

#### **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



**Required** - Enter Your Local Government Name:

Elizabethtown

## **State of North Carolina**

Local Government Report Form

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

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

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

		Please submit this form to Lgtea	m@ncdenr.gov by Septemb	er 1, 2017.	
	If you have questions	s or need assistance completin	ng this form, please call 91	!9-707-8121 c	or 919-707-8139.
Pe	rson Completing This Report: M	lichael Munford	Tit	le: Administrat	tive Coordinator
Ma	niling Address: P.O. Box 700		City: Elizabethtown		Zip: 28337
Ph	one: (910) 862-2035 x3	Fax: (910) 862-6151		Date: 8/30/2	017
En	nail: mmunford@elizabethtownn	c.org			
		Genera	al Instructions		
	ase remember that the time perio a specific question.	d for the report is JULY 1, 2016	through JUNE 30, 2017. Pl	ease check "No	o" if you have nothing to report
1.	Did your local government ha	ve a Recycling Coordinator or si	imilar position for FY 16-17?	Yes	⊠ No
	Name Recycling Coordinator	(if different from person comple	eting this report.)		
	Name:		Tit	le:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
2.	Did your local government ha	ve a Solid Waste Director or sim	nilar position for FY 16-17?	Yes	No No
	If Yes, Name:		Tit	le:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
3.	Did your local government has	ve <b>dedicated or part-time</b> Solid	d Waste Enforcement Staff fo	or FY 16-17?	Yes No
	If Yes, Name:		Tit	le:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
4.	Did your local government ha all that apply)	ve solid waste ordinances in plac	ce addressing any of the follo	wing during FY	Y 16-17? (if yes, please check
	∑ Disposal Bans ∑	Illegal Dumping	g Other, Please Describ	e:	
5.	Did your local government ma mulching, composting)?	anage, provide or contract for an	y solid waste services in FY	16-17 (e.g., col	lection, disposal, recycling,
	If you answer	"No" to question 5, the repor	t is complete, please email	to Lgteam@no	cdenr.gov.

#### Part I. Waste Reduction and Recycling Programs Serving Government Facilities The following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. Did your local government have a recycling program in place for collecting recyclable materials generated at Yes X No public buildings in FY 16-17? 7. Did your local government have any program or policy encouraging or requiring local agencies to X No purchase products with recycled content? Did your local government have a program in place to collect and recycle spent fluorescent lights X No | Yes generated from the public buildings and facilities that were operated by your government in FY 16-17? Part II. Waste Reduction and Recycling Programs Serving the Public SOURCE REDUCTION / REUSE Did your local government have a backyard composting program? Yes X No If yes, please check all backyard composting activities that apply: Education Demonstration site(s) Bin distribution/sales Number of Bins distributed? Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes X No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives? Did your local government offer a waste exchange or reuse program? Yes X No 13 If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public: Paint exchange Number of gallons recovered? Swap shop/shed Number of sheds in use? Other (e.g. pallet exchange, etc.) PUBLIC RECYCLING SERVICES Which of the following responses best describes your recyclables recovery activities for the period July 1, 2016 through June 30, 2017? My local government **DID operate or contract** for a recyclables recovery program. (please continue to question 15) My local government DID NOT operate or contract for recyclables recovery BUT DID participate in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; then go to Part IV on page 7.) With which local government did you participate? My local government **DID NOT operate**, **contract or participate** in a recycling program. (**Go to Part IV on page 7**.) If your local government **DID** operate or contract for a recyclables recovery program, please indicate in the following sections the type of program in operation and provide specifics about your program(s). **CURBSIDE RECYCLING PROGRAM** Did your government operate a Curbside Recycling Program? X Yes No, skip to question # 25 Who collected the recyclable materials for your local government's curbside recycling program? 16. Local government employees Private contractor (please specify) Waste Industries Franchised hauler (please specify) Other (please specify)

1/.	Please provide the following information about your community:
	a. Total number of households in your jurisdiction? 2,044
	b. Number of households eligible to participate in the curbside recycling program: 2,044
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 1,219
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:
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
	use answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any erials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.  Did your community operate an electronics recycling program in FY 16-17? Yes No, skip to question # 38
32.	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 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 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: \$
	Electronics Management Funds received from DEQ during FY 16-17 (Feb 2017 distribution): \$
	Electronics Management Funds spent during FY 16-17: \$
	Electronics Management Fund balance as of June 30, 2017: \$
36.	Briefly explain how Electronics Management Funds were spent during FY 2016-17 (please list items purchased if applicable):
37.	If you did operate an electronics recycling program, please provide the following information about your vendor / contractor:  Name of electronics recycling vendor(s) during FY 16-17:
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?
OT	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 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.
	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? $\  \  \  \  \  \  \  \  \  \  \  \  \ $
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? $\square$ Yes $\bowtie$ 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 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? $\square$ Yes
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)
	□ Athletic Field /Venue 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.
	6

#### 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

DD OCD AND	Cu	ırbside		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:	<u> </u>						
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans							
Steel Cans							
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)							
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper							
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled tons-check al items collected above		90.46					90.46
TOTAL TONS:		90.46					90.46
<u> </u>							

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

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

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

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

No.

sites

Please report in indicated units.

gallons

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

Yes

Materials from Citizens by Material Type

Used Motor Oil

material from the public?

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

All governments answering "Yes" to question # 5 on page 1 should complete the rest of the report with the exception of PART VIII which is only to be completed by Counties.

		Part IV. Yard Waste,	Mul	ching and <b>(</b>	Compostin	g Managem	ent
ınpe	ermitted sites an	rns management of vegetative mat ad it is illegal to burn. Composting ment of vegetative materials. Do not	and mi	ılching are popi	ılar manageme	nt options. Please	answer the questions below
49. 50. 51.	checking all the Did a storm ev What quantitie	al government operate a yard waste p at apply:  Collected curbside ent significantly impact the amount of s of materials were managed by your rial (yard waste, brush, limbs, leave	Collectof yard w	ted at convenien waste your gove raste program?	ce center Rrnment manage	eceived at yard w d during FY 16-1' aation in TONS <u>C</u>	7? Yes No  OR CUBIC YARDS of
		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 facility					
	Other public m	ulch or compost facility	$\boxtimes$	860.13		Bladen County Solid W	aste, Elizabethtown, NC 28337
	Private mulch	or compost facility					
	Land clearing a	and inert debris landfill (LCID)					
	Energy / Fuel U	Use (e.g. boiler fuel market)					
		Total		860.13			
	estimate yard v	E MANAGEMENT FORMULA: If waste volume. Calculate for each trued by program in the appropriate box	ck used	in your yard waye. Ex. $10 \text{ yd}^3$	ste managemen	t program, and the	en enter the grand total $yd^3$
	Size of Truc	X Avg. no. of times truck	fills each	XX	truck is used during	g vear	yd³ yd³
	Size of True			Vaste Colle			
This	section concern	s your local government's provision					
52.	Please complet	te the following table about your gov				1.	
	Sector	Who Collects Solid Waste? Insert Letter - see codes at right			aht Willo Co	ollects Solid Waste?	How is Solid Waste Collected?
	Residential			1 Secondary	b. By Co	ontract	s 1. Once a week at household 2. Twice a week at household
	Commercial	Primary b Secondary b Prin	nary	1 Secondary	d. Local	nise haulers government not	<ul><li>3. Convenience center/greenbox</li><li>4. As needed or by request</li></ul>
	Industrial	Primary b Secondary b Prin	nary	1 Secondary	involv 1 servic	red in provision of e	5. Daily 6. Other
53.	If you provide	residential waste collection at single	-family	households in y	our jurisdiction,	, please answer the	e following questions:
	What type of c	ollection method is used?	ılly Aut	omated S	Semi-Automated	d Manual	Don't know
	What is the sta	ndard collection frequency? 🛛 W	eekly	Two tim	es per week	Other	
	What is the typ	pical service point for single family h	ousehol	ld waste?	Curbside [	Back yard / Ba	ck door
	What type of c	ollection container is used? 🛛 G	overnm	ent-provided car	ts Reside	ent-provided conta	ainer Bags
	Do you offer b	ulky waste collection services?	Yes	☐ No			
54.		ties - did your government collect witte goods delivered to the county for	_		Yes No	No	
		Part VI. Solid Was	te and	d Recycling	Education	nal Activitie	S
55.	Did <b>your local</b> issues / activiti	government have an education pro	gram to	• •	specifically abo		
56.	Please estimate	e your annual budget for solid waste	related	education and or	ıtreach activitie	s: \$	
57.	Does your com	nmunity produce recycling education	and out	treach materials	in languages be	sides English?	Yes No
	If YES, please	list other languages used:					
58.	Please provide	your recycling website address and	public i	nformation phon	e number if app	olicable.	
	Website:					Phone #:	

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

00	ficient resources availab estions deal with funding					v	these programs.     1	the following
_	Did your local governm						Yes No	,
60.	With regards to funding	g sources, check all	that apply to your l	ocal gover	nment:	_		
	Tipping fees		☐ Volume/we	-	fees (e.g	_	re tax	
		es / general fund		yclables			hite Goods tax	
61	<ul><li>✓ Per househo</li><li>NC Solid Waste Dispos</li></ul>	_	Grants  e distributed to eligi	ible local σ	overnme		isposal Tax sis by the Departm	nent of Revenue
01.	According to GS 105-1	87.63 these funds r	nust be used by a ci					
	How are disposal tax d	_			<b>5</b> 00			
62.	If applicable, please pr			_				
	a. \$	•	1	_		old		
		_	1	•		old		
	c. \$ \frac{6.15}{}	per Month	1	per	Househo	old	for yard waste	
	d. \$	per		per			for bulky wast	e
	e. \$	per		per			availability fee	<u> </u>
						old		
63.	Did your local government					garbage during FY 1	6-17? (a system v	where residents
	are charged a fee by we	eight or volume for	the amount of trash	they disca	rd)	☐ Yes ⊠	No	
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct	full cos	t accounting annual	ly and to develop	a system to
	If your local government		d waste or recycling	y services	nlease re	nort the annual contr	act amount	
01.	\$	ne contracts for son	For solid waste s			port the difficult contr	act annount.	
	\$		For recycling per	•	jour			
	Ψ		OR	year				
	\$230,000		Combined Contr	act (solid w	vaste and	l recycling)		
<b>6</b> 5		1	_					1
05.	Collection Programs: P collection programs for							
	not available, please r		•	_				
		# of Households served	Tons Collected	Collection	on Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
N	Iunicipal Solid Waste*	1,219	2,378.16		24,178.5	110,582.2	146,181.7	6
	Recycling Program**		90.46		3,948.75	215.55	4,164.3	40
	Yard Waste Program	1,219	860.13	,	7,472.25	2,232.9	9,705.15	1
	Totals	(calculated by form):	3,328.75		35,599.5	113,030.65	160,051.15	48
	*for materials collected and	l sent for eventual dispo	sal in a Municipal Solid	Waste or Con	struction a	nd Demolition Landfill.		
	**for materials collected by							
66.	If your government ope							
	facility operations (roun proportionately. Land		). If budgets for dif			-	-	osts
		sfer Station Budget	•					
		Waste / Compost 1	•					
		cling Facility Budg						
67	-		· .			1	- 16 179 °	
σ/.	What was your government	nent s total combin	eu annuar buaget fo	n am soma v	waste and	i recycling services i	п 10-1/; Ф	

### **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 e-ma	il of person r	esponsi			
	Name: Michael Munford				dministrative Coordin	
	Address: 305 W. Swanzy St.	-	·	abethtown	Zip: <u>NC</u>	
	Telephone: 9108622035 Fax: 9108626151	1		Email: mmunford(	@elizabethtownnc.org	
69.	Please provide the physical address of the primary coun Street 1: 1522 Mercer Mill Rd.	nty white good	ds colle	ection site.		
	Street 2:					
	City: Elizabethtown		State:	North Carolina	Zip: 283	37
70.	Please provide the name of the business or person that r Name:		_		m white goods.	
	Street:					
	City:	_		North Carolina		
	Phone: Fax:		Email:			
71.	Give amounts / types of CFCs removed. Attach records	of CFC remo	oval, an	d copy of certificati	1 ,,1	ming extraction.
	Type of CFC Removed				Amount	
		0.01 11	<u> </u>		1, 0	~
72.	CFCs may be recycled or sent for destruction. Give nan			f Disposal	Amount Earned	Amount Spent
		1,10		2250000		Tanouno Spono
73.	Please report the tonnage of white goods collected during white goods tonnage reported on page 5? Yes	ng FY 2016-1	7 in the	e Recycling Tonnag	es table on page 5 (qu	estion # 45). Was
74.	List the amount of revenue for the white goods program	n by source:				
	Revenue collected from sale of scrap:	\$				
	Revenue collected from White Goods Tax Distributions	s: \$				
	Revenue from other source (e.g. grants):					
	Total Revenue:					
75.	According to the White Goods Law, White Good Tax I expenditures White Good Tax Distributions were used to					mounts and types of
	Operational Expenses: \$					
	Clean-up of Illegal White Goods Dumps: \$					
_	Total Expenditures: \$					

<b>SC</b> .	RAP TIRES					
76.	Please provide name, address, phone number, and e-Name:	•	•			
	Address:				Zip:	
	Telephone: Fax:		Email	l:		
77.	Please provide the physical address of the primary c Street 1:	_				
	Street 2:					
	City:		State: North	Carolina	Zip:	
78.	Tonnage/Number of scrap tires disposed July 1, 201  Tons o	6-June 30, 2017 (	excluding tire	es from cleanup of n Number of tires	uisance sites)	
79.	Tonnage/Number of scrap tires disposed from clean Tons o		nty designate	d nuisance sites Number of tires		
80.	Indicate the types of tires collected by the county: Passenger % Heavy To	ruck	%	Large Off-Road		_ %
81.	List the amount of revenue for the scrap tire program	•				
	Revenue from Scrap Tire Tax Distributions:					
	Revenue from Tire Fees:					
	Revenue from Scrap Tire Clean-up Reimbursement	s: \$				
	Revenue from Scrap Tire Cost-Overrun Grants:	\$				
	Total Revenue:	\$				
82.	County's total scrap tire program contract expenditu excluding costs of nuisance tire cleanups, for FY 16	re (contract dispos -17.	sal/hauling co	osts),		
83.	County's additional scrap tire program expenditure ( Labor \$		ience center o	cost), if any.		
	Site Cost \$					
	Other \$	descr	ribe Other: _			
84.	County's contract cost for scrap tire disposal. \$	/ To	on; \$	/ Tire		
85.	Hauling cost or fuel surcharge, if not included in co	ntract cost above	. \$	/ Ton; \$	/ Tire	
86.	Total tipping fees collected for tires not eligible for	free disposal. \$ _				
87.	Total number of tires collected not eligible for free	disposal:				
88.	If scrap tires were not hauled off site by contracted s	service provider, v	vere they cut	and disposed in a lo	cal landfill? Yes	No
89.	Name of tire disposal/recycling firm(s):					
TE	MPORARY DISASTER DEBRIS STAGI	NG SITES				
90.	Does your local government have a plan in place for	management of o	disaster debri	s? Xes	☐ No	
	If yes, indicate if the plan is a stand-alone plan or in	conjunction with	local govern	ment agencies:	Stand-alone   In	conjunction
91.	If you indicated having a plan, has the plan been rev requirements for public assistance reimbursement in			nagement or FEMA  Yes	to ensure it meets the	e basic
92.	Please list the name, contact numbers(s), and e-mail	address of the per	rson(s) in cha	arge of the disaster de	ebris management pro	ogram for
	your local government:  Name: Pat DeVane  Name	e: Michael Munf	ford	Name: Do	on Edwards	
		ne: 9108622035		Phone: 91		
		ail: mmunford@eliza	bethtownnc.org		lwards@elizabethtownnc.o	org

Disaster Site #	Site Name	Disaster Site #	Site Name
Does your plan address the m	nanagement of household hazardou	as waste and white goods following	a disaster? Yes X No
Does your plan address mass	animal mortality? Yes	⊠ No	
NAGEMENT OF ABA	NDONED MANUFACTU	RED HOMES BY COUNTIE	ES
Has your county considered	whether to implement a program for	or the management of abandoned ma	nnufactured homes? \(\begin{aligned}\text{Yes}\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
If yes, has your county devel	oped a written plan for the manage	ement of abandoned manufactured h	nomes? Yes No
	Part IX.	Comments	

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-assistance</a> or e-mail us at Lgteam@ncdenr.gov

