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: <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:

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

Form Year

Environmental Quality

Required - Enter Your Local Government Name: Lake Waccamaw

State of North Carolina

Local Government Report Form
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

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, 2017.

If you have questions or need assistance completing this form, please call 919-707-8121 or 919-707-8139.

Per	son Completing This Report: H		Title: Town Manager					
Ma	iling Address: PO Box 145	City: Lake Wacc	amaw		Zip: 28450			
Pho	one: (910) 646-3700	Fax: (910) 646-	-3860	D	ate: Augus	t 9, 2017		
Em	ail: lwtownmanager@embarqma	uil.com						
			General Instructions					
	ase remember that the time perio a specific question.	d for the report is JULY	1, 2016 through JUNE 30, 2	017. Please	check "No	" if you have nothing to report		
1.	Did your local government hav	ve a Recycling Coordina	tor or similar position for FY	16-17?	Yes	🖂 No		
	Name Recycling Coordinator	(if different from person	completing this report.)					
	Name:			Title:				
	Address:		City:			Zip:		
	Telephone:	Fax:	: Email:					
2.	Did your local government hav	ve a Solid Waste Directo	r or similar position for FY 1	6-17?	Yes	No		
	If Yes, Name:		Title:					
	Address:	City:			Zip:			
	Telephone:	Fax:	Email:					
3.	Did your local government have dedicated or part-time Solid Waste Enforcement Staff for FY 16-17? Yes No							
	If Yes, Name:			Title:				
	Address:		City:		Zip:			
	Telephone:	Fax:	Email:					
4.	Did your local government hav all that apply)	ve solid waste ordinances	s in place addressing any of t	he followin	g during F	Y 16-17? (if yes, please check		
	Disposal Bans	Illegal Dumping	Littering Other, Please	Describe:				
5.	Did your local government ma mulching, composting)?	nage, provide or contrac	t for any solid waste services		.7 (e.g., col ⊠ Yes	lection, disposal, recycling,		
	If you answer	"No" to question 5, th	e report is complete, please			cdenr.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.					
6.	Did your local government have a recycling program in place for collecting recyclable materials generated at Yes INO public buildings in FY 16-17?					
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 16-17?					
	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, 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?					
	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 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?					
	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 Go Green Recycling, Whiteville, N.C. 28472 Other (please specify)					
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program: Source-separated (citizens separate materials by type) dual / two stream (paper separated from cans/bottles) don't know / other					
28.	Please estimate the number of households served by your drop-off recycling program. 400					
29.	What sector(s) of your community are served by the drop-off recycling program? 🛛 Residential 🗌 Commercial 🔲 Industrial					
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites: 1					
31.	How many of these locations were staffed with attendants? All None Some please list # of staffed sites:					
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 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 progra	am collect or acce	pt 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?

OTHER PUBLIC RECYCLING PROGRAMS

Please answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by
the local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the
Recycling Tonnages Chart on pg 5.

38.	Did your local government operate a multifamily recycling collect	tion program	that provides on-property	recycling servic	ce for residents
	of multifamily properties in a manner other than through your cur	bside or dropo	off recycling programs?	Yes	No
39.	Did your local government operate a recycling program to serve c	ommercial or	institutional members of	your communit	y in a manner
	other than through your curbside or dropoff recycling programs?	X Yes	No 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	o-off recy	ycling sites	available for	ABC Or	n 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.		overnment have an ordinand of encouraging or requiring	0 0			am Yes	🔀 No

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 material type that was commingled.

PDOCDAM	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							
Brown							
Green							
Mixed			\square	15			15
PLASTIC:							
PET #1			\square				
HDPE #2			\square				
All Plastic Bottles			\square	5			5
Other Plastic Containers			\square				
Bulky Rigid Plastics			\square				
METAL:							
Aluminum Cans			\square	1			1
Steel Cans			\square	1			1
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)			\square	2			2
Cardboard (OCC)			\square	5			5
Magazines (OMG)			\square	2			2
Office Paper			\square	1			1
Mixed / Other Paper			\square	2			2
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here OTHER MATERIALS :							
Textiles (clothes etc) Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled tons-check all							
items collected above			\square				
TOTAL TONS:				34			34

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.

N	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 A H			A H H	D	
S	pecial	Waste	Collections	(Do No	t Include	Materials	Collected	as part of	t an HHW	Collection	Program	or Event)

4

47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		m collect this m the public?	# of sites	1		es collected / managed.		
	Used Motor Oil	Yes	No No		`	_	gallons		
	Used Oil Filters	Yes	No No		barr	els, or		lbs	
	Used Antifreeze	Yes	No No				gal	lons	
	Batteries, Lead Acid	Yes	No No		# b	atteries, or	r	lbs	
	Batteries, Dry Cell	Yes	No No				•	lbs	
	Fluorescent Bulbs/Lights Containing Mercury	Yes	No No			lbs, or	# bu	lbs	
	Propane Tanks	Yes	No No			lbs, or	# ta	anks	
	Used Cooking Oil / Waste Vegetable Oil	Yes	No No			lbs, or	gal	lons	
	Other Special Wastes - please provide waste type here:	Yes	No No					lbs	
	Pesticide Containers (NCDA Program, not pesticides themselves)	Yes	No No			lbs, or		con- iners	
	NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)	Yes	No No					lbs	
	Latex Paint (do not include paint collected at HHW event or by a paint exchange program)	Yes	No No			gals, or		lbs	
	 b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW pr Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from smaller from smaller in the second structure of th	ogram with a participated all businesses is material ma y HHW Prog lease simply ose collected Use	in your HHW (Conditionall anaged ram: if totals f provide total c at an HHW P	collectio y Exemp for indivi quantity rogram a	ent? Yes on program this ot Small Quanti dual materials a of materials col und should not in _ # of Barrels,	ty Generat pounds are known lected by I nclude ma or	tors)? Ye please itemize HHW program terials listed in lbs.	below. If data in 48g below. question 47.	
	Fluorescent Bulbs / Lights Containir						· /		
	 g. Provide Total Quantity of materials collected reported in 48f, please net the weight of those h. Please list HHW Collection Contractor 	l by HHW Pr e materials o	rogram. If ind ut of the total	ividual r listed he	re.			pound	
	i. Estimated cost of HHW / CESQG program of	or event(s) \$							

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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 16-17? 🛛 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	\boxtimes	850		RLR Enterprises, Chadborn, NC
Land clearing and inert debris landfill (LCID)				
Energy / Fuel Use (e.g. boiler fuel market)				
Total		850		

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	2	X	=		yd^3
Size of Truck (in yards)	Avg. no. of times	ruck fills each week	# of weeks truck is used during year		TOTAL	
	Part V.	Solid Wast	e Collection Services			

This section concerns your local government's provision of solid waste (garbage) collection services.

52. Please complete the following table about your government's solid waste collection system.

	Sector			ts Solid V				Waste Coll		Who Collects Solid Waste? a. Local government employees	How is Solid Waste Collected?	
	Residential	Primary	b	Secondary		Primary	1	Secondary	0	 b. By Contract c. Franchise haulers 	 Once a week at household Twice a week at household Convenience center/greenbox 	
	Commercial	Primary	b	Secondary		Primary	4	Secondary		d. Local government not involved in provision of	4. As needed or by request	
	Industrial	Primary	d	Secondary		Primary		Secondary		service	 5. Daily 6. Other 	
53.	If you provide	residenti	<u>al</u> was	te collect	ion at sin	gle-fam	ily hou	seholds in	your juri	isdiction, please answer the	following questions:	
	What type of co	ollection	metho	d is used	?	Fully A	Autom	ated 🔀	Semi-A	utomated 🗌 Manual	Don't know	
	What is the star	ndard co	llectio	n frequen	cy?	Weekl	у [Two tir	nes per	week Other		
	What is the typical service point for single family household waste? 🛛 Curbside 🗌 Back yard / Back door									ek door		
	What type of collection container is used? 🔀 Government-provided carts 🗌 Resident-provided container 🗌 Bags								iner 🗌 Bags			
	Do you offer be	ulky was	ste coll	ection ser	rvices?	Ye	es	No No				
54.	For municipalit If so, were whi			-			-			Yes ⊠No No		
]	Part	VI. So	lid W	aste a	nd F	Recyclin	g Edu	icational Activities		
55.	Did your local issues / activitie	0						orm citizens art VII, pag		cally about solid waste mar	nagement and / or recycling	
56.	Please estimate	your an	nual b	udget for	solid wa	ste relate	ed edu	cation and c	outreach	activities: \$		
57.	Does your com	munity p	produc	e recyclir	ng educat	ion and	outrea	ch materials	s in lang	guages besides English?	Yes No	
	If YES, please	list other	r langu	ages usec	1:							
58.	Please provide	your rec	ycling	website a	address a	nd publi	c info	rmation pho	ne numl	ber if applicable.		
	Website: Phone #:											

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Part V	II. Resources	for Solid Was	te Manageme	nt and Full C	Cost Accounti	ng
Sufficient resources ava questions deal with fund		0 1 0	v		f these programs. T	The following
59. Did your local gove		•			Yes No)
60. With regards to fun	-	-				
Tipping			eight-based fees (e.g		Fire tax	
	taxes / general fund		yclables		White Goods tax	
61. NC Solid Waste Di	ehold charges	Grants	ible local governme		Disposal Tax asis by the Departm	pent of Revenue
	5-187.63 these funds					
How are disposal ta	ax distributions being	used?To pay Waste	Industries for the ya	rd and solid waste	services	
62. If applicable, please	e provide your FY 16	17 household fees.	(e.g., a. <u>\$45.00</u> per	<u>year per household</u>	for solid waste)	
a. \$ <u>125</u>	per		per househo	old	for solid waste	2
	per					
-						
c. \$ 105	per		per	Ju	for yard waste	
d. \$	per		per		for bulky wast	e
e. \$	per		per		availability fee	2
f. \$	per		per		total charge	
63. Did your local gove	rnment operate a Pay	-As-You-Throw pro	gram for residential	garbage during FY	16-17? (a system v	where residents
are charged a fee by	weight or volume for	or the amount of trash	they discard)	Yes 🛛	No	
According to GS 130A inform users of such co		nments are required	to conduct full cos	t accounting annua	ally and to develop	a system to
64. If your local govern		lid waste or recyclin	g services, please re	port the annual con	tract amount.	
\$160,000		For solid waste				
\$1,800		For recycling pe	r year			
		OR OR	5			
\$161,800		Combined Contr	cact (solid waste, and	l recycling)		
65. Collection Program	s: Please complete th	e following table to t	he best of vour abili	ty to display the ful	ll costs of vour loca	l government's
collection programs	for waste, recyclable	es and yard waste inc	luding materials col			
not available, plea	se report program b		column.		Total Cost	Cost Per Ton
	# of Households	Tons Collected	Collection Cost	Disposal Cost	including	Managed
	served			(tipping fees paid)	overhead	(calculated by form)
Municipal Solid Was			94,784		94,784	155
Recycling Program	n** 89	834				0
Yard Waste Progr	am 89	8 610	102,549	10,309	112,858	185
То	tals (calculated by form	1,252	197,333	10,309	207,642	165

*for materials collected and sent for eventual disposal in a Municipal Solid Waste or Construction and Demolition Landfill.

**for materials collected by public recycling programs including those services offered to commercial and industrial generators. Do not include special waste services.
 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:

\$

\$

Transfer Station Budget:

Yard Waste / Compost Facility Budget: \$

Recycling Facility Budget:

67. What was your government's total combined annual budget for all solid waste and recycling services in 16-17? \$

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Part VIII. County Mandated Programs

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

WH	IITE GOODS					
68.	Please provide name, address, phone num		-			
	Name:					
	Address:				Zip:	
	Telephone: Fax	.:		Email:		
69.	Please provide the physical address of the	primary coun	ty white goo	ods collection site.		
	Street 1:					
	Street 2:					
	City:			State: North Carolina	a Zip:	
70.	Please provide the name of the business of	t person that re	emoves the	refrigerant gases (CFCs	s) from white goods.	
	Name:					
	Street:					
	City:				ı Zip:	
	Phone: Fax:			Email:		
71.	Give amounts / types of CFCs removed. A		of CFC rem	oval, and copy of certif	fication of person(s) perfo	orming extraction.
	Type of CFC Remo	oved			Amount	
72.	CFCs may be recycled or sent for destruct	ion. Give nam		-		-
	Firm		M	ethod of Disposal	Amount Earned	Amount Spent
73.	Please report the tonnage of white goods c white goods tonnage reported on page 5?		-	17 in the Recycling To	nnages table on page 5 (q	uestion # 45). Was
		Yes	No No			
74.	List the amount of revenue for the white g Revenue collected from sale of scrap:					
	Revenue collected from White Goods Tax	Distributions				
	Revenue from other source (e.g. grants):					
	Total Revenue:		\$			
75.	According to the White Goods Law, White expenditures White Good Tax Distribution					amounts and types of
	Operational Expenses:	\$				
	Capital Improvements:	\$				
	Clean-up of Illegal White Goods Dumps:					
		\$				
201	16-2017 Local Government Annual Report	Report Due	Date: Septe	mber 1, 2017 Submit	t to: Lgteam@ncdenr.gov	Page 9 of 11

6.	Please provide name, address, phone number, and e- Name:	-	-		
				11tte:	
	Address:				
	Telephone: Fax:		Ema	il:	
7.	Please provide the physical address of the primary c	•	p tires collection si	te.	
	Street 1:				
	Street 2:				7.
	City:				
3.	Tonnage/Number of scrap tires disposed July 1, 201 Tons o	6-June 30 r	, 2017 (<u>excluding</u> ti	res from cleanup of nu Number of tires	uisance sites)
).	Tonnage/Number of scrap tires disposed from clean Tons o	ip of state r	or county designat	ed nuisance sites Number of tires	
).	Indicate the types of tires collected by the county: Passenger % Heavy Tr	uck	%	Large Off-Road	%
l.	List the amount of revenue for the scrap tire program	n by sourc	e:		
	Revenue from Scrap Tire Tax Distributions:	\$			
	Revenue from Tire Fees:	\$			
	Revenue from Scrap Tire Clean-up Reimbursement	s: \$ _			
	Revenue from Scrap Tire Cost-Overrun Grants:	\$			
	Total Revenue:	\$			
2.	County's total scrap tire program contract expenditu excluding costs of nuisance tire cleanups, for FY 16	re (contrac 17.	ct disposal/hauling	costs), \$	
3.	County's additional scrap tire program expenditure (Labor \$		convenience center	cost), if any.	
	Site Cost \$				
	Other \$		describe Other:		
ŀ.	County's contract cost for scrap tire disposal. \$		/ Ton; \$	/ Tire	
5.	Hauling cost or fuel surcharge, if not included in co	ntract cost	above. \$	/ Ton; \$	/ Tire
).	Total tipping fees collected for tires not eligible for	free dispo	sal. \$		
7.	Total number of tires collected not eligible for free				
		-			
3.	If scrap tires were not hauled off site by contracted s	1		Ĩ	
).					
	MPORARY DISASTER DEBRIS STAGI				
).	Does your local government have a plan in place for	•			No
	If yes, indicate if the plan is a stand-alone plan or in		•		Stand-alone In conjuncti
•	If you indicated having a plan, has the plan been rev requirements for public assistance reimbursement in	a declare	d disaster event?	Yes	No No
2.	Please list the name, contact numbers(s), and e-mail your local government:	address o	t the person(s) in cl	harge of the disaster de	ebris management program for
	Name: Nam	e:		Name:	
	Phone: Phor	e:		Phone:	

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.

	J J J J J J J J J J J J J J J J J J J	······································							
Disaster Site #	Site Name		Disaster Site #	Site Name					

94.	Does your plan address the management of household hazardous waste and white goods following a disaster?
95.	Does your plan address mass animal mortality?
MA	NAGEMENT 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: 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 <u>https://deq.nc.gov/conservation/</u>recycling/local-government-recycling-assistance or e-mail us at Lgteam@ncdenr.gov

