

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



Required - Enter Your Local Government Name: Carrboro

State of North Carolina

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

Local Government Report Form

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.

Mailing Phone: 9 Email: I Please refor a specific aspecial special	Address: 301 W Main Street 919-918-7425 Lewhite-kelly@townofcarrboro.org emember that the time period for the scific question. d your local government have a Reference of the scific question.	Fax: 919-968-7728 Genera ne report is JULY 1, 2017	City: Carrboro Instructions through JUNE 30, 201	Date: 08/3	Zip: <u>27510</u>
Phone: 9	219-918-7425 Lwhite-kelly@townofcarrboro.org emember that the time period for the cific question. d your local government have a Re	Genera ne report is JULY 1, 2017	l Instructions		
Email: I	white-kelly@townofcarrboro.org emember that the time period for the crific question. d your local government have a Re	Genera ne report is JULY 1, 2017			1/2018
Please re	emember that the time period for the cific question. d your local government have a Re	ne report is JULY 1, 2017		18. Please check "N	
for a spe	ecific question. d your local government have a Re	ne report is JULY 1, 2017		18. Please check "N	
for a spe	ecific question. d your local government have a Re	-	through JUNE 30, 201	Please check "N	
		11 0 11			
	ma Pagyaling Coordinator (if diff		_	17-18? Yes	No No
	ame Recycling Coordinator (if difference:	erent from person complet	ing this report.)	Title:	
	ddress:		City:		Zip:
		_	_		Zip.
	elephone:	Fax:	Email:	100	
	d your local government have a So	olid waste Director or simi	nar position for FY 17		☐ No
If	Yes, Name: Chris Clark			Title: Solid Wast	e Supervisor
Ad	ddress: 301 W Main Street		City: Carrboro		Zip: 27510
Тє	elephone: 919-918-7433	Fax: 919-968-7728	Email: C	Cclark@townofcarrt	ooro.org
3. Di	d your local government have ded	icated or part-time Solid	Waste Enforcement S	taff for FY 17-18?	∑ Yes ☐ No
If	Yes, Name: Chris Clark			Title: Solid Wast	e Supervisor
Ad	ddress: 301 W Main Street		City: Carrboro		Zip: 27510
Те	elephone: 919-918-7433	Fax: 919-968-7728	Email: C	Cclark@townofcarrt	poro.org
	d your local government have solid that apply)	d waste ordinances in plac			
	∑ Disposal Bans ∑ Illegal	Dumping Littering	Other, Please D	Describe:	
	d your local government manage, palching, composting)?	provide or contract for any	solid waste services i	n FY 17-18 (e.g., co	ollection, disposal, recycling,

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 Yes No 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? Orange County 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? Yes No, skip to question # 32
26.	Who collected the recyclable materials for your local government's drop-off recycling program? Local government employees Private contractor
	Other (please specify)
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program: source-separated (citizens separate materials by type) single stream / commingled dual / two stream (paper separated from cans/bottles) don't know / other
28.	Please estimate the number of households served by your drop-off recycling program.
29.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:
31.	How many of these locations were staffed with attendants?
EL	ECTRONICS RECYCLING PROGRAM
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
37.	other than through your curbside or dropoff recycling programs? \square Yes \square No
40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes No
	On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served:
	Public drop-off recycling sites available for ABC On Premises Permit holders to use
41.	Does your local government operate a program to recycle Construction and Demolition materials? Yes No If yes, please check all materials that were recycled and report tonnages in tonnage table on page 5:
	☐ Clean Wood ☐ Brick, concrete, etc. ☐ Sheetrock ☐ Vinyl siding ☐ Shingles ☐ Metals ☐ Other
42.	Does your local government have an ordinance regulating the construction and demolition waste stream with the intention of encouraging or requiring waste reduction or recycling of these materials?
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

	Curbside		Drop-off		All "Othe	r'' 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 tong shart11								
Commingled tons-check all items collected above								
TOTAL TONS:					 			
DECYCLING TONN	ACEACAI	ECH T OF D						

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) Did program collect this **Special Waste Programs for Collecting** # of Data on quantities collected / managed. material from the public? Materials from Citizens by Material Type Please report in indicated units. sites Used Motor Oil Yes Used Oil Filters barrels, or lbs Yes No Used Antifreeze Yes No gallons # batteries, or Batteries, Lead Acid Yes No lbs Batteries, Dry Cell Yes No lbs Fluorescent Bulbs/Lights Containing Mercury Yes lbs, or # bulbs No **Propane Tanks** Yes No lbs, or # tanks Used Cooking Oil / Waste Vegetable Oil Yes No lbs, or gallons Other Special Wastes - please provide waste Yes No lbs type here: Pesticide Containers (NCDA Program, not # con-Yes ☐ No lbs, or pesticides themselves) tainers NCDA Pesticide Disposal Assistance Program Yes No lbs (for management of pesticides, not containers) Latex Paint (do not include paint collected at gals, □ No Yes lbs HHW event or by a paint exchange program) or Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event 48. Did your local government operate a household hazardous waste collection program or event in FY 17-18? 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 <u>local government?</u> Yes 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)? If yes, please estimate the amount of business material managed f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize below. If data about individual materials is not available, please simply provide total quantity of materials collected by HHW program in 48g below. Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in question 47. Used Motor Oil (gal) _____ Used Oil Filters ____ # of Barrels, or ____ lbs. Used Antifreeze (gal)

Lead Acid Batteries (lbs)

Other Batteries (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs) g. Provide Total Quantity of materials collected by HHW Program. If individual materials were pounds reported in 48f, please net the weight of those materials out of the total listed here. h. Please list HHW Collection Contractor i. Estimated cost of HHW / CESQG program or event(s) \$

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.

		Dort	IV Vor	d Wosto	Mul	ching and (Compostin	g Managemo	ont
		ns manage	ment of veg	etative mat	erials.	Yard waste ma	y not be dispo	osed in sanitary l	andfills, incinerators, or in answer the questions belov
									erials in this section.
49. 50. 51.	checking all that Did a storm ever What quantities	at apply: E ent significa s of materia	Collected of contly impact ls were managed	curbside the amount aged by you	Collectory of yard very and well and well and the contractions of	waste your gove vaste program? I	ce center	Received at yard ward during FY 17-18	OR CUBIC YARDS of
	organic mater	Destina		minos, ieav	Check if				Name and Location of Facility
	D 1 (6				used	Tons	Cubic Yards	Receiving	g Vegetative Materials
	End user (to far						5.754		
	Your local gove					1 221	5,754	Carrboro Public Works	
	Other public m					1,231		Orange County Solid W	aste Management Landfill
	Private mulch or compost facility Land clearing and inert debris landfill (LCID)								
	Energy / Fuel U	Tota		Ket)		1231	5754		
	VARD WASTI			RMI ΙΙ Δ· If	vard wa			you may use this fo	ormula below to help you
	estimate yard w	aste volum	e. Calculate am in the app	for each tru propriate bo	ick used xes abov	in your yard wave. Ex . 10 yd^3	ste managemen truck x 3 days/v	ant program, and the $wk \ x \ 16 \ wks = 480$	en enter the grand total yd^3
	Size of Truc	k (in yards)				week # of weeks		=	TOTAL
						Vaste Colle			
This	section concern.	s your local				! waste (garbage			
52.	Please complete					t's solid waste co		1.	
	Sector			ll ll		olid Waste Colle - see codes at ri	aht Will Co	ollects Solid Waste?	How is Solid Waste Collected? s 1. Once a week at household
	Residential	Daimaoury	Secondary			1 Secondary	b. By Co	ontract	2. Twice a week at household
	Commercial	Primary	Secondary Secondary	u n.	mary	1 Secondary Secondary	6 d. Local involving	hise haulers government not wed in provision of	3. Convenience center/greenbox4. As needed or by request5. Daily6. Other
	maustrar		1	u			6 service		6. Other
53.	• •			•	•		v	·	e following questions:
	What type of co				ully Aut	_	Semi-Automate		Don't know
	What is the star		1	-	Veekly	<u> </u>	es per week	☐ Other	
	What is the type					<u> </u>	Curbside [Back yard / Back	<u></u>
	What type of co				overnm √Yes	ent-provided car	ts Resid	ent-provided conta	niner Bags
51	Do you offer bu For municipalit	·		<u></u>		∐ No	V vos □	□No	
54.	If so, were white						Yes L	No	
		Pa	rt VI. So	olid Was	te and	d Recycling	Education	nal Activities	S
55.	Did your local issues / activities		nt have an ed	-	-	inform citizens to Part VII, page	•	out solid waste man	nagement and / or recycling
56.	Please estimate	your annua	al budget for	solid waste	related	education and or	utreach activitie	es: \$	
57.	Does your com	munity prod	duce recyclin	ng education	and ou	treach materials	in languages be	esides English?	Yes No
	If YES, please	list other la	nguages used	d: Spanish					
58.	Please provide	your recycl	ing website	address and	public i	nformation phon	ne number if app	plicable.	
	Wahaita: www.	tournoform	horo ora					Phone #: 010 01	0 7425

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

	ficient resources availab estions deal with funding					these programs. T	The following
59.	Did your local governm With regards to funding Tipping fees	nent operate an Eng sources, check and sees / general fund	Iterprise Fund for soll that apply to your Volume/we	id waste services in local government: eight-based fees (e.g	FY 17-18?	Yes	
61.	NC Solid Waste Dispos According to GS 105-1	sal Tax proceeds a 87.63 these funds	must be used by a ci		ents on a quarterly ba	sis by the Departm	
62	How are disposal tax d If applicable, please pr	_		(e.g. g. \$45.00 per	vaar nar housahold	for solid wasta)	
02.			10 nousenou jees. (-		<u>,</u>
	d. \$ 16	per three	items	per appliand	ce or varying fees fo	r ∰ for bulky wast	e
	e.\$	per		per		availability fee	2
	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.		nments are required	to conduct full cos	st accounting annual	lly and to develop	a system to
64.	If your local government	nt contracts for so	lid waste or recycling	g services, please re	port the annual contr	ract amount.	
	\$		For solid waste s	services per year			
	\$		For recycling pe	r year			
			OR				
	\$			act (solid waste, and			
65.	Collection Programs: P collection programs for not available, please r	waste, recyclable	s and yard waste inc	luding materials col			
		# 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*	4,387	6,626	384,231	291,526	675,757	101
	Recycling Program**						
	Yard Waste Program	4,387	1,231	200,328	24,870	225,198	182
		(calculated by form)		584,559	·	900,955	114
66.		y public recycling progerates a landfill, trand to nearest dollar dfill Budget:	grams including those servansfer station, yard v.r). If budgets for dif	vices offered to commercy vaste /compost facil ferent facilities are	cial and industrial generatity or recycling facil combined, please att	ity, please provide empt to allocate co	total budget for
		sfer Station Budge					
			Facility Budget: \$				
67	What was your governi	cling Facility Bud			d recycling comices	in 17 199 \$865 70°	1
07.	villat was your governi	ment s total combi	nea annuai buuget 10	n an somu waste alle	a recycling services	m 17-10; ψουσ,70.	1

Part VIII. County Mandated Programs

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

WH	ITE GOODS					
68.	Please provide name, address, phone number, and	e-mail of person	respons	_	program.	
	Name:			Title:		
	Address:	C	ity:		Zip:	
	Telephone: Fax:			Email:		
69.	Please provide the physical address of the primary	county white goo	ods colle	ection site.		
	Street 1:					
	Street 2:					
	City:				Zip:	
70.	Please provide the name of the business or person Name:				om white goods.	
	Street:					
	City:		State:	North Carolina	Zip:	
	Phone: Fax:					
71.	Give amounts / types of CFCs removed. Attach rec					
	Type of CFC Removed				Amount	_
72.	CFCs may be recycled or sent for destruction. Give	e name of firm, d	isposal	method and amount	earned / spent for CF0	C disposal.
	Firm	M	ethod of	f Disposal	Amount Earned	Amount Spent
73.	Please report the tonnage of white goods collected white goods tonnage reported on page 5? Ye	•	·18 in th	e Recycling Tonnag	es table on page 5 (qu	estion # 45). Was
74.	List the amount of revenue for the white goods pro	ogram by source:				
	Revenue collected from sale of scrap:	\$				
	Revenue collected from White Goods Tax Distribu	utions: \$				
	Revenue from other source (e.g. grants):	\$				
	Total Revenue:	\$				
75.	According to the White Goods Law, White Good expenditures White Good Tax Distributions were used to the Cook of th					mounts and types of
	Operational Expenses: \$					
	~					
	Clean-up of Illegal White Goods Dumps: \$					
	Total Expenditures: \$					

SC.	RAP TIRES					
76.	Please provide name, address, phone number, and e Name:	-	•			
	Address:					
	Telephone: Fax:		Emai	1:		
77.	Please provide the physical address of the primary of	ounty scrap tire	es collection sit	e.		
	Street 1:					
	Street 2:					
	City:		State: North	n Carolina	Zip:	
78.	Tonnage/Number of scrap tires disposed July 1, 201 Tons of	7-June 30, 201 or	8 (<u>excluding</u> ti	res from cleanup of nu _Number of tires	isance sites)	
79.	Tonnage/Number of scrap tires disposed from clean Tons of		ounty designate	ed nuisance sites Number of tires		
80.	Indicate the types of tires collected by the county: Passenger % Heavy T	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 expenditue excluding costs of nuisance tire cleanups, for FY 17	re (contract dis -18.	posal/hauling c	costs), \$		
83.	County's additional scrap tire program expenditure (Labor \$		renience center	cost), if any.		
	Site Cost \$					
	Other \$	de	scribe Other: _			
84.	County's contract cost for scrap tire disposal. \$		/ Ton; \$	/ Tire		
85.	Hauling cost or fuel surcharge, if not included in co	ntract cost abo	ove. \$	/ Ton; \$	/ Tire	
86.	Total tipping fees collected for tires not eligible for	free disposal.	S			
87.	Total number of tires collected not eligible for free	disposal:				
88.	If scrap tires were not hauled off site by contracted	service provide	r, 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	r management o	of disaster debr	is? Yes	No	
	If yes, indicate if the plan is a stand-alone plan or in	conjunction w	ith local goverr	nment agencies:	Stand-alone In conjunction	
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	person(s) in ch	arge of the disaster del	bris management program for	
	your local government: Name: Name: Name	ne:		Name:		
		-				
	E-mail: E-m					

	Disaster Site #	Site Name	Disaster Site #	Site Name
04.	Does your plan address the n	nanagement of household hazardous	s waste and white goods following	g a disaster? Yes No
5.	Does your plan address mass	s animal mortality?	No	
ΜA	NAGEMENT OF ABA	NDONED MANUFACTUR	ED HOMES BY COUNT	IES
6.	Has your county considered v	whether to implement a program for	r the management of abandoned n	nanufactured homes? Yes No
	If yes, has your county devel	oped a written plan for the managen	ment of abandoned manufactured	homes? Yes No
		Part IX.	Comments	
		y info provided in your report as neo	cessary. We would appreciate yo	ur comments about this report or other
		agement in North Carolina. Thank		
	n of Carrboro collects all resion collections are reflected in t	•	l as some non-residential MSW.	All tonnages and costs associated with
		1		

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-assistance or e-mail us at Lgteam@ncdenr.gov

