# **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



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

**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.

Person Completing This Report:	KAREN HEAGY	Title	e: OFFICE MAI	NAGER		
Mailing Address: PO BOX 99		City: NAGS HEAD		Zip: 27959		
Phone: 252-449-4203	Fax: 252-441-3350		Date: 8-28-17			
Email: KAREN.HEAGY@NAG	SHEADNC.GOV					
	General	Instructions				
Please remember that the time per for a specific question.	riod for the report is JULY 1, 2016 t	hrough JUNE 30, 2017. Ple	ase check "No"	if you have nothing to report		
1. Did your local government	have a Recycling Coordinator or sin	nilar position for FY 16-17?	Yes	🔀 No		
Name Recycling Coordinat	or (if different from person completi	ng this report.)				
Name:		Title:				
Address:		City:		Zip:		
Telephone:	Fax:	Email:				
2. Did your local government	have a Solid Waste Director or simil	lar position for FY 16-17?	Xes	No		
If Yes, Name: KAREN	HEAGY	Title: PW OFFICE MANAGER				
Address: PO BOX		City: NAGS HEAD		Zip: 27959		
Telephone: 252-449-4203	Fax: 252-441-3350	Email: KAREN.HEAGY@NAGSHEADNC.GOV				
3. Did your local government	have <b>dedicated</b> or part-time Solid	Waste Enforcement Staff for	FY 16-17?	Yes No		
If Yes, Name:		Title	e:			
Address:		City:		Zip:		
Telephone:	Fax:	Email:				
4. Did your local government all that apply)	have solid waste ordinances in place	addressing any of the follow	ving during FY 1	16-17? (if yes, please check		
⊠ Disposal Bans	Illegal Dumping	Other, Please Describe	2:			
5. Did your local government mulching, composting)?	manage, provide or contract for any	solid waste services in FY 1	6-17 (e.g., collec Xes	ction, disposal, recycling,		
If you answ	er "No" to question 5, the report	is complete, please email to	o Lgteam@ncdd	enr.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? Xes No
10.	If yes, please check all backyard composting activities that apply:
	$\boxtimes$ Education $\square$ Demonstration site(s) $\boxtimes$ Bin distribution/sales Number of Bins distributed? 1
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 <b>DID operate or contract</b> for a recyclables recovery program. ( <b>please continue to question 15</b> )
	My local government <b>DID NOT operate or contract</b> for recyclables recovery <b>BUT DID participate</b> in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; <b>then go to Part IV on page 7</b> .)
	With which local government did you participate?
	My local government <b>DID NOT operate, contract or participate</b> in a recycling program. ( <b>Go to Part IV on page 7</b> .)
-	our local government <b>DID operate or contract</b> 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)
	<ul> <li>Franchised hauler (please specify)</li> <li>Other (please specify)</li> <li>BAY DISPOSAL/OBX RECYCLING (FOR SUMMER EAST ROUTE)</li> </ul>

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction? 4,503
	b. Number of households eligible to participate in the curbside recycling program: 4,400
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 4,400
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?
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served:
21.	How frequently were the curbside recyclables collected?  Once a week  Every other week / biweekly
	Other
22.	Please describe the collection containers used:          Bins        Blue bags          Multi-bin system          Roll-out carts
23.	Please describe the method / style of recyclable materials handling:         □ curb-sort (collector separates material as collected)       □ single stream / commingled         □ dual / two stream       □ don't know / other
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used:          Iss than 50 gallon cart       65 gallon cart         95 gallon cart       multiple sizes of cart available
DR	OP-OFF RECYCLING PROGRAM
25.	Did your government operate a Drop-off Recycling Program? Xes 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 OBX HAULING/BAY DISPOSAL CONTRACTOR  Other (please specify)
27	
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)         dual / two stream (paper separated from cans/bottles)
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: 2
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? Xes 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: 1

- 33. Did your electronics recycling program collect or accept televisions from (check all that apply): 🛛 Residences
- 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:TAKEN TO DARE COUNTY

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

#### OTHER PUBLIC RECYCLING PROGRAMS

N/A

<u>the</u> <u>lo</u>	se answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for <u>by</u> <u>ocal government</u> . The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ocling Tonnages Chart on pg 5.
38.	Did your local government operate a multifamily recycling collection program that provides on-property recycling service for residents of multifamily properties in a manner other than through your curbside or dropoff recycling programs? $\Box$ Xac

	of multifamily properties in a manner other than through your curbside or dropoff recycling programs? $\Box$ Yes	No
39.	Did your local government operate a recycling program to serve commercial or institutional members of your community in	a manner
	other than through your curbside or dropoff recycling programs? 🔀 Yes 🗌 No	

40.	Does your local government provide recy	cling services to Alcoholic Beverage Commission permit holders?	] Yes	No
	On-site collection services provided	If on-site collection provided, please estimate # of ABC accounts serv	/ed:53	

$\sim$	Dublic drop	off rooveling	sitas available fo	r ABC On Promisor	s Permit holders to use
	r ublic ulop	-on recycning	sites available it	ADC OIL FICHIISCS	

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 Dhek, concrete, etc Sheenoek vinyr stung Shingles	Wietais	
42.	Does your local government have an ordinance regulating the construction and demolition waste stream	Yes	No No
	with the intention of encouraging or requiring waste reduction or recycling of these materials?		

Vinvl siding

Shingles

Motole

Other

- 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

Sheetrock

- 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

Clean Wood

- 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

Brick concrete etc

- Oyster Shell Recycling Program
- Other Programs (please specify) RECYCLING CANS PROVIDED AT BEACH ACCESSES

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.

DDOCDAM	Curbside		Drop-off		All "O	ther'' Programs	Total Tons	
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)	
GLASS:								
Clear	$\square$		$\boxtimes$					
Brown			$\boxtimes$					
Green			$\boxtimes$					
Mixed								
PLASTIC:								
PET #1								
HDPE #2								
All Plastic Bottles			$\boxtimes$					
Other Plastic Containers								
Bulky Rigid Plastics					$\square$	10.75	10.75	
METAL:								
Aluminum Cans			$\boxtimes$					
Steel Cans			$\boxtimes$					
White Goods					$\square$			
Other Metal					$\square$	125.188	125.188	
PAPER:								
Newsprint (ONP)	$\square$		$\boxtimes$					
Cardboard (OCC)			$\boxtimes$					
Magazines (OMG)			$\boxtimes$					
Office Paper			$\boxtimes$					
Mixed / Other Paper	$\square$		$\boxtimes$					
Cartons / Aseptic Containers								
WOOD:								
Pallets								
Other Wood - DO NOT								
report yard waste tons here								
OTHER MATERIALS:								
Textiles (clothes etc)								
Televisions					$\square$			
Other Electronics								
C&D Materials Recycling								
Commingled tons-check all					$  \square  $			
items collected above		884.8	$\square$	61.42		34.19	980.41	
TOTAL TONS:		884.8		61.42		170.128	1,116.348	

46. **RECYCLING TONNAGE AS A RESULT OF POLICY OR ORDINANCE:** complete this section for materials that were recycled as a result of local government ordinances or policies but that were NOT collected or managed directly by your local government recycling program. E.g. a corrugated cardboard disposal ban supported by a reporting mechanism for collecting data on private recycling tonnages.

Material Type	Tons Diverted	Describe the mechanism that caused these materials to be recovered and data collection method

## Part III. Special Waste Collections

This section concerns local government programs for managing materials that require special handling or that are banned from landfilling. Please provide responses and data as indicated below considering services provided to the public. Please do not include data on materials that were accepted and then disposed of in a landfill. Do not include materials generated exclusively by government operations (e.g. motorfleet services). Question 47 is about materials accepted outside of any Household Hazardous Waste (HHW) Program or event. If special wastes were <u>only</u> accepted as a part of an HHW Program or HHW event and were not collected by separate recycling efforts then do not record materials in question # 47 but instead report with HHW materials in question # 48.

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

4

Used Motor Oil       Yes       No	47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		n collect this m the public?	# of sites	-	Data on quantities collected / managed. Please report in indicated units.		
Used Antifreeze       □       ves       No		Used Motor Oil	Yes	🛛 No				gallons	
Batteries, Lead Acid       □		Used Oil Filters	Yes	No No		barre	ls, or	lbs	
Batteries, Dry Cell       □       Yes       No       □ <td></td> <td>Used Antifreeze</td> <td>Yes</td> <td>🛛 No</td> <td></td> <td></td> <td></td> <td>gallons</td> <td></td>		Used Antifreeze	Yes	🛛 No				gallons	
Fluorescent Bulbs/Lights Containing Mercury       Yes       No       ibs, or       # bulbs         Propane Tanks       Yes       No       ibs, or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       ibs, or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       ibs, or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       ibs, or       # tanks         Used Cooking Oil / Wastes - please provide waste       Yes       No       ibs, or       # tanks         Used Cooking Oil / Wastes - please provide waste       Yes       No       ibs, or       # con-         Pesticide Containers (NCDA Program, not       Yes       No       ibs, or       # con-         If to ranagement of pesticides, not containers)       Yes       No       ibs       ibs         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?       Yes       No       if Yes, please respond to the following questions:         a. Was HHW collectat 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		Batteries, Lead Acid	Yes	🖂 No		# ba	tteries, or	lbs	
Propane Tanks       □       Yes       No       □		Batteries, Dry Cell	Yes	No No			ľ	lbs	
Used Cooking Oil / Waste Vegetable Oil       Yes       No       ibs, or       gallons         Other Special Wastes - please provide waste type here:       Yes       No       ibs, or       ibs, or       gallons         Pesticide Containers (NCDA Program, not pesticides themselves)       Yes       No       ibs, or       itos, or       interest         NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)       Yes       No       ibs         HUW event of by a paint exchange program       Yes       No       gals, or       ibs         HUW event of by a paint exchange program       Yes       No       gals, or       ibs         HUW event of by a paint exchange program or program or event in FY 16-17?       Yes       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?       .       Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)?       Yes       No         Please list partner(s)		Fluorescent Bulbs/Lights Containing Mercury	Yes	No No		1	bs, or	# bulbs	
Other Special Wastes - please provide waste       Yes       No       Ibs         Uppe here:       IVes       No       Ibs       Ibs         Pesticide Containers (NCDA Program, not       Yes       No       Ibs, or       Image: Ibs         NCDA Pesticide Disposal Assistance Program       Yes       No       Ibs       Ibs         Intex Paint (do not include paint collected at       Image: Ibs       Ibs       Ibs         HHW event or by a paint exchange program       Yes       No       Iss       Ibs         HUWsehold 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?       Yes       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 one to accept materials during this Fiscal Year?       C. Did you partner or co-sponsor your HHW program with another local government?       Yes       No         e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)?       Yes       No         flyes, please estimate the amount of business material managed		Propane Tanks	Yes	No No		1	bs, or	# tanks	
type here:       Image: I		Used Cooking Oil / Waste Vegetable Oil	Yes	🗌 No		1	bs, or	gallons	
pesticides themselves)       Image: Im			Yes	No No				lbs	
(for management of pesticides, not containers)       Yes       Yes       No			Yes	No No		1	bs, or		
HHW event or by a paint exchange program)       Yes       No       or       bit         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?       Yes       No         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?			Yes	🖂 No				lbs	
<ul> <li>48. Did your local government operate a household hazardous waste collection program or event in FY 16-17? Yes No If Yes, please respond to the following questions: <ul> <li>a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility?</li> <li>Permanent Temp. Event</li> <li>b. How many days was your HHW Program open to accept materials during this Fiscal Year?</li> <li>c. Did you partner or co-sponsor your HHW program with another local government?</li> <li>Yes No</li> </ul> </li> <li>Please list partner(s) <ul> <li>Provide number of citizens / households that participated in your HHW collection program this Fiscal Year?</li> <li>c. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)?</li> <li>Yes No</li> <li>If yes, please estimate the amount of business material managed pounds</li> </ul> </li> <li>f. Amounts of individual materials collected by HHW Program: if totals for individual 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)</li> <li>g. Provide Total Quantity of materials collected by HHW Program. If individual materials were reported in 48f, please net the weight of those materials out of the total listed here. h. Please list HHW Collection Contractor</li></ul>		· · ·	Yes	No No		-		lbs	
<ul> <li>g. Provide Total Quantity of materials collected by HHW Program. If individual materials were reported in 48f, please net the weight of those materials out of the total listed here.</li> <li>h. Please list HHW Collection Contractor</li> <li>i. Estimated cost of HHW / CESQG program or event(s) \$</li> <li>Pages 3 through 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling services.</li> </ul>		<ul> <li>c. Did you partner or co-sponsor your HHW preplease list partner(s)</li> <li>d. Provide number of citizens / households that</li> <li>e. Did your program accept materials from small fyes, please estimate the amount of business</li> <li>f. Amounts of individual materials collected by about individual materials is not available, per Note, materials listed here should only be the Used Motor Oil (gal)</li> <li>Used Antifreeze (gal)</li> </ul>	ogram with a participated all businesses is material ma y HHW Progr lease simply ose collected Use Lea	in your HHW (Conditionall anaged ram: if totals f provide total of at an HHW P ed Oil Filters d Acid Batter	collection y Exemp for indivi quantity rogram a	ent? Yes on program this I pt Small Quantity idual materials ar of materials colle and should not in _ # of Barrels, o	Fiscal Year y Generator counds re known pl ected by HF clude mater	s)? Yes ease itemize below W program in 48 rials listed in quest	v. If data g below. tion 47.
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.						_			
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.		reported in 48f, please net the weight of those		ut of the total	listed he	ere.			pounds
Pages 3 through 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling services.		i. Estimated cost of HHW / CESOG program of	or event(s) \$						_
		es 3 through 6 should have only been complet	ed by govern	ments indica	ting in q	uestion # 14 the			

2016-2017 Local Government Annual Report *Report Due Date: September 1, 2017* Submit to: Lgteam@ncdenr.gov

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	$\boxtimes$	1,200		PW bulk/brush drop off yard 2200 Lark Ave. NH NC 27959
Other public mulch or compost facility				
Private mulch or compost facility				
Land clearing and inert debris landfill (LCID)				
Energy / Fuel Use (e.g. boiler fuel market)				
Total		1200		

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 yd<sup>3</sup> truck x 3 days/wk x 16 wks = 480 yd<sup>3</sup>

	_ X	X		$yd^3$
Size of Truck (in yards)	Avg. no. of times truck fills each w	veek # of weeks truck is used during year	TOTAL	
	Part V. Solid Wa			

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 see codes				Waste Collee codes at 1		Who Collects Solid Waste? a. Local government employees	How is Solid Waste Collected?	
	Residential	Primary	А	Secondary		Primary	2	Secondary		b. By Contract c. Franchise haulers	<ol> <li>Twice a week at household</li> <li>Convenience center/greenbox</li> <li>As needed or by request</li> <li>Daily</li> </ol>	
	Commercial	Primary	А	Secondary		Primary	6	Secondary		d. Local government not involved in provision of		
	Industrial	Primary	D	Secondary		Primary		Secondary		service	6. Other	
53.	If you provide	residenti	i <u>al</u> was	te collecti	ion at sin	gle-fam	ily hou	seholds in	your jur	isdiction, please answer the	following questions:	
	What type of c	ollection	metho	od is used	?	Fully A	Autom	ated	Semi-A	utomated 🗌 Manual	Don't know	
	What is the star	ndard co	ollectio	n frequen	cy? 🖂	Weekl	у [	Two tir	nes per	week Other		
	What is the typ	ical serv	vice po	int for sin	gle famil	y house	hold w	vaste?	🛛 Curl	bside Back yard / Bac	k door	
	What type of co	ollection	conta	iner is use	ed?	Govern	nment-	provided ca	urts	Resident-provided conta	iner 🗌 Bags	
	Do you offer b	ulky was	ste coll	ection ser	vices?	X Ye	es	No				
54.	For municipalities - did your government collect white goods at the curb? $\square$ Yes $\square$ No If so, were white goods delivered to the county for marketing? $\square$ Yes $\square$ No											
								•	0	icational Activities		
55.	. Did <b>your local government</b> have an education program to inform citizens specifically about solid waste management and / or recycling issues / activities? Xes No (If No, skip to Part VII, page 8)											
56.	Please estimate your annual budget for solid waste related education and outreach activities: \$											
57.	Does your com	munity ]	produc	e recyclir	ng educat	ion and	outrea	ch materials	s in lang	guages besides English?	Yes No	
	If YES, please	list othe	r langu	ages used	l:							
58.	Please provide	your rec	cycling	website a	address a	nd publi	c infor	mation pho	ne num	ber if applicable.		
	Website: WW	W.NAG	SHEA	DNC.GO	V					Phone #:		

2016-2017 Local Government Annual Report *Report Due Date: September 1, 2017* Submit to: Lgteam@ncdenr.gov

	Part VII	. Resources f	or Solid Was	te Manageme	ent and Full C	ost Accounti	ng
	ficient resources availab					these programs. T	The following
<u>^</u>	estions deal with funding Did your local governn					Vas 🕅 No	
	With regards to funding	-	-			Yes No	)
00.	Tipping fees		1100	eight-based fees (e.g	g. PAYT) 🗌 T	ire tax	
	Property tax	tes / general fund	$\boxtimes$ Sale of recy	yclables		hite Goods tax	
	Per househo	U	Grants			visposal Tax	
61.	NC Solid Waste Dispos According to GS 105-1	1	0	U	1 2	<i>v</i> 1	
	How are disposal tax d	•					
62.	If applicable, please pr						
	a. \$	per		per		for solid waste	•
	b. \$	per		per		for recycling	
	c. \$	per		per		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 governm are charged a fee by we					16-17? (a system v ] No	where residents
	cording to GS 130A-30	~	nents are required	to conduct full cos	st accounting annua	lly and to develop	a system to
	orm users of such costs.						
64.	If your local government	nt contracts for soli			eport the annual cont	ract amount.	
	\$		_ For solid waste s	ervices per year			
	\$94,443		_ For recycling per	r year			
			OR				
	\$		_ Combined Contr	act (solid waste, an	d recycling)		
65.	Collection Programs: P collection programs for	waste, recyclables	and yard waste inc	luding materials co			
	not available, please r		uget in Total Cost	column.		Total Cost	Cost Per Ton
		# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	including overhead	Managed (calculated by form)
N	Iunicipal Solid Waste*	4,503	9,431.43		683,858	1,698,873	180
	<b>Recycling Program**</b>	4,400	1,116.35			171,785	153
	Yard Waste Program	4,400	1,200		_	27,804	23
	Totals	(calculated by form):	11,747.78		683,858	1,898,462	161
	*for materials collected and	-	-				
66	** for materials collected by						
00.	6. If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, facility operations (round to nearest dollar). If budgets for different facilities are combined, please attem						
	proportionately. Land		\$			-	
	Tran	sfer Station Budget	: \$				
	Yard	Waste / Compost H	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? \$1,898,462

\$

2016-2017 Local Government Annual Report Due Date: September 1, 2017 Submit to: Lgteam@ncdenr.gov

# 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 numb	-		s program.	
	Name:				
	Address:				
	Telephone: Fax:		Email:		
69.	Please provide the physical address of the p	primary county white	e goods collection site.		
	Street 1:				
	Street 2:				
	City:		State: North Carolina	Zip:	
70.	Please provide the name of the business or Name:	-		om white goods.	
	Street:				
	City:			Zip:	
	Phone: Fax:				
71.	Give amounts / types of CFCs removed. At				
	Type of CFC Remov	ved		Amount	
72.	CFCs may be recycled or sent for destruction	on. Give name of firi	m, disposal method and amount	t earned / spent for CF	C disposal.
	Firm		Method of Disposal	Amount Earned	Amount Spent
73.	Please report the tonnage of white goods co white goods tonnage reported on page 5?	Ilected during FY 20     Yes		ges table on page 5 (qu	estion # 45). Was
74.	List the amount of revenue for the white go	oods program by sour	rce:		
	Revenue collected from sale of scrap:	\$			
	Revenue collected from White Goods Tax				
	Revenue from other source (e.g. grants):	\$			
	Total Revenue:				
75.	According to the White Goods Law, White expenditures White Good Tax Distributions				mounts and types of
	Operational Expenses: \$	S			
	Capital Improvements: \$				
	Clean-up of Illegal White Goods Dumps: \$				
	Total Expenditures: \$				
201	6-2017 Local Government Annual Report	Report Due Date: S	eptember 1, 2017 Submit to:	Lgteam@ncdenr.gov	Page 9 of 11

6.	Please provide name, address, phone number, and Name:	-	-		
				11tle:	
	Address:				
	Telephone: Fax:		Ema	ail:	
7.	Please provide the physical address of the primary	•	ap tires collection s	ite.	
	Street 1:				
	Street 2:				
	City:				
3.	Tonnage/Number of scrap tires disposed July 1, 20 Tons	16-June 30	0, 2017 ( <u>excluding</u> t	ires from cleanup of n Number of tires	uisance sites)
9.	Tonnage/Number of scrap tires disposed from clea	nup of stat or	e or county designa	ted nuisance sites Number of tires	
).	Indicate the types of tires collected by the county: Passenger% Heavy	Fruck	%	Large Off-Road	%
1.	List the amount of revenue for the scrap tire progra	m by sour	ce:		
	Revenue from Scrap Tire Tax Distributions:	\$			
	Revenue from Tire Fees:	\$			
	Revenue from Scrap Tire Clean-up Reimbursemen	nts: \$			
	Revenue from Scrap Tire Cost-Overrun Grants:	<i>•</i>			
	Total Revenue:	\$			
2.	County's total scrap tire program contract expendit excluding costs of nuisance tire cleanups, for FY 1	ure (contra 6-17.	act disposal/hauling	costs), \$	
3.	County's additional scrap tire program expenditure Labor \$			r cost), if any.	
	Site Cost \$		_		
	Other \$		describe Other:		
1.	County's contract cost for scrap tire disposal. \$		/ Ton; \$	/ Tire	
5.	Hauling cost or fuel surcharge, if not included in c	ontract cos	st above. \$	/ Ton; \$	/ Tire
5.	Total tipping fees collected for tires not eligible for	r free disp	osal. \$		
<i>'</i> .	Total number of tires collected not eligible for free	-			
3.	If scrap tires were not hauled off site by contracted	service pr	rovider, were they cu	ut and disposed in a lo	cal landfill? Yes No
Э.	Name of tire disposal/recycling firm(s):				
E	MPORARY DISASTER DEBRIS STAG	ING SIT	TES		
).	Does your local government have a plan in place f	or manage	ment of disaster deb	ris? 🗌 Yes	No
	If yes, indicate if the plan is a stand-alone plan or i	n conjunct	ion with local gover	rnment agencies:	Stand-alone In conjuncti
l.	If you indicated having a plan, has the plan been re requirements for public assistance reimbursement			Ianagement or FEMA	to ensure it meets the basic
2.	Please list the name, contact numbers(s), and e-ma your local government:		of the person(s) in c	harge of the disaster de	ebris management program for
		me:			
	Phone: Pho	one:		Phone:	
	E-mail: E-1	nail:		E-mail:	

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.

esources after a aisaster ma	y cause adjicanty for rocar governments when all infinite	, "	oolaan i Emii reimoursena	m. much extra sheets, n needed.
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?	Yes	🗌 No
-----	--	-----	------

95. Does your plan address mass animal mortality? Yes No

### MANAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES

96. Has your county considered whether to implement a program for the management of abandoned manufactured homes? 🗌 Yes 🗌 No

If yes, has your county developed a written plan for the management of abandoned manufactured homes? Yes

### 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.

DARE COUNTY IS MARKETING SOME OF THE DROP OFF RECYCLABLE MATERIALS AND REPORTING BALANCE OF THE TONS. DART AND BAY IS MARKETING THE REST.

Page 9 #64-Bay Contract services-Pulls \$6,500.00, 3 Town Building and the new east route contract cost-\$87,943.00 total \$94,443.00. The Only C&D Tons included on this report is on on question 65.

1116.35- TOTAL TONS HANDLED, PICKED UP OR BROUGHT TO OBX HAULING/BAY DISPOSAL OF THESE TONS ARE BROKEN OUT AS FOLLOWS:

125.19 Dart Steel (Page 6 other metal)

10.75 Plastic Trash Carts

371.12 OBX HAULING- Summer East Route- commingled CURBSIDE PICKED UP BY OBX HAULING (began 5-2016)

34.19 OBX HAULING Beach accesses- commingled CURBSIDE PICKED UP BY OBX HAULING (we pay bay for collecting this)

513.68 Town Forces Curbside Residential recycle program and commingled - cost per ton became \$0 per ton.

61.42 OBX HAULING-1 ROLL off at TH Commingled that OBX HAULING pulls (we pay bay for collecting this) 1116.35-TOTAL

Question 65. Yard Waste Program (breakdown) Part time employee- \$14,287 Grinding Costs-\$13,517 Total =\$27,804.00

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



No