# Environmental Quality

#### **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: <a href="https://get.adobe.com/reader/">https://get.adobe.com/reader/</a> - it is suggested that you complete the form using the latest version of Adobe Reader. Please <a href="DO NOT">DO NOT</a> 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: Bayboro

## 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.

		Please submit this form to I	gteam@ncdenr.gov by <b>Se</b>	otember 1, 2017.						
	If you have questio	ns or need assistance comp	pleting this form, please o	all 919-707-8121	or 919-707-8139.					
Pers	son Completing This Report:	Joan Spain Leary		Title: Town Cle	erk/Finance Officer					
Mai	ling Address: P.O. Box 519		City: Bayboro		Zip: 28515					
Pho	ne: 252 745 4238	Fax: 252 745 6030	)	Date: Aug	;. 29, 2017					
Ema	ail: townofbayboro@gmail.co	 m								
		Ge	eneral Instructions							
	se remember that the time per a specific question.	iod for the report is JULY 1,	2016 through JUNE 30, 20	17. Please check "I	No" if you have nothing to report					
1.	Did your local government have a Recycling Coordinator or similar position for FY 16-17? Yes No									
	Name Recycling Coordinator (if different from person completing this report.)									
	Name:			Title:						
	Address:		City:		Zip:					
	Telephone:	Fax:	Email:							
2.	Did your local government l	nave a Solid Waste Director o	r similar position for FY 16	-17? Yes	No No					
	If Yes, Name:			Title:						
	Address:		City:		Zip:					
	Telephone:	Fax:	Email:							
3.	Did your local government l	nave dedicated or part-time	Solid Waste Enforcement S	taff for FY 16-17?	Yes No					
	If Yes, Name:		Title:							
	Address:		City:		Zip:					
	Telephone:	Fax:	Email:							
4.	Did your local government hall that apply)	nave solid waste ordinances in	place addressing any of th	e following during	FY 16-17? (if yes, please check					
	∑ Disposal Bans ∑	☑ Illegal Dumping ☑ Litt	ering Other, Please I	Describe:						
5.	Did your local government i mulching, composting)?	manage, provide or contract fo	or any solid waste services i	n FY 16-17 (e.g., c ⊠ Yes	ollection, disposal, recycling,					
	If you answ	er "No" to question 5, the r	enort is complete please i	email to I oteam@	ncdenr gov					

#### Part I. Waste Reduction and Recycling Programs Serving Government Facilities The following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. Did your local government have a recycling program in place for collecting recyclable materials generated at Yes X No public buildings in FY 16-17? 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 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? 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, 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? County of Pamlico 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 <b>number of households</b> that participate in the curbside recycling program (estimate if necessary):
18.	If your curbside recycling program is operated through a <u>public franchise granted to a private company</u> then please answer the following:  Is public participation in the franchise:  Voluntary or Mandatory  Does your franchise consist of:  One service district or Multiple service districts
19.	What sector(s) of your community was served by the curbside recycling program?  Residential Commercial Industrial
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served:
21.	How frequently were the curbside recyclables collected?  Once a week  Every other week / biweekly  Other
22.	Please describe the collection containers used:  Bins Blue bags Multi-bin system Roll-out carts
23.	Please describe the method / style of recyclable materials handling:  curb-sort (collector separates material as collected) single stream / commingled dual / two stream don't know / other
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used:    less than 50 gallon cart
DR	OP-OFF RECYCLING PROGRAM
25.	Did your government operate a Drop-off Recycling Program?
26.	Who collected the recyclable materials for your local government's drop-off recycling program?  Local government employees  Private contractor
	Other (please specify)
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 16-17? Yes No, skip to question # 38  If you did operate an electronics recycling program, please indicate style of program:  Permanent - Curbside Collection Permanent - Drop-off Scheduled Collection Day or Event Part of HHW Program  If you offer curbside collection of electronics is it: by appointment or unscheduled  If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:

33.	Did your electronics recycling program 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 2017, please provide the following information:										
	Electronics Management Fund balance as of July 1, 2016: \$										
	Electronics Management Funds received from DEQ during FY 16-17 (Feb 2017 distribution): \$										
	Electronics Management Funds spent during FY 16-17: \$										
	Electronics Management Fund balance as of June 30, 2017: \$										
36.	Briefly explain how Electronics Management Funds were spent during FY 2016-17 (please list items purchased if applicable):										
37.	If you did operate an electronics recycling program, please provide the following information about your vendor / contractor:  Name of electronics recycling vendor(s) during FY 16-17:										
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?										
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 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

DDOCD 434	Curbside		Dr	Drop-off		er'' Programs	<b>Total Tons</b>	
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:							I	
Textiles (clothes etc) Televisions								
Other Electronics								
C&D Materials Recycling								
Commingled tons-check all	1							
items collected above								
TOTAL TONS:					1			
OFFICE INC TONS	IACIE AC A I		DOLICY OD C					

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 16-17? 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.

			v. Yard wast							
			ent of vegetative m							
			to burn.  Composti. ive materials.  Do n							
			operate a yard waste					lease indicate ho		
	•	•	Collected curbside			-			•	
60.	_	—	ly impact the amoun					•	•	No
1.		_	were managed by yo	-			_	-		
	organic mater	rial (yard wast	te, brush, limbs, le	aves, etc.)	managed. For	conversio	n purpo	oses, use 400 lbs.	/cubic yd.	
		Destination	on	Check if used	Tons	Cubic Y	ards		Vame and Location g Vegetative Mate	-
	End user (to fa	rmer or home-	-owner)							
	Your local gov	ernment's mul	ch or compost facili	ity 🗌						
	Other public m	ulch or compo	ost facility							
	Private mulch	or compost fac	ility							
	Land clearing a	and inert debri	s landfill (LCID)							
	Energy / Fuel U	Jse (e.g. boile	r fuel market)							
		Total								
	YARD WAST	E MANAGEN	MENT FORMULA:	If yard wa	ste quantities a	re not trac	ked, yo	ou may use this fo	rmula below to	help you
			Calculate for each							d total
	volume manag	ed by program	in the appropriate l	boxes abov		truck x 3	days/wi	$k \times 16 \text{ wks} = 480$	$yd^3$	*2
			X		X			=	TOTAL	$\underline{}$ $yd^3$
	Size of Truc	ck (in yards)	Avg. no. of times tru					-	TOTAL	
					Vaste Colle					
			o <i>vernment's provisio</i> g table about your g							
52.	Please complet	1			lid Waste Coll	ootod2	-			
	Sector		ll l		- see codes at r	ioht   -		lects Solid Waste? government employee	How is Solid Wa	
	Residential	Primary b		Primary 1	G 1	b	. By Con	ntract	2. Twice a week at	t household
	Commercial	Primary b	Secondary	Primary 1	Secondary		l. Local g	ise haulers government not	<ul><li>3. Convenience cer</li><li>4. As needed or by</li></ul>	
	Industrial	Primary	Secondary	Primary	Secondary		involve service	ed in provision of	<ul><li>5. Daily</li><li>6. Other</li></ul>	
3.	If you provide	residential was	ste collection at sing	gle-family	households in y	our jurisd	iction,	please answer the	e following ques	tions:
	What type of c	ollection meth	od is used?	Fully Aut	omated S	Semi-Auto	omated	Manual	Don't know	W
	What is the sta	ndard collection	on frequency?	Weekly	☐ Two tim	nes per we	ek	Other		
	What is the typ	oical service po	oint for single family	y househol	d waste?	Curbsic	de 🗌	Back yard / Ba	ck door	
	What type of c	ollection conta	niner is used?	Governme	ent-provided ca	rts 🔲 1	Reside	nt-provided conta	niner Ba	gs
	Do you offer b	ulky waste col	lection services?	Yes	No No					
64.		•	government collect	_		Yes		No		
	If so, were whi		ered to the county f			No		T A		
			VI. Solid Wa		• •	-				
55.	Did <b>your local</b> issues / activiti		have an education p Yes ⊠ No (If	•	inform citizens o Part VII, page	-	lly abou	it solid waste ma	nagement and / o	or recycling
66.	Please estimate your annual budget for solid waste related education and outreach activities: \$									
57.	Does your com	munity produc	ce recycling educati	on and out	reach materials	in langua	ges bes	ides English?	Yes No	)
	If YES, please	list other lange	uages used:							
8.	Please provide	your recycling	g website address ar	nd public ir	nformation phoi	ne number	if appl	licable.		
	Website:							Phone #:		

#### Part VII. Resources for Solid Waste Management and Full Cost Accounting Sufficient resources available to solid waste management programs are essential for continued success of these programs. The following questions deal with funding of your community's solid waste and materials management programs. 59. Did your local government operate an Enterprise Fund for solid waste services in FY 16-17? Yes □ No 60. With regards to funding sources, check all that apply to your local government: Tipping fees Volume/weight-based fees (e.g. PAYT) Tire tax Property taxes / general fund Sale of recyclables White Goods tax Per household charges Grants ☐ Disposal Tax 61. NC Solid Waste Disposal Tax proceeds are distributed to eligible local governments on a quarterly basis by the Department of Revenue. According to GS 105-187.63 these funds must be used by a city of county solely for solid waste management programs and services. How are disposal tax distributions being used? 62. If applicable, please provide your FY 16-17 household fees. (e.g., a. \$45.00 per year per household for solid waste) for solid waste \_\_\_\_\_ per \_\_\_\_\_ per \_\_\_\_\_ for recycling \_\_\_\_\_ per \_\_\_\_\_ per \_\_\_\_ for yard waste \_\_\_\_\_ per \_\_\_\_\_ per \_\_\_\_ for bulky waste per \_\_\_\_\_ per \_\_\_\_ availability fee per \_\_\_\_\_ per \_\_\_\_ total charge 63. Did your local government operate a Pay-As-You-Throw program for residential garbage during FY 16-17? (a system where residents are charged a fee by weight or volume for the amount of trash they discard) Yes According to GS 130A-309.08, local governments are required to conduct full cost accounting annually and to develop a system to inform users of such costs. 64. If your local government contracts for solid waste or recycling services, please report the annual contract amount. For solid waste services per year For recycling per year OR \$39,000 Combined Contract (solid waste, and recycling) 65. Collection Programs: Please complete the following table to the best of your ability to display the full costs of your local government's collection programs for waste, recyclables and yard waste including materials collected from convenience centers. If full cost analysis is not available, please report program budget in Total Cost column. Total Cost Cost Per Ton # of Households Disposal Cost Tons Collected Collection Cost including Managed served (tipping fees paid) (calculated by form) overhead **Municipal Solid Waste\*** Recycling Program\*\* Yard Waste Program Totals (calculated by form): \*for materials collected and sent for eventual disposal in a Municipal Solid Waste or Construction and Demolition Landfill.

66. If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide total budget for facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate costs proportionately. Landfill Budget: Transfer Station Budget:

Recycling Facility Budget:

Yard Waste / Compost Facility Budget: \$

67. What was your government's total combined annual budget for all solid waste and recycling services in 16-17? \$39,000

<sup>\*\*</sup>for materials collected by public recycling programs including those services offered to commercial and industrial generators. Do not include special waste services.

## **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.							
	Name:	Title:					
	Address:	Ci	ty:		Zip:		
	Telephone: Fax:			Email:			
69.	Please provide the physical address of the primary	y county white goo	ods colle	ection site.			
	Street 1:						
	Street 2:						
	City:				Zip:		
70.	Please provide the name of the business or person Name:				m white goods.		
	Street:						
	City:						
	Phone: Fax:		Email:				
71.	Give amounts / types of CFCs removed. Attach re	ecords of CFC rem	oval, ar	nd copy of certificati	on of person(s) perfor	ming extraction.	
	Type of CFC Removed				Amount		
72.	CFCs may be recycled or sent for destruction. Give						
	Firm	Mo	ethod of	f Disposal	Amount Earned	Amount Spent	
73.	Please report the tonnage of white goods collected white goods tonnage reported on page 5? Yes	-	17 in th	e Recycling Tonnag	es table on page 5 (qu	estion # 45). Was	
74.	List the amount of revenue for the white goods pr	ogram by source:					
	Revenue collected from sale of scrap:	\$					
	Revenue collected from White Goods Tax Distrib	outions: \$					
	Revenue from other source (e.g. grants):	\$					
	Total Revenue:	\$					
75.	According to the White Goods Law, White Good expenditures White Good Tax Distributions were					mounts and types of	
	Operational Expenses: \$						
	Capital Improvements: \$						
	Clean-up of Illegal White Goods Dumps: \$						
	Total Expenditures: \$						

Name:	<b>5</b> C.	KAP TIKES										
Address:   City:   Email:    77. Please provide the physical address of the primary county scrap tires collection site.  Street 1:   Street 2:   Strate:   North Carolina   Zip:    78. Tonnage/Number of scrap tires disposed July 1, 2016-June 30, 2017 (eschading tires from cleanup of nuisance sites)    79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated misance sites    79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated misance sites    79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated misance sites    80. Indicate the types of tires collected by the county:   Passenger   Number of tires    81. List the amount of revenue for the scrap tire program by source:   Revenue from Scrap Tire Tax Distributions:   S	76.	•										
Total Prices provide the physical address of the primary country scrap tires collection site.  Street 1:  Street 2:  City:  State: North Carolina  Zip:  78. Tonnage/Number of scrap tires disposed July 1, 2016-June 30, 2017 (excluding tires from cleanup of muisance sites)  Number of tires  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites  Tons or  80. Indicate the types of tires collected by the county:  Passenger  94. Heavy Truck  95. Large Off-Road  96. Large Off-Road  97. Revenue from Scrap Tire Tan Distributions:  85. Revenue from Scrap Tire Tan Distributions:  86. Revenue from Scrap Tire Clean-up Reimbursements:  87. Revenue from Scrap Tire Clean-up Reimbursements:  88. Revenue from Scrap Tire Clean-up Reimbursements:  89. Revenue from Scrap Tire Cost-Overrun Grants:  80. County's total scrap tire program contract expenditure (contract disposal/hauling costs), excluding costs of nuisance tire cleanups, for FY 16-17.  80. County's dditional scrap tire program expenditure (i.e. labor, convenience center cost), if any.  Labor  80. Hulling cost or fuel surcharge, if not included in contract cost above. S  10. July cost or fuel surcharge, if not included in contract cost above. S  10. Total Immber of tires oliceted for tires not eligible for free disposal.  10. Total Immber of tires offers a stand-alone plan in place for management of disaster debris?  11. Total number of tires disposal/recycling firm(s):  12. TEMPORARY DISASTER DEBRIS STAGING SITES  13. Does your local government have a plan in place for management of disaster debris?  14. In place the management program for your local government:  15. Place is the name, contact number(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:  16. Place is the management number of tires of the disaster debris management program for your local government:  17. Place is the plan is a stand-alone plan e-mail address of the person(s) in charge of the dis						Zip:						
Street 1:  Street 2:  City:  State: North Carolina  Zip:  Tonnage/Number of scrap tires disposed July 1, 2016-June 30, 2017 (excluding tires from cleamup of nuisance sites) Tons or  Number of tires  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated muisance sites Tons or  Number of tires  80. Indicate the types of tires collected by the county: Passenger  96. Heavy Truck  96. Large Off-Road  96.  81. List the amount of revenue for the scrap tire program by source: Revenue from Scrap Tire Tax Distributions:  \$8. Revenue from Scrap Tire Clean-up Reimbursements:  \$\$ County's total scrap tire program expenditure (ontract disposal/hauling costs).  \$\$ excluding costs of nuisance tire cleanups, for FY 16-17.  82. County's stolal scrap tire program expenditure (i.e. labor, convenience center cost), if any.  Labor  \$\$ Site Cost \$\$ Other \$\$ describe Other:  84. County's contract cost for scrap tire disposal.  \$\$ f'Ton; \$\$ /*Tire  85. Hauling cost or fuel surcharge, if not included in contract cost above. \$\$ /*Ton; \$\$ /*Tire  86. Total dipping fees collected not eligible for free disposal:  88. If scrap tires were not hauled off site by contracted scrvice provider, were they cut and disposed in a local landfill? \$\$ No  89. Name of tire disposal/recycling firm(s):    TEMPORARY DISASTER DEBRIS STAGING SITES  90. Does your local government have a plan in place for management of disaster debris? \$\$ Yes \$\$  No  If yes, indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to enable requirements for public assistance reimbursement in a declared disaster eventy. \$\$  Plone: \$\$ Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:  Name: \$\$ Name: \$\$				Emai	1:							
Street 2: City: State: North Carolina	77.	Please provide the physical address of the primary	county scrap tir	es collection sit	e.							
City: State: North Carolina Zip:  78. Tonnage/Number of scrap tires disposed July 1, 2016-June 30, 2017 (excluding tires from cleanup of nuisance sites)  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites  70. Number of tires  80. Indicate the types of tires collected by the county:  81. List the amount of revenue for the scrap tire program by source:  82. Revenue from Scrap Tire Tax Distributions:  83. Revenue from Scrap Tire Clean-up Reimbursements:  84. Revenue from Scrap Tire Cost-Overrun Grants:  85. Revenue from Scrap Tire Cost-Overrun Grants:  86. County's total scrap tire program contract expenditure (contract disposal/hauling costs),  87. Site Cost \$  88. Other \$  89. describe Other:  84. County's contract cost for scrap tire disposal. \$  87. Total tipping fees collected for tires not eligible for free disposal. \$  88. If scrap tires collected for tires not eligible for free disposal. \$  89. Name of tire disposal/recycling firm(s):  70. Does your local government have a plan in place for management of disaster debris?    Yes   No		Street 1:										
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80. Indicate the types of tires collected by the county:	78.		016-June 30, 201 or	17 ( <u>excluding</u> tin	res from cleanup of nu _Number of tires	isance sites)						
Passenger	79.	• • • • • • • • • • • • • • • • • • • •		county designate								
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Revenue from Tire Fees: \$ Revenue from Scrap Tire Clean-up Reimbursements: \$ Revenue from Scrap Tire Cost-Overrun Grants: \$ Revenue from Scrap tire program contract expenditure (contract disposal/hauling costs), \$ excluding costs of nuisance tire cleanups, for FY 16-17.  83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any. Labor \$ Site Cost \$	81.	1 1 6	,									
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describe Other:	83.	T -1	•	venience center	cost), if any.							
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your local government: Name: Tim Buck, Pamlico Co. Mgr. Name: Name: Name: Phone: 252 745 3133 Phone: Phone:	91.											
Name:         Tim Buck, Pamlico Co. Mgr.         Name:         Name:           Phone:         252 745 3133         Phone:         Phone:	92.		il address of the	person(s) in ch	arge of the disaster de	bris management program for						
Phone: 252 745 3133 Phone: Phone:		•	me:		Name:							
		Phone: 252 745 3133 Ph			701							
		E-mail: E-	•									

	Disaster Site #	e difficulty for local governments when atter Site Name		Disaster Site #	Site Name
94.	Does your plan address the r	management of household hazardou	us waste	and white goods follow	wing a disaster? Xes No
95.	Does your plan address mass	s animal mortality? Yes	No No		
		ANDONED MANUFACTU			
96.	Has your county considered	whether to implement a program for	or the m	anagement of abandon	ed manufactured homes?  Yes No
	If yes, has your county deve	loped a written plan for the manage	ement o	f abandoned manufactu	red homes? Yes No
		Part IX.	. Con	ıments	
					e your comments about this report or other
		nagement in North Carolina. Thank	•	•	
		e collection is contracted thru GDS the spring and collects at residence			ew Bern handles the white-goods o contact them with what happens to the
	e goods after they pick up.	the spring, and concets at residence	es caros	ide. Tod would need to	o contact them with what happens to the

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 <a href="https://deq.nc.gov/conservation/recycling/local-government-recycling-assistance">https://deq.nc.gov/conservation/recycling-assistance</a> or e-mail us at Lgteam@ncdenr.gov

