# Environmental Quality

#### **State of North Carolina**

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

## Solid Waste and Materials Management Annual Report July 1, 2016 -- June 30, 2017

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

On the following pages you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2016-2017. Each North Carolina County and Municipality is required to complete this report annually. Completion and submission of this report will fulfill the annual reporting mandate to the state as required by G.S. 130A-309.09A. Failure to complete and submit this report could result in the local government being excluded from distributions of Solid Waste Disposal Tax Proceeds and other Department of Environmental Quality grants.

#### **Instructions:**

Each local government should determine which staff member is responsible for preparing and submitting the annual report and ensure that the report is completed and submitted before the reporting deadline on September 1, 2017.

Options for obtaining a blank copy of this form:

- $1-download\ a\ copy\ of\ the\ form\ from\ this\ web\ site:\ \underline{http://deq.nc.gov/about/divisions/waste-management/solid-waste-section/annual-reporting}$
- 2 call the Division of Environmental Assistance and Customer Service at 877-623-6748
- 3 request a copy of the form by sending an email to Lgteam@ncdenr.gov.

This form must be completed electronically using Adobe Reader. Adobe Reader can be downloaded for free at the following web site: <a href="https://get.adobe.com/reader/">https://get.adobe.com/reader/</a> - it is suggested that you complete the form using the latest version of Adobe Reader. Please <a href="DO NOT">DO NOT</a> complete this form using Adobe Acrobat Pro.

Complete the form by entering responses in the appropriate fields using Adobe Reader. Please save a copy of the completed form to your computer for your records by using the "Save As" option and choosing an appropriate file name. When naming the file, please include your community's name as a part of the file name.

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

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

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

Form Year

2017



Local Government Report Form

**Required** - Enter Your Local Government Name: Hyde County

## **State of North Carolina**

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

# Solid Waste and Materials Management Annual Report July 1, 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 s	ubmit this form to Lgtean	n@ncdenr.gov by <b>September</b>	1, 2017.		
If you hav	ve questions or nee	d assistance completing	g this form, please call 919	)-707-8121 or	919-707-8139.	
Person Completing Thi	s Report: James O.	Blount	Title	: Superintende	nt	
Mailing Address: Po	O. Box 66		City: Swan Quarter		Zip: 27885	
Phone: 252-926-4196		Fax: 252-926-3703		Date: 08-11-	17	
Email: jblount@hydec	ountync .gov					
		General	Instructions			
Please remember that the for a specific question.	ne time period for th	e report is JULY 1, 2016 t	hrough JUNE 30, 2017. Plea	ase check "No"	if you have nothing to report	
• •	vernment have a Rec	cycling Coordinator or sin	nilar position for FY 16-17?	X Yes	No	
Name Recycling (	Coordinator (if diffe	rent from person completi	ng this report.)			
Name: James B	lount		Title	: Superintender	nt	
Address: PO.Bo	x 66		City: Swan Quarter		Zip: 27885	
Telephone: 252-9	26-4196	Fax: 252-926-3703	Email: jblount@	hydecountync	.gov	
2. Did your local gov	vernment have a Sol	id Waste Director or simil	ar position for FY 16-17?	X Yes	☐ No	
If Yes, Name:	Clint Berry		Title	: Director of the	of the Public Services	
Address: PO Box	66		City: Swan Quarter		Zip: 27885	
Telephone: 252-9	26-4196	Fax: 252-926-3703	Email: cberry@	hydecountync.	gov	
3. Did your local gov	vernment have <b>dedi</b>	cated or part-time Solid	Waste Enforcement Staff for	FY 16-17?	X Yes No	
If Yes, Name:	James Blount		Title	: Superintender	ıt	
Address: P O. Bo	x 66		City: Swan Quarter		Zip: 27885	
Telephone:	Telephone: Fax:		Email: jblount@	hydecountync	.gov	
4. Did your local govall that apply)	vernment have solid		addressing any of the follow	ing during FY	16-17? (if yes, please check	
⊠Disposal	Bans   X Illegal	Dumping	Other, Please Describe	:		
5. Did your local gor mulching, compos		rovide or contract for any	solid waste services in FY 16	5-17 (e.g., colle X Yes	ection, disposal, recycling,  No	
If	you answer ''No'' i	o question 5, the report	is complete, please email to	Lgteam@nca	lenr.gov.	

#### Part I. Waste Reduction and Recycling Programs Serving Government Facilities The following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. Did your local government have a recycling program in place for collecting recyclable materials generated at X No public buildings in FY 16-17? 7. Did your local government have any program or policy encouraging or requiring local agencies to X No purchase products with recycled content? Did your local government have a program in place to collect and recycle spent fluorescent lights X Yes No generated from the public buildings and facilities that were operated by your government in FY 16-17? Part II. Waste Reduction and Recycling Programs Serving the Public SOURCE REDUCTION / REUSE Did your local government have a backyard composting program? Yes X No If yes, please check all backyard composting activities that apply: Education Demonstration site(s) Bin distribution/sales Number of Bins distributed? Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes X No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives? Did your local government offer a waste exchange or reuse program? Yes 13 If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public: Paint exchange Number of gallons recovered? Swap shop/shed Number of sheds in use? Other (e.g. pallet exchange, etc.) PUBLIC RECYCLING SERVICES Which of the following responses best describes your recyclables recovery activities for the period July 1, 2016 through June 30, 2017? My local government **DID operate or contract** for a recyclables recovery program. (please continue to question 15) My local government DID NOT operate or contract for recyclables recovery BUT DID participate in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; then go to Part IV on page 7.) With which local government did you participate? My local government **DID NOT operate**, contract or participate in a recycling program. (Go to Part IV on page 7.) If your local government **DID** operate or contract for a recyclables recovery program, please indicate in the following sections the type of program in operation and provide specifics about your program(s). CURBSIDE RECYCLING PROGRAM Did your government operate a Curbside Recycling Program? Yes No, skip to question # 25 Who collected the recyclable materials for your local government's curbside recycling program? 16. Local government employees Private contractor (please specify) Franchised hauler (please specify) Other (please specify)

17.	Please provide the following information about your community:  a. Total number of households in your jurisdiction?							
	b. Number of households eligible to participate in the curbside recycling program:							
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary):							
18.	If your curbside recycling program is operated through a <u>public franchise granted to a private company</u> then please answer the following: Is public participation in the franchise:    Voluntary or   Mandatory   Multiple service districts							
19.	What sector(s) of your community was served by the curbside recycling program?  Residential Commercial Industrial							
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served:							
21.	How frequently were the curbside recyclables collected?  Once a week  Every other week / biweekly  Other							
22.	Please describe the collection containers used:  Bins Blue bags Multi-bin system Roll-out carts							
23.	Please describe the method / style of recyclable materials handling:  curb-sort (collector separates material as collected) single stream / commingled dual / two stream don't know / other							
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used:    less than 50 gallon cart							
DR	OP-OFF RECYCLING PROGRAM							
25.	Did your government operate a Drop-off Recycling Program?							
26.	Who collected the recyclable materials for your local government's drop-off recycling program?  \[ \sum \text{Local government employees} \]  Private contractor							
	Other (please specify)							
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program:  source-separated (citizens separate materials by type) 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. 4,500							
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: 6							
31.	How many of these locations were staffed with attendants?							
EL	ECTRONICS RECYCLING PROGRAM							
mate	Is answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any perials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.  Did your community operate an electronics recycling program in FY 16-17? Yes No, skip to question # 38  If you did operate an electronics recycling program, please indicate style of program:  Permanent - Curbside Collection Permanent - Drop-off Scheduled Collection Day or Event Part of HHW Program If you offer curbside collection of electronics is it: by appointment or unscheduled  If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites: 6							

33.	Did your electronics recycling program collect or accept televisions from (check all that apply):   Residences  Businesses								
34.	Did your electronics recycling program collect or accept computer equipment from (check all that apply): 🔀 Residences 🔲 Businesses								
35.	DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was eligible to receive proceeds from the State Electronics Management Fund in February of 2017, please provide the following information:								
	Electronics Management Fund balance as of July 1, 2016: \$6,000								
	Electronics Management Funds received from DEQ during FY 16-17 (Feb 2017 distribution): \$ 552.44								
	Electronics Management Funds spent during FY 16-17: \$ 6,697.2								
	Electronics Management Fund balance as of June 30, 2017: \$ 0								
36.	Briefly explain how Electronics Management Funds were spent during FY 2016-17 (please list items purchased if applicable):								
	Used for expenses transporting electronics to central locations.								
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: Electronic Recyclers International, Inc.								
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? Xes No								
OT	HER PUBLIC RECYCLING PROGRAMS								
<u>the</u> <u>l</u>	use answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ycling Tonnages Chart on pg 5.								
<ul><li>38.</li><li>39.</li></ul>	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? $\bigvee$ Yes $\bigvee$ No Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner								
40	other than through your curbside or dropoff recycling programs?   Yes No								
40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? X Yes On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served:								
	□ Public drop-off recycling sites available for ABC On Premises Permit holders to use								
41.	Does your local government operate a program to recycle Construction and Demolition materials?    Yes    No  If yes, please check all materials that were recycled and report tonnages in tonnage table on page 5:								
	☐ Clean Wood ☐ Brick, concrete, etc. ☐ Sheetrock ☐ Vinyl siding ☐ Shingles ☐ Metals ☐ Other								
42.	Does your local government have an ordinance regulating the construction and demolition waste stream with the intention of encouraging or requiring waste reduction or recycling of these materials?								
43.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 16-17. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)								
	□ Public Parks Recycling Program     □ Athletic Field / Venue Recycling Program								
	☐ Pedestrian Recycling Program ☐ Recycling Service for Special Events / Festivals								
44.	Please identify all "Other" programs or services operated by your government during FY 16-17. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)								
	☐ Public School Recycling Program								
	Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)								
	∠ Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events								
	Organics / Food Waste Recycling other than yard waste program								
	Oyster Shell Recycling Program								
	Other Programs (please specify)								
	Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.								

#### RECYCLING TONNAGES FROM PUBLIC PROGRAMS

- 45. a. Enter data in the table below for ALL recycling programs operated or contracted for by your local government. Provide TONNAGES (or estimates) for each material collected for the period JULY 1, 2016 through JUNE 30, 2017. DO NOT include materials that were not collected or managed by your local government either directly or under contract to a private service provider.
  - b. Do NOT report YARD WASTE, TIRES, HHW, USED OIL, OIL FILTERS, ANTI-FREEZE, BATTERIES or other SPECIAL WASTE tonnages on this page - these items should be reported in other sections of report form. See page 6 for SPECIAL WASTES.
  - c. Please report materials collected in tons only. Please only extend numbers to two decimal places (x.xx).
  - d. If you collected single stream or other commingled materials, record Tons in the "Commingled tons" row and then check the box for each individual material type that was commingled

DD OCD AM	Curbside  ⊠ if Yes Tons			Drop-off	All "C	Other" Programs	Total Tons (totals are calculated by form)	
PROGRAM			⊠ if Yes	Tons	⊠ if Yes	Tons		
GLASS:								
Clear								
Brown								
Green								
Mixed				32.92			32.92	
PLASTIC:								
PET #1								
HDPE #2								
All Plastic Bottles								
Other Plastic Containers								
Bulky Rigid Plastics								
METAL:								
Aluminum Cans								
Steel Cans								
White Goods								
Other Metal						62.92	62.92	
PAPER:					<u> </u>			
Newsprint (ONP)								
Cardboard (OCC)				47.03			47.03	
Magazines (OMG)								
Office Paper								
Mixed / Other Paper								
Cartons / Aseptic Containers								
WOOD:								
Pallets					$\boxtimes$			
Other Wood - DO NOT								
report yard waste tons here								
OTHER MATERIALS:								
Textiles (clothes etc)								
Televisions					$\boxtimes$	9.0985	9.0985	
Other Electronics								
C&D Materials Recycling								
Commingled tons-check all items collected above			$\boxtimes$	89.04			89.04	
TOTAL TONS:				168.99		72.0185	241.0085	

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

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

## **Part III. Special Waste Collections**

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

Special Waste Collections (Do Not Include Materials Collected as part of an HHW Collection Program or Event)

47.	Special Waste Programs for Collecting Materials from Citizens by Material Type  Did program collect this material from the public? # of sites  Data on quantities collected / manager please report in indicated units.			_					
Ţ	Jsed Motor Oil	Yes Yes	☐ No				2,088 gallo	ns	
Ţ	Jsed Oil Filters	∑ Yes	☐ No		15 barr	els, or	,	lbs	
Ţ	Used Antifreeze	∑ Yes	☐ No			<u>'</u>	50 g	gallons	
E	Batteries, Lead Acid	∑ Yes	☐ No		60 # b	atteries, o	or	lbs	
E	Batteries, Dry Cell	∑ Yes	☐ No				3	0 lbs	
F	Fluorescent Bulbs/Lights Containing Mercury	∑ Yes	☐ No			lbs, or	80 #	bulbs	
F	ropane Tanks	∑ Yes	☐ No			lbs, or	6 #	tanks	
τ	Used Cooking Oil / Waste Vegetable Oil	Yes	☐ No			lbs, or	1,921 g	gallons	
C	Other Special Wastes - please provide waste type here:	Yes	⊠ No				,	lbs	
	Pesticide Containers (NCDA Program, not esticides themselves)	⊠ Yes	☐ No		8,144	lbs, or		# con- tainers	
	NCDA Pesticide Disposal Assistance Program for management of pesticides, not containers)	☐ Yes	⊠ No					lbs	
	atex Paint (do not include paint collected at IHW event or by a paint exchange program)	Yes	⊠ No		0	gals, or		lbs	
I a b c c d d	8. Did your local government operate a household hazardous waste collection program or event in FY 16-17?								
	Used Antifreeze (gal)	Lea	d Acid Batter	ies (lbs)		Other Bat	teries (lbs) _		
	Fluorescent Bulbs / Lights Containing	ng Mercury (ll	os)		_				
	Provide Total Quantity of materials collected reported in 48f, please net the weight of those. Please list HHW Collection Contractor	•	it of the total	listed he					pound
i	Estimated cost of HHW / CESQG program of	or event(s) \$							_
	2 41 1 7 .1 . 111				// 1/4 /1		D.O. 1.1	7.	

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

	Part IV. Yard Waste	, Mul	ching and (	Composting	g Management
	section concerns management of vegetative ma				
	ermitted sites and it is illegal to burn. Composting at your management of vegetative materials. Do no				
	Does your local government operate a yard waste				please indicate how yard waste is managed by
+2.	checking all that apply:  Collected curbside				
50.	Did a storm event significantly impact the amount				
51.	What quantities of materials were managed by you				
	organic material (yard waste, brush, limbs, leav	1	1	conversion purp	•
	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	y 🗵		4,462	Hyde Co Convenience site on mainland
	Other public mulch or compost facility				
	Private mulch or compost facility				
	Land clearing and inert debris landfill (LCID)			7,488	
	Energy / Fuel Use (e.g. boiler fuel market)				
	Total			11950	
	YARD WASTE MANAGEMENT FORMULA: I				
	estimate yard waste volume. Calculate for each trivolume managed by program in the appropriate bo			_	
	X	oxes abov	X X	truck x 5 aays/v	$vk   x  10  wks = 400  ya^{3} $ $=      vd^{3}$
	Size of Truck (in yards)  Avg. no. of times truc	k fills each		s truck is used during	
				ction Servi	
This	section concerns your local government's provision				
52.	Please complete the following table about your go				
	Sector Who Collects Solid Waste? H			WILL CO	ollects Solid Waste? How is Solid Waste Collected?
	Insert Letter - see codes at right		1	a. Local	government employees 1. Once a week at household ontract 2. Twice a week at household
	Residential		,	c. Franch	nise haulers 3. Convenience center/greenbox
	Commercial	imary	Secondary		government not 4. As needed or by request 5. Daily
	Industrial Primary d Secondary Pr	imary	Secondary	service	
53.	If you provide residential waste collection at single	e-family	households in y	our jurisdiction,	please answer the following questions:
	What type of collection method is used?	Fully Aut	omated S	Semi-Automated	d Manual Don't know
	What is the standard collection frequency?	Weekly	Two tim	nes per week	Other
	What is the typical service point for single family	househol	ld waste?	Curbside	Back yard / Back door
	What type of collection container is used?	Governm	ent-provided car	rts Reside	ent-provided container Bags
	Do you offer bulky waste collection services?	Yes	No No		
54.	For municipalities - did your government collect w	_		Yes	No
	If so, were white goods delivered to the county for		<u> </u>	No No	1
	Part VI. Solid Was		•	_	
55.	Did <b>your local government</b> have an education pro issues / activities? $\bigvee Yes \bigcap No$ (If N	_	o Part VII, page		ut solid waste management and / or recycling
56.	Please estimate your annual budget for solid waste	related	education and or	utreach activitie	s: \$
57.	Does your community produce recycling education	n and ou	treach materials	in languages be	sides English?  Yes  No
	If YES, please list other languages used:				
58.	Please provide your recycling website address and	public i	nformation phor	ne number if app	olicable.
	Website: www.hydecountync.gov				Phone #: 252-926-4196

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

	ficient resources availab estions deal with funding					these programs. T	The following
	Did your local governm With regards to funding Tipping fees Property tax Per househo	g sources, check all s es / general fund	that apply to your l	local government: eight-based fees (e.g	z. PAYT) $\boxtimes$ T	Yes	
61.	NC Solid Waste Dispos According to GS 105-1	87.63 these funds n	nust be used by a ci	ty of county solely	ents on a quarterly ba for solid waste mana	sis by the Departm	
62	How are disposal tax d  If applicable, please pr	C	-		<u> </u>	for solid wasta)	
02.	a. \$			_			<u>,</u>
	c. \$	per		per		for yard waste	
	d. \$	per		per		for bulky wast	e
	e. \$	per		per		availability fee	<u> </u>
	f. \$	per		per		total charge	
63.	Did your local governmare charged a fee by we	nent operate a Pay-A	As-You-Throw prog	gram for residential	garbage during FY		where residents
	cording to GS 130A-309 orm users of such costs.		nents are required	to conduct full cos	st accounting annual	lly and to develop	a system to
64.	If your local government	nt contracts for soli	d waste or recycling	g services, please re	port the annual conti	act amount.	
	\$		_ For solid waste s	ervices per year			
	\$		_ For recycling per	r year			
	4.07.407		OR				
	\$ <u>287,697</u>		_	act (solid waste, and			
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials col			
		# 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*	4,500	5,767.18		173,242.11	299,626	51
	Recycling Program**	4,500	273.8			45,345	165
	Yard Waste Program	4,500		_			
		(calculated by form):	6,040.98		173,242.11	344,971	57
66.	*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 serv	vices offered to commercy vaste /compost facil ferent facilities are	cial and industrial generate ity or recycling facil:	ity, please provide empt to allocate co	total budget for
		sfer Station Budget					
	Yard	Waste / Compost I	Facility Budget: \$				
		cling Facility Budg					
67.	What was your government	ment's total combine	ed annual budget fo	or all solid waste an	d recycling services	in 16-17? \$	

## **Part VIII. County Mandated Programs**

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

WH	ITE GOODS					
68.	Please provide name, address, phone number, and	l e-mail of person	responsi	_	program.	
	Name:			Title:		
	Address:	Ci	ty:		Zip:	
	Telephone: Fax:			Email:		
69.	Please provide the physical address of the primary	y county white goo	ods colle	ection site.		
	Street 1:					
	Street 2:					
	City:				Zip:	
70.	Please provide the name of the business or person Name:				m white goods.	
	Street:					
	City:					
	Phone: Fax:		Email:			
71.	Give amounts / types of CFCs removed. Attach re	ecords of CFC rem	oval, ar	nd copy of certificati	on of person(s) perfor	ming extraction.
	Type of CFC Removed				Amount	
72.	CFCs may be recycled or sent for destruction. Give					
	Firm	Mo	ethod of	f Disposal	Amount Earned	Amount Spent
73.	Please report the tonnage of white goods collected white goods tonnage reported on page 5? Yes	•	17 in th	e Recycling Tonnag	es table on page 5 (qu	estion # 45). Was
74.	List the amount of revenue for the white goods pr	ogram by source:				
	Revenue collected from sale of scrap:	\$				
	Revenue collected from White Goods Tax Distrib	outions: \$				
	Revenue from other source (e.g. grants):	\$				
	Total Revenue:	\$				
75.	According to the White Goods Law, White Good expenditures White Good Tax Distributions were					mounts and types of
	Operational Expenses: \$					
	Capital Improvements: \$					
	Clean-up of Illegal White Goods Dumps: \$					
	Total Expenditures: \$					

Name: James Blount   Title: Superintendent   Title: Superintendent   Address: P O. Box 66   City: Swan Quarter   Zip: 27885	<b>SC</b> .	KAP TIKES					
Telephone: 252-926-4196  Fax: 252-926-3703  Finalt: jhlount@hydecountyne.gov  Please provide the physical address of the primary county scrap tires collection site.  Street 1: 3154 US Hyw 264 Engelhard  Street 2: 488 Credle Rd Swan Quareter  City: Swan Quareter  State: North Carolina  Zip: 27885  78. Tonnage/Number of scrap tires disposed July 1, 2016-June 30, 2017 (exclading tires from cleanup of autisance sites)  Sys.80  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated muisance sites  Number of tires  90. Indicate the types of tires collected by the county:  Passenger 90  % Heavy Truck 6  81. List the amount of revenue for the scrap tire program by source:  Revenue from Scrap Tire Tax Distributions:  8 7,330.14  Revenue from Scrap Tire Clean-up Reimbursements:  8 0  Revenue from Scrap Tire Clean-up Reimbursements:  8 0  Revenue from Scrap Tire Cost-Overrun Grants:  8 0  Revenue from Scrap Tire Cost-Overrun Grants:  8 0  Total Revenue:  8 7,359.14  82. County's total scrap tire program expenditure (contract disposal/hauling costs).  8 7,303.24  excluding costs of autisance tire cleanups, for FY 16-17.  83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any.  Labor 8 0  Site Cost 8 0  Other 8 0  County's contract cost for scrap tire disposal. \$ 92.12  / Ton; \$ / Tire  Hauling cost or fuel surcharge, if not included in contract cost above. \$ / Ton; \$ / Tire  84. County's contract cost for scrap tire disposal. \$ 92.12  / Ton; \$ / Ton; \$ / Tire  85. Hauling cost or fuel surcharge, if not included in contract cost above. \$ / Ton; \$ / Ton; \$ / Ton; \$ / Ton;  86. Total tipping fees collected for tires not eligible for free disposal. \$ 0  87. Total number of tires collected for tires not eligible for free disposal. \$ 0  88. If scrap tires were not hauled off sibe by contracted service provider, were they cut and disposed in a local landfill?   Yes   No  89. Name of tire disposal/recycling firm(s): Central Carolina Holding LLC.  TEMPORAR	76.	-	nail of perso	on responsible fo			
77. Please provide the physical address of the primary county scrap tires collection site.  Street 1: 3154 US Hyw 264 Engelhard  Street 2: 488 Credle Rd Swam Quareter  City: Swam Quarter  78. Tomage/Number of scrap tires disposed July 1, 2016-June 30, 2017 (excluding tires from cleanup of nuisance sites)  79. Tomage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites  79. Tomage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites  80. Indicate the types of tires collected by the county:  Passenger 90 % Heavy Truck 6 % Large Orf-Road 4 %  81. List the amount of revenue for the scrap tire program by source:  Revenue from Scrap Tire Tax Distributions: \$ 7,539.14  Revenue from Scrap Tire Clean-up Reimbursements: \$ 0  Revenue from Scrap Tire Clean-up Reimbursements: \$ 0  Revenue from Scrap Tire Cost-Overrun Grants: \$ 0  Total Revenue: \$ 7,539.14  82. County's total scrap tire program contract expenditure (contract disposal/hauling costs). \$ 7,303.24  excluding costs of nuisance tire cleanups, for FY 16-17.  83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any.  Labor \$ 0  Site Cost \$ 0  Other \$ 0  describe Other:  84. County's contract cost for scrap tire disposal. \$ 92.12  / Ton; \$ / Tire  85. Hauling cost or fuel surcharge, if not included in contract cost above. \$ / Ton; \$ / Tire  86. Total tipping fees collected for tires not eligible for free disposal. \$ 0  87. Total number of tires collected not eligible for free disposal. \$ 0  88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill? \( \text{ Yes} \) \( \text{ No} \)  89. Name of tire disposal/recycling firm(s): \( \text{ Central Carolina Holding LLC.} \)  TEMPORARY DISASTER DEBRIS STAGING SITES  90. Does your local government have a plan in place for management of disaster debris? \( \text{ Yes} \) \( \text{ No} \)  1 If you indicated having a plan, has the plan becan revi		Address: P O. Box 66		City: Swan Qua	rter	Zip: <u>27885</u>	
Street 1: 3154 US Hyw 264 Engelhard  Street 2: 488 Credle Rd Swan Quarter  City: Swan Quarter  State: North Carolina  Zip: 27885  78. Tonnage/Number of scrap tires disposed July 1, 2016-June 30, 2017 (eschading tires from cleanup of nuisance sites) 53.86  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated muisance sites Tons or  Number of tires  80. Indicate the types of tires collected by the county: Passenger 90 % Heavy Truck 6 % % Large Off-Road 4 %  81. List the amount of revenue for the scrap tire program by source: Revenue from Scrap Tire Tax Distributions:  8 7,339.14  Revenue from Scrap Tire Clean-up Reimbursements:  8 0  Revenue from Scrap Tire Cost-Overrun Grants:  8 0  Revenue from Scrap Tire Cost-Overrun Grants:  8 0  Revenue from Scrap Tire Cost-Overrun Grants:  9 0  Total Revenue:  8 7,339.14  82. County's total scrap tire program expenditure (i.e. labor, convenience center cost), if any. Labor 5 0  Site Cost \$ 0  Other \$ 0  describe Other:  84. County's contract cost for scrap tire disposal. \$ 92.12 / Ton; \$ / Tire  85. Hauling cost or fuel surcharge, if not included in contract cost above. \$ / Ton; \$ / Tire  86. Total dipping fees collected not eligible for free disposal: 0  87. Total number of fires collected not eligible for free disposal: 0  88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill?   Yes   No  89. Name of tire disposal/recycling firm(s): Central Carolina Holding LLC.    TEMPORARY DISASTER DEBRIS STAGING STIES   Yes   No  If yes, indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to enable content in the plan is a stand-alone plan or in conjunction with local government agencies:   Sund-alone   In conjunction your local governments for public assistance reimbursement in a declared dissect event?   Yes   No  99. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program f		Telephone: <u>252-926-4196</u> Fax: <u>252-926-3</u>	3703	Ema	il: jblount@hydecour	ntync.gov	
Street 2: 488 Credie Rd Swan Quareter City: Swan Quarter State: North Carolina State: North Carolina Zip: 27885  78. Tonnage/Number of scrap tires disposed July 1, 2016-June 30, 2017 (excluding fires from cleanup of nuisance sites)	77.						
78. Tonnage/Number of scrap tires disposed July 1, 2016-June 30, 2017 (excluding tires from cleanup of nuisance sites)  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites  70. Number of tires  80. Indicate the types of tires collected by the county:  Passenger 90 % Heavy Truck 6 % Large Off-Road 4 %  81. List the amount of revenue for the scrap tire program by source:  Revenue from Scrap Tire Tax Distributions: \$ 7,539,14  Revenue from Scrap Tire Clean-up Reimbursements: \$ 0  Revenue from Scrap Tire Clean-up Reimbursements: \$ 0  Revenue from Scrap Tire Cost-Overrun Grants: \$ 0  Revenue from Scrap Tire Cost-Overrun Grants: \$ 7,539,14  82. County's total scrap tire program contract expenditure (contract disposal/haulling costs), \$ 7,303,24  excluding costs of nuisance tire cleanups, for FY 16-17.  83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any.  1 Labor \$ 0  Site Cost \$ 0  Other \$ 0  Other \$ 0  describe Other:  84. County's contract cost for scrap tire disposal. \$ 92.12  / Ton; \$ / Tire  85. Hauling cost or fuel surcharge, if not included in contract cost above. \$ / Ton; \$ / Tire  86. Total tipping fees collected for tires not eligible for free disposal: 0  87. Total number of tires collected not eligible for free disposal: 0  88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill? \( \text{ Yes} \) No  89. Name of tire disposal/recycling firm(s): Central Carolina Holding LLC.  **TEMPORARY DISASTER DEBRIS STAGING SITES**  90. Does your local government have a plan in place for management of disaster debris? \( \text{ Yes} \) No  If yes, indicate if the plan is a stand-alone plan or in conjunction with local government or FEMA to ensure it meets		Street 2: 488 Credle Rd Swan Quareter					
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Passenger 90 % Heavy Truck 6 % Large Off-Road 4 %    List the amount of revenue from the scrap tire program by source:   Revenue from Scrap Tire Tax Distributions:	79.		of state or	county designate			
Revenue from Scrap Tire Tax Distributions:    Revenue from Tire Fees:	80.		ck <u>6</u>	%	Large Off-Road	4	<u></u> %
Revenue from Tire Fees: \$ 0	81.	1 1 0	•	2.14			
Revenue from Scrap Tire Clean-up Reimbursements: \$ 0		•					
Revenue from Scrap Tire Cost-Overrun Grants: \$ 0			· —				
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83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any.  Labor \$ 0  Other \$							
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Additional Country's contract cost for scrap tire disposal. \$ 92.12	83.	County's additional scrap tire program expenditure (i.	e. labor, co	nvenience center	cost), if any.		
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89. Name of tire disposal/recycling firm(s): Central Carolina Holding LLC.    TEMPORARY DISASTER DEBRIS STAGING SITES	87.	Total number of tires collected not eligible for free di	sposal: 0				
TEMPORARY DISASTER DEBRIS STAGING SITES  90. Does your local government have a plan in place for management of disaster debris?	88.	If scrap tires were not hauled off site by contracted se	rvice provid	der, were they cu	t and disposed in a lo	cal landfill? T	es No
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91. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Yes No  92. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:  Name: Justin Gibbs Name: Name:  Phone: 252-926-4374 Phone: Phone:	90.		•			☐ No	
requirements for public assistance reimbursement in a declared disaster event?   Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:  Name: Justin Gibbs  Name: Name: Phone: Phone:		If yes, indicate if the plan is a stand-alone plan or in c	onjunction	with local govern	nment agencies:	Stand-alone	In conjunction
your local government: Name: Justin Gibbs Name: Name: Name: Phone: 252-926-4374 Phone: Phone: Phone:	91.						the basic
Name:         Justin Gibbs         Name:         Name:           Phone:         252-926-4374         Phone:         Phone:	92.		ddress of th	ne person(s) in ch	arge of the disaster d	ebris management	program for
Phone: 252-926-4374 Phone: Phone:		•	:		Name:		
		<del></del>					
		E-mail: jgibbs@hydecountync.gov E-mai					

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

Disaster Site #	Site Name	Disaster Site #	Site Name
Engelhard	Hyde County Airport		
Juniper Bay Rd	Hydeland Rd		
Ponzer	Smithwick Rd		
Ocracoke	Lifeguard Beach Park		
Hyde Correction	510 Prison		

	Hyde Correction	510 Prison									
94. Does your plan address the management of household hazardous waste and white goods following a disaster? Yes No											
95.	5. Does your plan address mass animal mortality?  Yes  No										
MA	MANAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES										
96.	Has your county consid	lered whether to implement a program for the	e i	m	nanagement of abandor	ned manufactui	red homes?	Yes No			
	If yes, has your county developed a written plan for the management of abandoned manufactured homes?    Yes    No										
	D AW C										

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.

#45 - no electronics sent to market in FY 2016-17 other than one load of televisions.

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 <a href="https://deq.nc.gov/conservation/recycling/local-government-recycling-assistance">https://deq.nc.gov/conservation/recycling-local-government-recycling-assistance</a> or e-mail us at Lgteam@ncdenr.gov

