

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, 2017 -- June 30, 2018

Please submit this form to Lgteam@ncdenr.gov by September 1, 2018.

On the following pages you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2017-2018. 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, 2018.

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: https://get.adobe.com/reader/ - it is suggested that you complete the form using the latest version of Adobe Reader. Please DO NOT complete this form using Adobe Acrobat Pro.

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

After completing the report form, please submit a copy electronically to the Division of Environmental Assistance and Customer Service by attaching 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:

Wendy Worley, phone: 919-707-8136, email: wendy.worley@ncdenr.gov Matt James, phone: 919-707-8133, email: matt.james@ncdenr.gov

Form Year

2018



Local Government Report Form

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

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, 2017 -- June 30, 2018

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 Sep	tember 1, 2018.		
	If you have ques	tions or need assistance con	npleting this form, please c	all 919-707-813	6 or 919-707-8133.	
Per	son Completing This Repor	t: Cindy Moore		Title: Assistan	t to Town Clerk	
Ma	iling Address: PO Box 158		City: Bostic		Zip: 28018	
Pho	one: 828-245-5108	Fax: n/a		Date: 8/2	3/18	
Em	ail: townofbostic@nctv.cor	n				
		(General Instructions			
	ase remember that the time a specific question.	period for the report is JULY 1	, 2017 through JUNE 30, 201	8. Please check '	'No" if you have nothing to report	
 Did your local government have a Recycling Coordinator or similar position for FY 17-18? Yes 						
	Name Recycling Coordin	ator (if different from person c	completing this report.)			
	Name:					
	Address:		City:		Zip:	
	Telephone:	Fax:	Email:			
2.	Did your local government	nt have a Solid Waste Director	or similar position for FY 17	-18? Yes	No No	
	If Yes, Name:			Title:		
	Address:		City:		Zip:	
	Telephone:	Fax:	Email:			
3.	Did your local government	nt have dedicated or part-tim	e Solid Waste Enforcement S	taff for FY 17-18	? Yes No	
	If Yes, Name:			Title:		
	Address:		City:		Zip:	
	Telephone:	Fax:	Email:			
4.	Did your local governmentall that apply)	nt have solid waste ordinances	in place addressing any of the	e following during	g FY 17-18? (if yes, please check	
	Disposal Bans	☐ Illegal Dumping ☐ L	ittering Other, Please D	escribe:		
5.	Did your local government mulching, composting)?	nt manage, provide or contract	for any solid waste services is	n FY 17-18 (e.g., ⊠ Yes	collection, disposal, recycling,	
	If you ans	swer ''No'' to question 5, the	report is complete, please e	mail 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. Did your local government have a recycling program in place for collecting recyclable materials generated at Yes X No public buildings in FY 17-18? 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 17-18? 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, 2017 through June 30, 2018? 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? 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) 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 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) single stream / commingled dual / two stream don't know / other						
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						
DR	OP-OFF RECYCLING PROGRAM						
25.	Did your government operate a Drop-off Recycling Program?						
26.	Who collected the recyclable materials for your local government's drop-off recycling program? Local government employees Private contractor						
	Other (please specify) Contract with Rutherford County						
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program: source-separated (citizens separate materials by type) 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. 140						
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						
mate	Is answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any perials 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 17-18? 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 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 2018, please provide the following information							
	Electronics Management Fund balance as of July 1, 2017: \$							
	Electronics Management Funds received from DEQ during FY 17-18 (Feb 2018 distribution): \$							
	Electronics Management Funds spent during FY 17-18: \$							
	Electronics Management Fund balance as of June 30, 2018: \$							
36.	Briefly explain how Electronics Management Funds were spent during FY 2017-18 (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 17-18:							
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?							
OT	THER PUBLIC RECYCLING PROGRAMS							
the	ase answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ycling Tonnages Chart on pg 5.							
38. 39.	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? Yes No Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner							
	other than through your curbside or dropoff recycling programs? Yes No							
40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served:							
	Public drop-off recycling sites available for ABC On Premises Permit holders to use							
41.	Does your local government operate a program to recycle Construction and Demolition materials? Yes No If yes, please check all materials that were recycled and report tonnages in tonnage table on page 5:							
	☐ Clean Wood ☐ Brick, concrete, etc. ☐ Sheetrock ☐ Vinyl siding ☐ Shingles ☐ Metals ☐ Other							
42.	Does your local government have an ordinance regulating the construction and demolition waste stream with the intention of encouraging or requiring waste reduction or recycling of these materials? \square Yes							
43.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 17-18. (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 17-18. (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, 2017 through JUNE 30, 2018. 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

DDOCD AM	Curbside		D	rop-off	All "Other" Programs		Total Tons
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear							
Brown							
Green							
Mixed							
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans							
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 her	re 📙						
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling	g						
Commingled tons-check				7.1			7.1
items collected above TOTAL TONS:	+ - +			7.1			7.1
TOTAL TUNS:				/.1			7.1

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

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

Part III. Special Waste Collections

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

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

47.	7. Special Waste Programs for Collecting Materials from Citizens by Material Type Materials from Citizens Did program collect this material from the public? # of please report in indicate the public in the							
	Used Motor Oil	Yes	⊠ No				gallons	
	Used Oil Filters	Yes	⊠ No		barre	ls, or	lbs	
	Used Antifreeze	Yes	⊠ No			'	gallons	
	Batteries, Lead Acid	Yes	⊠ No		# ba	tteries, or	lbs	
	Batteries, Dry Cell	Yes	⊠ No				lbs	
	Fluorescent Bulbs/Lights Containing Mercury	Yes	⊠ No		11	bs, or	# bulbs	
	Propane Tanks	Yes	⊠ No		11	bs, or	# tanks	
	Used Cooking Oil / Waste Vegetable Oil	Yes	⊠ No		11	bs, or	gallons	
	Other Special Wastes - please provide waste type here:	Yes	⊠ No			·	lbs	
	Pesticide Containers (NCDA Program, not pesticides themselves)	Yes	⊠ No		11	bs, or	# containers	
	NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)	Yes	⊠ No				lbs	
	Latex Paint (do not include paint collected at HHW event or by a paint exchange program)	Yes	⊠ No		ا ا	gals, or	lbs	
	8. Did your local government operate a household hazardous waste collection program or event in FY 17-18? Yes No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event b. How many days was your HHW Program open to accept materials during this Fiscal Year? c. Did you partner or co-sponsor your HHW program with another local government? Yes No							
	Please list partner(s) d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year? e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)?							No
	f. Amounts of individual materials collected by about individual materials <u>is not</u> available, p Note, materials listed here should only be the	y HHW Progr lease simply	ram: if totals f provide total c	quantity	idual materials ar of materials colle	e known plea ected by HHV	W program in 48	g below.
	Used Motor Oil (gal)	Use	ed Oil Filters		_ # of Barrels, o	r	lbs.	
	Used Antifreeze (gal)	Lea	d Acid Batter	ies (lbs)	0	ther Batteries	s (lbs)	
	Fluorescent Bulbs / Lights Containing							
	g. Provide Total Quantity of materials collected reported in 48f, please net the weight of thosh. Please list HHW Collection Contractor	e materials or	ut of the total	listed he	ere.			pound
	_							
	 i. Estimated cost of HHW / CESQG program of should have only been complete 					at they DO n	provide recycline	g sprvices
· ug	os s misougii o snoum nuve oniy ocen complet	on by govern	month circuit	ving in t	juosiivii # 17 III	u may DO p	normo recyclili)	Source

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.

		iv. Yard waste,							
	section concerns managem					•			
	ermitted sites and it is illega it your management of vegeto								
49.						_	ow yard waste is managed by		
47.			_			-	vaste, compost, or LCID faci		
50.	Did a storm event significar					•			
51.									
	organic material (yard wa	ste, brush, limbs, leav	es, etc.)	managed. For	conversion pur	•	<u> </u>		
	Destinat	tion	Check if used	Tons	Cubic Yards		Name and Location of Facility ag Vegetative Materials		
	End user (to farmer or home	e-owner)							
	Your local government's mu	ulch or compost facility							
	Other public mulch or comp	post facility							
	Private mulch or compost fa	acility							
	Land clearing and inert debr	ris landfill (LCID)							
	Energy / Fuel Use (e.g. boil	er fuel market)							
	Tota	l							
	YARD WASTE MANAGE								
	estimate yard waste volume								
	volume managed by program	m in the appropriate box	xes abov	e. <i>Ex. 10 ya</i> ³ X	truck x 3 aays/v	$vK \times 10 \ wKS = 480$	yd ³		
	Size of Truck (in yards)	Avg. no. of times truck	fills each		truck is used durin		TOTAL ya-		
	Size of Truck (iii yarus)				ction Servi				
This	saction concarns your local								
52.	•	section concerns your local government's provision of solid waste (garbage) collection services. Please complete the following table about your government's solid waste collection system.							
	Who Coll			lid Waste Coll	ootod2	ollects Solid Waste?	How is Solid Waste Collected		
			Insert #	- see codes at r	i aht		es 1. Once a week at household		
	Residential Primary b	Secondary Prin	mary 1	Secondary	b. By Co	ontract hise haulers	2. Twice a week at household3. Convenience center/greenbox		
	Commercial Primary	Secondary Prin	mary	Secondary	d. Local	government not yed in provision of	4. As needed or by request5. Daily		
	Industrial Primary	Secondary Prin	mary	Secondary	servic		6. Other		
53.	If you provide residential w	aste collection at single	-family l	households in y	our jurisdiction	, please answer th	e following questions:		
	What type of collection method is used? Fully Automated Semi-Automated Manual Don't know								
	What is the standard collect	tion frequency? 🛛 W	/eekly	☐ Two tim	nes per week	Other			
	What is the typical service point for single family household waste? Curbside Back yard / Back door								
	What type of collection con	tainer is used? G	overnme	ent-provided car	rts 🔀 Resid	ent-provided cont	ainer Bags		
	Do you offer bulky waste co	ollection services?	Yes	⊠ No					
54.	For municipalities - did you	ır government collect w	hite good	ds at the curb?	Yes	No			
	If so, were white goods deli	•		<u> </u>	☐ No				
		t VI. Solid Was		•	_				
55.	Did your local governmen issues / activities?	•	_	inform citizens o Part VII, page		out solid waste ma	inagement and / or recycling		
56.	Please estimate your annual	budget for solid waste	related e	education and o	utreach activitie	es: \$			
57.	Does your community produ	uce recycling education	and out	reach materials	in languages be	esides English?	Yes No		
	If YES, please list other lan	guages used:							
58.	Please provide your recyclin	ng website address and	public in	nformation phor	ne number if app	olicable.			
	Website:					Phone #:			

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

	ficient resources availab stions deal with funding					these programs. T	The following
60.	Per househo	g sources, check all s es / general fund old charges	that apply to your lower Volume/wes Sale of reco	local government: eight-based fees (e.g yclables	g. PAYT)	Yes No ire tax White Goods tax Disposal Tax	
61.	NC Solid Waste Dispos According to GS 105-1	87.63 these funds n	nust be used by a ci	ity of county solely			
60	How are disposal tax d	C			, , , , ,	C 1+1	
62.	a. \$\frac{114}{2}			-			
							;
	b. \$	per		per		for recycling	
	c. \$	per		per		for yard waste	
	d. \$	per		per		for bulky wast	e
	e. \$	per		per		availability fee	<u> </u>
	f. \$	per		per		total charge	
63.	Did your local governmare charged a fee by we			•		17-18? (a system v] No	where residents
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full cos	at accounting annua	lly and to develop	a system to
64.	If your local government	nt contracts for soli	d waste or recycling	g services, please re	port the annual cont	ract amount.	
	\$ <u>16,140</u>		_ For solid waste s	services per year			
	\$1,020		_ For recycling per	r year			
	do.		OR				
	\$		_	act (solid waste, and	• 0,		
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials col			
	, <u> </u>	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
M	Iunicipal Solid Waste*	120	71.07	16,140	4,406.34	20,546.34	289
	Recycling Program**						
	Yard Waste Program						
		(calculated by form):	71.07	16,140	ļI	20,546.34	289
*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 seem to the facility operations of the facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt the proportionately. Landfill Budget: \$					ity, please provide tempt to allocate co	total budget for	
	Trans	sfer Station Budget	: \$				
	Yard	Waste / Compost I	Facility Budget: \$				
		cling Facility Budg					
67.	What was your government	ment's total combine	ed annual budget fo	or all solid waste and	d recycling services	in 17-18? \$ <u>20,546</u> .	34

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, phor	ne number, and e	-mail of persor	respons	•	program.	
	Name:				Title: _		
	Address:		(City:		Zip:	
	Telephone:						
69.	Please provide the physical address	of the primary of	county white go	ods coll	ection site.		
	Street 1:						
	Street 2:						
	City:						
70.	Please provide the name of the bus Name:	-				om white goods.	
	Street:						
	City:			State:	North Carolina	Zip:	
	Phone:	Fax:		_ Email	:		
71.	Give amounts / types of CFCs reme		ords of CFC rea	moval, aı	nd copy of certificati		rming extraction.
	Type of CF(Removed				Amount	
				-			
				-			
72	CECs many have somethed an east form	lastmatica Cias		4:1		and for CE	C diamana1
72.	CFCs may be recycled or sent for o	lestruction. Give			f Disposal	Amount Earned	
					•		
73.	Please report the tonnage of white white goods tonnage reported on pa		_		e Recycling Tonnag	ges table on page 5 (qu	nestion # 45). Was
74.	List the amount of revenue for the	white goods prog	gram by source				
	Revenue collected from sale of scr	ap:	\$				
	Revenue collected from White Goo	ods Tax Distribut	tions: \$				
	Revenue from other source (e.g. gr	ants):	\$				
	Total Revenue:		\$				
75.	According to the White Goods Law expenditures White Good Tax Dist						mounts and types of
	Operational Expenses:	\$					
	Capital Improvements:						
	Clean-up of Illegal White Goods D						
	Total Expenditures:	\$					

SC.	RAP TIRES					
76.	Please provide name, address, phone number, and e-Name:					
	Address:					
	Telephone: Fax:		Emai	il:		
77.	Please provide the physical address of the primary c	ounty scrap tires	collection sit	te.		
	Street 1:					
	Street 2:					
	City:		State: North	n Carolina	Zip:	
78.	Tonnage/Number of scrap tires disposed July 1, 201 Tons o	7-June 30, 2018 (excluding tin	res from cleanup of nu _Number of tires	isance sites)	
79.	Tonnage/Number of scrap tires disposed from clean Tons o		nty designate	ed nuisance sites _Number of tires		
80.	Indicate the types of tires collected by the county: Passenger % Heavy Tr	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 17	re (contract dispo	sal/hauling c	costs),		
83.	County's additional scrap tire program expenditure (Labor \$		ience center	cost), if any.		
	Site Cost \$					
	Other \$	descr	ribe Other: _			
84.	County's contract cost for scrap tire disposal. \$	/ T	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					
88.	If scrap tires were not hauled off site by contracted s	service provider,	were they cu	t and disposed in a loca	al 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	disaster debr	ris? Yes	No	
	If yes, indicate if the plan is a stand-alone plan or in	conjunction with	local govern	nment agencies:	Stand-alone	
91.	If you indicated having a plan, has the plan been rev requirements for public assistance reimbursement in			anagement or FEMA to	o ensure it meets the basic No	
92.	Please list the name, contact numbers(s), and e-mail	address of the pe	rson(s) in ch	arge of the disaster del	bris management program for	
	your local government: Name: Name	ame: Name:				
		ne:				
	E-mail: E-m					

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 See 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			
94.	Does your plan address the	management of household hazarde	ous waste and white goods followir	ng a disaster? Yes No			
95.	Does your plan address mas	s animal mortality?	☐ No				
MA	NAGEMENT OF ABA	ANDONED MANUFACTU	RED HOMES BY COUNT	TIES			
96.			for the management of abandoned				
	If yes, has your county deve	eloped a written plan for the mana	gement of abandoned manufactured	l homes? Yes No			
		Dort IX	K. Comments				
I Ica	this section to alaborate on a			our comments about this report or other			
			nk you for your time. You may sub				
Edit	or Comment (TN): #67 pulle	d from #65 (total cost)					
	This form is to be submit	ted electronically. If you require	e assistance, please contact one of	f these NC DEACS staff members:			

Matt James, email: matt.james@ncdenr.gov phone 919-707-8133 Wendy Worley, email: wendy.worley@ncdenr.gov phone: 919-707-8136

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 https://deq.nc.gov/conservation/recycling-assistance or e-mail us at Lgteam@ncdenr.gov

