State of North Carolina



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

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

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

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

Instructions:

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

Options for obtaining a blank copy of this form:

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

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

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

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

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

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

Form Year



Required - Enter Your Local Government Name: Dobson

State of North Carolina

Local Government Report Form

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

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

COMPLETION AND SUBMISSION OF THIS REPORT WILL FULFILL THE ANNUAL REPORTING MANDATE TO THE STATE AS REQUIRED BY G.S. 130A-309.09A.

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

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

| Person Completing This Report | Title: Town Manager | | | | |
|--|--|--------------------------------|--------------------------|---------------------------------|--|
| Mailing Address: PO Box 351 | | City: Dobson | | Zip: 27017 | |
| Phone: 336-356-8962 | Fax: 336-356-4836 | | Date: 9/4/20 | 17 | |
| Email: customerservice@dobso | n-nc.com | | | | |
| | General | I Instructions | | | |
| Please remember that the time p for a specific question. | period for the report is JULY 1, 2016 | through JUNE 30, 2017. Ple | ease check "No | " if you have nothing to report | |
| 1. Did your local governmen | t have a Recycling Coordinator or sin | nilar position for FY 16-17? | Yes | 🔀 No | |
| Name Recycling Coordina | ator (if different from person complet | ing this report.) | | | |
| Name: | | Title | e: | | |
| Address: | | City: | | Zip: | |
| Telephone: | Fax: | Email: | | | |
| 2. Did your local governmen | t have a Solid Waste Director or simi | lar position for FY 16-17? | Yes | No | |
| If Yes, Name: | | Title | e: | | |
| Address: | | City: | | Zip: | |
| Telephone: | Fax: | Email: | | | |
| 3. Did your local governmen | t have dedicated or part-time Solid | Waste Enforcement Staff for | FY 16-17? | Yes No | |
| If Yes, Name: | | Title | e: | | |
| Address: | | City: | | Zip: | |
| Telephone: | Fax: | Email: | | | |
| 4. Did your local governmen all that apply) | t have solid waste ordinances in place | e addressing any of the follow | wing during F | Y 16-17? (if yes, please check | |
| Disposal Bans | Illegal Dumping Littering | Other, Please Describe | e: | | |
| 5. Did your local governmen mulching, composting)? | t manage, provide or contract for any | solid waste services in FY 1 | 6-17 (e.g., col X Yes | lection, disposal, recycling, | |
| If you ans | wer "No" to question 5, the report | is complete, please email t | | cdenr.gov. | |

| | Part I. Waste Reduction and Recycling Programs Serving Government Facilities | | | | | |
|-----|--|--|--|--|--|--|
| The | following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. | | | | | |
| 6. | Did your local government have a recycling program in place for collecting recyclable materials generated at Yes No public buildings in FY 16-17? | | | | | |
| 7. | Did your local government have any program or policy encouraging or requiring local agencies to Yes No purchase products with recycled content? | | | | | |
| 8. | Did your local government have a program in place to collect and recycle spent fluorescent lights generated from the public buildings and facilities that were operated by your government in FY 16-17? | | | | | |
| | Part II. Waste Reduction and Recycling Programs Serving the Public | | | | | |
| SO | URCE REDUCTION / REUSE | | | | | |
| 9. | Did your local government have a backyard composting program? Yes No | | | | | |
| 10. | If yes, please check all backyard composting activities that apply: | | | | | |
| | Education Demonstration site(s) Bin distribution/sales Number of Bins distributed? | | | | | |
| 11. | Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives? | | | | | |
| 12. | Did your local government offer a waste exchange or reuse program? Yes No | | | | | |
| 13 | If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public: | | | | | |
| | Swap shop/shed Number of sheds in use? Paint exchange Number of gallons recovered? | | | | | |
| | Other (e.g. pallet exchange, etc.) | | | | | |
| PU | BLIC RECYCLING SERVICES | | | | | |
| 14. | Which of the following responses best describes your recyclables recovery activities for the period July 1, 2016 through June 30, 2017? | | | | | |
| | My local government DID operate or contract for a recyclables recovery program. (please continue to question 15) | | | | | |
| | My local government DID NOT operate or contract for recyclables recovery BUT DID participate in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; then go to Part IV on page 7 .) | | | | | |
| | With which local government did you participate? | | | | | |
| | My local government DID NOT operate, contract or participate in a recycling program. (Go to Part IV on page 7 .) | | | | | |
| | 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). | | | | | |
| 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 Management | | | | | |
| | Franchised hauler (please specify) | | | | | |
| | Other (please specify) | | | | | |

| 17. | Please provide the following information about your community: a. Total number of households in your jurisdiction? 550 | | | | |
|-----|---|--|--|--|--|
| | b. Number of households eligible to participate in the curbside recycling program: 550 | | | | |
| | c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 350 | | | | |
| 18. | If your curbside recycling program is operated through a <u>public franchise granted to a private company</u> then please answer the following: Is public participation in the franchise: Voluntary or Mandatory Does your franchise consist of: One service district or Multiple service districts | | | | |
| 19. | What sector(s) of your community was served by the curbside recycling program? | | | | |
| 20. | If you checked commercial or industrial in question 19, please indicate the number of accounts served: | | | | |
| 21. | How frequently were the curbside recyclables collected? | | | | |
| | 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 | | | | |
| | use answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any erials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5. | | | | |
| 32. | Did your community operate an electronics recycling program in FY 16-17? Yes Xo, 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 recycl | ling program collect or ac | ccept televisions from (che | eck all that apply): | Residences | Businesses |
|-----|-----------------------------|----------------------------|-----------------------------|----------------------|------------|------------|
| | | 01 0 | | | | |

- 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 on | nly programs operated or contracted for <u>by</u> |
|---|---|
| the local government. The tonnage of any materials collected by the following programs should be | e listed in the "Other" column in the |
| Recycling Tonnages Chart on pg 5. | |

| 38. | Did your local government operate a multifamily recycling collection program that provides on-property recycling service for residents |
|-----|--|
| | of multifamily properties in a manner other than through your curbside or dropoff recycling programs? \Box Yes \boxtimes No |
| 39. | Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner |
| | other than through your curbside or dropoff recycling programs? \Box Yes \boxtimes No |

| 40. | Does your local government provide recyc | cling services to Alcoholic Beverage Commission permit holders? | Xes Yes | No No |
|-----|--|---|---------|-------|
| | On-site collection services provided | If on-site collection provided, please estimate # of ABC accounts | served: | |

| | I | 1 | · 1 | |
|-----------|---|--------------|----------------------|---|
| \square | Public drop-off recycling sites available for ABC O | n Premises P | ermit holders to use | • |

Chastroal

| 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: | | | |

Vinyl aiding

Chingles

| | Clean wood Brick, concrete, etc Sheetrock vinyr siding Shingles | Wietais | |
|-----|--|---------|------|
| 42. | Does your local government have an ordinance regulating the construction and demolition waste stream | Yes | 🔀 No |
| | 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

Clean Wood Driels concrete ate

- 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) post office recycling program

Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.

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Matala

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.

| DROCRAM | Curbside | | Drop-off | | All "Other" Programs | | Total Tons | |
|---|-----------|-------|----------|------|----------------------|------|---------------------------------|--|
| PROGRAM | ⊠ if Yes | Tons | ⊠ if Yes | Tons | ⊠ if Yes | Tons | (totals are calculated by form) | |
| GLASS: | | | | | | | | |
| Clear | | 4.16 | | | | | 4.16 | |
| Brown | | 2.6 | | | | | 2.6 | |
| Green | | 3.64 | | | | | 3.64 | |
| Mixed | | | | | | | | |
| PLASTIC: | | | | | | | | |
| PET #1 | | 1.77 | | | | | 1.77 | |
| HDPE #2 | | 3.64 | | | | | 3.64 | |
| All Plastic Bottles | | | | | | | | |
| Other Plastic Containers | | | | | | | | |
| Bulky Rigid Plastics | | | | | | | | |
| METAL: | · | | | | | | | |
| Aluminum Cans | | 1.04 | | | | | 1.04 | |
| Steel Cans | | 2.6 | | | | | 2.6 | |
| White Goods | | | | | | | | |
| Other Metal | | | | | | | | |
| PAPER: | | | | | | | | |
| Newsprint (ONP) | \square | 32.25 | | | | | 32.25 | |
| Cardboard (OCC) | | | | | | | | |
| Magazines (OMG) | | | | | | | | |
| Office Paper | | | | | | | | |
| Mixed / Other Paper | | | | | | | | |
| Cartons / Aseptic Containers | | | | | | | | |
| WOOD: | | | | | | | | |
| Pallets | | | | | | | | |
| Other Wood - DO NOT | | | | | | | | |
| report yard waste tons here | | | | | | | | |
| OTHER MATERIALS: | | | | | | | | |
| Textiles (clothes etc) | | | | | | | | |
| Televisions | | | | | | | | |
| Other Electronics | | | | | | | | |
| C&D Materials Recycling | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Commingled tons-check all items collected above | | | | | | | | |
| TOTAL TONS: | | 51.7 | | | | | 51.7 | |

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 | A H U | | T 1 1 | 36 / 13 | <i>A</i> H A H | | | A H H | D | |
|---|--------|-------|--------------|---------|--------------|-----------|-----------------------|------------|----------|--------------|---------|-----------|
| S | pecial | Waste | Collections | (Do Noi | t Include | Materials | Collected | as part ol | t an HHW | Collection | Program | or Event) |
| ~ | | | | (| | | | | | | | |

4

| 47. | Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type | | m collect this m the public? | # of sites | 1 | Data on quantities collected / managed. Please report in indicated units. | | |
|-----|--|---|--|--|--|--|---|---|
| | 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 | llbs |
| | Propane Tanks | Yes | No No | | | lbs, or | # ta | anks |
| | Used Cooking Oil / Waste Vegetable Oil | Yes | No No | | | lbs, or | gal | lons |
| | Other Special Wastes - please provide waste type here: | Yes | No No | | | | | lbs |
| | Pesticide Containers (NCDA Program, not pesticides themselves) | Yes | No No | | | lbs, or | | con- iners |
| | NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) | Yes | No No | | | | | lbs |
| | Latex Paint (do not include paint collected at HHW event or by a paint exchange program) | Yes | No No | | | gals, or | | lbs |
| | b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW pr Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma If yes, please estimate the amount of business f. Amounts of individual materials collected by about individual materials is not available, p Note, materials listed here should only be the Used Motor Oil (gal) Used Antifreeze (gal) | ogram with a participated all businesses is material ma y HHW Progi lease simply ose collected Use | another <u>local</u> g in your HHW (Conditionall anaged ram: if totals f provide total c at an HHW P ed Oil Filters | collectio y Exemp for indivi quantity rogram a | ent? Yes on program this ot Small Quantit dual materials a of materials coll and should not in _ # of Barrels, | ty Generat pounds are known lected by l nclude ma or | tors)? Ye please itemize HHW program terials listed in lbs. | below. If data in 48g below. question 47. |
| | Fluorescent Bulbs / Lights Containin | | | | | | · / | |
| | g. Provide Total Quantity of materials collected reported in 48f, please net the weight of thos h. Please list HHW Collection Contractor | l by HHW Pr e materials o | rogram. If ind ut of the total | ividual r listed he | re. | | | pound |
| | i. Estimated cost of HHW / CESQG program of | or event(s) \$ | | | | | | |

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is only to be completed by Counties.

Part IV. Yard Waste, Mulching and Composting Management

This section concerns management of vegetative materials. Yard waste may not be disposed in sanitary landfills, incinerators, or in unpermitted sites and it is illegal to burn. Composting and mulching are popular management options. Please answer the questions below about your management of vegetative materials. Do not include information on food waste or non-vegetative materials in this section.

- 49. Does your local government operate a yard waste program? ☐ Yes ⊠ No If yes please indicate how yard waste is managed by checking all that apply: ☐ Collected curbside ☐ Collected at convenience center ☐ Received at yard waste, compost, or LCID facil.
- 50. Did a storm event significantly impact the amount of yard waste your government managed during FY 16-17? Yes No
- 51. What quantities of materials were managed by your yard waste program? Provide information in TONS OR CUBIC YARDS of
 - organic material (yard waste, brush, limbs, leaves, etc.) managed. For conversion purposes, use 400 lbs./cubic yd.

| Destination | Check if used | Tons | Cubic Yards | Please Provide Name and Location of Facility Receiving Vegetative Materials |
|---|------------------|------|-------------|--|
| End user (to farmer or home-owner) | | | | |
| Your local government's mulch or compost facility | | | | |
| Other public mulch or compost facility | | | | |
| Private mulch or compost facility | | | | |
| Land clearing and inert debris landfill (LCID) | | | | |
| Energy / Fuel Use (e.g. boiler fuel market) | | | | |
| Total | | | | |

YARD WASTE MANAGEMENT FORMULA: If yard waste quantities are not tracked, you may use this formula below to help you estimate yard waste volume. Calculate for each truck used in your yard waste management program, and then enter the grand total volume managed by program in the appropriate boxes above. *Ex.* 10 yd³ truck x 3 days/wk x 16 wks = 480 yd³

| | _X X | K = | = | 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 Wast | e Collection Services | | |
| This section concerns your local g | government's provision of solid waste | e (garbage) collection services. | | |

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

| | Sector | | | ts Solid V | | | | Waste Coll | | Who Collects Solid Waste? | How is Solid Waste Collected? | |
|-----|--------------------|------------------------------------|---------------|-------------|------------|---------------|----------|---|-----------|------------------------------|--|--|
| | | Insert Letter - see codes at right | | | t # - se | ee codes at 1 | right | a. Local government employees 1. Once a week at household | | | | |
| | Residential | Primary | b | Secondary | | Primary | 1 | Secondary | | 5 | Twice a week at household Convenience center/greenbox As needed or by request Daily | |
| | Commercial | Primary | b | Secondary | | Primary | 1 | Secondary | | d. Local government not | | |
| | Industrial | Primary | b | Secondary | | Primary | 1 | Secondary | | I. | 6. Other | |
| 53. | If you provide | residenti | <u>al</u> was | te collect | ion at sin | gle-fami | ily hou | seholds in | your juri | isdiction, please answer the | following questions: | |
| | What type of co | ollection | metho | od is used | ? | Fully A | Automa | 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 typ | ical serv | vice po | int for sin | gle famil | y house | hold w | vaste? | 🗙 Curł | oside 🗌 Back yard / Bac | k door | |
| | What type of co | ollection | conta | iner is use | ed? | Govern | nment- | provided ca | arts | Resident-provided contai | iner 🗌 Bags | |
| | Do you offer b | ulky was | ste coll | ection ser | vices? | Ye | es | 🔀 No | | | | |
| 54. | For municipality | | | - | | - | - | | <u> </u> | les No | | |
| | If so, were whi | te goods | delive | ered to the | county f | for mark | eting? | Yes | 1 | No | | |
| | |] | Part | VI. So | lid Wa | aste a | nd F | Recyclin | g Edu | icational Activities | | |
| 55. | Did your local | governi | ment l | ave an ec | lucation j | program | to info | orm citizens | s specifi | cally about solid waste man | agement and / or recycling | |
| | issues / activitie | es? | ×Υ | es | No (I | f No, ski | ip to Pa | art VII, pag | e 8) | | | |
| 56. | Please estimate | your an | nual b | udget for | solid wa | ste relate | ed edu | cation and o | outreach | activities: \$100 | | |
| 57. | Does your com | munity j | produc | e recyclir | ng educat | ion and | outrea | ch materials | s in lang | uages besides English? 🛛 | Yes No | |
| | If YES, please | list other | r langu | ages used | l: Spanis | sh, upon | reque | st | | | | |
| 58. | Please provide | your rec | ycling | website a | address a | nd publi | c infor | mation pho | ne numl | ber if applicable. | | |
| | Website: www | .dobson | -nc.coi | n | | | | | | Phone #: 336-35 | 6-8962 | |

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

| | Part VII | . Resources f | or Solid Was | te Manageme | nt and Full C | Cost Accounti | ng |
|-------------------|---|---|---|---|--|--|---|
| | ficient resources availab stions deal with funding | | | | | f these programs. T | The following |
| 60. | Per househo NC Solid Waste Dispos According to GS 105-1 | g sources, check all s tes / general fund old charges sal Tax proceeds are 87.63 these funds r | that apply to your Volume/we Sale of rec Grants e distributed to elig nust be used by a c | local government: eight-based fees (e.g yclables ible local governme ity of county solely : | . PAYT) N N I I nts on a quarterly b for solid waste man | | nent of Revenue. |
| <i>(</i>) | How are disposal tax d | Ū. | | | | | |
| 62. | If applicable, please pr | - | | | - | • | |
| | a. \$ | per | | per | | for solid waste | 2 |
| | b. \$ | per | | per | | for recycling | |
| | c. \$ | per | | per | | for yard waste | |
| | d. \$ | per | | per | | for bulky wast | e |
| | e. \$ | per | | per | | availability fee | > |
| | | | | per | | | |
| | are charged a fee by we cording to GS 130A-309 orm users of such costs. | 9.08, local governr | | - | | ☑ No Illy and to develop | a system to |
| 64. | If your local governments | nt contracts for soli | • | • | port the annual cont | tract amount. | |
| | \$ | | For recycling per | r year | | | |
| | \$95,000 | | OR Continue of Contra | | 1 | | |
| 65. | Collection Programs: P collection programs for not available, please r | waste, recyclables | – following table to t and yard waste inc | luding materials col | ty to display the ful | ience centers. If fu | ll cost analysis is |
| | | # 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* | 550 | 331.7 | 65,000 | | 65,000 | 195 |
| | Recycling Program** | 550 | 51.7 | 30,000 | | | 580 |
| | Yard Waste Program | | | | | | |
| | Totals | (calculated by form): | 383.4 | 95,000 | | 95,000 | 247 |
| 66. | Yard | y public recycling progra erates a landfill, trar nd to nearest dollar) Ifill Budget: sfer Station Budget | ams including those serv nsfer station, yard w). If budgets for dif \$: \$ Facility Budget: \$ | vices offered to commerc vaste /compost facili fferent facilities are (| ial and industrial genera ty or recycling faci | lity, please provide tempt to allocate co | total budget for |
| | Recy | cling Facility Budg | get: \$ | | | | |

67. What was your government's total combined annual budget for all solid waste and recycling services in 16-17? \$95,000

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Part VIII. County Mandated Programs

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

| WH | IITE GOODS | | | | |
|-----|--|------------------------------|-------------------------------|-------------------------|---------------------|
| 68. | Please provide name, address, phone numb | - | | s program. | |
| | Name: | | | | |
| | Address: | | | | |
| | Telephone: Fax: | | Email: | | |
| 69. | Please provide the physical address of the p | primary county white | e goods collection site. | | |
| | Street 1: | | | | |
| | Street 2: | | | | |
| | City: | | State: North Carolina | Zip: | |
| 70. | Please provide the name of the business or Name: | - | | om white goods. | |
| | Street: | | | | |
| | City: | | | Zip: | |
| | Phone: Fax: | | | | |
| 71. | Give amounts / types of CFCs removed. At | | | | |
| | Type of CFC Remov | ved | | Amount | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 72. | CFCs may be recycled or sent for destruction | on. Give name of firi | m, disposal method and amount | t earned / spent for CF | C disposal. |
| | Firm | | Method of Disposal | Amount Earned | Amount Spent |
| | | | | | |
| | | | | | |
| | | | | | |
| 73. | Please report the tonnage of white goods co white goods tonnage reported on page 5? | Ilected during FY 20 Yes | | ges table on page 5 (qu | estion # 45). Was |
| 74. | List the amount of revenue for the white go | oods program by sour | rce: | | |
| | Revenue collected from sale of scrap: | \$ | | | |
| | Revenue collected from White Goods Tax | | | | |
| | Revenue from other source (e.g. grants): | \$ | | | |
| | Total Revenue: | | | | |
| 75. | According to the White Goods Law, White expenditures White Good Tax Distributions | | | | mounts and types of |
| | Operational Expenses: \$ | S | | | |
| | Capital Improvements: \$ | | | | |
| | Clean-up of Illegal White Goods Dumps: \$ | | | | |
| | Total Expenditures: \$ | | | | |
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| 6. | Please provide name, address, phone number, and Name: | - | - | | |
|------------|--|----------------------|------------------------------|---|------------------------------|
| | | | | 11tle: | |
| | Address: | | | | |
| | Telephone: Fax: | | Ema | ail: | |
| 7. | Please provide the physical address of the primary | • | ap tires collection s | ite. | |
| | Street 1: | | | | |
| | Street 2: | | | | |
| | City: | | | | |
| 3. | Tonnage/Number of scrap tires disposed July 1, 20 Tons | 16-June 30 | 0, 2017 (<u>excluding</u> t | ires from cleanup of n Number of tires | uisance sites) |
| 9. | Tonnage/Number of scrap tires disposed from clea | nup of stat or | e or county designa | ted nuisance sites Number of tires | |
|). | Indicate the types of tires collected by the county: Passenger% Heavy | Fruck | % | Large Off-Road | % |
| 1. | List the amount of revenue for the scrap tire progra | m by sour | ce: | | |
| | Revenue from Scrap Tire Tax Distributions: | \$ | | | |
| | Revenue from Tire Fees: | \$ | | | |
| | Revenue from Scrap Tire Clean-up Reimbursemen | nts: \$ | | | |
| | Revenue from Scrap Tire Cost-Overrun Grants: | <i>•</i> | | | |
| | Total Revenue: | \$ | | | |
| 2. | County's total scrap tire program contract expendit excluding costs of nuisance tire cleanups, for FY 1 | ure (contra 6-17. | act disposal/hauling | costs), \$ | |
| 3. | County's additional scrap tire program expenditure Labor \$ | | | r cost), if any. | |
| | Site Cost \$ | | _ | | |
| | Other \$ | | describe Other: | | |
| 1. | County's contract cost for scrap tire disposal. \$ | | / Ton; \$ | / Tire | |
| 5. | Hauling cost or fuel surcharge, if not included in c | ontract cos | st above. \$ | / Ton; \$ | / Tire |
| 5. | Total tipping fees collected for tires not eligible for | r free disp | osal. \$ | | |
| | | | | | |
| <i>'</i> . | Total number of tires collected not eligible for free | - | | | |
| 3. | If scrap tires were not hauled off site by contracted | service pr | rovider, were they cu | ut and disposed in a lo | cal landfill? Yes No |
| Э. | Name of tire disposal/recycling firm(s): | | | | |
| E | MPORARY DISASTER DEBRIS STAG | ING SIT | TES | | |
|). | Does your local government have a plan in place f | or manage | ment of disaster deb | ris? 🗌 Yes | No |
| | If yes, indicate if the plan is a stand-alone plan or i | n conjunct | ion with local gover | rnment agencies: | Stand-alone In conjuncti |
| l. | If you indicated having a plan, has the plan been re requirements for public assistance reimbursement | | | Ianagement or FEMA | to ensure it meets the basic |
| 2. | Please list the name, contact numbers(s), and e-ma your local government: | | of the person(s) in c | harge of the disaster de | ebris management program for |
| | | me: | | | |
| | Phone: Pho | one: | | Phone: | |
| | E-mail: E-1 | nail: | | E-mail: | |

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

| Disaster Site # | Site Name | | Disaster Site # | Site Name | | | | |
|-----------------|-----------|--|-----------------|-----------|--|--|--|--|
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| 94. | Does your plan address the management of household hazardous waste and white goods following a disaster? |
|-----|--|
| 95. | Does your plan address mass animal mortality? |
| MA | NAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES |
| 96. | Has your county considered whether to implement a program for the management of abandoned manufactured homes? 🗌 Yes 🗌 No |
| | If yes, has your county developed a written plan for the management of abandoned manufactured homes? Yes No |

Part IX. Comments

Use this section to elaborate on any info provided in your report as necessary. We would appreciate your comments about this report or other matters regarding solid waste management in North Carolina. Thank you for your time. You may submit additional sheets if needed.

This form is to be submitted electronically. If you require assistance, please contact one of these NC DEACS staff members: Joseph Fitzpatrick, email: joseph.fitzpatrick@ncdenr.gov phone 919-707-8121 Rob Taylor, email: rob.taylor@ncdenr.gov phone: 919-707-8139

The Division of Environmental Assistance and Customer Service Local Government Assistance Team is ready to assist you in any way we can. Please visit our Web site at <u>https://deq.nc.gov/conservation/</u>recycling/local-government-recycling-assistance or e-mail us at Lgteam@ncdenr.gov

