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: <u>http://deq.nc.gov/about/divisions/waste-management/solid-waste-section/annual-reporting</u>
- 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: <u>https://get.adobe.com/reader/</u> - 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

Environmental Quality

Local Government Report Form

Required - Enter Your Local Government Name: Fayetteville

State of North Carolina

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

Solid Waste and Materials Management Annual Report July 1, 2017 -- June 30, 2018

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

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

If you have questions or need assistance completing this form, please call 919-707-8136 or 919-707-8133.

Person Completing This Report	t: C. Teresa Faircloth	Title: Analyst				
Mailing Address: 455 Grove St		City: Fayetteville	Zip: 28301-0925			
Phone: 910-433-1508	Fax: 910-433-1516		Date: 08/30/1	8		
Email: CTFaircloth@ci.fay.nc.	us					
	General	Instructions				
Please remember that the time p for a specific question.	period for the report is JULY 1, 2017	through JUNE 30, 2018. Plea	ase check "No'	' if you have nothing to report		
1. Did your local governmen	t have a Recycling Coordinator or sir	nilar position for FY 17-18?	Yes	🔀 No		
Name Recycling Coordina	ator (if different from person complet	ing this report.)				
Name:		Title	2:			
Address:		City:		Zip:		
Telephone:	Fax:	Email:				
2. Did your local governmen	t have a Solid Waste Director or simi	lar position for FY 17-18?	Xes Yes	No		
If Yes, Name: Robert S	Stone	Title	e: Public Servic	es Director		
Address: 433 Hay St		City: Fayetteville		Zip: 28301-5537		
Telephone: 910-433-1691	Fax:	Email: RStone@ci.fay.nc.us				
3. Did your local governmen	t have dedicated or part-time Solid	Waste Enforcement Staff for	FY 17-18?	Yes No		
If Yes, Name: James R	Rhodes	Title: Solid Waste Superintendent				
Address: 455 Grove St		City: Fayetteville		Zip: 28301-0925		
Telephone: 910-433-1503	Fax: 910-433-1516	Email: JRhodes@ci.fay.nc.us				
4. Did your local governmen all that apply)	t have solid waste ordinances in place	e addressing any of the follow	ving during FY	17-18? (if yes, please check		
🔀 Disposal Bans	⊠ Illegal Dumping ⊠ Littering	Other, Please Describe	2:			
5. Did your local governmen mulching, composting)?	t manage, provide or contract for any	solid waste services in FY 1	7-18 (e.g., colle Yes	ection, disposal, recycling,		
If you ans	wer "No" to question 5, the report	is complete, please email to	o Lgteam@ncd	denr.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.						
6.	Did your local government have a recycling program in place for collecting recyclable materials generated at \bigotimes Yes \square No public buildings in FY 17-18?						
7.	Did your local government have any program or policy encouraging or requiring local agencies to Yes No purchase products with recycled content?						
8.	Did your local government have a program in place to collect and recycle spent fluorescent lights 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						
SO	URCE REDUCTION / REUSE						
9.	Did your local government have a backyard composting program? Yes No						
10.	If yes, please check all backyard composting activities that apply:						
	Education Demonstration site(s) Bin distribution/sales Number of Bins distributed?						
11.	Did your local government operate a program to promote source reduction efforts such as junk mail reduction, 🗌 Yes 🕅 No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives?						
12.	Did your local government offer a waste exchange or reuse program? 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? Paint exchange Number of gallons recovered?						
	Other (e.g. pallet exchange, etc.)						
PU	BLIC RECYCLING SERVICES						
14.	Which of the following responses best describes your recyclables recovery activities for the period July 1, 2017 through June 30, 2018?						
	My local government DID operate or contract for a recyclables recovery program. (please continue to question 15)						
	My local government DID NOT operate or contract for recyclables recovery BUT DID participate in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; then go to Part IV on page 7 .)						
	With which local government did you participate?						
	My local government DID NOT operate, contract or participate in a recycling program. (Go to Part IV on page 7 .)						
•	If your local government DID operate or contract for a recyclables recovery program, please indicate in the following sections the type of program in operation and provide specifics about your program(s).						
CU	RBSIDE RECYCLING PROGRAM						
15.	Did your government operate a Curbside Recycling Program? 🔀 Yes 🗌 No, skip to question # 25						
16.	Who collected the recyclable materials for your local government's curbside recycling program?						
	Local government employees						
	Private contractor (please specify) Waste Management Inc.						
	Franchised hauler (please specify)						
	Other (please specify)						

17.	 Please provide the following information about your community: a. Total number of households in your jurisdiction? 61,234 							
	b. Number of households eligible to participate in the curbside recycling program: 61,234							
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 42,864							
18.								
19.	What sector(s) of your community was served by the curbside recycling program?							
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							
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: Iss than 50 gallon cart 65 gallon cart 95 gallon cart Image: Size size size size size size size size s							
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? All None Some please list # of staffed sites:							
EL	ECTRONICS RECYCLING PROGRAM							
	ise answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any erials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.							
32.	Did your community operate an electronics recycling program in FY 17-18? Xes 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:							

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33.	Did your electronics	recycling program co	llect or accept televisions from	(check all that apply):	X 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: Cumberland County Solid Waste/Synergy Recycling

Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? Xes

OTHER PUBLIC RECYCLING PROGRAMS

Please answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by
the local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the
Recycling Tonnages Chart on pg 5.
28. Did your local accomment encode a multifemily recycling collection are seen that any idea on another recycling convict for recidents

50.	of multifamily properties in a manner other than through your curbside or dropoff recycling programs? \bigvee Yes \square No
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? \Box Yes \boxtimes 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? Xes No If yes, please check all materials that were recycled and report tonnages in tonnage table on page 5:
	Clean Wood Dirick, concrete, etc. Sheetrock Vinyl siding Shingles Metals Other
42.	Does your local government have an ordinance regulating the construction and demolition waste stream Yes No 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) Plastic Cart Recycling

Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.

RECYCLING TONNAGES FROM PUBLIC PROGRAMS

- 45. a. Enter data in the table below for ALL recycling programs operated or contracted for by your local government. Provide TONNAGES (or estimates) for each material collected for the period JULY 1, 2017 through JUNE 30, 2018. DO NOT include materials that were not collected or managed by your local government either directly or under contract to a private service provider.
 - b. Do NOT report YARD WASTE, TIRES, HHW, USED OIL, OIL FILTERS, ANTI-FREEZE, BATTERIES or other SPECIAL WASTE tonnages on this page - these items should be reported in other sections of report form. See page 6 for SPECIAL WASTES.
 - c. Please report materials collected in tons only. Please only extend numbers to two decimal places (x.xx).
 - d. If you collected single stream or other commingled materials, record Tons in the "Commingled tons" row and then check the box for each individual material type that was commingled.

DDOCDAM	Curbside		Drop-off		All "Oth	ner" 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						27.08	27.08
METAL:							
Aluminum Cans							
Steel Cans	\square						
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)	\square						
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper							
Cartons / Aseptic Containers							
WOOD:							
Pallets						0.23	0.23
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled tons-check all items collected above		7,195.69			\square	764.62	7,960.31
TOTAL TONS:		7,195.69				791.93	7,987.62

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 <u>only</u> 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.

a		**7 4	A H U			36 / 13	A H A H			A H H	D	
S	pecial	Waste	Collections	(Do No	t Include	Materials	Collected	as part of	t an HHW	Collection	Program	or Event)

4

Used Motor Oil □ Yes No	47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		n collect this m the public?	# of sites	-	ta on quantities collected / managed. Please report in indicated units.				
Used Antifreeze □ yes No gallons Batteries, Lead Acid □ Yes No		Used Motor Oil	Yes	🛛 No				gallons	5		
Batteries, Lead Acid Yes No # batteries, or bbs Batteries, Dry Cell Yes No Ibs ibs Fluorescent Bulbs/Lights Containing Mercury Yes No Ibs, or # bulbs Propane Tanks Yes No Ibs, or # bulbs Other Special Wastes - please provide waste Yes No Ibs, or # anks Used Cooking Oil / Waste Vegetable Oil Yes No Ibs, or # anks Used Cooking Oil / Waste Vegetable Oil Yes No Ibs, or # anks Used Cooking Oil / Waste Vegetable Oil Yes No Ibs, or # anks Use hore: Yes No Ibs, or # con- tainers NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) Yes No Ibs Huwerhold 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? Yes No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permane		Used Oil Filters	Yes	🛛 No		barı	rels, or		lbs		
Batteries, Dry Cell Yes No		Used Antifreeze	Yes	🛛 No				ga	llons		
Pluorescent Bulbs/Lights Containing Mercury Yes No ibs. or # bulbs Propane Tanks Yes No ibs. or # tanks Used Cooking Oil / Waste Vegetable Oil Yes No ibs. or # tanks Used Cooking Oil / Waste Vegetable Oil Yes No ibs. or # tanks Other Special Wastes - please provide waste Yes No ibs. or # tanks Pesticide Containers (NCDA Program, not Yes No ibs. or # compassion Itype here: Wes No ibs. or # compassion # compassion No Wes No ibs. or # compassion # compassion # compassion No gals. ibs. or ibs. # compassion # co		Batteries, Lead Acid	Yes	🛛 No		#t	patteries, or	r	lbs		
Propane Tanks		Batteries, Dry Cell	Yes	🛛 No					lbs		
Used Cooking Oil / Waste Vegetable Oil Yes No Ibs, or gallons Other Special Wastes - please provide waste type here: Yes No Ibs, or gallons Pesticide Containers (NCDA Program, not pesticides themselves) Yes No Ibs, or galos, or galos, or NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) Yes No gals, or ibs HHW event or by a paint exchange program Yes No gals, or ibs HUW event or by a paint exchange program Yes No gals, or ibs HUW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Eve b. How many days was your HHW program open to accept materials during this Fiscal Year? No Pesse ist partner(s) d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year? No Pesse itemp opunds f. Amounts of individual materials form small businesses (Conditionally Exempt Small Quantity of materials are known please itemize below. If da about individual materials iscollected by HHW Program: if totals for individual materials instel were may if yes, please estimate the amount of business material managed f. Amounts of individual materials indurity be materials individual materials instel were si		Fluorescent Bulbs/Lights Containing Mercury	Yes	🛛 No			lbs, or	# b	ulbs		
Other Special Wastes - please provide waste type here: Yes No Ibs Other Special Wastes - please provide waste type here: Yes No Ibs Pesticide Containers (NCDA Program, not pesticides themselves) Yes No Ibs, or Its NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) Yes No Ibs Ibs Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Yes No gals, Ibs 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? Yes No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Eve b. How many days was your HHW program open to accept materials during this Fiscal Year? Eoid you partner or co-sponsor your HHW program with another local government? Yes No Please list partner(s)		Propane Tanks	Yes	No No			lbs, or	#	tanks		
type here: Image: Second S		Used Cooking Oil / Waste Vegetable Oil	Yes	No No			lbs, or	ga	llons		
pesticides themselves) Image restricted Disposal Assistance Program (for management of pesticides, not containers) Yes No Its Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Yes No gals, or Its HUW event or by a paint exchange program) Yes No gals, or Its HUW event or by a paint exchange program) Yes No gals, or Its HUW event or by a paint exchange program) Yes No gals, or Its HUW event or by a paint exchange program) Yes No gals, or Its HUW event or by a paint exchange program) Yes No gals, or Its HUW event or by a paint exchange program Yes No Permanent FY 17-18? Yes No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event b. How many days was your HHW program open to accept materials during this Fiscal Year?			Yes	No No					lbs		
(for management of pesticides, not containers) Yes No Its Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Yes No gals, or Its Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event 10s No Its 48. Did your local government operate a household hazardous waste collection program or event in FY 17-18? Yes No Its a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Eve b. How many days was your HHW program open to accept materials during this Fiscal Year? . . c. Did you partner or co-sponsor your HHW program with another local government? Yes No Please list partner(s)			Yes	No No			lbs, or				
HHW event or by a paint exchange program) Yes Image: No or Image: 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? Image: No Please list partner(s) Image: No Please list Hest isto in usinesses (Conditionally Exempt Small Qua			Yes	No No					lbs		
 48. Did your local government operate a household hazardous waste collection program or event in FY 17-18? Yes No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event b. How many days was your HHW program open to accept materials during this Fiscal Year? c. Did you partner or co-sponsor your HHW program with another local government? Yes No Please list partner(s) d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year? e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? Yes No If yes, please estimate the amount of business material managed pounds f. Amounts of individual materials collected by HHW Program: if totals for individual materials collected by HHW Program. If total quantity of materials listed in question 47 Used Motor Oil (gal) Used Motor Oil (gal) Used Oil Filters # of Barrels, or bls. Used Antifreeze (gal) Event Lead Acid Batteries (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs) g. Provide Total Quantity of materials collected by HHW Program. If individual materials were reported in 48f, please net the weight of those materials out of the total listed here. h. Please list HHW Collection Contractor i. Estimated cost of HHW / CESQG program or event(s) \$ 		· · · · · ·	Yes	No No					lbs		
Fluorescent Bulbs / Lights Containing Mercury (lbs)		 Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma If yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, p Note, materials listed here should only be th Used Motor Oil (gal) 	all businesses all businesses s material ma y HHW Progr lease simply ose collected Use	in your HHW (Conditionall anaged ram: if totals f provide total c at an HHW P ed Oil Filters	or indivi quantity	on program this of Small Quanti dual materials of materials col and should not i _ # of Barrels,	s Fiscal Yea ity Generate pounds are known llected by H include man	ors)? Y please itemize HW program terials listed in lbs.	e below. If data n in 48g below. n question 47.		
 g. Provide Total Quantity of materials collected by HHW Program. If individual materials were reported in 48f, please net the weight of those materials out of the total listed here. h. Please list HHW Collection Contractor i. Estimated cost of HHW / CESQG program or event(s) \$ 							Other Batte	eries (lbs)			
 h. Please list HHW Collection Contractor i. Estimated cost of HHW / CESQG program or event(s) \$ 		g. Provide Total Quantity of materials collected	Provide Total Quantity of materials collected by HHW Program. If individual materials were								
i. Estimated cost of HHW / CESQG program or event(s) \$											
		i. Estimated cost of HHW / CESQG program	or event(s) \$								
rages 5 intough 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling servic	Pag						hat they D	O provide red	cycling services		

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is only to be completed by Counties.

Part IV. Yard Waste, Mulching and Composting Management

This section concerns management of vegetative materials. Yard waste may not be disposed in sanitary landfills, incinerators, or in unpermitted sites and it is illegal to burn. Composting and mulching are popular management options. Please answer the questions below about your management of vegetative materials. Do not include information on food waste or non-vegetative materials in this section.

- 49. Does your local government operate a yard waste program? ⊠ Yes □ No If yes please indicate how yard waste is managed by checking all that apply: ⊠ Collected curbside □ Collected at convenience center □ Received at yard waste, compost, or LCID facil.
- 50. Did a storm event significantly impact the amount of yard waste your government managed during FY 17-18? 🗌 Yes 🛛 No
- 51. What quantities of materials were managed by your yard waste program? **Provide information in TONS OR CUBIC YARDS of**
 - organic material (yard waste, brush, limbs, leaves, etc.) managed. For conversion purposes, use 400 lbs./cubic yd.

Destination	Check if used	Tons	Cubic Yards	Please Provide Name and Location of Facility Receiving Vegetative Materials
End user (to farmer or home-owner)				
Your local government's mulch or compost facility				
Other public mulch or compost facility	\boxtimes	21,683.54		Cumberland County, Wilkes Rd. Facility
Private mulch or compost facility				
Land clearing and inert debris landfill (LCID)				
Energy / Fuel Use (e.g. boiler fuel market)				
Total		21683.54		

YARD WASTE MANAGEMENT FORMULA: If yard waste quantities are not tracked, you may use this formula below to help you estimate yard waste volume. Calculate for each truck used in your yard waste management program, and then enter the grand total volume managed by program in the appropriate boxes above. *Ex.* 10 yd³ truck x 3 days/wk x 16 wks = 480 yd³

	Х	X	Χ	=		yd^3
Size of Truck (in yards)	Avg. no. of times	truck fills each week	# of weeks truck is used during year		TOTAL	
	Part V	. Solid Wast	e Collection Services			

This section concerns your local government's provision of solid waste (garbage) collection services.

52. Please complete the following table about your government's solid waste collection system.

	Sector	Sector Who Collects Solid Waste? Insert Letter - see codes at right			How is Solid Waste Collected? Insert # - see codes at right				Who Collects Solid Waste?	How is Solid Waste Collected?		
	Residential	Primary	A	Secondary	0	Primary	1	Secondary	ingin	· · · · · · · · · · · · · · · · · · ·	 Once a week at household Twice a week at household Convenience center/greenbox 	
	Commercial	Primary	D	Secondary		Primary		Secondary		d. Local government not	4. As needed or by request5. Daily	
	Industrial	Primary	D	Secondary		Primary		Secondary		1	6. Other	
53.	If you provide	residenti	<u>al</u> was	te collect	ion at sin	gle-fami	ily hou	seholds in g	your juri	isdiction, please answer the	following questions:	
	What type of co	ollection	metho	od is used	?	Fully A	Automa	ated 🔀	Semi-A	utomated 🗌 Manual	Don't know	
	What is the star	ndard co	llectio	n frequen	cy?	Weekl	у [Two tir	nes per v	week Other		
	What is the typ	ical serv	ice po	int for sin	gle famil	y house	hold w	vaste?	🛛 Curt	oside Back yard / Bac	k door	
	What type of co	ollection	conta	iner is use	ed?	Govern	nment-	provided ca	arts	Resident-provided contai	iner Bags	
	Do you offer bulky waste collection services? Xes No											
54.	. For municipalities - did your government collect white goods at the curb? Xes No If so, were white goods delivered to the county for marketing? Yes No											
]	Part	VI. So	lid W	aste a	nd R	Recyclin	g Edu	icational Activities	l.	
55.	Did your local issues / activitie	-	ment h X		-			orm citizens art VII, pag	-	cally about solid waste man	agement and / or recycling	
56.	Please estimate your annual budget for solid waste related education and outreach activities: \$8,045.16											
57.	Does your com	munity [produc	e recyclir	ng educat	ion and	outrea	ch materials	s in lang	uages besides English?	Yes No	
	If YES, please	list other	r langu	ages used	l: Spanis	sh						
58.	Please provide	your rec	ycling	website a	address a	nd publi	c infor	mation pho	ne numl	ber if applicable.		
	Website: fayet	tevillenc	.gov							Phone #: 910-43	3-1329	

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		Part VII.	Resources for Sol	id Waste Management and Full Cost Accounting	
				ent programs are essential for continued success of these programs. The j vaste and materials management programs.	ollowing
59.	Did y	our local governm	ent operate an Enterprise F	Fund for solid waste services in FY 17-18? Xes No	
60.	With	regards to funding	sources, check all that app	ly to your local government:	
		Tipping fees		Volume/weight-based fees (e.g. PAYT) Tire tax	
		Property taxe	es / general fund	Sale of recyclables White Goods tax	
		Per househol	d charges	Grants Disposal Tax	
61.				uted to eligible local governments on a quarterly basis by the Department used by a city of county solely for solid waste management programs and	
	How	are disposal tax di	stributions being used?		
62.	If app	olicable, please pro	wide your FY 17-18 house	hold fees. (e.g., a. <u>\$45.00</u> per <u>year</u> per <u>household</u> for solid waste)	
	a. \$	108	per year	per household for solid waste	
	b. \$		per	per for recycling	
	c. \$		per	per for yard waste	
	d. \$		per	per for bulky waste	
	e. \$		per	per availability fee	
	f. \$	108	per	per household total charge	
63.			ent operate a Pay-As-You- ght or volume for the amo	Throw program for residential garbage during FY 17-18? (a system when unt of trash they discard) \Box Yes \bigotimes No	e residents
		g to GS 130A-309 sers of such costs.	.08, local governments ar	e required to conduct full cost accounting annually and to develop a sy	vstem to
64.	If you	ır local governmen	t contracts for solid waste	or recycling services, please report the annual contract amount.	
	-	-		blid waste services per year	
		\$2,263,208.64		ecycling per year	
			OR		

65. Collection Programs: Please complete the following table to the best of your ability to display the full costs of your local government's <u>collection programs</u> 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.								
	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including	Cost Per Ton Managed		
				(overhead	(calculated by form)		
Municipal Solid Waste*	61,234	57,869.85	4,844,887	56,946	4,901,833	84		
Recycling Program** 61		8,086.04	2,447,987		2,447,987	302		
Yard Waste Program	61,234	21,683.54	2,439,494	40,420	2,479,914	114		
Totals	(calculated by form):	87,639.43	9,732,368	97,366	9,829,734	112		

Combined Contract (solid waste, and recycling)

*for materials collected and sent for eventual disposal in a Municipal Solid Waste or Construction and Demolition Landfill.

**for materials collected by public recycling programs including those services offered to commercial and industrial generators. Do not include special waste services.
 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:

\$

Yard Waste / Compost Facility Budget: \$

Recycling Facility Budget:

67. What was your government's total combined annual budget for all solid waste and recycling services in 17-18? \$11,946,870

\$

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Part VIII. County Mandated Programs

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

WH	IITE GOODS						
68. Please provide name, address, phone number, and e-mail of person responsible for white goods program.							
	Name:				Title:		
	Address:			City:			
	Telephone: Fa	ıx:		Email:			
69.	Please provide the physical address of th	e primary co	ounty white go	oods collection site.			
	Street 1:						
	Street 2:						
	City:			_ State: North Carol	ina	Zip:	
70.	Please provide the name of the business Name:	-			Cs) from white	e goods.	
	Street:						
	City:				ina	Zip:	
	Phone: Fax:						
71.	Give amounts / types of CFCs removed.						
	Type of CFC Ren					ount	
72.	CFCs may be recycled or sent for destru-	ction Give r	name of firm	disposal method and a	mount earned	/ spent for CE(7 disposal
12.	Firm			Iethod of Disposal		ount Earned	Amount Spent
73.	Please report the tonnage of white goods white goods tonnage reported on page 5		uring FY 2017	• •	Fonnages table	on page 5 (qu	estion # 45). Was
74.	List the amount of revenue for the white	goods progr	am by source	:			
	Revenue collected from sale of scrap:		\$				
	Revenue collected from White Goods Ta	ax Distributi					
	Revenue from other source (e.g. grants):						
	Total Revenue:						
75.	According to the White Goods Law, Whee expenditures White Good Tax Distribute					vities. Give a	mounts and types of
	Operational Expenses:	\$			-		
	Capital Improvements:						
	Clean-up of Illegal White Goods Dumps						
	Total Expenditures:	\$			-		
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6.	Please provide name, address, phone number, and e-n Name:	1	1	1 1 0	
				11tte:	
	Address:				
	Telephone: Fax:		Emai	1:	
7.	Please provide the physical address of the primary con		tires collection sit	e.	
	Street 1:				
	Street 2:				
	City:				
3.	Tonnage/Number of scrap tires disposed July 1, 2017 Tons or	-June 30, 2	2018 (<u>excluding</u> ti	res from cleanup of nu Number of tires	isance sites)
).	Tonnage/Number of scrap tires disposed from cleanup Tons or	o of state o	or county designate	ed nuisance sites Number of tires	
).	Indicate the types of tires collected by the county: Passenger % Heavy True	ck	%	Large Off-Road	%
	List the amount of revenue for the scrap tire program	by source:			
	Revenue from Scrap Tire Tax Distributions:	\$			
	Revenue from Tire Fees:	\$			
	Revenue from Scrap Tire Clean-up Reimbursements:	\$			
	Revenue from Scrap Tire Cost-Overrun Grants:	<i>•</i>			
	Total Revenue:	\$			
2.	County's total scrap tire program contract expenditure excluding costs of nuisance tire cleanups, for FY 17-1	(contract 8.	disposal/hauling c	costs), <u>\$</u>	
3.	County's additional scrap tire program expenditure (i. Labor \$		onvenience center	cost), if any.	
	Site Cost \$				
	Other \$		describe Other:		
ŀ.	County's contract cost for scrap tire disposal. \$		/ Ton; \$	/ Tire	
	Hauling cost or fuel surcharge, if not included in cont	ract cost	above. \$	/ Ton; \$	/ Tire
5 .	Total tipping fees collected for tires not eligible for fr	ee disposa	ıl. \$		
<i>.</i>	Total number of tires collected not eligible for free di	_			
8.	If scrap tires were not hauled off site by contracted se				
).				t and disposed in a loc	
	MPORARY DISASTER DEBRIS STAGIN				
).	Does your local government have a plan in place for r			is? Yes	No
	If yes, indicate if the plan is a stand-alone plan or in c	-			
•	If you indicated having a plan, has the plan been revier requirements for public assistance reimbursement in a				
	Please list the name, contact numbers(s), and e-mail a your local government:			arge of the disaster de	bris management program for
	Name: Name	:		Name:	
	Phone: Phone	•		Phone:	
		•			

93. Please list the temporary disaster debris staging sites in your county or municipality which have been reviewed for conflicts with the Natural Heritage Program (NHP) and the State Historic Preservation Office (SHPO) through coordination with the Solid Waste Section. *Please note that the vetting of a site prior to a disaster is advantageous to local governments because a staging site which is found to have impacted federal or state resources after a disaster may cause difficulty for local governments when attempting to obtain FEMA reimbursement.* Attach extra sheets, if needed.

	<i>y</i>	,		· · · · · · · · · · · · · · · · · · ·
Disaster Site #	Site Name		Disaster Site #	Site Name

94.	Does your plan address the management of household hazardous waste and white goods following a disaster?						
95.	Does your plan address mass animal mortality?						
MA	NAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES						
96.	Has your county considered whether to implement a program for the management of abandoned manufactured homes? 🗌 Yes 📄 No						
	If yes, has your county developed a written plan for the management of abandoned manufactured homes? Yes No						

Part IX. Comments

Use this section to elaborate on any info provided in your report as necessary. We would appreciate your comments about this report or other matters regarding solid waste management in North Carolina. Thank you for your time. You may submit additional sheets if needed.

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

