State of North Carolina



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

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

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

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

Instructions:

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

Options for obtaining a blank copy of this form:

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

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

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

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

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

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

Form Year

Environmental Quality

Required - Enter Your Local Government Name: CONNELLY SPRINGS

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

Ν	IANDATE TO THE STATE	AS REQUIRED BY G.S.	130A-309.09A	Α.			
	Please submit this form to L	gteam@ncdenr.gov by Septembe	r 1, 2017.				
If you have qu	lestions or need assistance comp	leting this form, please call 91	9-707-8121 or 9	019-707-8139.			
Person Completing This Re	port: TAMARA BROOKS	Title	e: TOWN CLER	K			
Mailing Address: PO BOX	99	City: CONNELLY SPRI	NGS	Zip: 28612			
Phone: 828-879-2321	Fax: 828-879-2325		Date: 09/22/201	17			
Email: clerk@ci.connelly-s	prings.nc.us						
	Gei	neral Instructions					
	ne period for the report is JULY 1, 2	016 through JUNE 30, 2017. Ple	ase check "No" i	f you have nothing to report			
 for a specific question. Did your local govern 	ment have a Recycling Coordinator	or similar position for EV 16 179	X Yes	No			
		•					
Name Recycling Coor	Name Recycling Coordinator (if different from person completing this report.)						
Name:		Title	Title:				
Address:		City:		Zip:			
Telephone:	Fax:	Email:					
2. Did your local govern	ment have a Solid Waste Director or	similar position for FY 16-17?	Yes	No			
If Yes, Name:		Title	2:				
Address:		City:		Zip:			
Telephone:	Fax:	Email:					
3. Did your local govern	ment have dedicated or part-time S	olid Waste Enforcement Staff for	FY 16-17?] Yes 🛛 No			
If Yes, Name:		Title	2:				
Address:		City:		Zip:			
Telephone:	Fax:	Email:					
4. Did your local govern all that apply)	ment have solid waste ordinances in	place addressing any of the follow	ving during FY 1	6-17? (if yes, please check			
Disposal Ban	Illegal Dumping	ring Other, Please Describe	2:				
5. Did your local govern mulching, composting	ment manage, provide or contract for)?	r any solid waste services in FY 1		tion, 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
The	following questions pertain to waste reduction and recycling activities / programs that serve local government facilities.
6.	Did your local government have a recycling program in place for collecting recyclable materials generated at \bigotimes Yes Dublic buildings in FY 16-17?
7.	Did your local government have any program or policy encouraging or requiring local agencies to Yes No purchase products with recycled content?
8.	Did your local government have a program in place to collect and recycle spent fluorescent lights generated from the public buildings and facilities that were operated by your government in FY 16-17?
	Part II. Waste Reduction and Recycling Programs Serving the Public
SO	URCE REDUCTION / REUSE
9.	Did your local government have a backyard composting program? Yes No
10.	If yes, please check all backyard composting activities that apply:
	Education Demonstration site(s) Bin distribution/sales Number of Bins distributed?
11.	Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives?
12.	Did your local government offer a waste exchange or reuse program? Yes No
13	If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public:
	Swap shop/shed Number of sheds in use? Paint exchange Number of gallons recovered?
	Other (e.g. pallet exchange, etc.)
PU	BLIC RECYCLING SERVICES
14.	Which of the following responses best describes your recyclables recovery activities for the period July 1, 2016 through June 30, 2017?
	My local government DID operate or contract for a recyclables recovery program. (please continue to question 15)
	My local government DID NOT operate or contract for recyclables recovery BUT DID participate in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; then go to Part IV on page 7 .)
	With which local government did you participate?
	My local government DID NOT operate, contract or participate in a recycling program. (Go to Part IV on page 7 .)
	our local government DID operate or contract for a recyclables recovery program, please indicate in the owing sections the type of program in operation and provide specifics about your program(s).
CU	RBSIDE RECYCLING PROGRAM
15.	Did your government operate a Curbside Recycling Program? 🗌 Yes 🛛 🕅 No, skip to question # 25
16.	Who collected the recyclable materials for your local government's curbside recycling program?
	Local government employees
	Private contractor (please specify)
	Franchised hauler (please specify)
	Other (please specify)

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction?				
	b. Number of households eligible to participate in the curbside recycling program:				
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary):				
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				
19.	What sector(s) of your community was served by the curbside recycling program?				
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served:				
21.	How frequently were the curbside recyclables collected?				
22.	Other				
23.	Please describe the method / style of recyclable materials handling: Curb-sort (collector separates material as collected) dual / two stream Curb-sort (collector separates material as collected) Curb-sort (collector separates material as collecte				
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used: Iss than 50 gallon cart 65 gallon cart 95 gallon cart multiple sizes of cart available				
DR	OP-OFF RECYCLING PROGRAM				
25.	Did your government operate a Drop-off Recycling Program? Xes 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 REPUBLIC SERVICES 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. 761				
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: 1				
31.	How many of these locations were staffed with attendants? All None Some please list # of staffed sites:				
EL	ECTRONICS RECYCLING PROGRAM				
	se answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any rials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.				
32.	Did your community operate an electronics recycling program in FY 16-17? 🗌 Yes 🛛 No, skip to question # 38				
	If you did operate an electronics recycling program, please indicate style of program:				
	Permanent - Curbside Collection Permanent - Drop-off Scheduled Collection Day or Event Part of HHW Program				
	If you offer curbside collection of electronics is it: by appointment or unscheduled				
	If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:				

33.	Did your electronics	recycling program	n collect or accep	t televisions from	(check all that ap	oply):	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?

OTHER PUBLIC RECYCLING PROGRAMS

Please answer the following questions about local government sponsored recycling efforts. List only programs operated or contract	ted for <u>by</u>
the local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the	he
Recycling Tonnages Chart on pg 5.	

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

40.	Does your local government	t provide recycling se	ervices to Alcoholic	Beverage Commission	permit holders?	Yes	🔀 No
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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 go	overnment have an ordinand	ce regulating the o	construction and dem	olition waste stre	am 🗌 Ves	No No
	with the intention	of encouraging or requiring	g waste reduction	or recycling of these	materials?	105	

43. Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 16-17. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)

Public Parks Recycling Program	Athletic Field /Venue Recycling Program

- Pedestrian Recycling Program
 Recycling Service for Special Events / Festivals
- 44. Please identify all "Other" programs or services operated by your government during FY 16-17. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
 - Public School Recycling Program
 - Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)
 - Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events
 - Organics / Food Waste Recycling other than yard waste program
 - Oyster Shell Recycling Program
 - Other Programs (please specify)

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

RECYCLING TONNAGES FROM PUBLIC PROGRAMS

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

DDOCDAM	Curbside		Drop-off		All "O	ther" Programs	Total Tons	
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	🛛 if Yes	Tons	(totals are calculated by form)	
GLASS:								
Clear			\square					
Brown								
Green								
Mixed								
PLASTIC:								
PET #1								
HDPE #2								
All Plastic Bottles								
Other Plastic Containers								
Bulky Rigid Plastics								
METAL:								
Aluminum Cans			\square					
Steel Cans								
White Goods								
Other Metal								
PAPER:								
Newsprint (ONP)			\square					
Cardboard (OCC)			\square	3.1			3.1	
Magazines (OMG)			\square					
Office Paper			\square					
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								
Comminated tong at111								
Commingled tons-check all items collected above			\square	13.29			13.29	
TOTAL TONS:				16.39			16.39	

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.

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

Part III. Special Waste Collections

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

a		**7 4	A H U			36 / 13	A H A H			A H H	D	
S	pecial	Waste	Collections	(Do No	t Include	Materials	Collected	as part of	t an HHW	Collection	Program	or Event)

4

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

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is only to be completed by Counties.

Part IV. Yard Waste, Mulching and Composting Management

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

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

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

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

		_ X	X				yd^3				
	Size of Truck (in yards)	Avg. no. of times truck fills each w	week # of weeks t	ruck is used during year	•	TOTAL					
	Part V. Solid Waste Collection Services										
This .	section concerns your local g	government's provision of solid w	waste (garbage)	collection services							
52.	2. Please complete the following table about your government's solid waste collection system.										

Sector					How is Solid Waste Collected?				Who Collects Solid Waste?	How is Solid Waste Collected?							
	Sector	Insert L	Letter -	see codes	s at right	Inse	rt # - se	ee codes at 1	right	a. Local government employees	1. Once a week at household						
	Residential	Primary	В	Secondary		Primary	1	Secondary		b. By Contract c. Franchise haulers	 Twice a week at household Convenience center/greenbox 						
	Commercial	Primary	d	Secondary		Primary		Secondary		d. Local government not 4. As needed or by request involved in provision of 5. Daily							
	Industrial	Primary	d	Secondary		Primary		Secondary		service 6. Other							
53.	3. If you provide <u>residential</u> waste collection at single-family households in your jurisdiction, please answer the following questions:																
	What type of collection method is used? 🛛 Fully Automated 🗌 Semi-Automated 🗌 Manual 🗌 Don't know																
	What is the standard collection frequency? \square Weekly \square Two times per week \square Other																
	What is the typical service point for single family household waste? 🛛 🖾 Curbside 🗌 Back yard / Back door																
	What type of collection container is used? 🔀 Government-provided carts 🗌 Resident-provided container 🗌 Bags																
	Do you offer b	ulky was	ste coll	ection ser	vices?	Y	es	No No									
54.	For municipality		•	-						les 🛛 No							
	If so, were whi	te goods	s delive	ered to the	county 1	tor mark	teting?	Yes		No							
]	Part	VI. So	lid W	aste a	nd F	Recycling	g Edu	icational Activities	5						
55.	•	-	ment l	nave an ed	lucation	program	to inf	orm citizens	s specifi	cally about solid waste mar	nagement and / or recycling						
	issues / activiti	es?	Ŷ	'es 🖂	No (I	f No, sk	ip to P	art VII, pag	e 8)								
56.	Please estimate	your an	nnual b	udget for	solid wa	ste relat	ed edu	cation and c	outreach	activities: \$							
57.	Does your com	munity	produc	e recyclin	ng educat	ion and	outrea	ch materials	s in lang	uages besides English?	Yes No						
	If YES, please	list othe	r langu	lages used	l:												
58.	Please provide	your rec	cycling	website a	address a	nd publi	ic info	rmation pho	ne numl	ber if applicable.							
	Website: Phone #:																

	Part VII	. Resources f	or Solid Was	te Manageme	nt and Full C	ost Accounti	ng				
	ficient resources availab stions deal with funding					these programs. T	The following				
59. 60.	 59. Did your local government operate an Enterprise Fund for solid waste services in FY 16-17? Yes No 60. With regards to funding sources, check all that apply to your local government: 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 Disposal Tax 61. NC Solid Waste Disposal Tax proceeds are distributed to eligible local governments on a quarterly basis by the Department of According to GS 105-187.63 these funds must be used by a city of county solely for solid waste management programs and ser How are disposal tax distributions being used? 										
60	-	•		¢ 45.00		<i>c 1</i> , <i>1</i>					
62.	If applicable, please pr										
	b. \$	per		per		for recycling					
	c. \$	per		per		for yard waste					
	d. \$	per		per		for bulky wast	e				
	e. \$	per		per		availability fee	2				
63.	Did your local governn are charged a fee by we	nent operate a Pay-	As-You-Throw prog	gram for residential	garbage during FY		where residents				
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full cos	t accounting annua	lly and to develop	a system to				
	\$\$		For solid waste s For recycling pe OR Combined Contr	services per year r year ract (solid waste, and	d recycling)						
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials col							
	not a tanaste, prease r	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)				
N	Iunicipal Solid Waste*	761	545.1	66,773.34		66,773.34	122				
	Recycling Program **	761	16.39	4,440.5		4,440.5	270				
	Yard Waste Program										
		(calculated by form):	561.49	71,213.84		71,213.84	126				
66.	*for materials collected and sent for eventual disposal in a Municipal Solid Waste or Construction and Demolition Landfill. **for materials collected by public recycling programs including those services offered to commercial and industrial generators. Do not include special was 66. If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide total l facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate costs proportionately. Landfill Budget:										
	Tran	sfer Station Budget	: \$								
	Yard	Waste / Compost H	Facility Budget: \$								
	Recy	cling Facility Budg	get: \$								
67.	What was your governme	nent's total combine	ed annual budget fo	or all solid waste and	d recycling services	in 16-17? \$71,768					

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Part VIII. County Mandated Programs

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

WH	IITE GOODS										
68.	Please provide name, address, phone num		-								
	Name:										
	Address:				Zip:						
	Telephone: Fax	.:		Email:							
69.	Please provide the physical address of the	primary coun	ty white goo	ods collection site.							
	Street 1:										
	Street 2:										
	City:			State: North Carolina	a Zip:						
70.	Please provide the name of the business of	t person that re	emoves the	refrigerant gases (CFCs	s) from white goods.						
	Name:										
	Street:										
	City:				ı Zip:						
	Phone: Fax:			Email:							
71.	Give amounts / types of CFCs removed. A		of CFC rem	oval, and copy of certif	fication of person(s) perfo	orming extraction.					
	Type of CFC Remo	oved			Amount						
72.		CFCs may be recycled or sent for destruction. Give name of firm, disposal method and amount earned / spent for CFC disposal.									
	Firm		M	ethod of Disposal	Amount Earned	Amount Spent					
73.	Please report the tonnage of white goods c white goods tonnage reported on page 5?		-	17 in the Recycling To	nnages table on page 5 (q	uestion # 45). Was					
		Yes	No No								
74.	List the amount of revenue for the white g Revenue collected from sale of scrap:										
	Revenue collected from White Goods Tax	Distributions									
	Revenue from other source (e.g. grants):										
	Total Revenue:		\$								
75.	According to the White Goods Law, White expenditures White Good Tax Distribution					amounts and types of					
	Operational Expenses:	\$									
	Capital Improvements:	\$									
	Clean-up of Illegal White Goods Dumps:										
		\$									
201	16-2017 Local Government Annual Report	Report Due	Date: Septe	mber 1, 2017 Submit	t to: Lgteam@ncdenr.gov	Page 9 of 11					

76.	Please provide name, address, phone number, and e-	-	-				
	Name:				1itle:		
	Address:						
	Telephone: Fax:						
7.	Please provide the physical address of the primary c Street 1:	• 1					
	Street 2:						
	City:			North	Carolina	Zip:	
8.	Tonnage/Number of scrap tires disposed July 1, 201	6-June 30, 2	2017 (<u>excludi</u>	<u>ng</u> tire			
9.	Tonnage/Number of scrap tires disposed from clean Tons o	up of state of	or county desi	gnated			
80.	Indicate the types of tires collected by the county: Passenger % Heavy T			%	Large Off-Road		%
81.	List the amount of revenue for the scrap tire program Revenue from Scrap Tire Tax Distributions:	ф.		_			
	Revenue from Tire Fees:						
	Revenue from Scrap Tire Clean-up Reimbursement						
	Revenue from Scrap Tire Cost-Overrun Grants:	Φ					
	Total Revenue:	\$					
2.	County's total scrap tire program contract expenditu excluding costs of nuisance tire cleanups, for FY 16	re (contract -17.	disposal/hau	ing co	sts), §		
3.	County's additional scrap tire program expenditure (Labor \$		onvenience co	enter c	ost), if any.		
	Site Cost \$						
	Other \$		describe Oth	er:			
4.	County's contract cost for scrap tire disposal. \$		/ Ton; \$ _		/ Tire		
5.	Hauling cost or fuel surcharge, if not included in co	ntract cost	above. \$		/ Ton; \$	/ Tire	
6.	Total tipping fees collected for tires not eligible for	free disposa	ıl. \$				
37.	Total number of tires collected not eligible for free	disposal:					
8.	If scrap tires were not hauled off site by contracted s	service prov	ider, were the	ey cut a	and disposed in a loca	al landfill? 🕅 Ye	es 🗌 No
9.	Name of tire disposal/recycling firm(s):						
	MPORARY DISASTER DEBRIS STAGI						
0.	Does your local government have a plan in place for			debris	? Yes	No	
	If yes, indicate if the plan is a stand-alone plan or in	•					In conjuncti
1.	If you indicated having a plan, has the plan been rev requirements for public assistance reimbursement in				agement or FEMA to	ensure it meets t	he basic
2.	Please list the name, contact numbers(s), and e-mail your local government:		the person(s)	in cha	-	oris management j	program for
	Name: Nam				Name:		
	Phone: Phone				Phone:		
	E-mail: E-m	ail:			E-mail:		

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

	· · · · · · · · · · · · · · · · · · ·											
Disaster Site #	Site Name		Disaster Site #	Site Name								

-				**	-
MA	NAGEMENT OF ABANDONED MANUFAC	TURED HOMES BY COUNTIES			
95.	Does your plan address mass animal mortality?	No No			
94.	Does your plan address the management of household haz	Yes	No No		

96. Has your county considered whether to implement a program for the management of abandoned manufactured homes? 🛛 Yes 🗌 No

If yes, has your county developed a written plan for the management of abandoned manufactured homes? Yes

Part IX. Comments

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

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

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



No No