

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, 2020 - June 30, 2021

Submit this form to Lgteam@ncdenr.gov by September 1, 2021.

On the following pages, you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2020-2021. 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

This form must be completed electronically using Adobe Reader. It is suggested that you complete the form using the latest version of Adobe Reader which can be downloaded for free at: <u>https://get.adobe.com/reader/</u>. Please <u>DO NOT</u> 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. Name the file Community Name LGAR 2020-21. For example, Aberdeen LGAR 2020-21.

You can find your reports from previous years at: <u>https://deq.nc.gov/conservation/recycling/local-government-recycling-assistance/LGAR</u>

After completing and saving the report, please email the report 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:

Tara Nattress, phone: 919-707-8123, email: <u>tara.nattress@ncdenr.gov</u> Carol Abken, phone: 919-707-8138, email: <u>carol.abken@ncdenr.gov</u>

Form Year



Required: Select your Local Government Name

PRINCETON

State of North Carolina

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

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, 2021.

If you have questions or need assistance completing this form, please call 919-707-8123 or 919-707-8138.

| Pers | son Completing This Report: LEIGH HARTL | EY | Title: ASSISTA | NT TOWN CLERK |
|------|---|---|--------------------|--------------------------------|
| Mai | ling Address: POST OFFICE BOX 67 | City: PRINCETON | | Zip: 27569 |
| Pho | ne: 919-936-8171 | | Date: 08/3 | 0/2021 |
| Ema | ail: L.HARTLEY@MYPRINCETONNC.COM | M | | |
| | | General Instructions | | |
| | se remember that the time period for the report rt for a specific question. | is JULY 1, 2020 through JUNE 30, 2021. | . Please check "N | o" if you have nothing to |
| 1. | Did your local government have a staff memb | per who managed the recycling program for | or FY 20-21? 🗙 | Yes 🗌 No |
| | If Yes, is recycling program management a f | full-time or part-time responsibility? | 🗌 Full Ti | me 🗙 Part Time |
| | If Yes, Name: CHAD THOMPSON | | Title: PUBLIC | WORKS SUPERINTENDEN |
| | Address: POST OFFICE BOX 67 | City: PRINCETON | | Zip: 27569 |
| | Telephone: 919-915-0693 | Email: C.THOMPSON@MYPRINCET | ONNC.COM | |
| 2. | Did your local government have a Solid Wast | e Director or similar position for FY 20-2 | 1? X Yes | No |
| | If Yes, Name: CHAD THOMPSON | | Title: PUBLIC V | VORKS SUPERINTENDENT |
| | Address: POST OFFICE BOX 67 | City: PRINCETON | | Zip: 27569 |
| | Telephone: 919-915-0693 | Email: C.THOMPSON@MYPRINCET | ONNC.COM | |
| 3. | Did your local government have dedicated on | r part-time Solid Waste Enforcement Sta | ff for FY 20-21? | X Yes No |
| | If Yes, Name: CHAD THOMPSON | | Title: PUBLIC V | VORKS SUPERINTENDENT |
| | Address: POST OFFICE BOX 67 | City: PRINCETON | | Zip: 27569 |
| | Telephone: 919-915-0693 | Email: C.THOMPSON@MYPRINCET | ONNC.COM | |
| 4. | Did your local government have solid waste call that apply) | ordinances in place addressing any of the f | following during F | Y 20-21? (if yes, please check |
| | Disposal Bans Illegal Dumping | Littering Construction & Demo | lition Othe | r: |
| 5. | Did your local government manage, provide of mulching, composting)? | or contract for any solid waste services in No | FY 20-21 (e.g., co | llection, disposal, recycling, |

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 |
|-----|---|
| 6. | Did your local government have a recycling program in place for collecting recyclable materials generated at public buildings in FY 20-21? X Yes No |
| 7. | Did your local government have any program or policy encouraging or requiring local agencies to purchase products with recycled content in FY 20-21? Yes No |
| 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 20-21? \bigvee Yes \square No |
| | 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 ? |
| | If yes, please check all source reduction programs that apply: |
| | Junk Mail Reduction Single Use Plastics Reduction Food Waste Reduction |
| 10 | Promoting Reuse and Donation Other |
| 12. | Did your local government offer a waste exchange or reuse program? Yes No |
| 13. | If yes, please check all waste exchange and/or reuse programs that apply: |
| | 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, 2020 through June 30, 2021? Choose ONE option that best applies. |
| | X 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 partner with another local government to operate or contract a recyclables recovery program. (Please identify the local government responsible for its operation and briefly explain the partnership; then go to Part IV on page 7 .) |
| | With which local government did you partner and what is the arrangement? |
| | My local government DID NOT operate, contract or participate in a recycling program. (Go to Part IV on page 7 .) |
| 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? |
| | Iccal government employees |
| | Private contractor (please specify) |
| | Franchised hauler (please specify) |
| | Other (please specify) |

| 17. | Please provide the following information about your community: a. Total number of households in your jurisdiction? 631 |
|-----|---|
| | b. Number of households eligible to participate in the curbside recycling program: 631 |
| | c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 551 |
| 18. | If your curbside recycling program is operated by a franchised hauler 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: 42 |
| 21. | How frequently were the curbside recyclables collected? Once a week Other Other |
| 22. | Please describe the collection containers used: Image: Display and the provided states and the provided state |
| 23. | Please describe the method of recycling collection: □ curb-sort (collector separates material as collected) □ dual / two stream □ dual / two stream |
| 24. | Do residents sign up for curbside recycling service or are they automatically included? Sign up Automatically included |
| 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 |
| 32. | Did your community operate an electronics recycling program in FY 20-21? ☐ Yes |
| | |

| 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. | Annually, DEQ distributes funds to eligible units of local government. If your unit of local government received a distribution from the |
| | Electronics Management Fund in February 2021, please provide the following information: |
| | Electronics Management Fund balance as of July 1, 2020: \$ |
| | Electronics Management Funds received from DEQ during FY 20-21 (Feb 2021 distribution): \$ |
| | Electronics Management Funds spent during FY 20-21: \$ |
| | Electronics Management Fund balance as of June 30, 2021: \$ |
| | Total spent on electronics recycling program FY 20-21 (Electronics Management Funds plus additional funds): \$ |
| 36. | Explain how Electronics Management Funds were used during FY 20-21 (list items purchased if applicable): |
| | |
| 37 | Name of electronics recycler(s) used during FY 20-21: |
| | Does the electronics recycler(s) used have either the e-Steward or R2 certification? |
| ΟΤ | HER PUBLIC RECYCLING PROGRAMS |
| | only programs operated or contracted for <u>by the local government</u> . The tonnage of any materials collected by the following programs Id be 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 drop-off recycling programs? |
| 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 drop-off recycling programs? \Box Yes X No |
| 40. | Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? 🗌 Yes 🛛 🗙 No |
| | On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served: |
| | Public drop-off recycling sites available for ABC On Premises Permit holders to use |
| 41. | Does your local government operate a program to recycle Construction and Demolition materials? Yes X 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. | Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 20-21. (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 |
| 43. | Please identify all "Other" programs or services operated by your government during FY 20-21. (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 |
| | |
| | If yes, what type? Drop-off Curbside Pilot Other: |
| | |
| | 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

- 44. 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, 2020 through JUNE 30, 2021.
 - b. Do NOT report yard waste, tires, HHW, used oil, batteries or other special wastes on this page these are covered later in the report.
 - c. If you collected single stream or other commingled materials, record tons in the "Commingled tons" row and then X the boxes beside each material type above for all items included.

| BROCRAM | | Curbside | | Drop-off | | er" Programs | Total Tons | |
|--|--------------|---------------|-------------------|-----------|----------|--------------|---------------------------------|--|
| PROGRAM | ⊠ if Yes | Tons | ⊠ if Yes | Tons | ⊠ if Yes | Tons | (totals are calculated by form) | |
| GLASS: | | | | | | | | |
| Clear | | | | | | | 0.00 | |
| Brown | | | | | | | 0.00 | |
| Green | | | | | | | 0.00 | |
| Mixed | | | | | | | 0.00 | |
| PLASTIC: | | | | | | | | |
| PET #1 | \times | | | | | | 0.00 | |
| HDPE #2 | | | | | | | 0.00 | |
| All Plastic Bottles | | | | | | | 0.00 | |
| Other Plastic Containers | | | | | | | 0.00 | |
| Bulky Rigid Plastics | | | | | | | 0.00 | |
| METAL: | | | | | | | ۱ | |
| Aluminum Cans | \mathbf{X} | | | | | | 0.00 | |
| Steel Cans | | | | | | | 0.00 | |
| PAPER: | | | | | | | | |
| Newsprint (ONP) | \mathbf{X} | | | | | | 0.00 | |
| Cardboard (OCC) | | | | | | | 0.00 | |
| Magazines (OMG) | | | | | | | 0.00 | |
| Office Paper | | | | | | | 0.00 | |
| Mixed / Other Paper | | | | | | | 0.00 | |
| Cartons / Aseptic Containers | | | | | | | 0.00 | |
| WOOD: | | | | | | | | |
| Pallets | | | | | | | 0.00 | |
| Other Wood - DO NOT | | Report all to | ns in Other colun | n | | | | |
| report yard waste tons here | e | | | | | | 0.00 | |
| ELECTRONICS: | | | | | | | | |
| Televisions | | | | | | | 0.00 | |
| Computer Equipment | | Report all to | ns in Other colun | n | | | 0.00 | |
| Other Electronics | | | | | | | 0.00 | |
| OTHER MATERIALS: | | | | | | | | |
| Textiles (clothes etc) | | | | | | | 0.00 | |
| C&D Materials Recycling | | | | | | | 0.00 | |
| White Goods | | Dopout all to | ng in Othen eel | | | | 0.00 | |
| Other Scrap Metal | | Keport all to | ns in Other colun | <i>in</i> | | | 0.00 | |
| Food Waste | | | | | | | 0.00 | |
| | | | | | | | 0.00 | |
| Commingled tons* (x boxe above for all items included) | es 🗙 | 24.77 | | | | | 24.77 | |
| TOTAL TONS: | | 24.77 | 0.0 | 0 | 0.0 | 0 | 24.77 | |

45. *If you checked commingled, which material recovery facility (MRF) does your community use? JOHNSTON COUNTY LANDFILL

- A MRF is the plant that separates commingled recyclables into marketable commodities (paper, plastic, metals, glass)
- a. Do you have a formal contract with the MRF? \Box Yes \boxtimes No If yes, what month/year does it expire?
- b. Do you know your inbound contamination level at your MRF? Yes No Inbound contamination is the amount of non-recyclable materials in commingled loads delivered to the MRF. If yes, what is the inbound contamination percentage?

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 cardboard disposal ban results in private cardboard recycling (and you have a way to track the tons collected)

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

Part III. Special Waste Collections

Please provide data below for services provided to the public. 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). 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/Event and were not collected by separate recycling efforts then report in #48, <u>not</u> in #47.

Special wastes are materials collected at convenience centers, transfer stations, landfills, etc. Do not include materials collected at household hazardous waste permanent collection facilities or household hazardous waste temporary collection events.

| 7. Special Waste Programs for Collecting Materials <u>from</u> Citizens by Material Type | Did program collect this material from the public? | # of sites | 1 | | ollected / manage | ed. |
|--|--|---------------|---|------------------------|--|-------|
| Used Motor Oil | X Yes | 1 | 0 | | gallons | 5 |
| Used Oil Filters | X Yes | 1 | 0.00 barr | els, or | | lbs |
| Used Antifreeze | X Yes | 1 | 0 | | ga | llons |
| Batteries, Lead Acid (Auto) | Yes | | # b | atteries | , or | lbs |
| Batteries, Dry Cell (Household) | Yes | | | | | lbs |
| Fluorescent Bulbs/Lights Containing Mercury | Yes | | | lbs, or | # bi | ulbs |
| Propane Tanks | Yes | | | lbs, or | # 1 | anks |
| Used Cooking Oil / Waste Vegetable Oil | Yes | | | lbs, or | ga | llons |
| Other Special Wastes - please provide waste type here: | ☐ Yes | | | | | lbs |
| Pesticide Containers (NCDA Program, not pesticides themselves) | Yes | | | lbs, or | | con- |
| NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) | TYes | | | | L. L | lbs |
| Latex Paint (do not include paint collected at HHW event or by a paint exchange program) | TYes Yes | | | gals, or | | lbs |
| busehold Hazardous Waste (HHW) Collection I Did your local government operate a permanent If Yes, please respond to the following question a. Was HHW collected at a permanent collection How many permanent collection facilities (s b. How many days did all HHW collection prog c. Did your local government partner the HHW Please list partner(s) | HHW collection facility or s: on facility or temporary col sites) do you operate? grams operate (number of d | tempor | event? Pern _ How many te prated out of 365 | manent mporar)? | Temp. Eve | |
| d. How many households/residences participate | ed in your HHW collection | progran | n? | | | |
| e. Did your program accept materials from VS0 If yes, please provide or estimate the amount | QG (Very Small Quantity C | Benerato | | Y | es 🗌 No pounds | |
| f. Provide the amount of materials collected by Do not include (subtract out) any tons that are in | y the HHW program for the | fiscal y | | ed in #44 | pour | |
| g. List all the HHW disposal and HHW recyclin | ng contractors: | | | | | |
| h. What is the fiscal year cost to operate the HF | W collection program? 0. | 00 | | | | |

Part IV. Yard Waste, Mulching and Composting Management

Yard waste may not be disposed in sanitary landfills, incinerators, or in unpermitted sites and it is illegal to burn. Do not include information on food waste or non-vegetative materials in this section.

- 49. Does your local government operate a yard waste program? X Yes No If yes please indicate how yard waste is managed by checking all that apply: X 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 20-21? 🗌 Yes 🛛 🗙 No
- 51. What quantities of materials were managed by your yard waste program? **Provide information in TONS** <u>OR</u> **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 | Facility Name and Location |
|---|------------------|--------|----|-------------|----------------------------|
| End user (to farmer or home-owner) | | | or | | |
| Your local government's mulch or compost facility | | | or | | |
| Other public mulch or compost facility | | | or | | |
| Private mulch or compost facility | | | or | | |
| Land clearing and inert debris landfill (LCID) | \mathbf{X} | 211.21 | or | | JOHNSTON COUNTY LANDFILL |
| Energy / Fuel Use (e.g. boiler fuel market) | | | or | | |
| Total | | 211.21 | or | 0.00 | |

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 cubic yard truck x 3 days/wk x 16 wks = 480* cubic yards

| | Х | Σ | Κ | = 0.00 | cubic yards |
|--------------------------|-----------------|---------------------------|--------------------------------------|--------|-------------|
| Size of Truck (in yards) | Avg. no. of tir | nes truck fills each week | # of weeks truck is used during year | TOTAL | |
| | Part | V. Solid Wast | e Collection Services | | |

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

| | Sector | | | | | | s Solid Waste Collected? ert # - see codes at right | | | <u>Who Collects Solid Waste?</u> a. Local government employees | How is Solid Waste Collected? | | | |
|---|---|------------|----------|-------------|-------------|------------|--|---------------|------------------|---|--|--|--|--|
| | Residential | Primary | а | Secondary | | Primary | 1 | Secondary | | b. By Contract | 2. Twice a week at household 3. Convenience center/greenbox | | | |
| | Commercial | Primary | а | Secondary | d | Primary | 1 | Secondary | | d. Local government not | 4. As needed or by request | | | |
| | Industrial | Primary | d | Secondary | d | Primary | | Secondary | | | 5. Daily 6. Other | | | |
| 53. | | | | | | - | • | - | | isdiction, please answer the | | | | |
| What type of collection method is used? \Box Fully Automated \boxtimes So | | | | | | Semi-A | utomated 🔲 Manual 🗌 Don't know | | | | | | | |
| | What is the standard collection frequency? 🔀 Weekly | | | | | у | Two tin | nes per v | s per week Other | | | | | |
| What is the typical service point for single family household waste? 🛛 🔀 Curbside 🗌 Back yard / Back door | | | | | | к door | | | | | | | | |
| | What type of co | ollection | i conta | iner is use | ed? 🗙 | Gover | nment- | provided ca | arts | Resident-provided contain | ner 🗌 Bags | | | |
| | Do you offer bu | ulky wa | ste coll | ection set | rvices? | ΧΥ | es | 🗌 No | | | | | | |
| 54. | For municipalit If so, were whi | | | | | | | | | | | | | |
| | | | Part | VI. So | lid W | aste a | nd F | Recyclin | g Edu | cational Activities | | | | |
| 55. | Does your loca | l govern | ment l | nave an eo | lucation | program | about | solid waste | and/or | recycling program/activities | ? 🗌 Yes 🛛 No | | | |
| | If yes, do you u | tilize an | y of th | e DEACS | S-provide | d templ | ates (R | ecycle Right | nt NC)? | Yes No | | | | |
| | Available at <u>https</u> | s://deq.no | c.gov/co | onservation | n/recycling | g/general | <u>l-recycl</u> | ing-informati | ion/custo | mized-outreach-materials | | | | |
| | Do you use any | recyclin | ng edu | cational e | nforcem | ent strate | egies? | | | | | | | |
| | Cart tagging | 5 | | Collectio | on App | |] Other | r (please des | scribe): | | | | | |
| 56. | Please estimate | your ar | nnual b | udget for | solid wa | ste and | recycli | ng educatio | n/outrea | ch activities: \$ | | | | |
| 57. | Do you offer ea | lucation | mater | ials in lan | guages b | esides E | English | ? Yes | | No Other language(s): | | | | |

2020-2021 Local Government Annual Report *Report Due Date: September 1, 2021* Submit to: Lgteam@ncdenr.gov

| Part VII. Resou | rces for | Solid Wa | aste Manageme | ent and | d Full C | ost Account | ing |
|---|--|---|--|--|--|--|--|
| 58. Did your local government operation 59. NC Solid Waste Disposal Tax produces According to GS 105-187.63 these Did your local government receives If yes, how are disposal tax distribution | oceeds are dis e funds must e Solid Wast | stributed to e t be used by a te Disposal T | ligible local governme a city or county solely ax distributions? | ents on a for solid | quarterly bays waste man | | ment of Revenue. s and services. |
| 60. What other funding sources does Tipping fees Property taxes / genera Per household charges | ll fund | Volume/ Sale of r Grants | weight-based fees (e.§ ecyclables | | | `ire tax Vhite Goods tax | |
| 61. If applicable, please provide your ex: \$ \$75.00 | | | | | hold | for solid was | to |
| pc | | | per | | | | |
| a. \$ per per for solid wa | | | | | | for solid was | te |
| b. \$ per per for recycling | | | | | | | |
| c. \$ per per for yard waste | | | | | | e | |
| d. \$ pe | r | | per | | | for bulky was | ste |
| e. \$ pe | r | | per | | | availability fo | ee |
| f. \$ 25.00 pe | | | | | | | |
| 62. Did your local government operat | | | 1 | | | - | where residents |
| are charged a fee by weight or vo | | | · · L | Yes | X No | | |
| According to <i>GS 130A-309.08</i> , local 63. If your local government contract | 0 | - | | st accoun | iting annua | and inform us | sers of such costs. |
| 05. If your local government contract | s for solid wa | | - | t | Month/Vo | an of Contract Eve | instign |
| Solid Waste Services Contract | | Annual Contract Amount Month/Year | | | | ar of Contract Exp | biration |
| Recycling Contract | | \$ | | | | | |
| OR: Combined Contract (solid wa | aste & recycl | | | | | | |
| OR. Combined Contract (solid wa | iste de recyci | iiig) | | | | | |
| | | | | | | | |
| 64. Collection Programs: Please composition programs for waste, reconstruction available, please report programs | yclables and | l yard waste i | ncluding materials co | | | | 0 |
| collection programs for waste, red | cyclables and gram budget | l yard waste i | ncluding materials co ost column. | llected fr | | | 0 |
| <u>collection programs</u> for waste, rec not available, please report prog # of Hou | cyclables and gram budget seholds ed | l yard waste i t in Total Co | ncluding materials co ost column. | llected fr | om conventions al Cost (fees paid) | ience centers. If f <u>Total Cost</u> including | Cost Per Ton Managed |
| collection programs for waste, rec not available, please report prog # of Hou serv | seholds ed 74 | l yard waste i t in Total Co | ncluding materials co ost column. | llected fro Dispo (tipping | om conventions al Cost (fees paid) | ience centers. If f Total Cost including overhead | Cost Per Ton Managed (calculated by form) |
| collection programs for waste, red not available, please report programs # of Hou serv Municipal Solid Waste* 673 | seholds and constraints of the second | l yard waste i t in Total Co ons Collected 9.01 | ncluding materials co ost column. Collection Cost 47,095.90 | Dispo (tipping 27,713 | om conventions al Cost fees paid) | ience centers. If f <u>Total Cost</u> including overhead 74,809.27 | Cost Per Ton Managed (calculated by form) 99.88 |
| collection programs for waste, reconstruction not available, please report program # of Hou served # of Hou served # of Hou served Municipal Solid Waste* 673 Recycling Program** 673 | yclables and gram budget scholds ed 74 24 24 by form): 98 | l yard waste i t in Total Co ons Collected 9.01 .77 1.21 4.99 | Including materials coost column. I Collection Cost 47,095.90 35,792.88 70,643.85 153,532.63 | Illected fr Dispc (tipping 27,713 0.00 3,801. 31,515 | om conventions al Cost (fees paid) 3.37 78 5.15 | Total Cost including overhead 74,809.27 35,792.88 | Cost Per Ton Managed (calculated by form) 99.88 1,445.01 |

65. If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide the total budget for facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate costs proportionately. Landfill Budget:

\$_____\$_____

Transfer Station Budget:

Yard Waste / Compost Facility Budget: \$

Recycling Facility Budget:

66. What was your government's total combined annual budget for all solid waste and recycling services in 20-21? \$185,047.78

\$

2020-2021 Local Government Annual Report *Report Due Date: September 1, 2021* Submit to: Lgteam@ncdenr.gov

Part VIII. Mandated Programs

| | <u>y Counties</u> need to complete questions 6 Viscarded White Goods" and Part 2B, "S | | | | | 2D, "Management | | |
|-----|---|--|----------------------|----------------------------------|-----------------------|-----------------|--|--|
| | ITE GOODS | 1 | - | | 1.0 | | | |
| 67. | Please provide contact information for | the person responsible | for the white | goods program. | | | | |
| | Name: | | Title: | Title: | | | | |
| | Mailing Address: | | City: | | Zip: | | | |
| | Phone: | Email: | | | | | | |
| 68. | Please provide the physical address of Physical Address: | the primary County wh | U | | | | | |
| | GPS Coordinates (decimal degree syst | `````````````````````````````````````` | | | | | | |
| 69. | Please provide contact information and Name: | l license number of the | person(s) that | removes refrigerar | | | | |
| | Refrigerant Extraction License #: | | | | License #: | | | |
| | | | | ing Address: | | | | |
| | Phone: Email: | | | | Email: | | | |
| 70 | Provide the types and amounts of refri | | | | | | | |
| 70. | Type of Refrigerants Remov | - | Amount | | | | | |
| | | | | | | | | |
| 71. | Refrigerants may be recycled or sent for Business Name and Phon | | | nethod of disposal d of Disposal | and amount earned / I | - Y | | |
| | Dusiness Ivanie and I non | e Number | Ivictiio | u of Disposal | Amount Earneu | Amount Faiu | | |
| | | | | | | | | |
| | | | | | | | | |
| 72. | Tons of white goods received: | | I | | | 1 | | |
| | Tons of white goods from cleanup act | | | | _ | | | |
| | Total Tons (also list in #44 on page 5) | : 0.00 | | Reported in #44 of | on page 5? 🗌 Yes | No No | | |
| 73. | NCDOR White Goods Disposal Tax P Total (Aug, Nov, Feb and May) | | ^{\$} 959.98 | | | | | |
| | Monies earned from the sale of white | goods | \$ | | | | | |
| | Monies earned from the sale of extrac | ted refrigerants | \$ | | | | | |
| | Monies from other sources | | | | | | | |
| | T 1 D | | | | | | | |
| | Total Revenue: | | \$ 959.98 | | | | | |
| 74. | Total Revenue: The NCGS Management of Discarded of discarded white goods. Provide the | | that the white | goods tax proceeds | | | | |
| 74. | The NCGS Management of Discarded | | that the white | goods tax proceeds | | | | |
| 74. | The NCGS Management of Discarded of discarded white goods. Provide the | amounts and types of e | that the white | goods tax proceeds | | | | |

| 2020-2021 Local Government Annual Report <i>Report Due Date: September 1, 2021</i> Submit to: Lgteam@ncdenr.gov Page 9 of |
|---|
|---|

§ 959.98

\$_____

describe:

Other:

Total Expenditures:

| SC | RAP TIRES | | | | | | | |
|------------|--|----------------|----------------------|------|--|--|--|--|
| 75. | | | | | | | | |
| | Name: | | | | | | | |
| | Mailing Address: City: | | Zip: | | | | | |
| | Phone: Email: | | | | | | | |
| 76. 77. | Please provide the physical address of the primary scrap tire collection site. | | | | | | | |
| | Physical Address: | | | | | | | |
| | GPS Coordinates (decimal degree system): | | | | | | | |
| | Scrap Tire Management Program - Tons Collected July 1, 2020 - June 30, 2021 | | | | | | | |
| | Tons of scrap tires certified as originated in NC in the normal course of business | | Tons | | | | | |
| | Tons of scrap tires from cleanup activities - costs reimbursed by DEQ | | Tons | | | | | |
| | Tons of scrap tires from fees charged | | Tons | | | | | |
| | Tons of scrap tires no fees charged - costs not reimbursed by DEQ Total Tons: | | Tons | | | | | |
| | | 0.00 | Tons | Tons | | | | |
| 78. | Indicate the types of scrap tires received: | | | | | | | |
| | Passenger% Truck% Off-Road% Agricultural | % Cle | eanup % Out of State | e% | | | | |
| 79. | Scrap Tire Management Program - Revenue July 1, 2020 - June 30, 2021 | | | | | | | |
| | NCDOR Scrap Tire Disposal Tax Proceeds Distributions Total (Aug, Nov, Feb, N | | | | | | | |
| | Scrap Tire Disposal Account Fund Grants (if applicable: Jul and Jan) Scrap Tire Cleanup Reimbursements from DEQ: | | | | | | | |
| | Scrap Tire fees collected: | \$ | | | | | | |
| | Total Revenue: | \$ 0.00 |) | | | | | |
| | | \$ <u></u> | | | | | | |
| 80. | Scrap Tire Management Program - Expenditures July 1, 2020 - June 30, 2021 | | | | | | | |
| | FY contract cost for disposal/processing: | | | | | | | |
| | FY contract cost for shipping - if known: Additional scrap tire management program costs: describe: | | | | | | | |
| | Total Expenditures: 0.00 | | | | | | | |
| | | | | | | | | |
| | Contract cost per ton for disposal/processing: | | | | | | | |
| 81. | Scrap Tire Disposal/Processing Company | | | | | | | |
| | Company Name: Phone: | I | Email: | | | | | |
| | Physical Address: | | | | | | | |
| 82. | If scrap tires were not hauled off site for treatment or disposal in a tire monofill, with a MSW landfill? Yes No If yes, how many tons? | | and disposed of | | | | | |
| 83. | Suggestions for scrap tire disposal tax proceeds distribution alternatives: | | | | | | | |
| 84. | Scrap tire management program limitations, other than money: | | | | | | | |
| MA | ANAGEMENT OF ABANDONED MANUFACTURED HOMES | BY COUN | TIES | | | | | |
| 85. | Has your county considered whether to implement a program for the management of abandoned manufactured homes? 🗌 Yes 🔀 N | | | | | | | |
| | If yes, has your county developed a written plan for the management of abandone | ed manufacture | ed homes? Yes No | | | | | |

| Part IX. Disaster Preparedness - COUNTIES and MUNICIPALITIES | | | | | | | | |
|---|---|--|--|-----------|--|--|--|--|
| TEMPORARY DISASTER DEBRIS STAGING SITES | | | | | | | | |
| 86. | Does your local government have a plan in place for management of disaster debris? 🗌 Yes 🛛 No | | | | | | | |
| If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies: | | | | | | | | |
| 87. | If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? | | | | | | | |
| 88. | your local government: | | he person(s) in charge of the disaster debris management program for | | | | | |
| | Name: | Name: | | Name: | | | | |
| | Phone: | Phone: | | Phone: | | | | |
| | E-mail: | E-mail: | | E-mail: | | | | |
| 89. Please list the temporary disaster debris staging sites in your county or municipality which have been reviewed for conflicts with Natural Heritage Program (NHP) and the State Historic Preservation Office (SHPO) through coordination with the Solid Waste 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 s 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 | | | | |
| | | | - | | | | | |
| | | | | | | | | |
| | | | - | | | | | |
| | | | - | | | | | |
| 90. | . Does your plan address the management of: Household hazardous waste Mass animal mortality Abandoned vessels | | | | | | | |
| 91. | . Does your plan include coordination with NC DOT on clearing roads and waste in the right of way? Yes No | | | | | | | |
| | | Part X. Co | omments | | | | | |
| prog | gram since last year? Do you | any info provided in your report as neces expect upcoming changes to your progr that affect your programs? You may sub | ams? How were your pro | | | | | |

Editor's Note (TN): Put total cost from 64 into 66.

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

Tara Nattress, email: tara.nattress@ncdenr.gov phone 919-707-8123 Carol Abken, email: carol.abken@ncdenr.gov phone: 919-707-8138

THIS FORM IS DUE SEPTEMBER 1, 2021

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



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