email:		_
2. D	id your local government hav	ve a Solid Waste Director or simi	lar position for FY 16-1	17? Xes	No
If	Yes, Name: Randy Alfor	d		Title: Superintend	dent
A	ddress: 514 Rockingham Rd		City: Rockingham		Zip: 28379
Т	elephone: 910-895-2488	Fax: 910-895-2488	Email: -		
3. D	id your local government hav	ve dedicated or part-time Solid	Waste Enforcement Sta	off for FY 16-17?	⊠ Yes □ No
If	Yes, Name: Tim Combs			Title: Code enfor	cement
A	ddress: 514 Rockingham rd		City: Rockingham		Zip: 28379
Т	elephone: 910-895-9088	Fax: 910-895-6617	Email: tin	ngorockingham.co	m
	id your local government hav l that apply)	ve solid waste ordinances in place	e addressing any of the	following during F	FY 16-17? (if yes, please check
	☐ Disposal Bans	Illegal Dumping	Other, Please De	scribe:	
	id your local government ma ulching, composting)?	nage, provide or contract for any	solid waste services in	FY 16-17 (e.g., co	ollection, disposal, recycling,
	If you answer	"No" to question 5, the report	is complete, please en	nail to Lgteam@n	icdenr.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 Yes X No public buildings in FY 16-17? 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 16-17? 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, 2016 through June 30, 2017? 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? Richmond County 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? 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?
	b. Number of households eligible to participate in the curbside recycling program:
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary):
18.	If your curbside recycling program is operated through a <u>public franchise granted to a private company</u> then please answer the following:  Is public participation in the franchise:  Voluntary or Mandatory  Does your franchise consist of:  One service district or Multiple service districts
19.	What sector(s) of your community was served by the curbside recycling program?  Residential Commercial Industrial
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served:
21.	How frequently were the curbside recyclables collected?  Once a week  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:    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
	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	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 16-17? 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 2017, please provide the following information:
	Electronics Management Fund balance as of July 1, 2016: \$
	Electronics Management Funds received from DEQ during FY 16-17 (Feb 2017 distribution): \$
	Electronics Management Funds spent during FY 16-17: \$
	Electronics Management Fund balance as of June 30, 2017: \$
36.	Briefly explain how Electronics Management Funds were spent during FY 2016-17 (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 16-17:
	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?   Yes  No  Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner
٠,٠	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    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?
43.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 16-17. (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 16-17. (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, 2016 through JUNE 30, 2017. 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 mat		rbside		op-off	All "Othe	r'' 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							
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 tong shart11							
Commingled tons-check all items collected above							
TOTAL TONS:					<del>                                     </del>		
DECYCLING TONN	ACEACAI	ECH T OF D					

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) Did program collect this **Special Waste Programs for Collecting** # of Data on quantities collected / managed. material from the public? Materials from Citizens by Material Type Please report in indicated units. sites Used Motor Oil Yes Used Oil Filters barrels, or lbs Yes No Used Antifreeze Yes No gallons # batteries, or Batteries, Lead Acid Yes No lbs Batteries, Dry Cell Yes No lbs Fluorescent Bulbs/Lights Containing Mercury Yes lbs, or # bulbs No Propane Tanks Yes No lbs, or # tanks Used Cooking Oil / Waste Vegetable Oil Yes No lbs, or gallons Other Special Wastes - please provide waste Yes No lbs type here: Pesticide Containers (NCDA Program, not # con-Yes ☐ No lbs, or pesticides themselves) tainers NCDA Pesticide Disposal Assistance Program Yes No lbs (for management of pesticides, not containers) Latex Paint (do not include paint collected at gals, □ No Yes lbs HHW event or by a paint exchange program) or Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event 48. Did your local government operate a household hazardous waste collection program or event in FY 16-17? No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event b. How many days was your HHW Program open to accept materials during this Fiscal Year? c. Did you partner or co-sponsor your HHW program with another <u>local government?</u> Yes Please list partner(s) d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year? e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? If yes, please estimate the amount of business material managed f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize below. If data about individual materials is not available, please simply provide total quantity of materials collected by HHW program in 48g below. Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in question 47. Used Motor Oil (gal) \_\_\_\_\_ Used Oil Filters \_\_\_\_ # of Barrels, or \_\_\_\_ lbs. Used Antifreeze (gal)

Lead Acid Batteries (lbs)

Other Batteries (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs) g. Provide Total Quantity of materials collected by HHW Program. If individual materials were pounds reported in 48f, please net the weight of those materials out of the total listed here. h. Please list HHW Collection Contractor i. Estimated cost of HHW / CESQG program or event(s) \$

Pages 3 through 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling services. All governments answering "Yes" to question # 5 on page 1 should complete the rest of the report with the exception of PART VIII which is only to be completed by Counties.

		Part IV. Yard Wast		C			
		ns management of vegetative m					
		d it is illegal to burn. Compostinent of vegetative materials. Do n					
	-	l government operate a yard waste				_	ow yard waste is managed by
	-	at apply:   Collected curbside				•	
60.		ent significantly impact the amoun					
1.		s of materials were managed by ye					
	organic mater	ial (yard waste, brush, limbs, le		managed. For	conversion p	_	s./cubic yd.  Name and Location of Facility
		Destination	Check if used	Tons	Cubic Yard		ng Vegetative Materials
	End user (to fa	rmer or home-owner)					
	Your local gov	ernment's mulch or compost facili	ity 🗌				
	Other public m	ulch or compost facility					
	Private mulch	or compost facility					
	Land clearing a	and inert debris landfill (LCID)	$\boxtimes$	1,829.64		Richmond County	
	Energy / Fuel U	Use (e.g. boiler fuel market)					
		Total		1829.64			
		E MANAGEMENT FORMULA:					
		vaste volume. Calculate for each					
	volume manage	ed by program in the appropriate l X	boxes abov	Ye. Ex. 10 ya <sup>3</sup>	truck x 3 day	$vs/wk \ x \ 10 \ wks = 480$	·
	Size of Truc		uck fills each		truck is used di	ring year	TOTAL $yd^3$
	Size of True			Vaste Colle			
This	section concern	s your local government's provision					
52.		te the following table about your g					
	Sector	Who Collects Solid Waste?			77110	Collects Solid Waste?	How is Solid Waste Collected?
		Insert Letter - see codes at right	D :	- see codes at ri	a. Lu		tes 1. Once a week at household
	Residential	a	Primary 2	G 1	c. Fr	Contract anchise haulers	<ul><li>2. Twice a week at household</li><li>3. Convenience center/greenbox</li></ul>
	Commercial		Primary	.		cal government not volved in provision of	<ul><li>4. As needed or by request</li><li>5. Daily</li></ul>
	Industrial	Primary b Secondary c	Primary	4 Secondary	se	vice	6. Other
3.	If you provide	residential waste collection at sing	gle-family	households in y	our jurisdicti	on, please answer th	ne following questions:
	What type of c	ollection method is used?	Fully Auto	omated S	Semi-Automa	ated Manual	Don't know
	What is the star	ndard collection frequency?	Weekly	Two tim	es per week	Other	
	What is the typ	pical service point for single family	y househol	d waste?	Curbside	Back yard / Ba	ack door
	What type of c	ollection container is used?	Governme	ent-provided car	rts 🔀 Res	sident-provided cont	tainer Bags
	Do you offer b	ulky waste collection services?	X Yes	No No			
64.	-	ties - did your government collect te goods delivered to the county for	_	_	Yes	No	
	ii so, were win	Part VI. Solid Wa			⊠ No - Educati	onal Activitie	oc .
55.	Did your local	government have an education p		•	_		
· J .	issues / activiti	_	_	o Part VII, page		ioodi sona waste ma	magement and / of recycling
66.	Please estimate	e your annual budget for solid was	ste related e	education and or	utreach activi	ties: \$	
7.	Does your com	nmunity produce recycling educati	ion and out	reach materials	in languages	besides English? [	Yes No
	If YES, please	list other languages used:					
8.	Please provide	your recycling website address ar	nd public in	nformation phon	ne number if	applicable.	
	Website:					Phone #:	

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

	ficient resources availal estions deal with funding						these programs.	The following
_	Did your local governr				-		Yes No	)
60.	With regards to fundin  Tipping fee  Property tax  Per househo	s kes / general fund	☐ Volume/we	eight-based			Fire tax White Goods tax Disposal Tax	
61.	NC Solid Waste Dispo According to GS 105-1	sal Tax proceeds ar	e distributed to elig	_		ents on a quarterly ba	asis by the Departn	
	How are disposal tax of	· ·						
62.	If applicable, please pr							
	a. \$ 15.5	per liloliti	1	per	Housend	Ju	for solid waste	2
	b. \$	per		per			for recycling	
	c. \$	per		per			for yard waste	
	d. \$	per		per			for bulky was	te
	e. \$ 150	per year		per	househo	old	availability fe	e
						old		
63.	Did your local governr are charged a fee by we	nent operate a Pay-	As-You-Throw pro	gram for re	sidential	garbage during FY		where residents
	cording to GS 130A-30 orm users of such costs		ments are required	to conduct	full cos	st accounting annua	lly and to develop	a system to
64.	If your local governme	ent contracts for soli	d waste or recyclin	g services, ¡	olease re	port the annual cont	ract amount.	
	\$		For solid waste s					
	\$		For recycling pe	r year				
			OR					
	\$		_ Combined Contr	ract (solid w	aste, and	d recycling)		
65.	Collection Programs: For collection programs for not available, please in	r waste, recyclables	and yard waste inc	luding mate			•	_
		# of Households served	Tons Collected	Collectio	n Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
N	Iunicipal Solid Waste*		5,746.31				1,488,347	259
	Recycling Program**	:						
	Yard Waste Program		1,829.64					
	Totals	s (calculated by form):	7,575.95				1,488,347	190
66.	*for materials collected an **for materials collected b If your government op- facility operations (rou proportionately. Land	by public recycling progreerates a landfill, trained to nearest dollar	rams including those serves.  If budgets for different control of the control of	vices offered to vaste /comp fferent facil	ost facilities are	cial and industrial general	ity, please provide tempt to allocate co	total budget for
		sfer Station Budget	t: \$					
	Yard	d Waste / Compost	Facility Budget: \$					
		ycling Facility Budg						
67.	What was your govern	ment's total combin	ed annual budget fo	or all solid v	vaste and	d recycling services	in 16-17? \$1,488,3	347

## **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	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 re	moval, aı	nd copy of certificati		ming extraction.
	Type of CFO	2 Removed				Amount	
				_			
70			C. C*	<u>.</u>		1 / C CD	G 1' 1
72.	CFCs may be recycled or sent for o	lestruction. Give			f Disposal	Amount Earned	Amount Spent
73.	Please report the tonnage of white white goods tonnage reported on page 1				e Recycling Tonnag	es table on page 5 (qu	testion # 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 Distribu					
	Revenue from other source (e.g. gr	ants):	\$				
	Total Revenue:		\$				
75.	According to the White Goods Lav 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-ma		1 0	
	Name:		Title:	
	Address:	City:		Zip:
	Telephone: Fax:	Email:		
77.	Please provide the physical address of the primary coun	nty scrap tires collection site.		
	Street 1:			
	Street 2:			
	City:	State: North Caro	olina	_ Zip:
78.	Tonnage/Number of scrap tires disposed July 1, 2016-J Tons or		om cleanup of nuisanber of tires	ance sites)
79.	Tonnage/Number of scrap tires disposed from cleanup Tons or	, ,	sance sites aber of tires	
80.	Indicate the types of tires collected by the county: Passenger % Heavy Truc	k % Lε	arge Off-Road	%
81.	List the amount of revenue for the scrap tire program b	y source:		
	Revenue from Scrap Tire Tax Distributions:	\$		
	Revenue from Tire Fees:	\$		
	Revenue from Scrap Tire Clean-up Reimbursements:	\$		
	Revenue from Scrap Tire Cost-Overrun Grants:	\$		
	Total Revenue:	\$		
82.	County's total scrap tire program contract expenditure (excluding costs of nuisance tire cleanups, for FY 16-17	(contract disposal/hauling costs),	\$	
83.	County's additional scrap tire program expenditure (i.e. Labor \$		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 contra	act cost above. \$/	Ton; \$	/ Tire
86.	Total tipping fees collected for tires not eligible for fre	e disposal. \$		
87.	Total number of tires collected not eligible for free dis	posal:		
88.	If scrap tires were not hauled off site by contracted serv	vice provider, were they cut and o	disposed in a local	landfill? Yes No
89.	Name of tire disposal/recycling firm(s):			
TE	MPORARY DISASTER DEBRIS STAGING	G SITES		
90.	Does your local government have a plan in place for m	anagement of disaster debris?	Yes	No
	If yes, indicate if the plan is a stand-alone plan or in co	njunction with local government	agencies: Sta	and-alone
91.	If you indicated having a plan, has the plan been review requirements for public assistance reimbursement in a continuous continuous and the plan been review requirements for public assistance reimbursement in a continuous continuo		ment or FEMA to e	ensure it meets the basic No
92.	Please list the name, contact numbers(s), and e-mail ad your local government:			
	E-mail: E-mail:		E-mail:	

Disaster Site #	Site Name	Disaster Site #	Site Name
Does your plan address the	management of household hazardo	us waste and white goods following	g a disaster? Yes No
Does your plan address ma	ass animal mortality? Yes	☐ No	
· •	ANDONED MANUFACTU	RED HOMES BY COUNT	IES
	d whether to implement a program f		
	reloped a written plan for the manage	_	
ii yes, has your county acr	croped a written plan for the manage	chieff of abandoned manufactured	nomes:
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This form is to be submitted electronically. If you require assistance, please contact one of these NC DEACS staff members:

Joseph Fitzpatrick, email: joseph.fitzpatrick@ncdenr.gov phone 919-707-8121

Rob Taylor, email: rob.taylor@ncdenr.gov phone: 919-707-8139

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

