

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: Calypso

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 Lg	team@ncdenr.gov by Sep	otember 1, 2018.		
	If you have ques	tions or need assistance compl	eting this form, please c	all 919-707-8130	5 or 919-707-8133.	
Per	son Completing This Repor	rt: Loretta Lanier		Title: Town Cle	erk	
Ma	iling Address: PO BOX 327	7	City: Calypso		Zip: 28325	
Pho	one: 919-658-9221	Fax: 919-658-4840		Date: 7/10)/2018	
Em	ail: calypsocityof@bellsout	h.net				
		Gen	eral Instructions			
	ase remember that the time a specific question.	period for the report is JULY 1, 20	017 through JUNE 30, 20	18. Please check "	No" if you have nothing to report	
1.	• •	nt have a Recycling Coordinator of	or similar position for FY	17-18? Yes	⊠ No	
	Name Recycling Coordin	ator (if different from person com	pleting this report.)			
	Name:			Title:		
	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-time Se	olid 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 p	place addressing any of the	e following during	FY 17-18? (if yes, please check	
	Disposal Bans	☐ Illegal Dumping ☐ Litter	ring Other, Please D	Describe:		
5.	Did your local government mulching, composting)?	nt manage, provide or contract for	any solid waste services i	n FY 17-18 (e.g., o	collection, disposal, recycling,	
	If you ans	swer ''No'' to question 5, the rep	port is complete, please e	mail to L2team@	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 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? 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? 197
	b. Number of households eligible to participate in the curbside recycling program: 197
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 170
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 ☐ 95 gallon cart ☐ multiple sizes of cart available
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)
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
mate	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.
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:

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? $\ \ \ \ \ \ \ \ \ \ \ \ \ $
	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 each individual material type that was commingled

PROGRAM.	Cı	ırbside	E	Prop-off	All "Otl	her" 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 here							
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled tons-check all items collected above		16.48					16.48
TOTAL TONS:		16.48					16.48

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)

Used Motor Oil	d.	ollected / managed. indicated units.	antities co	Data on qua	# of sites	n collect this	Did program material fron	pecial Waste Programs for Collecting terials <u>from Citizens</u> by Material Type	7.
Used Antifreeze			1			_		· · · · · · · · · · · · · · · · · · ·	_
Batteries, Lead Acid	lbs	lt lt	arrels, or	bar		⊠ No	Yes	Oil Filters	U:
Batteries, Dry Cell	llons	gallo				⊠ No	Yes	Antifreeze	U:
Fluorescent Bulbs/Lights Containing Mercury	lbs	, or	batteries,	# 1		⊠ No	Yes	ries, Lead Acid	Ва
Propane Tanks	lbs	lt		<u> </u>		⊠ No	Yes	ries, Dry Cell	Ва
Used Cooking Oil / Waste Vegetable Oil	ılbs	# bulb	lbs, or			⊠ No	Yes	rescent Bulbs/Lights Containing Mercury	Fl
Other Special Wastes - please provide waste type here: Pesticide Containers (NCDA Program, not pesticides themselves) NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Ves No gals, or	anks	# tan	lbs, or			⊠ No	Yes	ane Tanks	Pr
Pesticide Containers (NCDA Program, not pesticides themselves) NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Lousehold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event B. Did your local government operate a household hazardous waste collection program or event in FY 17-18? Yes 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 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)? Ye If yes, please estimate the amount of business material managed pounds f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize about individual materials is not available, please simply provide total quantity of materials collected by HHW program Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in Used Motor Oil (gal)	llons	gallo	lbs, or			⊠ No	Yes	Cooking Oil / Waste Vegetable Oil	U:
Pesticides themselves Yes No No No No No No No N	lbs	lt-				⊠ No	Yes		- 1
Comparison of pesticides, not containers Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Yes No gals, or	con- niners		lbs, or			⊠ No	Yes		
HHW event or by a paint exchange program) Yes No	lbs	11:				⊠ No	Yes		
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 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)? Ye If yes, please estimate the amount of business material managed pounds f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize about individual materials is not available, please simply provide total quantity of materials collected by HHW program Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in Used Motor Oil (gal) Used Oil Filters # of Barrels, or lbs. Used Antifreeze (gal) Lead Acid Batteries (lbs) Other Batteries (lbs)	lbs	1t				☐ No	Yes		
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 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)? Ye If yes, please estimate the amount of business material managed pounds f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize about individual materials is not available, please simply provide total quantity of materials collected by HHW program Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in Used Motor Oil (gal) Used Oil Filters # of Barrels, or lbs. Used Antifreeze (gal) Lead Acid Batteries (lbs) Other Batteries (lbs)	t	rogram or Event	ESQG) Pı	Generator (CE	antity G	pt Small Qu	ionally Exem	ld Hazardous Waste (HHW) and Condit	ouse
a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent 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)? Ye If yes, please estimate the amount of business material managed pounds f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize about individual materials is not available, please simply provide total quantity of materials collected by HHW program Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in Used Motor Oil (gal) Used Oil Filters # of Barrels, or lbs. Used Antifreeze (gal) Lead Acid Batteries (lbs) Other Batteries (lbs)	No No	? Yes 🔀	FY 17-18	m or event in F	n prograi	aste collection	hazardous wa	your local government operate a household	3. Di
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)? Ye If yes, please estimate the amount of business material managed pounds f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize about individual materials is not available, please simply provide total quantity of materials collected by HHW program Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in Used Motor Oil (gal) Used Oil Filters # of Barrels, or lbs. Used Antifreeze (gal) Lead Acid Batteries (lbs) Other Batteries (lbs)	_	_	_						
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)? Ye If yes, please estimate the amount of business material managed pounds f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize about individual materials is not available, please simply provide total quantity of materials collected by HHW program Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in Used Motor Oil (gal) Used Oil Filters # of Barrels, or lbs. Used Antifreeze (gal) Lead Acid Batteries (lbs) Other Batteries (lbs)	Temp. Eve	Permanent	ility?				•		
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)? Ye If yes, please estimate the amount of business material managed pounds f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize about individual materials is not available, please simply provide total quantity of materials collected by HHW program Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in Used Motor Oil (gal) Used Oil Filters # of Barrels, or lbs. Used Antifreeze (gal) Lead Acid Batteries (lbs) Other Batteries (lbs)				_	_		•		
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e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)?	· · · · · · · · · · · · · · · · · · ·								
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about individual materials <u>is not</u> available, please simply provide total quantity of materials collected by HHW program Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in Used Motor Oil (gal) Used Oil Filters # of Barrels, or lbs. Used Antifreeze (gal) Lead Acid Batteries (lbs) Other Batteries (lbs)	es 🔀 No	· —	•		•	*		. 1 6 1	e.
Used Antifreeze (gal) Lead Acid Batteries (lbs) Other Batteries (lbs)	n in 48g belov	y HHW program ir	ollected b	of materials co	quantity	provide total	lease simply p	oout individual materials <u>is</u> <u>not</u> available, p	f.
Used Antifreeze (gal) Lead Acid Batteries (lbs) Other Batteries (lbs)		lbs.	s, or	# of Barrels,		d Oil Filters	Used	Used Motor Oil (gal)	
		atteries (lbs)	Other Ba		ries (lbs)	d Acid Batter	Lead	Used Antifreeze (gal)	
g. Provide Total Quantity of materials collected by HHW Program. If individual materials were reported in 48f, please net the weight of those materials out of the total listed here.	pour		e 	materials were	lividual ı	ogram. If inc	l by HHW Pro	rovide Total Quantity of materials collected ported in 48f, please net the weight of those	_
h. Please list HHW Collection Contractor								lease list HHW Collection Contractor	h.
i. Estimated cost of HHW / CESQG program or event(s) \$							or event(s) \$	stimated cost of HHW / CESQG program of	i.

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

		Part I	V. Yard Wasto	e, Mulo	ching and	Composti	ng Managem	nent
ипре	ermitted sites and	d it is illegal	to burn. Compostin	g and mu	lching are pop	ular managem	ent options. Pleas	landfills, incinerators, or in se answer the questions below aterials in this section.
49. 50. 51.	checking all that Did a storm ever What quantities	at apply: 🔀 (ent significant s of materials	ly impact the amoun	Collected tof yard ward ward ward ward ward ward ward w	ed at convenier waste your gove aste program?	nce center ernment manag Provide infor	Received at yard veged during FY 17-1 mation in TONS	OR CUBIC YARDS of
		Destinati	on	Check if used	Tons	Cubic Yards		Name and Location of Facility ng Vegetative Materials
	End user (to far	rmer or home	-owner)					
	Your local gove	ernment's mul	lch or compost facilit	ту 🗌				
	Other public m	ulch or compo	ost facility					
	Private mulch o	or compost fac	cility					
	Land clearing a	and inert debri	is landfill (LCID)	\boxtimes				
	Energy / Fuel U	Jse (e.g. boile	r fuel market)				Duplin County LCID	Facility
		Total						
	estimate yard w	vaste volume.		ruck used	in your yard wa	aste manageme	ent program, and th	formula below to help you hen enter the grand total $0 yd^3$ yd^3
	Size of Truc	k (in vards)	Avg. no. of times true	ck fills each		s truck is used dur	ing year	TOTAL
	Size of True	K (III yaras)			Vaste Colle			
This	section concern	s your local g	overnment's provisio					
52.	Please complete		g table about your go				m.	
	Sector		cts Solid Waste? - see codes at right			ight VIII V	Collects Solid Waste? al government employe	How is Solid Waste Collected? ees 1. Once a week at household
	Residential	Primary B	Secondary P	rimary 1	Secondary		Contract nchise haulers	2. Twice a week at household3. Convenience center/greenbox
	Commercial	Primary B		rimary 1	Secondary	d. Loc	al government not olved in provision of	4. As needed or by request5. Daily
	Industrial	Primary	Secondary P	rimary	Secondary	serv	•	6. Other
53.	If you provide 1	<u>residential</u> wa	ste collection at sing	le-family l	households in y	our jurisdictio	n, please answer tl	he following questions:
	What type of co	ollection meth	nod is used?	Fully Auto	omated [Semi-Automat	ed Manual	Don't know
	What is the star	ndard collection	on frequency?	Weekly	Two tin	nes per week	Other	
	What is the typ	ical service po	oint for single family	househol	d waste?	Curbside	Back yard / B	ack door
	What type of co	ollection conta	ainer is used?	Governme	ent-provided ca	rts Resi	dent-provided con	tainer Bags
	Do you offer bu	ulky waste col	llection services?	Yes	No No			
54.		•	government collect rered to the county for	_		Yes No	No	
		Part	t VI. Solid Wa	ste and	l Recycling	g Educatio	onal Activitie	es
55.	Did your local issues / activities		-	-	inform citizens o Part VII, page		oout solid waste m	anagement and / or recycling
56.	Please estimate	your annual l	budget for solid wast	e related e	education and o	utreach activit	ies: \$	
57.	Does your com	munity produ	ce recycling education	on and out	reach materials	in languages l	pesides English?	Yes No
	If YES, please	list other lang	uages used:					
58.	Please provide	your recycling	g website address and	d public in	nformation pho	ne number if a	pplicable.	
	Website:						Phone #:	

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

	ficient resources availal stions deal with funding						these programs. T	The following
59.	Did your local government With regards to funding Tipping fee	ment operate an Ent g sources, check all s kes / general fund	erprise Fund for soll that apply to your	lid waste ser local govern eight-based t	rvices in ment:	FY 17-18? Ti	Yes No ire tax Thite Goods tax isposal Tax	
61.	NC Solid Waste Dispo According to GS 105-	187.63 these funds	must be used by a c	_		nts on a quarterly ba	sis by the Departm	
	How are disposal tax of	٥	-					
62.	If applicable, please program 28					<u>year</u> per <u>household f</u> cial in town		
	a. \$ 28	per montl		per			for solid waste	
	b. \$ \(\frac{4.5}{}\)	per montl	1	per	in and o	ut of town	for recycling	
	c. \$ 16	per montl	1	per		solid waste	for yard waste	
	d. \$ 14	per montl	1	per	out of to	wn solid waste	for bulky wast	e
	e. \$ <u>26</u>	per montl	1	per	commer	cial out of town	availability fee)
	f. \$ 88.5	per montl	1	per	commer	cial/household	total charge	_
63.	Did your local government are charged a fee by w			_		garbage during FY 1		where residents
	cording to GS 130A-30 orm users of such costs		ments are required	to conduct	full cos	t accounting annual	ly and to develop	a system to
64.	If your local governme	ent contracts for sol	id waste or recyclin	g services, p	olease rej	port the annual contr	act amount.	
	\$35,830.25		For solid waste s	services per	year			
	\$ <u>9,593.97</u>		For recycling pe	r year				
			OR					
	\$		_ Combined Contr	ract (solid w	aste, and	l recycling)		
65.	Collection Programs: I collection programs fo not available, please in	r waste, recyclables	and yard waste inc	luding mate			•	_
		# of Households served	Tons Collected	Collection	n Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
M	Iunicipal Solid Waste*	244	248.9	35	5,830.25	0	35,830.25	143
	Recycling Program**	197	16.48	9	,593.97	0	9,593.97	582
	Yard Waste Program	200	84.24	15	5,925.74	2,535.66	18,461.4	219
		s (calculated by form):			,349.96	2,535.66	63,885.62	182
66.	*for materials collected an **for materials collected by If your government op facility operations (rou proportionately. Lan	by public recycling progrerates a landfill, tra	rams including those serves restation, yard very. 1). If budgets for different controls.	vices offered to vaste /compo fferent facili	ost facili	ial and industrial generate ty or recycling facili	ty, please provide empt to allocate co	total budget for
	Tran	nsfer Station Budge	t: \$					
	Yard	d Waste / Compost	Facility Budget: \$					
		ycling Facility Budg						
67.	What was your govern	ment's total combin	ned annual budget fo	or all solid w	vaste and	l recycling services i	n 17-18? \$63,885.	62

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 man be married an east for a	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 page 1997.		_		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 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 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	ie:		Name:	
		ne:			
	E-mail: E-m				

Natural Heritage Program (N Please note that the vetting of a site	(HP) and the State Historic Preserva prior to a disaster is advantageous to local	ation Office (SHPO) thro governments because a staging	ough coordination with the Solid Waste Section. g site which is found to have impacted federal or state
	Site Name		
•			following a disaster? Yes No
• •	ammar mortanty:	_	
Has your county considered v	whether to implement a program for	r the management of aba	ndoned manufactured homes? Yes No
If yes, has your county development	oped a written plan for the manager	ment of abandoned manu	factured homes? Yes No
	Part IX.	Comments	
1	Natural Heritage Program (N Please note that the vetting of a site resources after a disaster may cause Disaster Site # Does your plan address the m Does your plan address mass NAGEMENT OF ABA Has your county considered w If yes, has your county developments this section to elaborate on any	Natural Heritage Program (NHP) and the State Historic Preserve Please note that the vetting of a site prior to a disaster is advantageous to local resources after a disaster may cause difficulty for local governments when atten Disaster Site # Site Name Does your plan address the management of household hazardour Does your plan address mass animal mortality? Yes NAGEMENT OF ABANDONED MANUFACTUR Has your county considered whether to implement a program for If yes, has your county developed a written plan for the management Part IX. this section to elaborate on any info provided in your report as ne	Does your plan address the management of household hazardous waste and white goods

This form is to be submitted electronically. If you require assistance, please contact one of 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-local-government-recycling-assistance or e-mail us at Lgteam@ncdenr.gov

