## **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: Grimesland

**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

|   | Please submit this form t   | o Lgteam@ncdenr.gov by Septer       | mber 1, 2018.                                   |  |  |  |  |  |
|---|---|-------------------------------------|---|--|--|--|--|--|
| If you have   | questions or need assistance co   | mpleting this form, please call     | 919-707-8136 or 919-707-8133.                   |  |  |  |  |  |
| Person Completing This F  | Report: Lee Latham  |                                     | Title: Public Works Director                    |  |  |  |  |  |
| Mailing Address: PO Box   | 147   | City: Grimesland                    | Zip: 27837                                      |  |  |  |  |  |
| Phone: 252-752-6337   | Fax: 252-752-7  | 433                                 | Date: June 20, 2018                             |  |  |  |  |  |
| Email: grimeslandtown@  | embarqmail.com  |                                     |   |  |  |  |  |  |
|   |   | General Instructions                |   |  |  |  |  |  |
| Please remember that the t for a specific question.                                 | time period for the report is JULY  | 1, 2017 through JUNE 30, 2018.      | Please check "No" if you have nothing to report |  |  |  |  |  |
|   | mment have a Recycling Coordinat  | or or similar position for FY 17-   | 18? 🗌 Yes 🖂 No                                  |  |  |  |  |  |
|   | ordinator (if different from person   | -                                   |   |  |  |  |  |  |
| Name:   |   | Title:                              |   |  |  |  |  |  |
| Address:  |   | City:                               | Zip:  |  |  |  |  |  |
|   |   |                                     | Zip   |  |  |  |  |  |
| Telephone:  | Fax:  | Email:                              |   |  |  |  |  |  |
| 2. Did your local gover   | Did your local government have a Solid Waste Director or similar position for FY 17-18?                         |                                     |   |  |  |  |  |  |
| If Yes, Name:   |   |                                     | Title:  |  |  |  |  |  |
| Address:  |   | City:                               | Zip:  |  |  |  |  |  |
| Telephone:  | Fax:  | Email:                              |   |  |  |  |  |  |
| 3. Did your local gover   | Did your local government have <b>dedicated or part-time</b> Solid Waste Enforcement Staff for FY 17-18? Yes No |                                     |   |  |  |  |  |  |
| If Yes, Name:   |   |                                     | Title:  |  |  |  |  |  |
| Address:  |   | City:                               | Zip:  |  |  |  |  |  |
| Telephone:  | Fax:  | Email:                              |   |  |  |  |  |  |
| <ol> <li>Did your local gover<br/>all that apply)</li> <li>∑ Disposal Ba</li> </ol> |   | in place addressing any of the fo   | ollowing during FY 17-18? (if yes, please check |  |  |  |  |  |
| 5 Did your local gover  | ment manage provide or contrac  | t for any solid waste services in F | TY 17-18 (e.g. collection disposal recycling    |  |  |  |  |  |

5. ment manage, provide or contract for any solid waste services in FY mulching, composting)? X Yes No

If you answer "No" to question 5, the report is complete, please email to Lgteam@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.   |  |  |  |  |  |
| 6.  | Did your local government have a recycling program in place for collecting recyclable materials generated at Yes INO 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<br>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:   |  |  |  |  |  |
| 10  | 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 <b>DID operate or contract</b> for a recyclables recovery program. ( <b>please continue to question 15</b> )   |  |  |  |  |  |
|     | My local government <b>DID NOT operate or contract</b> for recyclables recovery <b>BUT DID participate</b> in a recyclables<br>recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; <b>then go to Part IV on page 7</b> .) |  |  |  |  |  |
|     | With which local government did you participate?   |  |  |  |  |  |
|     | My local government <b>DID NOT operate, contract or participate</b> in a recycling program. ( <b>Go to Part IV on page 7</b> .)  |  |  |  |  |  |
|     | If your local government <b>DID operate or contract</b> 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? X 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) Pak-R Disposal & Recycling Inc.  |  |  |  |  |  |
|     | Franchised hauler (please specify)   |  |  |  |  |  |
|     | Other (please specify)   |  |  |  |  |  |

| 17. | Please provide the following information about your community:<br>a. Total number of households in your jurisdiction? 193   |  |  |  |  |
|-----|---|--|--|--|--|
|     | b. Number of households eligible to participate in the curbside recycling program: 193  |  |  |  |  |
|     | c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 193  |  |  |  |  |
| 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       Multiple service districts  |  |  |  |  |
| 19. | What sector(s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served |  |  |  |  |
| 20. | If you checked commercial or industrial in question 19, please indicate the number of accounts served: 17   |  |  |  |  |
| 21. | How frequently were the curbside recyclables collected?<br>Once a week Every other week / biweekly Other  |  |  |  |  |
| 22. | Other   |  |  |  |  |
| 23. | Please describe the method / style of recyclable materials handling:<br>Curb-sort (collector separates material as collected)<br>dual / two stream  |  |  |  |  |
| 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       multiple sizes of cart available  |  |  |  |  |
| 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   |  |  |  |  |
|     | use answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any<br>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? Yes Xo, 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 progra | am collect or acce | pt 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
- DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was 35. 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: \$

Briefly explain how Electronics Management Funds were spent during FY 2017-18 (please list items purchased if applicable): 36.

37. If you did operate an electronics recycling program, please provide the following information about your vendor / contractor: Name of electronics recycling vendor(s) during FY 17-18:

Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? No

#### OTHER PUBLIC RECYCLING PROGRAMS

| Please answer the following questions about local government sponsored recycling efforts. List only programs operated or contract    | ted for <u>by</u> |
|--|-------------------|
| the local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the | he                |
| Recycling Tonnages Chart on pg 5.  |                   |

| 38. | 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                              |
|     | 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?        | 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 go | overnment have an ordinand  | ce regulating the o | construction and dem  | olition waste stre | am 🗌 Yes | 🔀 No  |
|     | with the intention | of encouraging or requiring | g waste reduction   | or recycling of these | materials?         | 105      |       |

Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 17-18. 43. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)

| Public Parks Recycling Program | Athletic Field /Venue Recycling Program |
|--------------------------------|---|
|                                |   |

- Recycling Service for Special Events / Festivals Pedestrian Recycling Program
- Please identify all "Other" programs or services operated by your government during FY 17-18. (check all that apply and if possible 44 indicate tonnages on page 5 in "Other" column)
  - Public School Recycling Program
  - Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)
  - Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events
  - Organics / Food Waste Recycling other than yard waste program
  - Oyster Shell Recycling Program
  - Other Programs (please specify)

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

### **RECYCLING TONNAGES FROM PUBLIC PROGRAMS**

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

| DDOCDAM   | C         | urbside |          | Drop-off | All "C   | Other'' 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)                                 | $\square$ |         |          |          |          |                  |                                 |
| Cardboard (OCC)                                 |           |         |          |          |          |                  |                                 |
| Magazines (OMG)                                 |           |         |          |          |          |                  |                                 |
| Office Paper                                    |           |         |          |          |          |                  |                                 |
| Mixed / Other Paper                             |           |         |          |          |          |                  |                                 |
| Cartons / Aseptic Containers                    |           |         |          |          |          |                  |                                 |
| WOOD:   |           |         |          |          |          |                  |                                 |
| Pallets   |           |         |          |          |          |                  |                                 |
| Other Wood - DO NOT                             |           |         |          |          |          |                  |                                 |
| report yard waste tons here                     |           |         |          |          |          |                  |                                 |
| OTHER MATERIALS:                                |           |         |          |          |          |                  |                                 |
| Textiles (clothes etc)                          |           |         |          |          |          |                  |                                 |
| Televisions                                     |           |         |          |          |          |                  |                                 |
| Other Electronics                               |           |         |          |          |          |                  |                                 |
| C&D Materials Recycling                         |           |         |          |          |          |                  |                                 |
|   |           |         |          |          |          |                  |                                 |
|   |           |         |          |          |          |                  |                                 |
|   |           |         |          |          |          |                  |                                 |
| Commingled tons-check all items collected above |           | 9.31    |          |          |          |                  | 9.31                            |
| TOTAL TONS:                                     |           | 9.31    |          |          |          |                  | 9.31                            |

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 | <b>A H U</b> |        |           | 36 / 13   | <b>A H A H</b> |            |          | <b>A H H</b> | D              |           |
|---|--------|-------|--------------|--------|-----------|-----------|----------------|------------|----------|--------------|----------------|-----------|
| S | pecial | Waste | Collections  | (Do No | t Include | Materials | Collected      | as part of | t an HHW | Collection   | <b>Program</b> | or Event) |
|   |        |       |              |        |           |           |                |            |          |              |                |           |

4

| Used Motor Oil       Yes       No       gallons         Used Oil Filters       Yes       No       burrels, or       bbs         Batteries, Lead Acid       Yes       No       gallons       bbs         Batteries, Lead Acid       Yes       No       gallons       bbs         Batteries, Dry Cell       Yes       No       bbs       bbs         Propane Tanks       Yes       No       bbs, or       # bulbs         Propane Tanks       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         NCDA Pesticide Disposal Assistance Program       Yes       No       bbs       groot         Itatex Paint (do not include paint collected at       Yes       No       gallons       bbs         Howschold Hazardous waste collection program or event in FY 17-18?       Yes       No       if Yes, please respond to the follo  | 47. | Special Waste Programs for Collecting<br>Materials <u>from Citizens</u> by Material Type  |  | n collect this m the public?  | # of sites   | -   | tities collect<br>port in indic  | ted / managed.<br>eated units.  |                                    |
|--|-----|---|--|---|--|---|--|---|------------------------------------|
| Used Antifreeze               Vestore              No              galons          Batteries, Lead Acid              Yestore              No              # batteries, or               Ibs          Batteries, Dry Cell              Yes               No               # batteries, or               Ibs          Fropane Tanks              Yes               No               Ibs, or               # tanks          Used Coxing Oil / Waste Vegetable Oil               Yes               No               Ibs, or               # tanks          Used Coxing Oil / Waste Vegetable Oil               Yes               No               Ibs, or               gallons          Other Special Wastes - please provide waste               Yes               No               Ibs          Pesticide Containers (NCDA Program, not             pesticides, not containers               Yes               No               gals               Ibs          Household Hazardoss Maste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event               Sol your local govermment oreparta in bous   |     | Used Motor Oil  | Yes  | 🛛 No  |  |   |  | gallons   |                                    |
| Batteries, Lead Acid       □       Yes       No       # batteries, or       Its         Batteries, Dry Cell       □       Yes       No       □       Its         Fluorescent Bulbs/Lights Containing Mercury       Yes       No       □       bs, or       # bulbs         Propane Tanks       □       Yes       No       □       bs, or       # tanks         Used Cooking Oil / Waste Vegetable Oil       □       Yes       No       □       bs, or       # tanks         Other Special Wastes - please provide waste       □       Yes       No       □       bs, or       # tanks         Other Special Wastes - please provide waste       □       Yes       No       □       bs, or       # con-         Pesticide Containers (NCDA Program, not       □       Yes       No       □       bs, or       □       tanes         NCDA Pesticide Disposal Assistance Program       Yes       No       □       gals       □       □       bs         HCDA Pesticide Disposal Assistance Program       Yes       No       □       gals       □       □       bs         Hueschold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       48. Did your local government operate a houschold hazardous w  |     | Used Oil Filters  | Yes  | 🛛 No  |  | barr  | els, or  | lbs   |                                    |
| Batteries, Dry Cell       □       Yes       No       □ <td></td> <td>Used Antifreeze</td> <td>Yes</td> <td>No No</td> <td></td> <td></td> <td></td> <td>gallons</td> <td></td>   |     | Used Antifreeze   | Yes  | No No   |  |   |  | gallons   |                                    |
| Fluorescent Bulbs/Lights Containing Mercury       Yes       No       bs. or       # bulbs         Propane Tanks       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # con-         Pesticide Containers (NCDA Program, not       Yes       No       bs. or       # con-         Pesticide Disposal Assistance Program       Yes       No       gals.       bs         Id our include paint collected at       Yes       No       gals.       bs         Huwehold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       48       bd       So or       No       If Yes, please respond to the following questions:         a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection program or Event       bd your partner or co-sponsor your HHW program with another local government?       Yes   |     | Batteries, Lead Acid  | Yes  | 🛛 No  |  | # b   | atteries, or   | lbs   |                                    |
| Propane Tanks       □       Yes       No       □       bbs, or       # tanks         Used Cooking Oil / Waste Vegetable Oil       □       Yes       No       □       bbs, or       gallons         Other Special Wastes - please provide waste       □       Yes       No       □       bbs, or       gallons         Other Special Wastes - please provide waste       □       Yes       No       □       bbs, or       # con-         Ipsticide Stemsselves)       □       Yes       No       □       bbs, or       # con-         NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)       Yes       No       □       gals, or       □       bbs         HIW event or by a paint exchange program       □       Yes       No       □       gals, or       □       bbs         HOUsehold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       1       Bos       Ibs         How event or by a paint exchange program)       □       Yes       No       □       □       □       □       □       Ibs  |     | Batteries, Dry Cell   | Yes  | 🖂 No  |  |   |  | lbs   |                                    |
| Used Cooking Oil / Waste Vegetable Oil       Yes       No       Ibs. or       gallons         Other Special Wastes - please provide waste<br>type here:       Yes       No       Ibs. or       gallons         Pesticide Containers (NCDA Program, not<br>pesticides themselves)       Yes       No       Ibs. or       # con-<br>tainers         NCDA Pesticide Disposal Assistance Program<br>(for management of pesticides, not containers)       Yes       No       Ibs.       # bbs         NUCDA Pesticide Disposal Assistance Program<br>(for management of pesticides, not containers)       Yes       No       Ibs.       # bbs         HHW event or by a paint exchange program)       Yes       No       gals.       Ibs.       # bbs         HUSehold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       148. Did your local government operate a household hazardous waste collection program or event in FY 17-182       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?  |     | Fluorescent Bulbs/Lights Containing Mercury   | Yes  | 🖂 No  |  |   | lbs, or  | # bulbs   |                                    |
| Other Special Wastes - please provide waste       Yes       No       Ibs         ivpe here:       Pesticide Containers (NCDA Program, not       Yes       No       Ibs, or       #con-tuiners         NCDA Pesticide Disposal Assistance Program       Yes       No       Ibs, or       #con-tuiners         NCDA Pesticide Disposal Assistance Program       Yes       No       Ibs, or       #toon-tuiners         NCDA Pesticide Disposal Assistance Program       Yes       No       Ibs       Ibs         Lates Paint (do not include paint collected at HWW event or by a paint exchange program)       Yes       No       Ipaint       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 Program or Event       b. How many days was your HHW Program open to accept materials during this Fiscal Year?       Permanent Collegian       Temp. Event         b. How goargam accept materials from small businesses (Conditionally Exempt Small Quantity Generators)?       Yes       No         ff yes, please estimate the amount of business material managed       pounds       f. Amoounts of individual materials collected by HHW  |     | Propane Tanks   | Yes  | No No   |  |   | lbs, or  | # tanks   |                                    |
| type here:       Image: Second S |     | Used Cooking Oil / Waste Vegetable Oil  | Yes  | No No   |  |   | lbs, or  | gallons   |                                    |
| pesticides themselves)       Image: Im  |     |   | Yes  | No No   |  |   |  | lbs   |                                    |
| (for management of pesticides, not containers)       Yes       No  |     |   | Yes  | No No   |  |   | lbs, or  |   |                                    |
| HHW event or by a paint exchange program)       Image: Yes       Image: No       Image: Or       Image:  |     | · · · ·   | Yes  | No No   |  |   |  | lbs   |                                    |
| <ul> <li>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: <ul> <li>a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event</li> <li>b. How many days was your HHW Program open to accept materials during this Fiscal Year?</li> <li>c. Did you partner or co-sponsor your HHW program with another local government? Yes No</li> <li>Provide number of citizens / households that participated in your HHW collection program this Fiscal Year?</li> <li>e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? Yes No</li> <li>If yes, please estimate the amount of business material managed pounds</li> </ul> </li> <li>f. Amounts of individual materials collected by HHW Program: if totals for individual 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) Lead Acid Batteries (lbs) Other Batteries (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs)</li> <li>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.</li> <li>h. Please list HHW Collection Contractor</li> <li>i. Estimated cost of HHW / CESQG program or event(s) \$</li> </ul>   |     |   | Yes  | No No   |  |   | -  | lbs   |                                    |
| <ul> <li>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.</li> <li>h. Please list HHW Collection Contractor</li> <li>i. Estimated cost of HHW / CESQG program or event(s) \$</li> </ul>   |     | <ul> <li>c. Did you partner or co-sponsor your HHW pr<br/>Please list partner(s)</li> <li>d. Provide number of citizens / households that</li> <li>e. Did your program accept materials from sma<br/>If yes, please estimate the amount of business</li> <li>f. Amounts of individual materials collected by<br/>about individual materials is not available, p<br/>Note, materials listed here should only be the<br/>Used Motor Oil (gal)</li> <li>Used Antifreeze (gal)</li> </ul> | ogram with a<br>participated<br>all businesses<br>as material ma<br>y HHW Progr<br>lease simply<br>ose collected<br>Use<br>Lea | in your HHW<br>(Conditionall<br>anaged<br>ram: if totals f<br>provide total c<br>at an HHW P<br>ed Oil Filters<br>d Acid Batter | overnma<br>collecti<br>y Exemp<br>or indivi<br>juantity<br>rogram a<br>ies (lbs) | ent? Yes<br>on program this<br>pt Small Quantit<br>idual materials a<br>of materials coll<br>and should not in<br>_ # of Barrels, | Fiscal Year<br>ty Generator<br>pounds<br>are known pl<br>lected by HI<br>nclude mate<br>or | rs)? Yes hease itemize below<br>HW program in 48<br>rials listed in quest<br>lbs. | v. If data<br>g below.<br>tion 47. |
| reported in 48f, please net the weight of those materials out of the total listed here.  |     | _   |  |   |  |   |  |   |                                    |
| i. Estimated cost of HHW / CESQG program or event(s) \$  |     | reported in 48f, please net the weight of those   |  | ut of the total   | listed he  | ere.  |  |   | pounds                             |
|  |     | i. Estimated cost of HHW / CESOG program of   | or event(s) \$   |   |  |   |  |   |                                    |
|  | Pag |   |  |   |  |   | at thev DO   | provide recvcling   | services.                          |

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.

- Does your local government operate a yard waste program? Yes No If yes please indicate how yard waste is managed by 49. checking all that apply: Collected curbside Collected at convenience center Received at yard waste, compost, or LCID facil.
- Did a storm event significantly impact the amount of yard waste your government managed during FY 17-18? Yes 50. | 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<br>used | Tons | Cubic Yards | Please Provide Name and Location of Facility<br>Receiving Vegetative Materials |
|---|------------------|------|-------------|--|
| End user (to farmer or home-owner)                |                  |      |             |  |
| Your local government's mulch or compost facility |                  |      |             |  |
| Other public mulch or compost facility            |                  |      |             |  |
| Private mulch or compost facility                 |                  |      |             |  |
| Land clearing and inert debris landfill (LCID)    |                  |      |             |  |
| Energy / Fuel Use (e.g. boiler fuel market)       |                  |      |             |  |
| Total   |                  |      |             |  |

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 yd<sup>3</sup> truck x 3 days/wk x 16 wks = 480 yd<sup>3</sup>

|      |                 |             |         | Χ          |               |              |          | _ X                     |            | =                                    |     |  | $\yd^3$   |
|------|-----------------|-------------|---------|------------|---------------|--------------|----------|-------------------------|------------|--------------------------------------|-----|--|-----------|
|      | Size of Truc    | k (in yards | 5)      | Avg. no    | . of times ti | ruck fills e | each wee | ek # of week            | s truck is | used during year                     |     | TOTAL  |           |
|      |                 |             |         | P          | art V.        | Solid        | Was      | ste Colle               | ection     | Services                             |     |  |           |
| This | section concern | s your la   | ocal go | overnment  | 's provisi    | ion of sc    | olid wa  | ste (garbag             | e) colled  | ction services.                      |     |  |           |
| 52.  | Please complet  | e the fol   | lowing  | g table ab | out your g    | governn      | nent's s | olid waste              | collectio  | on system.                           |     |  |           |
|      | Sector          |             |         | see code   |               | 11           |          | Waste Collee codes at 1 |            | Who Collects Sol                     |     | How is Solid Was   |           |
|      | Residential     | Primary     | В       | Secondary  |               | Primary      | 1        | Secondary               |            | b. By Contract<br>c. Franchise haule | 1 0 | <ol> <li>Twice a week at 1</li> <li>Convenience cen</li> </ol> | nousehold |

|     | Commercial      | Primary   | В              | Secondary  |            | Primary  | 1       | Secondary  |          | d. Local government not<br>involved in provision of | <ul><li>4. As needed or by reques</li><li>5. Daily</li></ul> |
|-----|-----------------|-----------|----------------|------------|------------|----------|---------|------------|----------|---|--|
|     | Industrial      | Primary   | В              | Secondary  |            | Primary  | 1       | Secondary  |          | service   | 6. Other   |
| 53. | If you provide  | residenti | <u>ial</u> was | te collect | ion at sin | igle-fam | ily hou | seholds in | your jur | isdiction, please answer th                         | e following questions:                                       |
|     | What type of co | ollection | n metho        | od is used | ?          | Fully /  | Autom   | ated 🕅     | Semi-A   | utomated  | Don't know   |

|     | <b>7</b> 1                                     |             | 2           |                     |                    |           |      |
|-----|--|-------------|-------------|---------------------|--------------------|-----------|------|
|     | What is the standard collection frequency?     | $\boxtimes$ | Weekly      | Two times per week  | C Other            |           |      |
|     | What is the typical service point for single f | amil        | v household | waste? Curbside     | Back yard          | Back door |      |
|     | What type of collection container is used?     | $\boxtimes$ | Governmen   | nt-provided carts R | esident-provided c | ontainer  | Bags |
|     | Do you offer bulky waste collection service    | s?          | Yes         | 🔀 No                |                    |           |      |
| 54. | For municipalities - did your government co    | llect       | white good  | s at the curb? Yes  | No                 |           |      |

If so, were white goods delivered to the county for marketing? Yes No

## Part VI. Solid Waste and Recycling Educational Activities

| 55. | Did your local government have an education program to inform citizens specifically about solid waste management and / or recycling |
|-----|---|
|     | issues / activities? Yes No (If No, skip to Part VII, page 8)   |
| 56. | Please estimate your annual budget for solid waste related education and outreach activities: \$                                    |
| 57. | Does your community produce recycling education and outreach materials in languages besides English? 🗌 Yes 📄 No                     |
|     | If YES, please list other languages used:   |

58. Please provide your recycling website address and public information phone number if applicable. Website: Phone #:

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|          | Part VII  | . Resources f                          | or Solid Was          | te Manageme                 | ent and Full C                   | ost Accounti                | ng                   |
|----------|---|--|-----------------------|-----------------------------|----------------------------------|-----------------------------|----------------------|
|          | ficient resources availab                         |  |                       |                             |                                  | f these programs. T         | The following        |
| <u>^</u> | stions deal with funding                          |  |                       | Ū.                          |                                  |                             |                      |
|          | Did your local governm                            | -                                      | -                     |                             | FY 17-18?                        | Yes 🛛 No                    | )                    |
| 60.      | With regards to funding                           |  | 1100                  | e                           |                                  | ire tox                     |                      |
|          | Tipping fees                                      | s<br>xes / general fund                |                       | eight-based fees (e.g       |                                  | `ire tax<br>Vhite Goods tax |                      |
|          | Per househo                                       | •                                      | Grants                | yciables                    |                                  | Disposal Tax                |                      |
| 61.      | NC Solid Waste Dispos                             | 0                                      |                       | ible local governme         |                                  | *                           | tent of Revenue.     |
| 011      | According to GS 105-1                             | *                                      | -                     |                             |                                  | • •                         |                      |
|          | How are disposal tax d                            | listributions being u                  | sed?                  |                             |                                  |                             |                      |
| 62.      | If applicable, please pr                          | ovide your FY 17-1                     | 8 household fees. (   | e.g., a. <u>\$45.00</u> per | <u>year</u> per <u>household</u> | for solid waste)            |                      |
|          | a. \$   | per                                    |                       | per                         |                                  | for solid waste             | >                    |
|          | b. \$   | per                                    |                       | per                         |                                  | for recycling               |                      |
|          | c. \$   | per                                    |                       | per                         |                                  | for yard waste              |                      |
|          | d. \$   | per                                    |                       | per                         |                                  | for bulky wast              | e                    |
|          | e. \$   | per                                    |                       | per                         |                                  | availability fee            | 2                    |
|          |   |  |                       |                             |                                  |                             | —                    |
| 62       | Did your local governm                            |  |                       |                             |                                  |                             | whom manidanta       |
|          | are charged a fee by we                           | · ·                                    |                       |                             |                                  | No                          |                      |
|          | cording to GS 130A-309                            |  | nents are required    | to conduct full cos         | accounting annua                 | lly and to develop          | a system to          |
| info     | orm users of such costs.                          |  |                       |                             |                                  |                             |                      |
| 64.      | If your local government                          | nt contracts for soli                  | d waste or recycling  | g services, please re       | port the annual cont             | ract amount.                |                      |
|          |   |  |                       | -                           | 1                                |                             |                      |
|          | \$  |  |                       |                             |                                  |                             |                      |
|          | ¢   |  | For recycling per     | ryear                       |                                  |                             |                      |
|          |   |  | OR                    |                             |                                  |                             |                      |
|          | \$  |  | _ Combined Contr      | act (solid waste, and       | d recycling)                     |                             |                      |
| 65.      | Collection Programs: P                            |  |                       |                             |                                  |                             |                      |
|          | collection programs for                           |  |                       |                             | lected from conveni              | ience centers. If fu        | ll cost analysis is  |
|          | not available, please r                           | eport program bu                       | dget in Total Cost    | column.                     |                                  | Total Cost                  | Cost Per Ton         |
|          |   | # of Households                        | Tons Collected        | Collection Cost             | Disposal Cost                    | including                   | Managed              |
|          |   | served                                 |                       |                             | (tipping fees paid)              | overhead                    | (calculated by form) |
| M        | Iunicipal Solid Waste*                            | 193                                    | 163.1                 | 13,044                      |                                  | 13,044                      | 79                   |
|          | <b>Recycling Program**</b>                        | 193                                    | 9.31                  | 2,691                       |                                  | 2,691                       | 289                  |
|          | Yard Waste Program                                |  |                       |                             |                                  |                             | <u></u>              |
|          | Totals  | (calculated by form):                  | 172.41                | 15,735                      |                                  | 15,735                      | 91                   |
|          | *for materials collected and                      | -                                      | -                     |                             |                                  |                             |                      |
|          | ** for materials collected by                     |  |                       |                             |                                  |                             |                      |
| 66.      | If your government ope                            |  |                       |                             |                                  |                             |                      |
|          | facility operations (rour<br>proportionately. Lan | nd to nearest dollar;<br>dfill Budget: | 1. If budgets for dif |                             | combined, please at              | tempt to allocate co        | osts                 |
|          |   | sfer Station Budget                    | : \$                  |                             |                                  |                             | -                    |
|          | Yard  | l Waste / Compost H                    | Facility Budget: \$   |                             |                                  |                             |                      |
|          | Recy  | cling Facility Budg                    | et: \$                |                             |                                  |                             |                      |

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

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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 nur   |                | -              | -  |                           |                          |
|     | Name:   |                |                |  | ·                         |                          |
|     | Address:  |                |                | City:  |                           |                          |
|     | Telephone: Fa   | ıx:            |                | Email:   |                           |                          |
| 69. | Please provide the physical address of th   | e primary co   | ounty white go | ods collection site.                                   |                           |                          |
|     | Street 1:   |                |                |  |                           |                          |
|     | Street 2:   |                |                |  |                           |                          |
|     | City:   |                |                | State: North Carolina                                  | Zip:                      |                          |
| 70. | Please provide the name of the business   | -              |                |  | from white goods.         |                          |
|     | Name:   |                |                |  |                           |                          |
|     | Street:   |                |                |  | 7:                        |                          |
|     | City:   |                |                |  |                           |                          |
|     | Phone: Fax:   |                |                |  |                           |                          |
| 71. | Give amounts / types of CFCs removed.   |                | rds of CFC rei | noval, and copy of certific                            | Amount                    | rming extraction.        |
|     | Type of CFC Ren   | loveu          |                |  | Amount                    |                          |
|     |   |                |                |  |                           |                          |
|     |   |                |                |  |                           |                          |
|     |   |                |                |  |                           |                          |
|     |   |                |                |  |                           |                          |
|     |   |                |                |  |                           |                          |
| 72. | CFCs may be recycled or sent for destruction <b>Firm</b>                            | ction. Give n  |                | disposal method and amou<br>[ <b>ethod of Disposal</b> | Amount Earned             | C disposal. Amount Spent |
|     |   |                | 14             | letiou of Disposal                                     |                           |                          |
|     |   |                |                |  |                           |                          |
|     |   |                |                |  |                           |                          |
| 73. | Please report the tonnage of white goods<br>white goods tonnage reported on page 55 |                | uring FY 2017  | -18 in the Recycling Tonr                              | nages table on page 5 (qu | lestion # 45). Was       |
| 74. | List the amount of revenue for the white  | goods progra   | am by source:  |  |                           |                          |
|     | Revenue collected from sale of scrap:   |                | \$             |  |                           |                          |
|     | Revenue collected from White Goods Ta   | ax Distributio |                |  |                           |                          |
|     | Revenue from other source (e.g. grants):  |                |                |  |                           |                          |
|     | Total Revenue:  |                |                |  |                           |                          |
| 75. | According to the White Goods Law, Whee expenditures White Good Tax Distribution     |                |                |  |                           | mounts and types of      |
|     | Operational Expenses:   | \$             |                |  |                           |                          |
|     | Capital Improvements:   |                |                |  |                           |                          |
|     | Clean-up of Illegal White Goods Dumps   |                |                |  |                           |                          |
|     | Total Expenditures:   | \$             |                |  |                           |                          |
| 201 | 7-2018 Local Government Annual Report   | Report Di      | ue Date: Sept  | ember 1, 2018 Submit t                                 | o: Lgteam@ncdenr.gov      | Page 9 of 11             |

| 76. | r , , , , , , , , , , , , , , , , , , ,  | -                                     | -             |           |  |                        |              |
|-----|--|---------------------------------------|---------------|-----------|--|------------------------|--------------|
|     | Name:  |                                       |               |           | Title:                                   |                        |              |
|     | Address: Fax:  |                                       |               |           |  |                        |              |
|     | Please provide the physical address of the primary of  |                                       |               |           |  |                        |              |
| //. | Street 1:  |                                       |               |           |  |                        |              |
|     | Street 2:  |                                       |               |           |  |                        |              |
|     | City:  |                                       | State:        | North     | Carolina                                 | Zip:                   |              |
| 78. | Tonnage/Number of scrap tires disposed July 1, 201<br>Tons of  |                                       |               |           | s from cleanup of nui<br>Number of tires | sance sites)           |              |
| 79. | Tonnage/Number of scrap tires disposed from clean Tons of Tons | up of state of or                     | county de     | signated  | l nuisance sites<br>Number of tires      |                        |              |
| 80. | Indicate the types of tires collected by the county:<br>Passenger % Heavy T  | ruck                                  |               | %         | Large Off-Road                           |                        | %            |
| 81. | List the amount of revenue for the scrap tire program  | n by source:                          |               |           |  |                        |              |
|     | Revenue from Scrap Tire Tax Distributions:   | \$                                    |               |           |  |                        |              |
|     | Revenue from Tire Fees:  |                                       |               |           |  |                        |              |
|     | Revenue from Scrap Tire Clean-up Reimbursement   | s: \$                                 |               |           |  |                        |              |
|     | Revenue from Scrap Tire Cost-Overrun Grants:   |                                       |               |           |  |                        |              |
|     | Total Revenue:   | \$                                    |               |           |  |                        |              |
| 82. | County's total scrap tire program contract expenditu<br>excluding costs of nuisance tire cleanups, for FY 17   | re (contract o<br>-18.                | lisposal/ha   | uling co  | sts), \$                                 |                        |              |
| 83. | County's additional scrap tire program expenditure Labor \$  | · · · · · · · · · · · · · · · · · · · | nvenience     | center c  | ost), if any.                            |                        |              |
|     | Site Cost \$   |                                       |               |           |  |                        |              |
|     | Other \$   |                                       | describe Ot   | ther:     |  |                        |              |
| 84. | County's contract cost for scrap tire disposal. \$   |                                       | / Ton; \$     |           | / Tire                                   |                        |              |
| 85. | Hauling cost or fuel surcharge, if not included in co  |                                       |               |           |  |                        |              |
| 86. | Total tipping fees collected for tires not eligible for  | free disposal                         | . \$          |           |  |                        |              |
| 87. | Total number of tires collected not eligible for free  | disposal:                             |               |           |  |                        |              |
| 88. | If scrap tires were not hauled off site by contracted  | service provi                         | der, were tl  | ney cut   | and disposed in a loca                   | l landfill? 🗌 Ye       | s 🗌 No       |
| 89. | Name of tire disposal/recycling firm(s):   |                                       |               |           |  |                        |              |
| ТЕ  | MPORARY DISASTER DEBRIS STAGI  | NG SITES                              | 5             |           |  |                        |              |
| 90. | Does your local government have a plan in place for  | r managemer                           | nt of disaste | er debris | ? Yes                                    | No                     |              |
|     | If yes, indicate if the plan is a stand-alone plan or in   | conjunction                           | with local    | governr   | nent agencies: S                         | tand-alone             | n conjunctio |
| 91. | If you indicated having a plan, has the plan been rev<br>requirements for public assistance reimbursement in   |                                       |               |           | agement or FEMA to                       | ensure it meets the No | ne basic     |
| 92. | Please list the name, contact numbers(s), and e-mail   | address of th                         | ne person(s   | ) in cha  | rge of the disaster deb                  | ris management p       | orogram for  |
|     | your local government:<br>Name: Lee Latham Nan   | ne: Dan Strie                         | ckland        |           | Name: May                                | or Elanor Farr         |              |
|     |  | ne: 252-752-                          |               |           | Phone: 252-                              |                        |              |
|     |  | ail: grimesland                       |               | amail.com |  | slandtown@embarqm      | ail.com      |

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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.

| $\frac{1}{1} = \frac{1}{1} = \frac{1}$ |           |  |                 |           |  |
|--|-----------|--|-----------------|-----------|--|
| 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? Yes No   |  |  |  |  |
| MANAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES |  |  |  |  |  |
| 96.  | Has your county considered whether to implement a program for the management of abandoned manufactured homes? Ves No |  |  |  |  |

If yes, has your county developed a written plan for the management of abandoned manufactured homes? [Yes

#### 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.

SS notes (post data download) - no curbside tonnage reported. Used tons from last year (9.31).

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



No