

### **State of North Carolina**

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

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

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

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

### **Instructions:**

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

Options for obtaining a blank copy of this form:

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

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

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

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

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

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

Form Year

2017



Local Government Report Form

<b>Required</b> - Enter Your Local Government Name:	
Apex	

# 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 Lgte	eam@ncdenr.gov by S	September 1, 2017.	
If you have questio	ns or need assistance complet	ting this form, please	e call 919-707-8121	or 919-707-8139.
Person Completing This Report:	Andrew Jenks		Title: Solid Wast	te Supervisor
Mailing Address: PO Box 250		City: Apex		Zip: 27502
Phone: 919-249-3521	Fax:		Date: 8/22/	 17
Email: andy.jenks@apexnc.org				
	Gene	ral Instructions		
Please remember that the time per for a specific question.	riod for the report is JULY 1, 201	6 through JUNE 30, 2	2017. Please check "N	o" if you have nothing to report
1. Did your local government l	nave a Recycling Coordinator or	similar position for FY	Y 16-17? ⊠ Yes	☐ No
Name Recycling Coordinate	or (if different from person comp	leting this report.)		
Name: Jose F.Martinez III			Title: Public Wor	rks And Transportation Director
Address: PO Box 250		City: Apex		Zip: 27502
Telephone: 919-362-7443	Fax: 919-387-7055	Email	: jose.martinez@apexr	nc.org
2. Did your local government l	nave a Solid Waste Director or si	milar position for FY	16-17? Xes	□ No
If Yes, Name: Same As	<b>#</b> 1		Title:	
Address:		City:		Zip:
Telephone:	Fax:	Email	:	
3. Did your local government l	nave <b>dedicated</b> or part-time Sol	id Waste Enforcement	t Staff for FY 16-17?	⊠ Yes □ No
If Yes, Name: Same As	# 1		Title:	
Address:		City:		Zip:
Telephone:	Fax:	Email	:	
4. Did your local government lall that apply)	nave solid waste ordinances in pl	ace addressing any of	the following during F	FY 16-17? (if yes, please check
Disposal Bans	Illegal Dumping	ng Other, Please	e Describe:	
5. Did your local government mulching, composting)?	manage, provide or contract for a	ny solid waste service	es in FY 16-17 (e.g., co Yes	ollection, disposal, recycling,  No
If you answ	or "No" to question 5 the rene	out is complete place	a amail to I ataam@n	adans an

### Part I. Waste Reduction and Recycling Programs Serving Government Facilities The following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. Did your local government have a recycling program in place for collecting recyclable materials generated at X No public buildings in FY 16-17? 7. Did your local government have any program or policy encouraging or requiring local agencies to No purchase products with recycled content? Did your local government have a program in place to collect and recycle spent fluorescent lights X Yes No generated from the public buildings and facilities that were operated by your government in FY 16-17? Part II. Waste Reduction and Recycling Programs Serving the Public SOURCE REDUCTION / REUSE Did your local government have a backyard composting program? X Yes No If yes, please check all backyard composting activities that apply: Demonstration site(s) | Bin distribution/sales ⊠ Education Number of Bins distributed? 17 Did your local government operate a program to promote source reduction efforts such as junk mail reduction, □ 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) Waste Industries Franchised hauler (please specify) Other (please specify)

17.	Please provide the following information about your community:  a. Total number of households in your jurisdiction? 17,871
	b. Number of households eligible to participate in the curbside recycling program: 15,445
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 13,901
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?  ☐ Residential ☐ Commercial ☐ Industrial
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served: 184
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)
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     65 gallon cart   multiple sizes of cart available
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
mate	Is 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.  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: 1

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: \$2,369.67
	Electronics Management Funds received from DEQ during FY 16-17 (Feb 2017 distribution): \$ 3,319.23
	Electronics Management Funds spent during FY 16-17: \$ 2,387.99
	Electronics Management Fund balance as of June 30, 2017: \$ 3,300.91
36.	Briefly explain how Electronics Management Funds were spent during FY 2016-17 (please list items purchased if applicable):
	Funds were received through Wake County and were used to pay E-Waste collections cost
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: Metech Recycling
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?  Yes No
OT	HER PUBLIC RECYCLING PROGRAMS
<u>the</u> <u>l</u>	use answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for <u>by local government</u> . The tonnage of any materials collected by the following programs should be listed in the "Other" column in the welling Tonnages Chart on pg 5.
	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? $\square$ Yes $\square$ No
39.	Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner other than through your curbside or dropoff recycling programs?   Yes  No
40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served:
	Public drop-off recycling sites available for ABC On Premises Permit holders to use
41.	Does your local government operate a program to recycle Construction and Demolition materials? Yes No If yes, please check all materials that were recycled and report tonnages in tonnage table on page 5:
	☐ Clean Wood ☐ Brick, concrete, etc. ☐ Sheetrock ☐ Vinyl siding ☐ Shingles ☐ Metals ☐ Other
42.	Does your local government have an ordinance regulating the construction and demolition waste stream with the intention of encouraging or requiring waste reduction or recycling of these materials?
43.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 16-17. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	□ Public Parks Recycling Program     □ Athletic Field / Venue Recycling Program
	☐ Pedestrian Recycling Program ☐ Recycling Service for Special Events / Festivals
44.	Please identify all "Other" programs or services operated by your government during FY 16-17. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	Public School Recycling Program
	Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)
	Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events
	Organics / Food Waste Recycling other than yard waste program
	Oyster Shell Recycling Program
	Other Programs (please specify)
	Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.

#### RECYCLING TONNAGES FROM PUBLIC PROGRAMS

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

PD OCD AND	Cu	ırbside	Drop-off		All "Ot	her" Programs	<b>Total Tons</b>
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							,
Clear							
Brown							
Green							
Mixed		979.8					979.8
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles		241					241
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans		34.37					34.37
Steel Cans		69.14					69.14
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)		1,527.83					1,527.83
Cardboard (OCC)		447.25					447.25
Magazines (OMG)							
Office Paper							
Mixed / Other Paper		651.51					651.51
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions						2.8	2.8
Other Electronics						5.85	5.85
C&D Materials Recycling							
					<u> </u>		
Commingled tons-check al items collected above							
TOTAL TONS:		3,950.9				8.65	3,959.55

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

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

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

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

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

Materials <u>from Citizens</u> by Material Type		m collect this om the public?	# of sites	-	collected / managed n indicated units.	d.
Used Motor Oil	Yes Yes	☐ No	_1_		350 gallons	
Used Oil Filters	Yes	☐ No	1	3 barrels, or		lbs
Used Antifreeze	Yes	⊠ No			gall	lons
Batteries, Lead Acid	Yes	⊠ No		# batteri	es, or	lbs
Batteries, Dry Cell	Yes	⊠ No				lbs
Fluorescent Bulbs/Lights Containing Mercury	Yes	⊠ No		lbs, o	# bu	lbs
Propane Tanks	Yes	⊠ No		lbs, o	# ta	nks
Used Cooking Oil / Waste Vegetable Oil	Yes	⊠ No		lbs, o	gall	lons
Other Special Wastes - please provide waste type here:	Yes	⊠ No		'		lbs
Pesticide Containers (NCDA Program, not pesticides themselves)	Yes	⊠ No		lbs, o	•	con- iners
NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)	Yes	⊠ No				lbs
Latex Paint (do not include paint collected at HHW event or by a paint exchange program)	Yes	⊠ No		gals, or		lbs
sehold Hazardous Waste (HHW) and Condition Did your local government operate a household If Yes, please respond to the following questions	hazardous w s:	aste collection	prograi	m or event in FY 16-1	_	⊠ No
Did your local government operate a household	hazardous w s: ry Event or a en to accept	vaste collection at a Permanent materials duri	HHW (	n or event in FY 16-1 Collection Facility? Fiscal Year?	_	
Did your local government operate a household If Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program of Please list partner(s) d. Provide number of citizens / households that	hazardous was: ry Event or a gen to accept ogram with a participated	vaste collection at a Permanent materials duri another <u>local</u> g	HHW Cong this Fovernme	n or event in FY 16-1 Collection Facility? Fiscal Year? ent? Yes	7? Yes Permanent No I Year?	⊠ No
Did your local government operate a household If Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program elist partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma If yes, please estimate the amount of busines	hazardous ws: ry Event or a en to accept ogram with a participated all businesses s material m	raste collection at a Permanent materials duri another <u>local</u> g in your HHW s (Conditionall anaged	HHW (ong this Fovernment)	con program this Fisca pt Small Quantity Ge	Permanent  No  1 Year?  merators)?  Yes  Yes	No Tem
Did your local government operate a household If Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW proplease list partner(s)  d. Provide number of citizens / households that e. Did your program accept materials from small	hazardous ws: ry Event or aben to accept ogram with a participated all businesses s material m r HHW Prog lease simply	at a Permanent materials duri another local granisms (Conditionall anaged ram: if totals f provide total of	HHW Cong this Fovernment of the collection of th	collection Facility? Fiscal Year? ent? Yes  on program this Fiscate Small Quantity Ge poun idual materials are knof materials collected.	Permanent  No  I Year?  merators)? Yeads  own please itemize by HHW program	No Tem  s below in 48g
Did your local government operate a household If Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program elist partner(s)  d. Provide number of citizens / households that e. Did your program accept materials from small fyes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, please, materials listed here should only be the	hazardous ws: ry Event or a sen to accept ogram with a participated all businesses s material m r HHW Prog lease simply ose collected	in your HHW (Conditional) anaged cram: if totals of at an HHW Provider collection.	HHW Cong this Fovernment of the collection of th	con program this Fiscal Year?  The program this Fiscal Year and Should not include the control of the program o	Permanent  No  I Year?  merators)? Yeads  own please itemize by HHW program e materials listed in	No Tem  s below in 48g
Did your local government operate a household If Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program elist partner(s)  d. Provide number of citizens / households that e. Did your program accept materials from smalf yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, please the note, materials listed here should only be the Used Motor Oil (gal)	hazardous ws: ry Event or aben to accept ogram with a participated all businesses s material m r HHW Prog lease simply ose collected Use	in your HHW s (Conditionall anaged gram: if totals f provide total c at an HHW Pred Oil Filters	HHW Cong this Fovernment collection of the colle	collection Facility? Collection Facility? Collection Facility? Ciscal Year?  ent? Yes  on program this Fiscal pt Small Quantity Ge poundidual materials are known of materials collected and should not includ # of Barrels, or	Permanent  No  I Year?  merators)? Year  ds  own please itemize by HHW program e materials listed in  lbs.	No Tem  Tem  s below in 48g questi
Did your local government operate a household If Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program elist partner(s)  d. Provide number of citizens / households that e. Did your program accept materials from small fyes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, please, materials listed here should only be the	hazardous ws: ry Event or aben to accept ogram with a participated all businesses s material m r HHW Prog lease simply ose collected Use Lea	in your HHW s (Conditionall anaged ram: if totals f provide total of at an HHW Pred Oil Filters and Acid Batter	HHW Cong this Fovernment collection individuantity rogram are collections.	collection Facility? Collection Facility? Ciscal Year?  ent? Yes  on program this Fiscal pt Small Quantity Ge  dual materials are kn of materials collected and should not includ # of Barrels, or  Other	Permanent  No  I Year?  merators)? Year  ds  own please itemize by HHW program e materials listed in  lbs.	No Tem  Tem  s below in 48g questi
Did your local government operate a household If Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program op Please list partner(s)  d. Provide number of citizens / households that e. Did your program accept materials from smalf yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, please is not available, please your motion of the collected by about individual materials is not available, please and motion of the collected by about individual materials is not available, please and motion of the collected by about individual materials is not available, please and motion of the collected by about individual materials is not available, please and motion of the collected by about individual materials (gal)  Used Motor Oil (gal)  Used Antifreeze (gal)	hazardous ws: ry Event or a pen to accept ogram with a participated all businesses s material my HHW Proglease simply ose collected Leag Mercury (It by HHW Pre materials of the pen second sec	in your HHW is (Conditionall anaged at an HHW Pred Oil Filters and Acid Batter lbs) rogram. If indout of the total out of the total	HHW (ong this Fovernment)  collection of individuantity rogram are sites (lbs)  ividual individual	collection Facility? Collection Facility. Collectio	Permanent  No  I Year?  merators)? Yeads  own please itemize by HHW program e materials listed in lbs.  Batteries (lbs)	No Tem

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

		Part IV. Yard Wast	e, Mulo	ching and (	Composting	g Managem	ent
		rns management of vegetative m					
		d it is illegal to burn. Compostinent of vegetative materials. Do n					
	-	ll government operate a yard waste				_	ow yard waste is managed by
19.	•	at apply: X Collected curbside			•	•	
50.	•	ent significantly impact the amoun				•	* *
51.		s of materials were managed by yo					
	organic mater	ial (yard waste, brush, limbs, lea		managed. For	conversion purp		
		Destination	Check if used	Tons	Cubic Yards		Name and Location of Facility g Vegetative Materials
	End user (to fa	rmer or home-owner)					
	Your local gov	ernment's mulch or compost facili	ty 🗌				
	Other public m	ulch or compost facility					
	Private mulch	or compost facility		6,531.48		Greenway Waste Of Ap	ex
	Land clearing a	and inert debris landfill (LCID)					
	Energy / Fuel U	Use (e.g. boiler fuel market)					
		Total		6531.48			
		E MANAGEMENT FORMULA:					
		vaste volume. Calculate for each t ed by program in the appropriate b					
	voiume manag	X	oacs abov	X	iruck x 5 days/v	= =	vd³
	Size of Truc		ıck fills each	week # of weeks	truck is used during	g year	TOTAL
		Part V. S	Solid W	Vaste Colle	ction Servi	ces	
This	section concern	s your local government's provisio					
52.	Please complet	e the following table about your g	overnmen	t's solid waste co	ollection system	ı <b>.</b>	
	Sector	Who Collects Solid Waste?			VVIII CU	llects Solid Waste?	How is Solid Waste Collected?
		Insert Letter - see codes at right  Primary   b   Secondary   F		10 1	a. Local b. By Co		es 1. Once a week at household 2. Twice a week at household
	Residential	0	. '	1	c. Franch	nise haulers	3. Convenience center/greenbox
	Commercial	0		2 Secondary		government not red in provision of	<ul><li>4. As needed or by request</li><li>5. Daily</li></ul>
	Industrial	Primary d Secondary F	Primary	Secondary	service		6. Other
53.	If you provide	residential waste collection at sing	gle-family	households in yo	our jurisdiction,	please answer the	e following questions:
	What type of c	ollection method is used?	Fully Aut	omated S	Semi-Automated	l Manual	Don't know
	What is the sta	ndard collection frequency?	Weekly	Two tim	es per week	Other	
	What is the typ	oical service point for single family	househol	d waste?	Curbside [	Back yard / Ba	ck door
	What type of c	ollection container is used?	Governme	ent-provided car	ts Reside	ent-provided conta	ainer Bags
	Do you offer b	ulky waste collection services?	X Yes	☐ No			
54.	-	ties - did your government collect te goods delivered to the county for	_		∑ Yes ☐ No	No	
		Part VI. Solid Wa	ste and	l Recycling	Education	nal Activitie	S
55.	Did <b>your local</b> issues / activiti	<b>government</b> have an education pages? Yes No (If	_	inform citizens o Part VII, page		ut solid waste ma	nagement and / or recycling
56.	Please estimate	e your annual budget for solid was	te related e	education and ou	atreach activitie	s: \$500	
57.	Does your com	nmunity produce recycling education	on and out	reach materials	in languages be	sides English?	Yes No
	If YES, please	list other languages used:					
58.	Please provide	your recycling website address an	d public in	nformation phon	e number if app	olicable.	
	Website: http	o://www.apexnc.org/277/Garbage-	Recycling	y-Yard-Waste		Phone #: (919)	362-8676

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

	ficient resources availab estions deal with funding					these programs.	The following
_	Did your local governm	• •		_		Yes No	)
60.	With regards to funding	g sources, check all	that apply to your	local government:			
	Tipping fees			eight-based fees (e.g		ire tax	
	<ul><li>✓ Property tax</li><li>✓ Per househo</li></ul>	es / general fund	Sale of recy Grants	yclables		Vhite Goods tax Disposal Tax	
61.	NC Solid Waste Dispos According to GS 105-1	sal Tax proceeds ar	e distributed to elig		ents on a quarterly ba	asis by the Departn	
	How are disposal tax d		•				
62	If applicable, please pro	_					ching program
02.	0 11	•	•	per Househ		for solid waste	د
		_		_	old		,
					old		<u>;</u>
					t IX		
	f. \$ 18.42	ner Montl	1		old		<u>-</u>
63.	Did your local governm						where residents
	are charged a fee by we	eight or volume for	the amount of trash	they discard)		No	
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full cos	st accounting annua	lly and to develop	a system to
	If your local governmen		d waste or recycling	o services, please re	enort the annual cont	ract amount	
04.	\$	iit contracts for son	For solid waste s	-	port the annual cont	ract amount.	
	\$		For recycling per				
	Ψ		OR	i yeai			
	\$2,000,349.26			act (solid waste, and	d recycling)		
			_				
65.	Collection Programs: P collection programs for						
	not available, please r	eport program bu	dget in Total Cost	column.	1	m . 1 G	
		# 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*	15,240	12,734.599	1,059,925.64	349,415.7	1,409,341.34	11
	Recycling Program**	15,445	3,950.9	591,007.92		591,007.92	14
	Yard Waste Program	14,662	6,531.48	1,428,384.94		1,428,384.94	21
	Totals	(calculated by form):	23,216.979	3,079,318.5	349,415.7	3,428,734.2	14
	*for materials collected and	_	_				
	**for materials collected by						
66.	If your government ope facility operations (roun						
	proportionately. Land					-	75.65
	Trans	sfer Station Budget	4				
	Yard	Waste / Compost l					
		cling Facility Budg					
67.	What was your governr				d recycling services	in 16-17? \$2,000,3	349.26

## **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: \$					

SC	RAP TIRES						
76. Please provide name, address, phone number, and e-mail of person responsible for scrap tires program.  Name: Title:							
	Name:		Title:				
	Address:	City:		Zip:			
	Telephone: Fax:	Email:					
77.	Please provide the physical address of the primary cour Street 1:	•					
	Street 2:						
	City:		olina	Zip:			
78.	Tonnage/Number of scrap tires disposed July 1, 2016-J Tons or	June 30, 2017 (excluding tires from		ance sites)			
79.	Tonnage/Number of scrap tires disposed from cleanup  Tons or		isance sites mber of tires				
80.	Indicate the types of tires collected by the county: Passenger % Heavy Truc	k % L	arge Off-Road	%			
81.	List the amount of revenue for the scrap tire program b	y source:					
	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 16-17	(contract disposal/hauling costs), 7.	' \$				
83.	County's additional scrap tire program expenditure (i.e. Labor \$		, if any.				
	Site Cost \$						
	Other \$	describe Other:					
84.	County's contract cost for scrap tire disposal. \$	/ Ton; \$	/ Tire				
85.	Hauling cost or fuel surcharge, if not included in contra	act cost above. \$/	/ Ton; \$	/ Tire			
86.	Total tipping fees collected for tires not eligible for fre	e disposal. \$					
87.	Total number of tires collected not eligible for free dis	posal:					
88.	If scrap tires were not hauled off site by contracted serv	vice provider, were they cut and	disposed in a local	landfill? Yes No			
89.	Name of tire disposal/recycling firm(s):						
TE	MPORARY DISASTER DEBRIS STAGING	GSITES					
90.	Does your local government have a plan in place for m	anagement of disaster debris?	Yes	] No			
	If yes, indicate if the plan is a stand-alone plan or in co	njunction with local government	t agencies: Sta	and-alone			
91.	If you indicated having a plan, has the plan been review requirements for public assistance reimbursement in a contract of the plan been review of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for the plan been represented by the plan been review requirements for the plan been represented by the plan been represented b		ement or FEMA to e	ensure it meets the basic  No			
92.	Please list the name, contact numbers(s), and e-mail ad your local government:						
	E-mail: E-mail:		E-mail:				

	Site Name	Disaster Site #	Site Name
4. Does your plan address t	the management of household hazardou	s waste and white goods following	g a disaster? Yes No
5. Does your plan address i	mass animal mortality? Yes [	No	
ANAGEMENT OF A	BANDONED MANUFACTUR	RED HOMES BY COUNTI	IES
6. Has your county conside	ered whether to implement a program fo	or the management of abandoned n	nanufactured homes? Yes N
If yes, has your county d	leveloped a written plan for the manage	ement of abandoned manufactured	homes? Yes No
	Part IX.	Comments	
	n any info provided in your report as ne		
natters regarding solid waste	management in North Carolina. Thank	you for your time. You may subr	nit additional sheets if needed.
Fown of apex commercial acc	O I I		
33.31/recycle charge/per mon	th		
66.85/yard waste removal/per	month		
Solid Waste Pickup / Bulk Ite	ms		
611.00 - Item			
640.00 - per full load			
-			
640.00 - per full load	mes per week		
66.85/yard waste removal/per Solid Waste Pickup / Bulk Ite	e per week th month		

 $This form \ is \ to \ be \ submitted \ electronically. \ If \ you \ require \ assistance, \ please \ contact \ one \ of \ these \ NC \ DEACS \ staff \ members:$ 

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

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

