

State of North Carolina

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

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

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

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

Instructions:

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

Options for obtaining a blank copy of this form:

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

This form must be completed electronically using Adobe Reader. Adobe Reader can be downloaded for free at the following web site: 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:

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

Form Year

2017



Local Government Report Form

Required - Enter Your Local Government Name: Camden County

State of North Carolina

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

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

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

	Ple	ease submit this form to Lgter	am@ncdenr.gov by Septer	nber 1, 2017.
	If you have questions o	r need assistance completi	ng this form, please call	919-707-8121 or 919-707-8139.
Per	son Completing This Report: Step	phanie Humphries		Title: Finance Officer
Ma	iling Address: PO Box 190		City: Camden	Zip: 27921
Pho	one: 252-338-6363	Fax: 252-331-7831		Date: 8/28/17
Em	ail: shumphries@camdencountync	.gov		
		Gener	al Instructions	
	ase remember that the time period a specific question.	for the report is JULY 1, 2010	5 through JUNE 30, 2017.	Please check "No" if you have nothing to report
1.	Did your local government have	a Recycling Coordinator or s	imilar position for FY 16-	17? Yes No
	Name Recycling Coordinator (if	different from person comple	eting this report.)	
	Name:			Title:
	Address:		City:	Zip:
	Telephone:	Fax:	Email:	
2.	Did your local government have	a Solid Waste Director or sin	nilar position for FY 16-17	7? 🛛 Yes 🔲 No
	If Yes, Name: David Credle			Title: Public Works
	Address: PO Box 190		City: Camden	Zip: 27921
	Telephone: 252-338-6363	Fax: 252-331-7831	Email: dere	edle@camdencountync.gov
3.	Did your local government have	dedicated or part-time Soli	d Waste Enforcement Staf	f for FY 16-17? Yes No
	If Yes, Name:			Title:
	Address:		City:	Zip:
	Telephone:	Fax:	Email:	
4.	Did your local government have all that apply)	solid waste ordinances in pla	ce addressing any of the fo	ollowing during FY 16-17? (if yes, please check
	⊠ Disposal Bans ⊠ III	egal Dumping Litterin	g Other, Please Desc	cribe:
5.	Did your local government mana mulching, composting)?	age, provide or contract for an	y solid waste services in F	FY 16-17 (e.g., collection, disposal, recycling, Yes No
	If you answer !!	No" to augstion 5 the renor	ut is complete please em	ail to Lataam@nadann aan

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 16-17? Did your local government have any program or policy encouraging or requiring local agencies to 7. 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 16-17? Part II. Waste Reduction and Recycling Programs Serving the Public SOURCE REDUCTION / REUSE Did your local government have a backyard composting program? Yes X No If yes, please check all backyard composting activities that apply: Education Demonstration site(s) Bin distribution/sales Number of Bins distributed? Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes X No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives? Did your local government offer a waste exchange or reuse program? X Yes No 13 If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public: Swap shop/shed Number of sheds in use? 3 Paint exchange Number of gallons recovered? Other (e.g. pallet exchange, etc.) PUBLIC RECYCLING SERVICES Which of the following responses best describes your recyclables recovery activities for the period July 1, 2016 through June 30, 2017? My local government **DID operate or contract** for a recyclables recovery program. (please continue to question 15) My local government DID NOT operate or contract for recyclables recovery BUT DID participate in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; then go to Part IV on page 7.) With which local government did you participate? My local government **DID NOT operate**, contract or participate in a recycling program. (Go to Part IV on page 7.) If your local government **DID** operate or contract for a recyclables recovery program, please indicate in the following sections the type of program in operation and provide specifics about your program(s). CURBSIDE RECYCLING PROGRAM Did your government operate a Curbside Recycling Program? 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 Other Other
22.	Please describe the collection containers used: Bins Blue bags 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? X 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 Waste Industries
	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) 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. 4,000
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: 3
31.	How many of these locations were staffed with attendants?
EL	ECTRONICS RECYCLING PROGRAM
mat	Is answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any erials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5. Did your community operate an electronics recycling program in FY 16-17? Yes No, skip to question # 38 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: 3

33.	Did your electronics recycling program collect or accept televisions from (check all that apply): Residences
34.	Did your electronics recycling program collect or accept computer equipment from (check all that apply): 🔀 Residences 🔀 Businesses
35.	DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was eligible to receive proceeds from the State Electronics Management Fund in February of 2017, please provide the following information
	Electronics Management Fund balance as of July 1, 2016: \$-19,559
	Electronics Management Funds received from DEQ during FY 16-17 (Feb 2017 distribution): \$ 755.09
	Electronics Management Funds spent during FY 16-17: \$ 11,285.9
	Electronics Management Fund balance as of June 30, 2017: \$ -30,089.81
36.	Briefly explain how Electronics Management Funds were spent during FY 2016-17 (please list items purchased if applicable):
	Cost of recycling electronics through Synergy Recycling plus materials (Clear Plastic Wrap) to wrap electronics as required by company.
37.	If you did operate an electronics recycling program, please provide the following information about your vendor / contractor: Name of electronics recycling vendor(s) during FY 16-17: Synergy Recycling
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? Yes No
OT	HER PUBLIC RECYCLING PROGRAMS
the l	se answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for <u>by ocal government</u> . The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ocling Tonnages Chart on pg 5.
	Did your local government operate a multifamily recycling collection program that provides on-property recycling service for residents of multifamily properties in a manner other than through your curbside or dropoff recycling programs? $\ \ \ \ \ \ \ \ \ \ \ \ \ $
39.	Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner other than through your curbside or dropoff recycling programs? Yes 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 16-17. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	□ Public Parks Recycling Program □ Athletic Field /Venue Recycling Program
	☐ Pedestrian Recycling Program ☐ Recycling Service for Special Events / Festivals
44.	Please identify all "Other" programs or services operated by your government during FY 16-17. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	Public School Recycling Program
	Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)
	Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events
	Organics / Food Waste Recycling other than yard waste program
	Oyster Shell Recycling Program
	Other Programs (please specify)
	Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.

RECYCLING TONNAGES FROM PUBLIC PROGRAMS

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

DD 0 GD 115	Curbside		Γ	Prop-off	All "Ot	ther" 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						219.85	219.85	
Other Metal						0.29	0.29	
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						53.693	53.693	
Other Electronics						30.343	30.343	
C&D Materials Recycling								
Commingled tons-check al items collected above				347.99			347.99	
TOTAL TONS:				347.99		304.176	652.166	

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.

Materials <u>from</u> <u>Citizens</u> by Material Type		m collect this om the public?	# of sites	-		ollected / managindicated units.	ed.
Used Motor Oil	Yes Yes	☐ No				6,289 gallon	s
Used Oil Filters	⊠ Yes	☐ No		10 barr	els, or		lbs
Used Antifreeze	Yes	☐ No				355 ga	allons
Batteries, Lead Acid	⊠ Yes	☐ No		# b	atteries	, or 3,195	5 lbs
Batteries, Dry Cell	Yes	⊠ No				'	lbs
Fluorescent Bulbs/Lights Containing Mercury	Yes	⊠ No			lbs, or	# t	oulbs
Propane Tanks	Yes	⊠ No			lbs, or	#	tanks
Used Cooking Oil / Waste Vegetable Oil	Yes Yes	☐ No		4,586	lbs, or	g	allons
Other Special Wastes - please provide waste type here:	Yes	⊠ No				·	lbs
Pesticide Containers (NCDA Program, not pesticides themselves)	Yes	⊠ No			lbs, or		# con-
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			gals, or		lbs
sehold Hazardous Waste (HHW) and Condition Did your local government operate a household of Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora	hazardous w	aste collection	prograi	n or event in FY	7 16-17	? Yes	No No
Did your local government operate a household of Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op a. Did you partner or co-sponsor your HHW program elist partner(s) d. Provide number of citizens / households that be. Did your program accept materials from small figures, please estimate the amount of business. Amounts of individual materials collected by about individual materials is not available, please.	hazardous was: Try Event or a green to accept rogram with a participated all businesses as material may HHW Proglease simply	at a Permanent materials duri another local gran in your HHW s (Conditionall anaged gram: if totals f provide total of	HHW (ong this Fovernment) collecting Exemple or individuantity	Collection Facilifical Year? ent? Yes on program this pt Small Quantification idual materials a of materials col	ty? Fiscal ' ty Gene pounds are knowlected b	Permanent Year? rators)? Year Year	No Tem Tem Yes te below in 48g
Did your local government operate a household of Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program elist partner(s) d. Provide number of citizens / households that e. Did your program accept materials from small figes, please estimate the amount of business. Amounts of individual materials collected by about individual materials is not available, please, materials listed here should only be the	hazardous ws: ry Event or a pen to accept rogram with a participated all businesses as material my HHW Proglease simply ose collected	in your HHW s (Conditionall anaged ram: if totals f provide total of	HHW (ong this Fovernment) collecting Exemple (or individuantity rogram and continuation)	collection Facilities and Second Pearl Test Test Test Test Test Test Test Test	ty? The Interval of the Interv	Permanent Year? rators)? Yeares Yea	No Tem Tem Yes te below in 48g
Did your local government operate a household of Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op a. Did you partner or co-sponsor your HHW program elist partner(s) d. Provide number of citizens / households that be. Did your program accept materials from small figures, please estimate the amount of business. Amounts of individual materials collected by about individual materials is not available, please.	hazardous was: Try Event or a pen to accept rogram with a participated all businesses as material may HHW Proglease simply ose collected Use	in your HHW (Conditional) anaged ram: if totals f provide total conditions and HHW Pred Oil Filters	HHW (ong this Fovernment) collecting Exemple or individuantity rogram a	Collection Facilification Facilifica	ty? N Fiscal ` ty Gene pounds are know lected b nclude r	Permanent Year? rators)? Yes Year? y HHW programaterials listed in lbs.	No Tem
Did your local government operate a household of Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program elist partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma If yes, please estimate the amount of business f. Amounts of individual materials collected by about individual materials is not available, pl Note, materials listed here should only be the Used Motor Oil (gal)	hazardous ws: Ty Event or a pen to accept rogram with a participated all businesses as material my HHW Proglease simply ose collected Use Lea	in your HHW is (Conditionall anaged aram: if totals f provide total cat an HHW Pred Oil Filters and Acid Batterian	HHW (ong this Fovernment) collecting Exemple or individuantity rogram and the collection of the colle	Collection Facilification Facilifica	ty? N Fiscal ` ty Gene pounds are know lected b nclude r	Permanent Year? rators)? Yes Year? y HHW programaterials listed in lbs.	No Tem
Did your local government operate a household of Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program elist partner(s) d. Provide number of citizens / households that e. Did your program accept materials from small fight yes, please estimate the amount of business f. Amounts of individual materials collected by about individual materials is not available, please Motor Oil (gal) Used Motor Oil (gal) Used Antifreeze (gal)	hazardous ws: ary Event or a ben to accept rogram with a participated all businesses as material my HHW Proglease simply pose collected Leag Mercury (Id by HHW P	in your HHW s (Conditionall anaged if totals f provide totals f at an HHW Pred Oil Filters ad Acid Batterills) rogram. If indout of the total out of the total	HHW (ong this I overnment of the collecting of t	collection Facilifical Year? ent? Yes on program this pt Small Quantification and should not in the facility of Barrels, materials were are.	ty?	Permanent Year? rators)? Yes Year? y HHW programaterials listed in lbs.	No Tem

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.

This	section concer								` '	g I vianagem sed in sanitary		nerators, or i
npe	ermitted sites an	d it is ille	egal to	burn.	Composting	g and mu	lching are pop	ular mo	anageme	nt options. Please	e answer the	questions belov
										on-vegetative mai		
9.	Does your loca	_	_	-		_		•	•	please indicate he eceived at yard w	•	
60.	_					_				d during FY 16-1		No
51.	What quantities	s of mater	rials we	ere mana	iged by you	ır yard wa	aste program?	Provid	e inform	ation in TONS (<u>OR</u> CUBIC Y	ARDS of
	organic mater	ial (yard	waste,	, brush,	limbs, leav		managed. For	conver	rsion purp	oses, use 400 lbs		·: CE '1'
		Desti	ination	1		Check if used	Tons	Cubio	c Yards	Please Provide l Receivin	g Vegetative M	•
	End user (to fa	rmer or h	ome-ov	wner)								
	Your local gov	ernment's	s mulch	or com	post facility							
	Other public m	ulch or co	ompost	facility			324.22			Pasquotank County Lar	ndfill	
	Private mulch	or compos	st facili	ity								
	Land clearing a	and inert o	debris 1	landfill (LCID)							
	Energy / Fuel U	Jse (e.g. ł	boiler f	uel mark	ket)							
			'otal				324.22					
										ou may use this fo		
	•								_	t program, and th $vk \times 16 wks = 480$	_	rand total
	vorume manag	ou of pro	X		oropriate co		X		e dely in	=	<i>y</i> • • • • • • • • • • • • • • • • • • •	yd^3
	Size of Truc	k (in yards))	Avg. no.	of times truck	k fills each	week # of weeks	truck is	used during	g year	TOTAL	
				Pa	art V. S	olid W	aste Colle	ction	Servi	ces		
This	section concern		_		_							
52.	Please complet								n system			
	Sector				ll ll		lid Waste Colle - see codes at r			llects Solid Waste?		Waste Collected?
	Residential	Primary		Secondary		imary 3		<u>U</u>	b. By Co		2. Twice a wee	k at household
	Commercial	Primary	B S	Secondary	Pri	imary 3	Secondary		d. Local	nise haulers government not	4. As needed or	e center/greenbox r by request
	Industrial	Primary	D S	Secondary	Pri	mary	Secondary		servic	ed in provision of e	5. Daily6. Other	
3.	If you provide	residentia	al waste	e collecti	on at single	e-family l	nouseholds in y	our juri	isdiction,	please answer th	e following q	uestions:
	What type of co	ollection	method	d is used	? F	fully Auto	omated S	Semi-A	utomated	l Manual	Don't k	now
	What is the star	ndard col	lection	frequen	cy? U	Veekly	Two tim	es per	week	Other		
	What is the typ	ical servi	ce poin	nt for sin	gle family l	househol	d waste?	Curb	oside [Back yard / Ba	ck door	
	What type of co	ollection	contain	ner is use	ed?	Governme	ent-provided car	rts	Reside	ent-provided cont	ainer	Bags
	Do you offer be	ulky wast	te colle	ction ser	vices?	Yes	☐ No					
64.	For municipality									No		
	If so, were whi								No	1 4 4 44		
5	Did your local						•	•		nal Activitie ut solid waste ma		l / or recycling
55.	issues / activitie	_	Ye Ye		-	_	Part VII, page	-	carry abo	ut sond waste ma	nagement and	17 or recycling
6.	Please estimate	your ann	nual bu	dget for	solid waste	related e	ducation and o	utreach	activitie	s: \$		
7.	Does your com	munity p	roduce	recyclin	g education	n and out	reach materials	in lang	guages be	sides English?	Yes	No
	If YES, please		_	_								
8.	Please provide	your recy	ycling v	website a	address and	public in	formation phor	ne numl	ber if app	olicable.		
	Website:									Phone #:		

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

	ficient resources availab estions deal with funding			v	v	these programs.	The following
•	Did your local governm			· ·	1 0	Yes No)
	With regards to funding						
	Tipping fees			eight-based fees (e.g	. PAYT) \square T	ire tax	
		es / general fund		yclables		Vhite Goods tax	
<i>c</i> 1	Per househo NC Solid Waste Dispos	_	Grants	:1-1- 11		Pisposal Tax	
01.	According to GS 105-1	87.63 these funds r	nust be used by a ci	ty of county solely	for solid waste mana	agement programs	
<i>(</i> 2	How are disposal tax d If applicable, please pr	•					
02.		•			<u>year</u> per <u>nousenoia</u>	•	
							,
	c. \$	per		per		for yard waste	
	d. \$	per		per		for bulky wast	e
	e. \$	per		per		availability fee	<u>e</u>
	f. \$	per		per		total charge	
63.	Did your local governmare charged a fee by we					16-17? (a system v] No	where residents
	cording to GS 130A-309 orm users of such costs.	~	ments are required	to conduct full cos	t accounting annua	lly and to develop	a system to
64.	If your local government	nt contracts for soli	d waste or recycling	g services, please re	port the annual cont	ract amount.	
	\$		For solid waste s	ervices per year	-		
	\$		For recycling per	r vear			
	'		OR	7 0012			
	\$226,604.64			act (solid waste, and	d recycling)		
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials col		•	•
	,,	# 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*	4,000	3,527.97	75,534.88	330,604.49	410,034.87	110
	Recycling Program**	4,000	921.716	75,534.88	71,419.45	150,849.82	163
	Yard Waste Program	4,000	324.22	75,534.88	28,748.21	108,178.58	333
		(calculated by form):	4,773.906	226,604.64		669,063.27	140
66.	*for materials collected and **for materials collected by If your government ope facility operations (rour proportionately. Land	y public recycling progre erates a landfill, trai nd to nearest dollar	ams including those serv rester station, yard w). If budgets for dif	vices offered to commerc vaste /compost facili ferent facilities are	ial and industrial generatity or recycling facil	ity, please provide tempt to allocate co	total budget for
	Trans	sfer Station Budget					
	Yard	Waste / Compost I					
		cling Facility Budg					
67.	What was your government	ment's total combin	ed annual budget fo	or all solid waste and	d recycling services	in 16-17? \$669,06	4

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	d e-mail of persor					
	Name: Tommy McDaniel			Maintenance Supervise			
	Address: PO Box 190		City: Camden Zip: 27921				
	Telephone: <u>252-338-6363</u> Fax: <u>252-3</u>	31-7831	Email: tmcdanie	l@camdencountync.go	V		
69.	Please provide the physical address of the primary	y county white go	oods collection site.				
	Street 1: 103 Water Plant Rd.						
	Street 2:						
	City: Camden		State: North Carolina	Zip: 279	921		
70.	Please provide the name of the business or person Name: Tommy McDaniel	n that removes the	e refrigerant gases (CFCs) f	rom white goods.			
	Street: 330 East Hwy 158						
	City: Camden		State: North Carolina	Zip: 2792	21		
	Phone: (252) 338-6363 Fax: (252)	2) 331-7831	Email: tmcdaniel@camo	lencountync.gov			
71.	Give amounts / types of CFCs removed. Attach re	ecords of CFC rea	moval, and copy of certifica	ation of person(s) perfo	rming extraction.		
	Type of CFC Removed			Amount			
	R-134A		11 lbs				
72.	CFCs may be recycled or sent for destruction. Given						
	Firm		Iethod of Disposal	Amount Earned	Amount Spent		
	United Refrigeration	Recycled		0	0		
73.	Please report the tonnage of white goods collected white goods tonnage reported on page 5? X	•		ages table on page 5 (qu	nestion # 45). Was		
74.	List the amount of revenue for the white goods pr	•					
	Revenue collected from sale of scrap:	\$ 6,411.					
	Revenue collected from White Goods Tax Distrib	butions: $$4,020.$	26				
	Revenue from other source (e.g. grants):	\$ 2,730					
	Total Revenue:	\$ 13,161	.98				
75.	According to the White Goods Law, White Good expenditures White Good Tax Distributions were		-		amounts and types of		
	Operational Expenses: \$ 34,97	72.52					
	Capital Improvements: \$						
_	Total Expenditures: \$ 34,9	72.52					

SC	RAP TIRES						
76.	Please provide name, address, phone number, and e-ma	il of pe	rson responsib	ole for s	scrap tires program.		
	Name: Tommy McDaniel	Title: Maintenance Supervisor					
	Address: PO Box 190		_ City: Came	den		Zip: <u>27921</u>	
	Telephone: <u>2523386363</u> Fax: <u>252331783</u>	1		Email:	tmcdaniel@camde	ncountync.gov	
77.	Please provide the physical address of the primary cound Street 1: 103 Water Plant Rd.	nty scra	p tires collecti	on site.			
	Street 2:						
	City: Camden		State:	North (Carolina	Zip: 27921	
78.	Tonnage/Number of scrap tires disposed July 1, 2016-J 81.06 Tons or	une 30,	2017 (<u>exclud</u>		s from cleanup of n Number of tires	uisance sites)	
79.	Tonnage/Number of scrap tires disposed from cleanup of the transfer of the tra	of state	or county des		nuisance sites Number of tires		
80.	Indicate the types of tires collected by the county: Passenger % Heavy Truck	k		_ %	Large Off-Road		%
81.	List the amount of revenue for the scrap tire program by	•					
	Revenue from Scrap Tire Tax Distributions:	_	,688.54				
	Revenue from Tire Fees:	\$ <u> </u>					
	Revenue from Scrap Tire Clean-up Reimbursements:	\$ _					
	Revenue from Scrap Tire Cost-Overrun Grants: Total Revenue:		,695.06				
0.2			•	1.			
82.	County's total scrap tire program contract expenditure (excluding costs of nuisance tire cleanups, for FY 16-17	contrac	t disposal/hau	ling co	sts), \$ <u>16296.7</u>		
83.	County's additional scrap tire program expenditure (i.e. Labor \$		convenience c	enter co	ost), if any.		
	Site Cost \$ 4532						
	Other \$		describe Oth	ner: Co	ntainer Rental inclu	ided in contract cost	above
84.	County's contract cost for scrap tire disposal. \$ 1100		/ Ton; \$ _		/ Tire		
85.	Hauling cost or fuel surcharge, if not included in contra	act cost	above. \$		/ Ton; \$	/ Tire	
86.	Total tipping fees collected for tires not eligible for free	e dispos	sal. \$				
87.	Total number of tires collected not eligible for free disp	osal:					
88.	If scrap tires were not hauled off site by contracted serv	ice pro	vider, were th	ey cut a	and disposed in a lo	cal landfill? TYe	s No
89.	Name of tire disposal/recycling firm(s): Central Caroli	na Holo	dings				
TE	MPORARY DISASTER DEBRIS STAGING	S SIT	ES				
90.	Does your local government have a plan in place for ma			debris	? Xes	☐ No	
	If yes, indicate if the plan is a stand-alone plan or in con	njunctio	on with local g	overnn	nent agencies:	Stand-alone I	n conjunction
91.	If you indicated having a plan, has the plan been review requirements for public assistance reimbursement in a contract of the plan been review.				agement or FEMA Yes	to ensure it meets the No	ne basic
92.	Please list the name, contact numbers(s), and e-mail add your local government:			in char			
			Saunders				
	Phone: 252-338-1919 Phone:						
	E-mail: dporter@camdencountync.gov E-mail:	saunders	c@co.pasquotank	.nc.us	E-mail:		

Disaster Site #	Site Name		Disaster Site #	Site Name
1	Noblitt Property			
		_		
Does your plan address the n	nanagement of household hazardous	waste	and white goods following	a disaster? Yes No
Does your plan address mass	s animal mortality? Yes	No		
NAGEMENT OF ABA	NDONED MANUFACTURE	E D H	OMES BY COUNTI	ES
Has your county considered	whether to implement a program for	the ma	anagement of abandoned m	nanufactured homes? Yes No
If yes, has your county devel	oped a written plan for the managem	ent of	abandoned manufactured	homes? Yes No
If yes, has your county devel	oped a written plan for the managem Part IX. (homes? Yes No
	Does your plan address the n Does your plan address mass NAGEMENT OF ABA	Does your plan address the management of household hazardous Does your plan address mass animal mortality? Yes	Does your plan address the management of household hazardous waste Does your plan address mass animal mortality? Yes No NAGEMENT OF ABANDONED MANUFACTURED H	Does your plan address the management of household hazardous waste and white goods following

This form is to be submitted electronically. If you require assistance, please contact one of these NC DEACS staff members:

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

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

