

State of North Carolina

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

Solid Waste and Materials Management Annual Report July 1, 2018 - June 30, 2019

Submit this form to Lgteam@ncdenr.gov by September 1, 2019.

On the following pages, you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2018-2019. Each North Carolina county and municipality is required to complete this report annually. Completion and submission of this report will fulfill the annual reporting mandate to the state as required by G.S. 130A-309.09A. Failure to complete and submit this report could result in the local government being excluded from distributions of Solid Waste Disposal Tax Proceeds and other Department of Environmental Quality grants.

Instructions

You can download a blank copy of this form from this web site: http://deq.nc.gov/about/divisions/waste-management/solidwaste-section/annual-reporting

This form must be completed electronically using Adobe Reader. It is suggested that you complete the form using the latest version of Adobe Reader which can be downloaded for free at: https://get.adobe.com/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. Name the file Community Name LGAR 2018-19. For example, Aberdeen LGAR 2018-19.

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

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

Sandy Skolochenko, phone: 919-707-8147, email: sandy.skolochenko@ncdenr.gov Matt James, phone: 919-707-8133, email: matt.james@ncdenr.gov

Form Year

2019



Local Government Report Form

Required: Select your Local Government Name **STANFIELD**

State of North Carolina

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

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

Please submit this form to Lgteam@ncdenr.gov by September 1, 2019.

Per	son Completing This Report: Wanda W. Yow		Title: Town Cl	erk-Finance Officer			
Ma	iling Address: P.O. Box 699	City: Stanfield	Zip: 28163				
Pho	one: 704-888-2386		Date: 07-	17-19			
Em	ail: townclerk@stanfieldnc.com						
		General Instructions					
	ase remember that the time period for the report a specific question.	is JULY 1, 2018 through JUNE 30, 2019.	Please check "	'No" if you have nothing to report			
1.	Did your local government have a Recycling (Coordinator or similar position for FY 18-	19? Yes	⊠ No			
	Name Recycling Coordinator (if different from	n person completing this report.)					
	Name:		Title:				
	Address:	City:		Zip:			
	Telephone:	Email:					
2.	Did your local government have a Solid Waste	e Director or similar position for FY 18-19	? Yes	No No			
	If Yes, Name:		Title:				
	Address:	City:		Zip:			
	Telephone:	Email:					
3.	Did your local government have dedicated or	part-time Solid Waste Enforcement Staf	f for FY 18-19?	Yes No			
	If Yes, Name:		Title:				
	Address:	City:		Zip:			
	Telephone:	Email:					
4.	Did your local government have solid waste o all that apply)	rdinances in place addressing any of the f	ollowing during	FY 18-19? (if yes, please check			
	Disposal Bans Illegal Dumping	Littering Construction & Demo	ition Otl	ner:			
5.	Did your local government manage, provide o mulching, composting)? Yes	r contract for any solid waste services in I No	Y 18-19 (e.g.,	collection, disposal, recycling,			

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

	Part I. Waste Reduction and Recycling Programs Serving Government Facilities							
6.	Did your local government have a recycling program in place for collecting recyclable materials generated at public buildings in FY 18-19? Yes No							
7.	Did your local government have any program or policy encouraging or requiring local agencies to purchase products with recycled content? Yes No							
8.	Did your local government have a program in place to collect and recycle spent fluorescent lights generated from the public buildings and facilities that were operated by your government in FY 18-19? Yes No							
	Part II. Waste Reduction and Recycling Programs Serving the Public							
SO	URCE REDUCTION / REUSE							
9.	Did your local government have a backyard composting program? 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, reduction of single use plastics, food waste reduction, or promoting reuse and donation? Yes No							
12.	Did your local government offer a waste exchange or reuse program?							
13.	If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public:							
	Swap shop/shed Number of sheds in use? Paint exchange Number of gallons recovered?							
	Other (e.g. pallet exchange, etc.)							
PU	BLIC RECYCLING SERVICES							
14.	Which of the following responses best describes your recyclables recovery activities for the period July 1, 2018 through June 30, 2019? Choose ONE option that best applies.							
	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 .)							
CU	RBSIDE RECYCLING PROGRAM							
15.	Did your government operate a Curbside Recycling Program? X Yes No, skip to question # 25							
16.	Who collected the recyclable materials for your local government's curbside recycling program?							
	Local government employees							
	Private contractor (please specify) Waste Management							
	Franchised hauler (please specify)							
	Other (please specify)							

17.	a. Total number of households in your jurisdiction? 610							
	b. Number of households eligible to participate in the curbside recycling program: 610							
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 450							
18.	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: 20							
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)							
DR	OP-OFF RECYCLING PROGRAM							
24.	Did your government operate a Drop-off Recycling Program? Yes No, skip to question # 31							
25.	Who collected the recyclable materials for your local government's drop-off recycling program? Local government employees Private contractor							
	Other (please specify)							
26.	Please describe the method / style of recyclable materials handling for your drop-off recycling program: source-separated (citizens separate materials by type) single stream / commingled dual / two stream (paper separated from cans/bottles) don't know / other							
27.	Please estimate the number of households served by your drop-off recycling program.							
28.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial							
29.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:							
30.	How many of these locations were staffed with attendants? All None Some please list # of staffed sites:							
EL	ECTRONICS RECYCLING PROGRAM							
31.	Did your community operate an electronics recycling program in FY 18-19? Yes No, skip to question # 37							
	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:							

32.	Did your electronics recycling program collect or accept televisions from (check all that apply): Residences Businesses
33.	Did your electronics recycling program collect or accept computer equipment from (check all that apply): Residences Businesses
34.	DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was eligible to receive proceeds from the State Electronics Management Fund in February of 2018, please provide the following information:
	Electronics Management Fund balance as of July 1, 2018: \$
	Electronics Management Funds received from DEQ during FY 18-19 (Feb 2019 distribution): \$
	Electronics Management Funds spent during FY 18-19: \$
	Electronics Management Fund balance as of June 30, 2019: \$
35.	Briefly explain how Electronics Management Funds were spent during FY 2018-19 (please list items purchased if applicable):
36.	If you did operate an electronics recycling program, please provide the following information about your vendor / contractor: Name of electronics recycling vendor(s) during FY 18-19:
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? Yes No
ОТ	
	HER PUBLIC RECYCLING PROGRAMS
	only programs operated or contracted for <u>by the local government</u> . The tonnage of any materials collected by the following programs uld be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.
37.	of multifamily properties in a manner other than through your curbside or dropoff recycling programs? Yes No
38.	Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner other than through your curbside or dropoff recycling programs? Yes No
39.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served: 2
	Public drop-off recycling sites available for ABC On Premises Permit holders to use
40.	Does your local government operate a program to recycle Construction and Demolition materials? Yes No If yes, please check all materials that were recycled and report tonnages in tonnage table on page 5:
	☐ Clean Wood ☐ Brick, concrete, etc. ☐ Sheetrock ☐ Vinyl siding ☐ Shingles ☐ Metals ☐ Other
41.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 18-19. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	Public Parks Recycling Program Athletic Field /Venue Recycling Program
	☐ Pedestrian Recycling Program ☐ Recycling Service for Special Events / Festivals
42.	Please identify all "Other" programs or services operated by your government during FY 18-19. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	Public School Recycling Program
	Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)
	Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events
	Organics / Food Waste Recycling other than yard waste program
	Oyster Shell Recycling Program
	Other Programs (please specify)
	Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.

RECYCLING TONNAGES FROM PUBLIC PROGRAMS

Curbside

Tons

⊠ if Yes

PROGRAM

GLASS:

- 43. a. Enter data in the table below for ALL recycling programs operated or contracted for by your local government. Provide TONNAGES (or estimates) for each material collected for the period JULY 1, 2018 through JUNE 30, 2019. DO NOT include materials that were not collected or managed by your local government either directly or under contract to a private service provider.
 - b. Do NOT report YARD WASTE, TIRES, HHW, USED OIL, OIL FILTERS, ANTI-FREEZE, BATTERIES or other SPECIAL WASTE tonnages on this page - these items should be reported on page 6 in the SPECIAL WASTE section of this report.

⊠ if Yes

c. If you collected single stream or other commingled materials, record tons in the "Commingled tons" row and then check the box for each individual material type that was commingled.

Drop-off

Tons

Clear							
Brown							
Green							
Mixed							
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Container	s						
Bulky Rigid Plastics							
METAL:							
Aluminum Cans							
Steel Cans							
PAPER:							
Newsprint (ONP)							
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper							
Cartons / Aseptic Containe	ers						
WOOD:							
Pallets							
Other Wood - DO NOT		Report all tons i	in Other c	olumn			
report yard waste tons h							
OTHER MATERIALS	S:						
Textiles (clothes etc)	_						
Televisions	_						
Other Electronics	_						
C&D Materials Recycli	ng	Report all tons	in Other c	olumn			
White Goods	_						
Other Metal	_						
	_						
C	11						
Commingled tons-check items collected above*	K all	91.38					91.38
TOTAL TONS:		91.38					91.38
4. *If you checked commingled, which material recovery facility does your community use: 5. RECYCLING TONNAGE AS A RESULT OF POLICY OR ORDINANCE: complete this section for materials that were recycled as a result of local government ordinances or policies but that were NOT collected or managed directly by your local government recycling program. E.g. a cardboard disposal ban results in private cardboard recycling (and you have a way to track the tons collected) [Material Type							

Total Tons

(totals are calculated by

form)

All "Other" Programs

if Yes

Tons

Part III. Special Waste Collections

Please provide responses and data as indicated below considering services provided to the public. Please do not include data on materials that were accepted and then disposed of in a landfill. Do not include materials generated exclusively by government operations (e.g. motorfleet services). Question 46 is about materials accepted outside of any Household Hazardous Waste (HHW) Program or event. If special wastes were only accepted as a part of an HHW Program or HHW event and were not collected by separate recycling efforts then do not record materials in question # 46 but instead report with HHW materials in question # 47.

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

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

which are for Counties only.

		Par	t IV. Yard	Waste,	, Mul	ching and	d C	omposting	g Managem	ent	
	d waste may not ood waste or nor	be dispos	ed in sanitary la	ındfills, ind	cinerato					a. Do not include informati	0
1 8.	-	_	nent operate a ya	_	_			-	•	w yard waste is managed b aste, compost, or LCID fac	•
19.	Did a storm eve	ent signif	icantly impact th	ne amount	of yard	waste your go	over	nment managed	d during FY 18-19	9? Yes No	
50.									ation in TONS Coses, use 400 lbs.	DR CUBIC YARDS of /cubic yd.	
		Dest	ination		Check if used	Tons		Cubic Yards	Facility	Name and Location	
	End user (to fa	rmer or h	ome-owner)				or				
	Your local gov	ernment's	mulch or comp	ost facility			or				
	Other public m	ulch or co	ompost facility				or				
	Private mulch	or compo	st facility				or				_
	Land clearing a	and inert	debris landfill (L	CID)			or				_
	Energy / Fuel U	Jse (e.g. 1	ooiler fuel marke	et)			or				_
		Т	otal	-			or				
	volume manage	ed by pro	gram in the appi X	opriate box	xes abov	Ye. Ex. 10 c	ubic		days/wk x 16 wks	en enter the grand total $s = 480 \text{ cubic yards}$ cubic yard TOTAL	S
	Size of Truc	k (in yards)								TOTAL	
			ra	rt v. 50	ona v	vaste Col	пес	tion Servi	ces		
51.	Please complet		owing table abou						on system.		
	Sector	1	Collects Solid Wetter - see codes	ll ll		w is Solid Waste Collected? nsert # - see codes at right Who Collects Solid V				How is Solid Waste Collected	?
	Residential	Primary Primary	B Secondary		mary	Secondary	112	a. Local g		s 1. Once a week at household 2. Twice a week at household	
	Commercial	Primary	B Secondary	Pri	mary	1 Secondary			ise haulers government not	3. Convenience center/greenbox4. As needed or by request	
	Industrial	Primary	B Secondary	Pri	mary	1 Secondary		involve service	ed in provision of	5. Daily6. Other	
52.	If you provide	residentia	l waste collection	n at single	-family	households i	n vo	ur iurisdiction	nlease answer the	e following questions:	
	* *		method is used?		ully Aut		_	emi-Automated	<u> </u>	Don't know	
	* *		lection frequenc		eekly		_	s per week	Other	Don't know	
			•		•			•	_	als daan	
	What is the typical service point for single family household waste? Curbside Back yard / Back door What type of collection container is used? Government-provided carts Resident-provided container Bags										
	* 1		e collection serv		√ Yes	ent-provided No		s Keside	mi-provided com	ainer Bags	
53.	•	•	your governmen	<u>-</u>				⊠ Yes □	No		
,,,	-		delivered to the		_	. —	es	No No]110		
									al Activitie		
54.	Did your local issues / activities	_	nent have an edu	-	_	inform citize o Part VII, pa			ut solid waste ma	nagement and / or recycling	3
55.	Please estimate	your anr	nual budget for s	olid waste	related	education and	d out	treach activities	s: \$		
56.	Does your com	munity p	roduce recycling	g education	and ou	treach materi	als i	n languages be	sides English?	Yes No	
	If YES, please	list other	languages used:								

	rart vii	. Resources 1	or Sona was	te Manageme	ent and Full C	ost Account	ung
	Did your local governm NC Solid Waste Dispos According to GS 105-1	sal Tax proceeds are	e distributed to elig	ible local governme	nts on a quarterly ba		ment of Revenue.
	Did your local governm	nent receive Solid V	Vaste Disposal Tax	distributions?		Yes N	lo
	If yes, how are disposa	l tax distributions b	eing used?				
59.	What other funding sou Tipping fees Property tax Per househo	es / general fund	☐ Volume/we	eight-based fees (e.g		ire tax /hite Goods tax	
60.	If applicable, please pr	•				C 1: 1	
					household		
	a. \$	per		per		for solid was	te
	b. \$	per		per		for recycling	
	c. \$	per		per		for yard wast	te
	d. \$	per		per		for bulky wa	ste
	e. \$	per		per		availability f	ee
	f. \$	per		per		total charge	
61.	Did your local government					18-19? (a system	where residents
Δοι	are charged a fee by we cording to <i>GS 130A-309</i>					lly and to develo	on a system to
	orm users of such costs.		nonts are required	to conduct full cos	t accounting annua	ny ana to acvero	p a system to
62.	If your local government	nt contracts for soli	d waste or recycling	g services, please re	port the annual cont	ract amount.	
	\$72,834		_ For solid waste s	services per year			
	\$26,864.4		_ For recycling pe	r year			
			OR				
	\$99,698.4		_ Combined Contr	ract (solid waste, and	d recycling)		
63.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials col			
	, p	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
N	Iunicipal Solid Waste*	610	554.63	72,834			(
	Recycling Program**	610	91.38	26,864.4			
	Yard Waste Program						
	Totals	(calculated by form):	646.01	99,698.4			(
64.	*for materials collected and **for materials collected by If your government ope facility operations (roun proportionately. Land	y public recycling progra erates a landfill, tran nd to nearest dollar	ams including those serves rester station, yard was. If budgets for dif	vices offered to commerce vaste /compost facilities are	ial and industrial generatity or recycling facil	ity, please provid empt to allocate	e total budget for
		sfer Station Budget	: \$				_
	Yard	Waste / Compost I	Facility Budget: \$				_
		cling Facility Budg					_
65.	What was your government	nent's total combine	ed annual budget fo	or all solid waste and	d recycling services	in 18-19? \$99,68	4.4

Part VIII. Mandated Programs

The following questions pertain to programs mandated by NC statute. <u>Only Counties</u> need to complete questions 66 through 88. Failure to complete Part VIII may result in non-eligibility for grant funding. <u>Municipalities</u> should skip to question 89 on page 10.

WH	ITE GOODS								
66.	Please provide name, address, phone number		•	Tido.					
	Name: Cit					Zip:			
	Telephone: Fax:								
67.	Please provide the physical address of the pri								
	Street 1:	-	-						
	Street 2:								
	City:			State:	North Carolina	Zip:			
68.	Please provide the name of the business or pe			_	• • •	•			
	Street:								
	City:					Zip:			
	Phone: Fax:			Email	:				
69.	Give amounts / types of CFCs removed. Atta		ds of CFC remo	oval, ar	nd copy of certificat	. ,,,,	rming extraction.		
	Type of CFC Remove	d				Amount			
70.	CFCs may be recycled or sent for destruction	Give n	ame of firm di	l snosal :	method and amount	earned / spent for CF0	⊂ disnosal		
70.	Firm	a. Give in	Method of Disposal			Amount Earned	Amount Spent		
71.	Please report the tonnage of white goods collewhite goods tonnage reported on page 5?	ected du	ring FY 2018-1	9 in th	e Recycling Tonnaş	ges table on page 5 (qu	estion # 43). Was		
72.	List the amount of revenue for the white good	ds progra	nm by source:						
	Revenue collected from sale of scrap:		\$						
	Revenue collected from White Goods Tax Di	istributio	ons: \$						
	Revenue from other source (e.g. grants):		\$						
	Total Revenue:		\$						
73.	According to the White Goods Law, White C expenditures White Good Tax Distributions v						mounts and types of		
	Clean-up of Illegal White Goods Dumps: \$								
	Total Expenditures: \$								

74.	Please provide name, address, phone number, and e-ma	, and e-mail of person responsible for scrap tires program. Title:							
	Address:					Zip:			
	Telephone: Fax:								
75.	Please provide the physical address of the primary cour Street 1:	nty scrap t	ires collection	on site.					
	Street 2:								
	City:		State: 1	North C	arolina	Zip:			
76	Tonnage/Number of scrap tires disposed July 1, 2018-J Tons or	fune 30, 20	019 (<u>excludi</u>	ng tires	from cleanup Jumber of tires	of nuisance sites)			
77.	Tonnage/Number of scrap tires disposed from cleanup Tons or	of state or	county desi	gnated i	nuisance sites Jumber of tires	S			
78.	Indicate the types of tires collected by the county: Passenger % Heavy Truck		Large Off-	Road	0/	% Agricultural			
79.	List the amount of revenue for the scrap tire program b Revenue from Scrap Tire Tax Distributions:								
	Revenue from Scrap Tire Fees:								
	Revenue from Scrap Tire Clean-up Reimbursements:								
	Revenue from Scrap Tire Cost-Overrun Grants:								
	Total Revenue:	\$							
80.	County's total scrap tire program contract expenditure (excluding costs of nuisance tire cleanups, for FY 18-19	contract c	lisposal/haul	ing cost	ts), \$				
81.	County's additional scrap tire program expenditure (i.e. Labor \$		nvenience ce	enter co	st), if any.				
	Site Cost \$								
	Other \$		describe Oth	er:					
82.	County's contract cost for scrap tire disposal. \$		/ Ton; \$		/ Tire				
83.	Hauling cost or fuel surcharge, if not included in contra	act cost a	bove. \$		_ / Ton; \$	/ Tire			
84.	Total tipping fees collected for tires not eligible for fre	e disposal	. \$						
85.	Total number of tires collected not eligible for free dis								
86.	If scrap tires were not hauled off site by contracted serv						— □No		
87.	Name of tire disposal/recycling firm(s):	_		-	_				
MA	NAGEMENT OF ABANDONED MANUFA	ACTUR	ED HOM	ES BY	COUNTI	ES			
88.	Has your county considered whether to implement a pr	ogram for	the manager	ment of	abandoned m	anufactured homes? Y	es No		
	If yes, has your county developed a written plan for the	managen	nent of aband	doned n	nanufactured 1	homes? Yes No)		
TE:	MPORARY DISASTER DEBRIS STAGINO	G SITES	6 - Counti	es and	Municipal	ities			
89.	Does your local government have a plan in place for m	-				☐ No			
	If yes, indicate if the plan is a stand-alone plan or in co		_		•	Stand-alone In c			
90.	If you indicated having a plan, has the plan been review requirements for public assistance reimbursement in a continuous				gement or FE	MA to ensure it meets the b	oasic		

91.	Please list the name, co your local government	ontact numbers(s), and e-mail address of the t:	peı	rson(s) in charge of the			
	Name:	Name:			Name:		
	Phone:	Phone:			Phone:		
	E-mail:	E-mail:			E-mail:		
92.	Natural Heritage Progr Please note that the vetting of	ary disaster debris staging sites in your county ram (NHP) and the State Historic Preservation of a site prior to a disaster is advantageous to local governments when attemption	n (Office (SHPO) through	n coordination with the Solid Waste Section. e which is found to have impacted federal or state		
	Disaster Site #	Site Name	Name Disaster Site #		Site Name		
93.	Does your plan address	s the management of: Household hazard	ous	s waste Mass and	imal mortality		
		Abandoned vessels	3	White go	oods		
94.	Does your plan include	e coordination with NC DOT on clearing roa	ds	and waste in the right	of way? Yes No		
		Part IX. C	or	nments			
Use t		on any info provided in your report as neces					

matters regarding solid waste management in North Carolina. Thank you for your time. You may submit additional sheets if needed.

Editor (EB): Pulled #43 (commingled tons) from #63 (recycling program tons collected). Pulled #65 from #62 (combined contract amount).

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

Sandy Skolochenko, email: sandy.skolochenko@ncdenr.gov phone: 919-707-8147 Matt James, email: matt.james@ncdenr.gov phone 919-707-8133

THIS FORM IS DUE SEPTEMBER 1, 2019

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

