# **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



Local Government Report Form

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

**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 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: Robert Alan Moore			Titl	Title: Public Works Director			
Mail	ing Address: 109 N. Walker Street		City: Burgaw		Zip: 28425		
Phor	ne: (910)259-2901	Fax:		Date: 8/21/20	17		
Ema	il:rmoore@townofburgaw.com						
		Gener	al Instructions				
	e remember that the time period for specific question.	the report is JULY 1, 201	6 through JUNE 30, 2017. Ple	ease check "No"	if you have nothing to report		
1.	Did your local government have a l	Recycling Coordinator or s	similar position for FY 16-17?	Yes	🔀 No		
	Name Recycling Coordinator (if di	fferent from person compl	eting this report.)				
	Name:		Titl	e:			
	Address:		City:		Zip:		
	Telephone:	Fax:	Email:				
2.	Did your local government have a S	Solid Waste Director or sin	milar position for FY 16-17?	Yes	No		
	If Yes, Name:	Title:					
	Address:		City:		Zip:		
	Telephone:	Fax:	Email:				
3.	Did your local government have <b>de</b>	edicated or part-time Soli	id Waste Enforcement Staff for	r FY 16-17?	Yes No		
	If Yes, Name:		Titl	e:			
	Address:		City:		Zip:		
	Telephone:	Fax:	Email:				
4.	Did your local government have so all that apply)	lid waste ordinances in pla	ace addressing any of the follow	wing during FY	16-17? (if yes, please check		
	Disposal Bans Illeg	al Dumping 🗌 Litterin	ng Other, Please Describ	e:			
5.	Did your local government manage mulching, composting)?	e, provide or contract for a	ny solid waste services in FY 1	6-17 (e.g., colle X Yes	ction, disposal, recycling,		
	If you answer ''No	" to question 5, the repo	rt is complete, please email t	<u> </u>	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.							
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 Xon 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 <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> .)							
	your 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) Waste Industries							
	Franchised hauler (please specify)							
	Other (please specify)							

17.	<ul><li>17. Please provide the following information about your community:</li><li>a. Total number of households in your jurisdiction? 1,111</li></ul>						
	b. Number of households eligible to participate in the curbside recycling program: 1,111						
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 1,047						
18.	<ul> <li>8. 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</li> <li>Does your franchise consist of: One service district or Multiple service districts</li> </ul>						
19.	<ul> <li>What sector(s) of your community was served by the curbside recycling program?</li> <li>Residential Commercial Industrial</li> </ul>						
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served: 124						
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 Collected Collected						
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? Yes Xo, skip to question # 32						
26.	Who collected the recyclable materials for your local government's drop-off recycling program?  Local government employees  Private contractor						
	Other (please specify)						
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program:         source-separated (citizens separate materials by type)       single stream / commingled         dual / two stream (paper separated from cans/bottles)       don't know / other						
28.	Please estimate the number of households served by your drop-off recycling program.						
29.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial						
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:						
31.	How many of these locations were staffed with attendants? All None Some please list # of staffed sites:						
EL	ECTRONICS RECYCLING PROGRAM						
	ise 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 program c	ollect or accept televisions from	(check all that apply):	Residences	Businesses

- 34. Did your electronics recycling program collect or accept computer equipment from (check all that apply): Residences Businesses
- 35. DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was eligible to receive proceeds from the State Electronics Management Fund in February of 2017, please provide the following information:

Electronics Management Fund balance as of July 1, 2016: \$

Electronics Management Funds received from DEQ during FY 16-17 (Feb 2017 distribution): \$

Electronics Management Funds spent during FY 16-17: \$

Electronics Management Fund balance as of June 30, 2017: \$

36. Briefly explain how Electronics Management Funds were spent during FY 2016-17 (please list items purchased if applicable):

37. If you did operate an electronics recycling program, please provide the following information about your vendor / contractor: Name of electronics recycling vendor(s) during FY 16-17:

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

#### **OTHER PUBLIC RECYCLING PROGRAMS**

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

38.	3. Did your local government operate a multifamily recycling collection progra	am that provides on-	-property 1	recycling se	ervice for residents
	of multifamily properties in a manner other than through your curbside or dr	opoff recycling pro	grams?	Yes	No
	D. Did your local government operate a recycling program to serve commercial		mbers of y	our comm	unity in a manner
	other than through your curbside or dropoff recycling programs?	🔀 No			

40. Does your rotal government provide recycling services to methode beverage commission permit noiders. [] I es	40.	Does your local governmen	t provide recycling services to A	Alcoholic Beverage Commission permit holders?	Yes	No No
------------------------------------------------------------------------------------------------------------------	-----	---------------------------	-----------------------------------	-----------------------------------------------	-----	-------

On-site collection s	ervices provided If	If on-site collection provided, please estimate # of ABC accounts served:
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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:			

		Wietuis	
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

Metals

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

- 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

Clean Wood Rrick concrete etc Sheetrock

- 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.

DDOCDAM	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	$\square$							
Brown	$\square$							
Green	$\square$							
Mixed	$\square$							
PLASTIC:								
PET #1	$\square$							
HDPE #2	$\square$							
All Plastic Bottles	$\square$							
Other Plastic Containers	$\square$							
Bulky Rigid Plastics	$\square$							
METAL:								
Aluminum Cans	$\square$							
Steel Cans	$\square$							
White Goods					$\square$	11.7	11.7	
Other Metal								
PAPER:								
Newsprint (ONP)	$\square$							
Cardboard (OCC)	$\square$							
Magazines (OMG)								
Office Paper	$\square$							
Mixed / Other Paper	$\square$							
Cartons / Aseptic Containers	$\square$							
WOOD:								
Pallets								
Other Wood - DO NOT								
report yard waste tons here <b>OTHER MATERIALS</b> :								
Textiles (clothes etc) Televisions								
Other Electronics								
C&D Materials Recycling								
C&D Materials Recycling								
Commingled tons-check all								
items collected above	$\square$	184.47					184.47	
TOTAL TONS:		184.47				11.7	196.17	

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 A H</b>			<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

47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		m collect this m the public?	# of sites	1	tities collected / managed.		d.
	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
	<ul> <li>b. How many days was your HHW Program op</li> <li>c. Did you partner or co-sponsor your HHW pr</li> <li>Please list partner(s)</li> <li>d. Provide number of citizens / households that</li> <li>e. Did your program accept materials from smaller from smaller in the second structure of th</li></ul>	ogram with a participated all businesses is material ma y HHW Progi 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						· /	
	<ul> <li>g. Provide Total Quantity of materials collected reported in 48f, please net the weight of those</li> <li>h. Please list HHW Collection Contractor</li> </ul>	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) \$						

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	$\boxtimes$		5,314	Burgaw Yard Debris Site
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			5314	

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	week # of weeks truck is used	during year	TOTAL			
Part V. Solid Waste 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		How is Solid Waste Collected? Insert # - see codes at right				Who Collects Solid Waste?         How is Solid Waste Colle           a. Local government employees 1. Once a week at househol		
	Residential	Primary	b	Secondary	a	Primary	1	Secondary	4	b. By Contract	<ol> <li>Once a week at household</li> <li>Twice a week at household</li> <li>Convenience center/greenbox</li> </ol>	
	Commercial	Primary	b	Secondary	d	Primary	1	Secondary		d. Local government not	<ul><li>4. As needed or by request</li><li>5. Daily</li></ul>	
	Industrial	Primary	с	Secondary	d	Primary	1	Secondary		I.	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?											
	What type of collection container is used? 🔀 Government-provided carts 🗌 Resident-provided container 🗌 Bags								iner 🗌 Bags			
	Do you offer bulky waste collection services? Xes No											
54.	For municipalit If so, were whi			-								
		]	Part	VI. So	olid W	aste a	nd F	Recyclin	g Edu	icational Activities	i.	
55.	Did <b>your local</b> issues / activitie	-			-			orm citizens art VII, pag	-	cally about solid waste man	agement and / or recycling	
56.	Please estimate	your an	nual b	udget for	solid wa	ste relat	ed edu	cation and o	outreach	activities: \$		
57.	Does your com	munity p	produc	e recyclir	ng educat	ion and	outrea	ch material	s in lang	uages 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	mation pho	ne numl	ber if applicable.		
	Website:									Phone #:		

	Part VII. Resou	rces for Solid Waste M	Ianagement and Full Cos	st Accounting
		waste management programs are mmunity's solid waste and materi	e essential for continued success of th	ese programs. The following
		e an Enterprise Fund for solid wa		es 🗌 No
•	• •	check all that apply to your local		
00. •••••	Tipping fees			e tax
		l fund Sale of recyclabl		ite Goods tax
	Per household charges			posal Tax
61 NC Sc			ocal governments on a quarterly basi	
		•	county solely for solid waste manage	· ·
	are disposal tax distribution			1 8
	1		¢45.00 1 1 110	<b>1.1</b> ( )
			a. <u>\$45.00</u> per <u>year</u> per <u>household</u> for	*
a. \$	pe	r	_ per household	_ for solid waste
b. \$	pe	r	_ per	_ for recycling
c. \$	pe	r	_ per	_ for yard waste
d. \$	pe	r	_ per	_ for bulky waste
e. \$	pe	r	_ per	_ availability fee
f. \$	17.75 pe	r month	_ perhousehold	_ total charge
•	• •	e a Pay-As-You-Throw program ume for the amount of trash they	for residential garbage during FY 16 discard) Yes X	· · · ·
-	g to GS 130A-309.08, local ers of such costs.	governments are required to co	nduct full cost accounting annually	and to develop a system to
64. If you	r local government contract	s for solid waste or recycling serv	vices, please report the annual contract	ct amount.
	\$	For solid waste service		
\$	6	For recycling per year		

\$ For recycling per year
OR

\$244,050 Combined Contract (solid waste, and recycling)

65. Collection Programs: Please complete the following table to the best of your ability to display the full costs of your local government's <u>collection programs</u> for waste, recyclables and yard waste including materials collected from convenience centers. **If full cost analysis is not available, please report program budget in Total Cost column.** 

	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
Municipal Solid Waste*	1,111	968.44			209,185	216
Recycling Program**	1,238	184.47			34,865	189
Yard Waste Program	1,238	2,431.77	61,730	47,700	109,430	45
Totals (calculated by form):		3,584.68	61,730	47,700	353,480	98

\*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: \$61,730

Recycling Facility Budget:

67. What was your government's total combined annual budget for all solid waste and recycling services in 16-17? \$244,050

\$

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 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:					
		\$				
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76.		ase provide name, address, phone number, and e-mail of person responsible for scrap tires program.								
	Name:			1 itle:						
	Address:									
	Telephone: Fax:									
7.	Please provide the physical address of the primary council Street 1:	• •		2.						
	Street 2:									
	City:			Carolina	Zip:					
8.	Tonnage/Number of scrap tires disposed July 1, 2016- Tons or	June 30, 2017 (	excluding tir							
9.	Tonnage/Number of scrap tires disposed from cleanupTons or	of state or cou	ntv designate							
80.	Indicate the types of tires collected by the county: Passenger % Heavy Tru		%	Large Off-Road	%	)				
31.	List the amount of revenue for the scrap tire program Revenue from Scrap Tire Tax Distributions:	Ф								
	Revenue from Tire Fees:	<b></b>								
	Revenue from Scrap Tire Clean-up Reimbursements:									
	Revenue from Scrap Tire Cost-Overrun Grants:	<i>ф</i>								
	Total Revenue:	\$								
32.	County's total scrap tire program contract expenditure excluding costs of nuisance tire cleanups, for FY 16-1	(contract dispo 7.	sal/hauling co	osts), \$						
33.	County's additional scrap tire program expenditure (i.e. Labor \$	,	ence center o	cost), if any.						
	Site Cost \$									
	Other \$	descr	ibe Other:							
34.	County's contract cost for scrap tire disposal. \$	/ T	on; \$	/ Tire						
35.	Hauling cost or fuel surcharge, if not included in cont	ract cost above	\$	/ Ton; \$	/ Tire					
86.	Total tipping fees collected for tires not eligible for fr	ee disposal. \$								
37.	Total number of tires collected not eligible for free dia	sposal:								
38.	If scrap tires were not hauled off site by contracted set	vice provider, v	vere they cut	and disposed in a loca	al landfill? 🗌 Yes 🛛	No				
39.		_	-	-						
ſE	MPORARY DISASTER DEBRIS STAGIN									
90.	Does your local government have a plan in place for n		lisaster debri	s? Xes	No					
	If yes, indicate if the plan is a stand-alone plan or in co	-			Stand-alone 🗌 In con	njunctio				
91.	If you indicated having a plan, has the plan been revier requirements for public assistance reimbursement in a			nagement or FEMA to	o ensure it meets the bas	sic				
92.	Please list the name, contact numbers(s), and e-mail a	ddress of the pe	rson(s) in cha	arge of the disaster deb	oris management progra	am for				
	your local government: Name: DRC - Tony Swain Name:			Name:						
	Phone: (888) 721-4DRC Phone			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.

ebources afrer a ausabrer ma									
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 No
-----	----------------------------------------------------------------------------------------------------------	-----	-------

95. Does your plan address mass animal mortality?

#### 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.

Question # 43:Recycling Events: The town had no recycling related events this year (Correspondence with staff October 4, 2017- DH)

Question # 45- White Goods: White Goods are collected with Bulky Waste Items under the Curbside Program in a 30 cubic yard Roll Off Cart-Container. (Communications over the last 2 years with town staff -DH)

Question # 45: OCC Tons separate from Curbside: The town reported that they did not get any OCC ton for this reporting cycle (Correspondence with staff October 4, 2017- DH)

Question # 51- Yard Waste Tons lower: The town did not get as much as in the previous year and not much appeared. It is believe that most yard waste as a result of Hurricane Matthew disaster debris management (DH - 10-4-2017)

Question # 33 through Question # 45: Electronics Management - The town of Burgaw no longer collects electronics. They now encourage residents to use Pender County Convenience Centers. An old stockpile of 400 pounds of electronics waste was sent onto Waste Industries. Electronics This materials goes to the county transfer station and is sent on to Horton Metals which subsequently sends this onto a certified recycler eCycle Secure. All materials collected were electronic devices other then TVs. (Reports from the last two years and a discussion from 10-4-2017-- dh).

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