Environmental Quality

State of North Carolina

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

Solid Waste and Materials Management Annual Report July 1, 2015 -- June 30, 2016

Please submit this form to Lgteam@ncdenr.gov by September 1, 2016.

On the following pages you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2015-2016. 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, 2016.

Options for obtaining a blank copy of this form:

- 1 download a copy of the form from this web site: http://deq.nc.gov/about/divisions/waste-management/solid-waste-section/annual-reporting-local-government-solid-waste-facility-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 it to an email and sending the 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

2016



Local Government

Required - Enter Your Local Government Name: Winterville

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, 2015 -- June 30, 2016

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, 2016. If you have questions about completing this form, please call 919-707-8121 or 919-707-8139. If you have questions about the reporting requirement, please call 919-707-8200 or contact your Regional Environmental Senior Specialist. Person Completing This Report: Travis Welborn Title: Public Works Director Mailing Address: PO Box 1459 City: Winterville Zip: 28590 Phone: (252) 215-2428 Fax: (252) 215-2466 Date: August 9, 2016 Email: travis.welborn@wintervillenc.com **General Instructions** Please remember that the time period for the report is JULY 1, 2015 through JUNE 30, 2016. Please check "No" if you have nothing to report for a specific question. Did your local government have a Recycling Coordinator or similar position for FY 15-16? X No Name Recycling Coordinator (if different from person completing this report.) Name: Address: Telephone: Fax: Email: Did your local government have a Solid Waste Director or similar position for FY 15-16? 2. X No If Yes, Name: Address: Telephone: Fax: Email: Did your local government have **dedicated or part-time** Solid Waste Enforcement Staff for FY 15-16? 3. If Yes, Name: Address: Telephone: Fax: Email: Did your local government have solid waste ordinances in place addressing any of the following during FY 15-16? (if yes, please check all that apply) X Littering Disposal Bans Illegal Dumping Other, Please Describe: Did your local government manage, provide or contract for any solid waste services in FY 15-16 (e.g., collection, disposal, recycling, mulching, composting)?

If you answer "No" to question 5, the report is complete, please email to Lgteam@ncdenr.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. An example of source reduction at government facilities is duplex or two-sided copying. Did your local government have an in-house / government building recycling program in place for FY 15-16? X Yes No 7. Did your local government have any program or policy encouraging or requiring local agencies to X No purchase products with recycled content? Did your local government have a program in place to collect and recycle spent fluorescent lights X Yes | No generated from public buildings? 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 yes, 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.) PUBLIC RECYCLING SERVICES Which of the following responses best describes your recyclables recovery activities for the period July 1, 2015 through June 30, 2016? 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 what 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 you **DID** operate or contract for a recyclables recovery program, please indicate 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 # 26 Who collected the recyclable materials for your local government's curbside recycling program? 16.

Other (please specify)

Local government employees

Private contractor (please specify)

Franchised hauler (please specify)

Waste Industries

17.	Please answer the following questions about your community. a. Total number of households? 3,656							
	a. Total number of households? b. Number of households served by curbside recycling? 3,656							
	c. Please estimate the number of households that regularly participate in the program? 3,656							
18.	. If your curbside recycling program is operated through a <u>public franchise to a private company</u> then please answer the following: Is public participation in the franchise: 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	Other Please describe the collection containers used:							
22.	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							
25.	If you use roll-out carts for curbside recycling, please indicate the calendar year you implemented service with carts: 2009							
DR	OP-OFF RECYCLING PROGRAM							
26.	Did your government operate a Drop-off Recycling Program? Yes No, skip to question # 33							
27.	Who collected the recyclable materials for your local government's drop-off recycling program? Local government employees Private contractor							
	Other (please specify)							
28.	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							
29.	Please estimate the number of households served by your drop-off recycling program.							
30.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial							
31.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:							
32.	How many of these locations were staffed with attendants?							
EL	ECTRONICS RECYCLING PROGRAM							
	ase 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.							
33.	Did your community operate an electronics recycling program in FY 15-16? Yes No, skip to question # 39							
	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:							

34.	Did your electronics recycling program collect or accept televisions from (check all that apply): Residences										
35.	Did your electronics recycling program collect or accept computer equipment from (check all that apply): Residences Businesses										
36.	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 2016, please provide the following information:										
	Electronics Management Fund balance as of July 1, 2015: \$										
	Electronics Management Funds received from DENR during FY 15-16: \$										
	Electronics Management Funds spent during FY 15-16: \$										
	Electronics Management Fund balance as of June 30, 2016: \$										
37.	Please explain how Electronics Management Funds were spent during FY 2015-16 (please list items purchased if applicable):										
38.	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 15-16:										
	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.										
39. 40.	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										
41.	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										
42.	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										
43.	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?										
44.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 15-16. (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										
45.	Please identify all "Other" programs or services operated by your government during FY 15-16. (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

- 46. 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, 2015 through JUNE 30, 2016. 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

DD OCD AND	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							
Brown							
Green							
Mixed							
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans					ΙП		
Steel Cans							
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)					ТП		
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 Recovery							
Commingled tons-check al items collected above		623.7					623.7
TOTAL TONS:		623.7					623.7
					•	=	

47. 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 answer the questions and provide data as indicated below considering services provided to the public for recycling. Please do not include materials that were accepted and then disposed of in a landfill. Do not include materials generated exclusively by government operations (e.g. motor-fleet services). If special wastes were only accepted as a part of an Household Hazardous Waste (HHW) Program or HHW event and were not collected by separate recycling efforts then do not record materials in question # 48 but instead report with HHW materials in question #49.

Special Waste Collected Separately From HHW Collection Program or Event

8.	Special Waste Programs for Collecting [Atterials from Citizens by Material Type] Did program collect this material from the public? # of Sites Data on quantities collected / managed. Please report in indicated units.			1	businesses rticipate?				
U	sed Motor Oil	Yes	⊠ No				gallons		Yes
U	sed Oil Filters	Yes	⊠ No		Barrels	or	lbs		Yes
U	sed Antifreeze	Yes	⊠ No			·	gallons		Yes
В	atteries, Lead Acid	Yes	⊠ No		# batter	ies, or	lbs		Yes
В	atteries, Dry Cell	Yes	⊠ No			·	lbs		Yes
F	luorescent Bulbs/Lights Containing Mercury	Yes	⊠ No		lbs,	or	# bulbs		Yes
P	ropane Tanks	Yes	⊠ No		lbs,	or	# tanks		Yes
U	sed Cooking Oil / Waste Vegetable Oil	Yes	⊠ No		lbs,	or	gallons		Yes
O	ther Special Wastes - please provide waste type here:	Yes	⊠ No				lbs		Yes
	esticide Containers (NCDA Program, not esticides themselves)	Yes	⊠ No		lbs, (or	# con- tainers		n/a
	CDA Pesticide Disposal Assistance Program for management of pesticides, not containers)	Yes	⊠ No				lbs		n/a
	atex Paint (do not include paint collected at HW event or by a paint exchange program)	Yes	⊠ No		gals, or		lbs		Yes
Iff a. b. c. d. e.	Did your local government operate a household hazardous waste collection program or event in FY 15-16? Yes No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event b. How many days was your HHW Program open to accept materials during this Fiscal Year? c. Did you partner or co-sponsor your HHW program with another local government? Yes No Please list partner(s) d. How many citizens / households participated in your HHW collection program this Fiscal Year? e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? Yes No If yes, please estimate the amount of business material managed pounds f. Materials collected by HHW Program: if totals for individual materials are known please indicate below. If individual material totals are not known, please simply provide total quantity of materials collected by HHW program in Total Quantity row below.								
	Used Motor Oil (Gal)								
	Used Antifreeze (gal)					er Batteries (lb	os)		
	Fluorescent Bulbs / Lights Containing Mercury (lbs)								
Provide Total Quantity of materials collected by HHW Program. If individual materials reported in 49f, please net materials reported separately out of total amount collected by HHW Program								_ pounds	
g	Contractor(s) involved								
h	h. Estimated cost of HHW / CESQG program or event(s) \$								
	3 through 6 should have only been complete					than DO man	ida maan	alina	r compiees

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

		Part IV. Yard Waste	, Mul	ching and (Compostin	g Managem	ent
ınpe	ermitted sites an	rns management of vegetative mat ad it is illegal to burn. Composting nent of vegetative materials. Do not	and mi	ılching are popi	ular manageme	nt options. Please	e answer the questions below
50. Does your local government operate a yard waste program? X Yes No If yes please indicate how yard waste is matchecking all that apply: Collected curbside Collected at convenience center Received at yard waste, compost, or L Did a storm event significantly impact the amount of yard waste your government managed during FY 15-16? Yes What quantities of materials were managed by your yard waste program? Provide information in TONS OR CUBIC YARD organic material (yard waste, brush, limbs, leaves, etc.) managed. For conversion purposes, use 400 lbs./cubic yd.						raste, compost, or LCID facil. 6? Yes No DR CUBIC YARDS of	
		Destination	Check if used	Tons	Cubic Yards		Name and Location of Facility g Vegetative Materials
	End user (to fa	armer or home-owner)					
	Your local gov	ernment's mulch or compost facility					
	Other public m	ulch or compost facility					
	Private mulch	or compost facility					
	Land clearing	and inert debris landfill (LCID)	\boxtimes		10,522	ER Lewis Manning Far	m Landfill
	Energy / Fuel V	Use (e.g. boiler fuel market)					
		Total			10522		
	estimate yard v	E MANAGEMENT FORMULA: If waste volume. Calculate for each trued by program in the appropriate bo	ick used	in your yard wave. Ex. 10 yd^3	aste managemen	t program, and the	en enter the grand total $0 yd^3$
	Size of Truc	X Avg. no. of times truck	r fills asah	XX	tourals in mond during	=	TOTAL yd^3
	Size of Truc	Part V. Sol					TOTAL
Plea	se answer the fo	ollowing questions regarding your lo					disposal services.
53.		te the following table regarding your					
	Sector	Who Collects Solid Waste? House Letter - see codes at right I	Insert No	o see codes at	right a. Local		How is Solid Waste Collected? es 1. Once a week at household
	Residential	, в		1 Secondary	b. By Co	ntract nise haulers	2. Twice a week at household3. Convenience center/greenbox
	Commercial		mary	Secondary		government not ed in provision of	4. As needed or by request5. Daily
	Industrial	Primary D Secondary Pri	mary	Secondary	servic	e	6. Other
54.	If you provide	residential waste collection at single	e-family	households in y	our jurisdiction,	please answer the	e following questions:
	What type of c	ollection method is used?	ully Aut	omated S	Semi-Automated	l Manual	Don't know
	What is the sta	ndard collection frequency? 🛛 W	Veekly	Two tim	nes per week	Other	
	What is the typ	pical service point for single family h	nousehol	ld waste?	Curbside	Back yard / Ba	ck door
	What type of c	ollection container is used?	overnm	ent-provided car	rts Reside	ent-provided conta	ainer Bags
	Do you offer b	ulky waste collection services?	Yes	☐ No			
55.		ties - did your government collect w te goods delivered to the county for	_		∑ Yes	No	
		Part VI. Solid Was	te and	d Recycling	g Education	nal Activitie	S
56.	Did your local issues / activiti	government have an education pro es? Yes No (If N	_	inform citizens o Part VII, page		ut solid waste ma	nagement and / or recycling
57.	Please estimate	e your annual budget for solid waste	related	education and or	utreach activitie	s: \$	
58.	Does your com	nmunity produce recycling education	and ou	treach materials	in languages be	sides English?	Yes No
	If YES, please	list other languages used:					
59.	Please provide	your recycling website address and	public i	nformation phor	ne number if app	olicable.	
	Website: www	wintervillenc.com				Hotline:	

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

Sufficient resources available to solid waste management programs are essential for continued succe questions deal with resources allocated to solid waste management programs.	ss of these programs. The following
60. Did your local government operate an Enterprise Fund for solid waste services in FY 15-16?	Yes No
61. With regards to funding sources, check all that apply to your local government:	<u> </u>
Tipping fees Volume/weight-based fees (e.g. PAYT)	Tire tax
Property taxes / general fund Sale of recyclables	White Goods tax
Per household charges Grants 62. NC Solid Waste Disposal Tax proceeds are distributed to eligible local governments on a quart	Disposal Tax
According to GS 105-187.63 these funds must be used by a city of county solely for solid wast	
How are disposal tax distributions being used?	
63. If applicable, please provide your FY 15-16 household fees. (e.g., a. \$45.00 per year per household fees)	<u>rhold</u> for solid waste)
a. \$ \frac{11.5}{2} \text{ per } \frac{\text{month}}{2} \text{ per } \frac{\text{container}}{2}	for solid waste
b. \$ per per	for recycling
c. \$ per per	for yard waste
d. \$ per per	for bulky waste
e. \$ per per	availability fee
f. \$ 11.5 per month per container	total charge
64. Did your local government have a Pay-As-You-Throw program for residential garbage? (Residential garbage)	ents are charged by weight or volume for
the amount of trash disposed.) \square Yes \boxtimes No	
According to GS 130A-309.08, local governments are required to conduct full cost accounting a inform users of such costs.	anually and to develop a system to
65. If your local government contracts for solid waste or recycling services, please report the annual	contract amount
\$305,863.2 For solid waste services per year	
\$146,971.2 For recycling per year	
OR	
\$452,834.4 Combined Contract (solid waste, and recycling)	
66. Collection Programs: Please complete the following table to the best of your ability to display to programs for collecting waste, recyclables and yard waste including services at convenience ce	
available, please report program budget in Total Cost column.	
# of Households Tons Collected Collection Cost Disposal Co	
served concetted concetton cost (tipping fees p	overhead Managed
Municipal Solid Waste* 3,694 2,356.74 305,863.2	305,863.2
Recycling Program** 3,656 623.7 146,971.2	146,971.2 235
Yard Waste Program 3,694 2,104.4	
Calculated Totals: 5,084.84 452,834.4	452,834.4
*for materials collected and sent for eventual disposal in a Municipal Solid Waste or Construction and Demolition Lar	
**for materials collected by public recycling programs including those services offered to commercial and industrial g	
67. If your government operates a landfill, transfer station, yard waste /compost facility or recyclin facility operations. If budgets are combined, please attempt to allocate costs proportionately.	facility, please provide total budget for
Landfill Budget: \$	
Transfer Station Budget: \$	
Yard Waste / Compost Facility Budget: \$	
Recycling Facility Budget: \$	

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 69 through 97). 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					
69.	Give name, address, phone number, and Name:	•	•	Title		
	Address:		City:		Zip:	
	Telephone: Fa	nx:		Email:		
70.	Please provide the physical address of the Street 1:		_			
	Street 2:					
	City:				Zip:	
71.	Please provide the name of the business Name:	or person that remo	ves the refriger	ant gases (CFCs) fr	om white goods.	
	Street:					
	City:			North Carolina		
	Phone: Fax:		Email	:		
72.	Give amounts / types of CFCs removed.				tion of person(s) perfor	
	Type of CFC Ren	noved			Amount	
73.	CFCs may be recycled or sent for destruc	ction. Give name of				
	Firm		Method o	f Disposal	Amount Earned	Amount Spent
74	Tonnage of White Goods Collected (inc.	luda caran matal):				
74.		· -				
75.	List the amount of revenue for the white					
	Revenue collected from sale of scrap:	\$ Distributions (
	Revenue collected from White Goods Ta					
	Revenue from other source (e.g. grants):					
	Total Revenue:	\$				
76.	According to the White Goods Law, Wheexpenditures White Good Tax Distribution					mounts and types of
	Operational Expenses:	\$				
	Capital Improvements:	\$				
	Clean-up of Illegal White Goods Dumps	s: \$				
	Total Expenditures:					

SC	KAP TIKES								
77.	Give name, address, phone number, and e-mail of per Name:	-							
	Address:				Zip:				
	Telephone: Fax:								
78.	Please provide the physical address of the primary co Street 1:	unty scrap tire	es collection sit	e.					
	Street 2:								
	City:		State: North	n Carolina	Zip:				
79.	Tonnage/Number of scrap tires disposed July 1, 2015	mber of scrap tires disposed July 1, 2015-June 30, 2016 (<u>excluding</u> tires from cleanup of nuisance sites) Tons or Number of tires							
80.	Tonnage/Number of scrap tires disposed from cleanu Tons or		ounty designate	ed nuisance sites Number of tires					
81.	Indicate the types of tires collected by the county: Passenger % Heavy Tru	ıck	%	Large Off-Road	%				
82.	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:	\$							
83.	County's total scrap tire program contract expenditure excluding costs of nuisance tire cleanups, for FY 15-	e (contract dis 16.	posal/hauling c	costs), \$					
84.	County's additional scrap tire program expenditure (i. Labor \$		enience center	cost), if any.					
	Site Cost \$								
	Other \$	des	scribe Other: _						
85.	County's contract cost for scrap tire disposal. \$	/	Ton; \$	/ Tire					
86.	Hauling cost or fuel surcharge, if not included in con	tract cost abo	ve. \$	/ Ton; \$	/ Tire				
87.	Total tipping fees collected for tires not eligible for fa	ree disposal. \$							
88.	Total number of tires collected not eligible for free d								
89.	If scrap tires were not hauled off site by contracted se	rvice provide	r, were they cu	t and disposed in a loc	eal landfill? Yes No				
90.	Name of tire disposal/recycling firm(s):								
TE	MPORARY DISASTER DEBRIS STAGIN								
91.	Does your local government have a plan in place for	management o	of disaster debr	is? Yes	No				
	If yes, indicate if the plan is a stand-alone plan or in c	conjunction wi	th local govern	nment agencies:	Stand-alone In conjunction				
92.	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 No				
93.	Please list the name, contact numbers(s), and e-mail a	address of the	person(s) in ch	arge of the disaster de	ebris management program for				
	your local government: Name: Name	::		Name:					
		•							
	E-mail: E-mai								

94.	Natural Heritage Progra Please note that the vetting of	nm (NHP) and the State Historic Preservation of a site prior to a disaster is advantageous to local go	ion Office (SHPO) through coowernments because a staging site which	or municipality which have been reviewed for conflicts with the Office (SHPO) through coordination with the Solid Waste Section ments because a staging site which is found to have impacted federal or state to obtain FEMA reimbursement. Attach extra sheets, if needed.				
	Disaster Site #	Site Name	Disaster Site #	Site Name				
95.	Does your plan address	the management of household hazardous v	waste and white goods following	g a disaster? Yes No				
96.	Does your plan address	mass animal mortality? \square Yes \square	No					
MA	NAGEMENT OF A	ABANDONED MANUFACTURE	ED HOMES					
97.	Has your county consid	ered whether to implement a program for t	the management of abandoned	manufactured homes? Yes No				
	If yes, has your county	developed a written plan for the manageme	ent of abandoned manufactured	homes? Yes No				
		Part IX. C	Comments					
Use	this section to elaborate of	on any info provided in your report as nece		our comments about this report or other				
		management in North Carolina. Thank yo		-				
	This form is to be sub	omitted electronically. If you require ass Joseph Fitzpatrick, email: joseph.fitzpat Rob Taylor, email: rob.taylor@n	trick@ncdenr.gov phone 919-7	707-8121				
can.		tal Assistance and Customer Service Local e at https://deq.nc.gov/conservation/recycli	Government Assistance Team	is ready to assist you in any way we				
		RECYCLEMORE						