

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: https://get.adobe.com/reader/ - 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

2017



Local Government Report Form

Required - Enter Your Local Government Name: WALNUT COVE

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.

Person	n Completing This Report: 1	BRANDI BOWMAN	Ti	tle: DEPUTY	TOWN CLERK
Mailir	ng Address: PO BOX 130		City: WALNUT COVE		Zip: 27052
Phone	:: 336-591-4809	Fax: 336-591-7275		Date: 8/30/	/17
Email	: bhmcglamery@emabrqmai	l.com			
		Gene	eral Instructions		
for a s	pecific question.	•	•		No" if you have nothing to report
1. I	Did your local government ha	ave a Recycling Coordinator or	similar position for FY 16-17	? Yes	No No
1	Name Recycling Coordinator	(if different from person comp	pleting this report.)		
]	Name:		Ti	tle:	
	Address:		City:		Zip:
,	Telephone:	Fax:	Email:		
2. I	Oid your local government ha	ave a Solid Waste Director or s	similar position for FY 16-17?	Yes	No No
]	If Yes, Name:		Ti	tle:	
	Address:		City:		Zip:
,	Геlephone:	Fax:	Email:		
3. I	Did your local government ha	ave dedicated or part-time So	olid Waste Enforcement Staff f	or FY 16-17?	Yes No
]	If Yes, Name:		Ti	tle:	
	Address:		City:		Zip:
,	Telephone:	Fax:	Email:		
	Did your local government hall that apply)	ave solid waste ordinances in p	lace addressing any of the foll	owing during I	FY 16-17? (if yes, please check
	Disposal Bans	Illegal Dumping Litter	ing Other, Please Descri	be: no	
	Did your local government mulching, composting)?	anage, provide or contract for	any solid waste services in FY	16-17 (e.g., co	ollection, disposal, recycling,

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 Yes 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 No | Yes 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 X No 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? X 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) Foothill Waste Solutions Franchised hauler (please specify) Other (please specify)

1/.	Please provide the following information about your community:								
	a. Total number of households in your jurisdiction? 525								
	b. Number of households eligible to participate in the curbside recycling program: 525								
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 500								
18.	Is public participation in the franchise: Does your franchise consist of: Woluntary or Mandatory One service district or Multiple service districts								
19.	What sector(s) of your community was served by the curbside recycling program? Residential Commercial Industrial								
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served:								
21.	How frequently were the curbside recyclables collected? 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) ☐ 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? Yes No, skip to question # 32								
26.	Who collected the recyclable materials for your local government's drop-off recycling program? Local government employees Private contractor								
	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?								
EL	ECTRONICS RECYCLING PROGRAM								
Plea	se answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any crials 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 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: \$
	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?
OT	THER PUBLIC RECYCLING PROGRAMS
the	ase 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.
38. 39.	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? $\ \ \ \ \ \ \ \ \ \ \ \ \ $
	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? Yes No 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 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

PROGRAM		urbside		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		7.25					7.25
Brown		3.75					3.75
Green		2.75					2.75
Mixed		1					1
PLASTIC:							
PET #1		7.8					7.8
HDPE #2		3.1					3.1
All Plastic Bottles		3.75					3.75
Other Plastic Containers		3.15					3.15
Bulky Rigid Plastics							
METAL:							
Aluminum Cans		3.15					3.15
Steel Cans							
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)	\boxtimes	5.1					5.1
Cardboard (OCC)	\boxtimes	5.2					5.2
Magazines (OMG)		3					3
Office Paper		1					1
Mixed / Other Paper		0.95					0.95
Cartons / Aseptic Containers		0.64					0.64
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled to a start 1							
Commingled tons-check all items collected above							
TOTAL TONS:		51.59					51.59

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.

No.

sites

Please report in indicated units.

gallons

Special Waste Collections (Do Not Include Materials Collected as part of an HHW Collection Program or Event) Did program collect this **Special Waste Programs for Collecting** # of Data on quantities collected / managed.

Yes

Materials from Citizens by Material Type

Used Motor Oil

material from the public?

Yes Yes Yes Yes Yes Yes Yes Yes Yes	No No No No No No No No No			batteries	, or	lbs gallons lbs	-
Yes Yes Yes Yes	No No No		#		, or	lbs	-
Yes Yes Yes	⊠ No ⊠ No		#		, or]
Yes Yes	No No			1 1		lbs	
Yes							1
	⊠ No			lbs, or		# bulbs	1
Yes		II-		lbs, or		# tanks	5
	⊠ No			lbs, or		gallons	5
Yes	⊠ No					lbs	
Yes	⊠ No			lbs, or		# con- tainers	
Yes	⊠ No					lbs	
Yes	⊠ No			gals, or		lbs	
gram with a	nother <u>local</u>	governmen	t? Yes				
businesses	(Conditional			tity Gene	rators)?	Yes	☐ No
HHW Prograse simply	am: if totals provide total	quantity of	materials co	are know ollected b	wn please iter y HHW prog	ram in 4	48g below.
Use	d Oil Filters		# of Barrels	s, or	lbs.		
Lea	d Acid Batte	ries (lbs)		Other B	atteries (lbs)		
Mercury (l	os)						
materials o	it of the total	listed here					pounds
	Yes Yes Yes Yes Yes Azardous was a Event or a an to accept in gram with a articipated a businesses material management of the collected of the	Yes No Yes No Yes No No Yes No N	Yes No Yes No No Yes No No The properties of the total for individuals as simply provide total quantity of exactly collected at an HHW Program and the collected at an HH	Yes No Yes No Yes No No Tally Exempt Small Quantity Generator (CF azardous waste collection program or event in Formation to accept materials during this Fiscal Year? Gram with another local government? Yes articipated in your HHW collection program the businesses (Conditionally Exempt Small Quantity and Exempt Small Quantity Program: if totals for individual materials are simply provide total quantity of materials case collected at an HHW Program and should not to the Lead Acid Batteries (lbs) Mercury (lbs) Wercury (lbs) Yes Wercury (lbs) Wercury (lbs) Wercury (lbs) Wercury (lbs) Wercury (lbs) Wercury (lbs) Wercury (lbs)	Yes No	Yes No	Yes No

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	e, Mula	ching and (Comp	osting	g Manageme	ent
		ns management of vegetative ma						
		d it is illegal to burn. Composting nent of vegetative materials. Do no						
		Il government operate a yard waste					_	w yard waste is managed by
т).		at apply: Collected curbside						
50.		ent significantly impact the amount						
51.		s of materials were managed by you						
	organic mater	ial (yard waste, brush, limbs, leav		managed. For	conversi	on purp		/cubic yd. Jame and Location of Facility
		Destination	Check if used	Tons	Cubic	Yards		g Vegetative Materials
	End user (to fa	rmer or home-owner)						
	Your local gov	ernment's mulch or compost facility	y 🗵			16		
	Other public m	ulch or compost facility						
	Private mulch	or compost facility						
	Land clearing a	and inert debris landfill (LCID)						
	Energy / Fuel U	Use (e.g. boiler fuel market)						
		Total				16		
		E MANAGEMENT FORMULA: I						
		vaste volume. Calculate for each tr ed by program in the appropriate bo						
	volume manag	X		•	Truck x S	auys/w	- 400	ya ⁻ vd ³
	Size of Truc				s truck is us	sed during	vear	TOTAL
				Vaste Colle		_		
This	section concern	s your local government's provision						
52.		te the following table about your go						
	Sector	Who Collects Solid Waste?				Who Col	llects Solid Waste?	How is Solid Waste Collected?
		Insert Letter - see codes at right Primary B Secondary Pr	Insert #	- see codes at ri		a. Local g		s 1. Once a week at household 2. Twice a week at household
	Residential	0 1	. ' '	1		c. Franch	ise haulers	3. Convenience center/greenbox
	Commercial			Secondary S		,	government not ed in provision of	4. As needed or by request5. Daily
	Industrial	Primary d Secondary Pr	imary (Secondary Secondary		service	•	6. Other
53.	If you provide	residential waste collection at singl	e-family	households in y	our juris	diction,	please answer the	following questions:
	What type of c	ollection method is used?	Fully Aut	omated 🔀 S	Semi-Au	tomated	Manual	Don't know
	What is the sta	ndard collection frequency? X	Weekly	Two tim	nes per w	eek	Other	
	What is the typ	pical service point for single family	househol	d waste?	Curbs	ide	Back yard / Back	ek door
	What type of c	ollection container is used?	Governme	ent-provided car	rts	Reside	ent-provided conta	iner Bags
	Do you offer b	ulky waste collection services?	Yes	No No				
54.		ties - did your government collect v te goods delivered to the county for	_		☐ Ye		No	
	11 50, 11010 1111	Part VI. Solid Was					al Activities	
55.	Did your local	government have an education pro		•	_			
	issues / activiti	_	_	o Part VII, page	-	iny abou	ut sona waste mai	lagement and 7 of recycling
56.	Please estimate	e your annual budget for solid waste	e related e	education and or	utreach a	ctivities	s: \$	
57.	Does your com	munity produce recycling educatio	n and out	reach materials	in langu	ages bes	sides English?	Yes No
	If YES, please	list other languages used:						
58.	Please provide	your recycling website address and	l public ir	nformation phor	ne numbe	er if app	licable.	
	Website:						Phone #:	

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

	ficient resources availab stions deal with funding					these programs. T	The following
59.	Did your local governm With regards to funding Tipping fees	nent operate an Ente g sources, check all s es / general fund	erprise Fund for sol that apply to your Volume/we	lid waste services in local government: eight-based fees (e.ş	n FY 16-17?	Yes No ire tax Thite Goods tax isposal Tax	
61.	NC Solid Waste Dispos According to GS 105-1						
	How are disposal tax d	•					
62.	<i>If applicable, please pr</i>						
	a. \$ 150	per 5		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	<u> </u>
	f. \$	per		per		total charge	
63.	Did your local governmare charged a fee by we			-		16-17? (a system v No	where residents
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full co	st accounting annual	ly and to develop	a system to
64.	If your local government	nt contracts for soli	d waste or recyclin	g services, please re	eport the annual contr	ract amount.	
	\$52,551		_ For solid waste s	services per year			
	\$18,416.4		_ For recycling pe	r year			
			OR				
	\$70,967.4		_ Combined Contr	ract (solid waste, an	nd recycling)		
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials co			
	, .	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
M	Iunicipal Solid Waste*	500	395.02			52,551	133
	Recycling Program**	500	51.59			18,416.4	350
	Yard Waste Program				_		
	Totals	(calculated by form):	446.61			70,967.4	158
66.	*for materials collected and **for materials collected by If your government ope facility operations (roun proportionately. Land	y public recycling progrerates a landfill, trained to nearest dollar	ams including those servinsfer station, yard v). If budgets for different controls are serving to the serving th	vices offered to commer waste /compost facil fferent facilities are	cial and industrial generate lity or recycling facili	ity, please provide empt to allocate co	total budget for
	Trans	sfer Station Budget					
	Yard	Waste / Compost l					
		cling Facility Budg					
67.	What was your government	ment's total combin	ed annual budget fo	or all solid waste an	d recycling services i	in 16-17? \$70,967.	4

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: \$					

5 C.	RAP TIRES						
76.	Please provide name, address, phone number, and e-n Name:	and e-mail of person responsible for scrap tires program. Title:					
	Address:				Zip:		
	Telephone: Fax:		Emai	1:			
77.	Please provide the physical address of the primary con Street 1:	-					
	Street 2:						
	City:		State: North	n Carolina	Zip:		
78.	Tonnage/Number of scrap tires disposed July 1, 2016 Tons or	-June 30, 201	7 (<u>excluding</u> tin	res from cleanup of nu Number of tires	iisance sites)		
79.	Tonnage/Number of scrap tires disposed from cleanu Tons or		ounty designate	ed nuisance sites Number of tires			
80.	Indicate the types of tires collected by the county: Passenger % Heavy True	ick	%	Large Off-Road	%		
81.	List the amount of revenue for the scrap tire program	-					
	Revenue from Scrap Tire Tax Distributions:						
	Revenue from Tire Fees:						
	Revenue from Scrap Tire Clean-up Reimbursements:						
	Revenue from Scrap Tire Cost-Overrun Grants:						
	Total Revenue:	\$					
82.	County's total scrap tire program contract expenditure excluding costs of nuisance tire cleanups, for FY 16-1	e (contract dis	posal/hauling c	osts), \$			
83.	County's additional scrap tire program expenditure (i. Labor \$		renience center	cost), if any.			
	Site Cost \$						
	Other \$	de	scribe Other: _				
84.	County's contract cost for scrap tire disposal. \$		/ Ton; \$	/ Tire			
85.	Hauling cost or fuel surcharge, if not included in cont	tract cost abo	ove. \$	/ Ton; \$	/ Tire		
86.	Total tipping fees collected for tires not eligible for fi	ree disposal. §	S				
87.	Total number of tires collected not eligible for free di						
88.	If scrap tires were not hauled off site by contracted se	rvice provide	r, were they cu	t and disposed in a loc	al landfill? Yes	No	
89.	Name of tire disposal/recycling firm(s):						
TE	MPORARY DISASTER DEBRIS STAGIN						
90.	Does your local government have a plan in place for i	nanagement o	of disaster debr	is? Yes	No No		
	If yes, indicate if the plan is a stand-alone plan or in c	onjunction w	ith local govern	nment agencies:	Stand-alone In conju	unction	
91.	If you indicated having a plan, has the plan been revier requirements for public assistance reimbursement in a			anagement or FEMA t	to ensure it meets the basic	С	
92.	Please list the name, contact numbers(s), and e-mail a	ddress of the	person(s) in ch	arge of the disaster de	bris management program	n for	
	your local government: Name: Name	:		Name:			
							
	E-mail: E-mai						

A. Does your plan address the management of household hazardous waste and white goods following a disaster? Yes No		Disaster Site #	Site Name		Disaster Site #	Site Name
MANAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES 16. Has your county considered whether to implement a program for the management of abandoned manufactured homes? Yes If yes, has your county developed a written plan for the management of abandoned manufactured homes? No Part IX. Comments Part						
MANAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES 16. Has your county considered whether to implement a program for the management of abandoned manufactured homes? Yes If yes, has your county developed a written plan for the management of abandoned manufactured homes? No Part IX. Comments Part						
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MANAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES 26. Has your county considered whether to implement a program for the management of abandoned manufactured homes? Yes If yes, has your county developed a written plan for the management of abandoned manufactured homes? No Part IX. Comments Use this section to elaborate on any info provided in your report as necessary. We would appreciate your comments about this report or other parts and the provided in your report as necessary.	94.	Does your plan address the	management of household hazardor	us waste	e and white goods follow	ving a disaster? Yes No
16. Has your county considered whether to implement a program for the management of abandoned manufactured homes? Yes If yes, has your county developed a written plan for the management of abandoned manufactured homes? Yes No Part IX. Comments Use this section to elaborate on any info provided in your report as necessary. We would appreciate your comments about this report or other parts and the provided in your report as necessary.	95.	Does your plan address mas	s animal mortality? Yes	No No		
If yes, has your county developed a written plan for the management of abandoned manufactured homes? Yes No Part IX. Comments Use this section to elaborate on any info provided in your report as necessary. We would appreciate your comments about this report or other sections.	MA	NAGEMENT OF ABA	ANDONED MANUFACTU	RED I	HOMES BY COUN	ITIES
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 ot)6.	Has your county considered	whether to implement a program f	or the n	nanagement of abandone	ed manufactured homes? Tyes X I
Use this section to elaborate on any info provided in your report as necessary. We would appreciate your comments about this report or ot		If yes, has your county deve	loped a written plan for the manage	ement o	f abandoned manufactur	red homes? Yes No
Use this section to elaborate on any info provided in your report as necessary. We would appreciate your comments about this report or ot			Part IX	. Con	nments	
	Jse 1	this section to elaborate on ar	ny info provided in your report as n	ecessar	y. We would appreciate	your comments about this report or oth

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 https://deq.nc.gov/conservation/recycling-assistance or e-mail us at Lgteam@ncdenr.gov

