

### State of North Carolina

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

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

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

On the following pages you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2017-2018. Each North Carolina County and Municipality is required to complete this report annually. Completion and submission of this report will fulfill the annual reporting mandate to the state as required by G.S. 130A-309.09A. Failure to complete and submit this report could result in the local government being excluded from distributions of Solid Waste Disposal Tax Proceeds and other Department of Environmental Quality grants.

#### **Instructions:**

Each local government should determine which staff member is responsible for preparing and submitting the annual report and ensure that the report is completed and submitted before the reporting deadline on September 1, 2018.

Options for obtaining a blank copy of this form:

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

This form must be completed electronically using Adobe Reader. Adobe Reader can be downloaded for free at the following web site: <a href="https://get.adobe.com/reader/">https://get.adobe.com/reader/</a> - it is suggested that you complete the form using the latest version of Adobe Reader. Please <a href="DO NOT">DO NOT</a> complete this form using Adobe Acrobat Pro.

Complete the form by entering responses in the appropriate fields using Adobe Reader. Please save a copy of the completed form to your computer for your records by using the "Save As" option and choosing an appropriate file name. When naming the file, please include your community's name as a part of the file name.

After completing the report form, please submit a copy electronically to the Division of Environmental Assistance and Customer Service by attaching the report file to an email to Lgteam@ncdenr.gov

If you need assistance completing or submitting this form, please feel free to contact one of the following Division of Environmental Assistance and Customer Service staff members:

Wendy Worley, phone: 919-707-8136, email: wendy.worley@ncdenr.gov Matt James, phone: 919-707-8133, email: matt.james@ncdenr.gov

Form Year

2018



Local Government Report Form

**Required** - Enter Your Local Government Name: Harmony

## 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	Lgteam@ncdenr.gov by <b>Sep</b>	tember 1, 2018.	
	If you have questio	ons or need assistance com	pleting this form, please c	all 919-707-8136	or 919-707-8133.
Per	son Completing This Report:	Jennifer Allen		Title: Town Cler	k
Ma	iling Address: PO Box 118		City: Harmony		Zip: 28634
Pho	one: (704) 546-2339	Fax: (704) 546-50	061	Date: 8/28/	18
Em	ail: harmonync@yadtel.net				
	_	$\overline{G}$	eneral Instructions		
	ase remember that the time per a specific question.	riod for the report is JULY 1,	2017 through JUNE 30, 201	8. Please check "N	o" if you have nothing to report
1.	Did your local government l	have a Recycling Coordinator	r or similar position for FY 1	7-18? Yes	No No
	Name Recycling Coordinate	or (if different from person co	ompleting this report.)		
	Name:			Title:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
2.	Did your local government l	have a Solid Waste Director of	or similar position for FY 17-	-18? Yes	No No
	If Yes, Name:			Title:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
3.	Did your local government	have <b>dedicated or part-time</b>	Solid Waste Enforcement S	taff for FY 17-18?	Yes No
	If Yes, Name:			Title:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
4.	Did your local government lall that apply)	have solid waste ordinances i	n place addressing any of the	e following during F	Y 17-18? (if yes, please check
	Disposal Bans	Illegal Dumping Lit	tering	escribe: Section 12	Iredell code
5.	Did your local government mulching, composting)?	manage, provide or contract f	or any solid waste services in	n FY 17-18 (e.g., co ⊠ Yes	llection, disposal, recycling,
	If you answ	er ''No'' to question 5, the i	report is complete, please e	mail to Lgteam@n	cdenr.gov.

### Part I. Waste Reduction and Recycling Programs Serving Government Facilities The following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. Did your local government have a recycling program in place for collecting recyclable materials generated at X No public buildings in FY 17-18? 7. Did your local government have any program or policy encouraging or requiring local agencies to X No purchase products with recycled content? Did your local government have a program in place to collect and recycle spent fluorescent lights X No | Yes generated from the public buildings and facilities that were operated by your government in FY 17-18? Part II. Waste Reduction and Recycling Programs Serving the Public SOURCE REDUCTION / REUSE Did your local government have a backyard composting program? Yes X No If yes, please check all backyard composting activities that apply: Education Demonstration site(s) Bin distribution/sales Number of Bins distributed? Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes X No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives? Did your local government offer a waste exchange or reuse program? Yes X No 13 If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public: Paint exchange Number of gallons recovered? Swap shop/shed Number of sheds in use? Other (e.g. pallet exchange, etc.) PUBLIC RECYCLING SERVICES Which of the following responses best describes your recyclables recovery activities for the period July 1, 2017 through June 30, 2018? My local government **DID operate or contract** for a recyclables recovery program. (please continue to question 15) My local government DID NOT operate or contract for recyclables recovery BUT DID participate in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; then go to Part IV on page 7.) With which local government did you participate? My local government DID NOT operate, contract or participate in a recycling program. (Go to Part IV on page 7.) If your local government **DID** operate or contract for a recyclables recovery program, please indicate in the following sections the type of program in operation and provide specifics about your program(s). **CURBSIDE RECYCLING PROGRAM** Did your government operate a Curbside Recycling Program? Yes No, skip to question # 25 Who collected the recyclable materials for your local government's curbside recycling program? 16. Local government employees Private contractor (please specify) Franchised hauler (please specify) Other (please specify)

17.	Please provide the following information about your community:  a. Total number of households in your jurisdiction?
	b. Number of households eligible to participate in the curbside recycling program:
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary):
18.	If your curbside recycling program is operated through a <u>public franchise granted to a private company</u> then please answer the following:  Is public participation in the franchise:  Voluntary or Mandatory  Does your franchise consist of:  One service district or Multiple service districts
19.	What sector(s) of your community was served by the curbside recycling program?  Residential Commercial Industrial
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served:
21.	How frequently were the curbside recyclables collected?  Once a week  Every other week / biweekly  Other
22.	Please describe the collection containers used:  Bins Blue bags Multi-bin system Roll-out carts
23.	Please describe the method / style of recyclable materials handling:  curb-sort (collector separates material as collected) single stream / commingled dual / two stream don't know / other
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used:    less than 50 gallon cart
DR	OP-OFF RECYCLING PROGRAM
25.	Did your government operate a Drop-off Recycling Program? Yes No, skip to question # 32
26.	Who collected the recyclable materials for your local government's drop-off recycling program?  Local government employees  Private contractor
	Other (please specify)
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program:  source-separated (citizens separate materials by type) single stream / commingled dual / two stream (paper separated from cans/bottles) don't know / other
28.	Please estimate the number of households served by your drop-off recycling program.
29.	What sector(s) of your community are served by the drop-off recycling program?   Residential Commercial Industrial
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:
31.	How many of these locations were staffed with attendants?
EL	ECTRONICS RECYCLING PROGRAM
mate	Is answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any perials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.  Did your community operate an electronics recycling program in FY 17-18? Yes No, skip to question # 38  If you did operate an electronics recycling program, please indicate style of program:  Permanent - Curbside Collection Permanent - Drop-off Scheduled Collection Day or Event Part of HHW Program If you offer curbside collection of electronics is it: by appointment or unscheduled  If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:

33.	Did your electronics recycling program collect or accept televisions from (check all that apply):   Residences   Businesses
34.	Did your electronics recycling program collect or accept computer equipment from (check all that apply):   Residences  Businesses
35.	DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was eligible to receive proceeds from the State Electronics Management Fund in February of 2018, please provide the following information:
	Electronics Management Fund balance as of July 1, 2017: \$
	Electronics Management Funds received from DEQ during FY 17-18 (Feb 2018 distribution): \$
	Electronics Management Funds spent during FY 17-18: \$
	Electronics Management Fund balance as of June 30, 2018: \$
36.	Briefly explain how Electronics Management Funds were spent during FY 2017-18 (please list items purchased if applicable):
37.	If you did operate an electronics recycling program, please provide the following information about your vendor / contractor:  Name of electronics recycling vendor(s) during FY 17-18:
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?
OT	THER PUBLIC RECYCLING PROGRAMS
the	ase answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ycling Tonnages Chart on pg 5.
38. 39.	Did your local government operate a multifamily recycling collection program that provides on-property recycling service for residents of multifamily properties in a manner other than through your curbside or dropoff recycling programs?   Yes  No  Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner
37.	other than through your curbside or dropoff recycling programs? $\square$ Yes $\square$ No
40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders?    Yes    No
	On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served:
	Public drop-off recycling sites available for ABC On Premises Permit holders to use
41.	Does your local government operate a program to recycle Construction and Demolition materials?  Yes  No  If yes, please check all materials that were recycled and report tonnages in tonnage table on page 5:
	☐ Clean Wood ☐ Brick, concrete, etc. ☐ Sheetrock ☐ Vinyl siding ☐ Shingles ☐ Metals ☐ Other
42.	Does your local government have an ordinance regulating the construction and demolition waste stream with the intention of encouraging or requiring waste reduction or recycling of these materials?
43.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 17-18. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	☐ Public Parks Recycling Program ☐ Athletic Field /Venue Recycling Program
	Pedestrian Recycling Program Recycling Service for Special Events / Festivals
44.	Please identify all "Other" programs or services operated by your government during FY 17-18. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	Public School Recycling Program
	Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)
	Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events
	Organics / Food Waste Recycling other than yard waste program
	Oyster Shell Recycling Program
	Other Programs (please specify)
	Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.

#### RECYCLING TONNAGES FROM PUBLIC PROGRAMS

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

each individual mat		rbside		op-off	All "Othe	r'' Programs	<b>Total Tons</b>
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear							
Brown							
Green							
Mixed							
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans							
Steel Cans							
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)							
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper							
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc) Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled tong shart11							
Commingled tons-check all items collected above							
TOTAL TONS:					<del>                                     </del>		
DECYCLING TONN	ACEACAI	ECH T OF D					

46. **RECYCLING TONNAGE AS A RESULT OF POLICY OR ORDINANCE:** complete this section for materials that were recycled as a result of local government ordinances or policies but that were NOT collected or managed directly by your local government recycling program. E.g. a corrugated cardboard disposal ban supported by a reporting mechanism for collecting data on private recycling tonnages.

Material Type	Tons Diverted	Describe the mechanism that caused these materials to be recovered and data collection method

## **Part III. Special Waste Collections**

This section concerns local government programs for managing materials that require special handling or that are banned from landfilling. Please provide responses and data as indicated below considering services provided to the public. Please do not include data on materials that were accepted and then disposed of in a landfill. Do not include materials generated exclusively by government operations (e.g. motorfleet services). Question 47 is about materials accepted outside of any Household Hazardous Waste (HHW) Program or event. If special wastes were only accepted as a part of an HHW Program or HHW event and were not collected by separate recycling efforts then do not record materials in question #47 but instead report with HHW materials in question #48.

Special Waste Collections (Do Not Include Materials Collected as part of an HHW Collection Program or Event) Did program collect this **Special Waste Programs for Collecting** # of Data on quantities collected / managed. material from the public? Materials from Citizens by Material Type Please report in indicated units. sites Used Motor Oil Yes Used Oil Filters barrels, or lbs Yes No Used Antifreeze Yes No gallons # batteries, or Batteries, Lead Acid Yes No lbs Batteries, Dry Cell Yes No lbs Fluorescent Bulbs/Lights Containing Mercury Yes lbs, or # bulbs No **Propane Tanks** Yes No lbs, or # tanks Used Cooking Oil / Waste Vegetable Oil Yes No lbs, or gallons Other Special Wastes - please provide waste Yes No lbs type here: Pesticide Containers (NCDA Program, not # con-Yes ☐ No lbs, or pesticides themselves) tainers NCDA Pesticide Disposal Assistance Program Yes No lbs (for management of pesticides, not containers) Latex Paint (do not include paint collected at gals, □ No Yes lbs HHW event or by a paint exchange program) or Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event 48. Did your local government operate a household hazardous waste collection program or event in FY 17-18? No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event b. How many days was your HHW Program open to accept materials during this Fiscal Year? c. Did you partner or co-sponsor your HHW program with another <u>local government?</u> Yes Please list partner(s) d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year? e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? If yes, please estimate the amount of business material managed f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize below. If data about individual materials is not available, please simply provide total quantity of materials collected by HHW program in 48g below. Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in question 47. Used Motor Oil (gal) \_\_\_\_\_ Used Oil Filters \_\_\_\_ # of Barrels, or \_\_\_\_ lbs. Used Antifreeze (gal)

Lead Acid Batteries (lbs)

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

Pages 3 through 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling services. All governments answering "Yes" to question # 5 on page 1 should complete the rest of the report with the exception of PART VIII which is only to be completed by Counties.

			V. Yard Wasi		C	_	,	, ,	
									landfills, incinerators, or
									answer the questions belo erials in this section.
			operate a yard wast					_	w yard waste is managed by
•	•	•	•			•			aste, compost, or LCID faci
60.		· · · · · · · · · · · · · · · · · · ·	ly impact the amou					-	_
1.									OR CUBIC YARDS of
	organic mater	ial (yard wast	e, brush, limbs, le		managed. For	conversion	on purp		Name and Location of Facility
		Destination	on	Check if used	Tons	Cubic Y	/ards		g Vegetative Materials
	End user (to fa	rmer or home-	owner)						
	Your local gov	ernment's mul	ch or compost facil	lity 🗌					
	Other public m	ulch or compo	st facility						
	Private mulch	or compost fac	ility						
	Land clearing a	and inert debris	s landfill (LCID)						
	Energy / Fuel U	Jse (e.g. boiler	fuel market)						
		Total							
									ormula below to help you
									en enter the grand total
	volume manage		in the appropriate	boxes abov	•	truck x 3	days/w	$vk \ x \ 16 \ wks = 480$	•
	Size of True		Avg. no. of times tr	nyalı fillə əsələ	XX	tennals in man	d dumin a	=	TOTAL $yd^3$
	Size of Truc	k (iii yaius)			Vaste Colle			-	TOTAL
This	section concern	s vour local ac	overnment's provisi						
7113 52.			g table about your						
			ets Solid Waste?	ī		ootod2	•	llects Solid Waste?	How is Solid Waste Collected?
	Sector		see codes at right		- see codes at r	ight a	a. Local g	government employee	s 1. Once a week at household
	Residential	Primary b		Primary 1			o. By Con c. Franch	ntract iise haulers	<ul><li>2. Twice a week at household</li><li>3. Convenience center/greenbox</li></ul>
	Commercial	Primary b		Primary 6		Ċ		government not ed in provision of	<ul><li>4. As needed or by request</li><li>5. Daily</li></ul>
	Industrial	Primary a	Secondary	Primary	Secondary		service	•	6. Other
3.	If you provide	residential was	ste collection at sin	gle-family	households in y	our jurisd	liction,	please answer the	e following questions:
	What type of c	ollection metho	od is used?	Fully Aut	omated S	Semi-Auto	omated	Manual Manual	Don't know
	What is the star	ndard collectio	on frequency?	Weekly	Two tim	nes per we	eek	Other	
	What is the typ	ical service po	int for single famil	y househol	d waste?	Curbsi	de 🗌	Back yard / Back	ck door
	What type of c	ollection conta	iner is used?	Governme	ent-provided car	rts	Reside	ent-provided conta	ainer Bags
	Do you offer b	ulky waste coll	lection services?	Yes	No No				
64.	-	•	government collectered to the county f	_		Yes No		No	
	,		VI. Solid Wa		<u> </u>			al Activities	S
55.	Did <b>vour local</b>				•	-			nagement and / or recycling
	issues / activiti		-		o Part VII, page	-	<i>y</i>		
6.	Please estimate	your annual b	oudget for solid was	ste related e	education and o	utreach ac	ctivities	s: \$	
7.	Does your com	munity produc	ce recycling educat	ion and out	reach materials	in langua	iges be	sides English?	Yes No
	If YES, please	_							
8.	•	your recycling	g website address a	nd public ir	nformation phor	ne number	r if app		
	Website:							Phone #:	

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

	ficient resources availab estions deal with funding			*		these programs.	The following
_	Did your local governm					Yes No	)
	With regards to funding	_	-		_		
	Tipping fees			ight-based fees (e.g	· —	re tax	
		es / general fund		clables	_	hite Goods tax	
61	Per househo	•	Grants	ible legal governme	_	isposal Tax	ant of Davanua
01.	According to GS 105-1	87.63 these funds r	nust be used by a ci				
	How are disposal tax d	· ·		4.500			
62.	If applicable, please pr						
	a. \$	per		per		for solid waste	9
	b. \$	per		per		for recycling	
	c.\$	per		per		for yard waste	;
	d. \$	per		per		for bulky was	te
	e. \$	per		per		availability fe	<u>e</u>
	f. \$	per		per		total charge	
63.	Did your local governmare charged a fee by we	nent operate a Pay-	As-You-Throw prog	gram for residential	garbage during FY 1		where residents
	cording to GS 130A-309 orm users of such costs.	_	ments are required	to conduct full cos	t accounting annual	ly and to develop	a system to
64.	If your local government	nt contracts for soli	d waste or recycling	g services, please re	port the annual contr	act amount.	
	\$		For solid waste s	-	r		
	\$		For recycling per				
	Ψ		OR	year			
	\$			act (solid waste, and	d recycling)		
				•	• 0		
65.	Collection Programs: P collection programs for						
	not available, please r	eport program bu	dget in Total Cost	column.	T T	T 1.C	G . P T
		# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
N	Tunicipal Solid Waste*	261	339.3	19,072.8		19,072.8	56
	Recycling Program**						
	Yard Waste Program						
	Totals	(calculated by form):	339.3	19,072.8		19,072.8	56
	*for materials collected and	l sent for eventual dispo	sal in a Municipal Solid	Waste or Construction a	nd Demolition Landfill.		
	**for materials collected by		_			_	
66.	If your government operations (rous						
	* *	idfill Budget:	). If budgets for dif		comomed, please au	•	JSIS
		sfer Station Budget	: \$				_
		•	-				
		cling Facility Budg					
67.	What was your governi	ment's total combin	ed annual budget fo	or all solid waste and	d recycling services i	n 17-18? \$19,072	.8

## **Part VIII. County Mandated Programs**

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

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

SC.	RAP TIRES				
76.	Please provide name, address, phone number, and e Name:	-	•		
	Address:				
	Telephone: Fax:		Emai	1:	
77.	Please provide the physical address of the primary of	ounty scrap tire	es collection sit	e.	
	Street 1:				
	Street 2:				
	City:		State: North	n Carolina	Zip:
78.	Tonnage/Number of scrap tires disposed July 1, 201  Tons of	7-June 30, 201 or	8 ( <u>excluding</u> ti	res from cleanup of nu _Number of tires	isance sites)
79.	Tonnage/Number of scrap tires disposed from clean Tons of		ounty designate	ed nuisance sites Number of tires	
80.	Indicate the types of tires collected by the county: Passenger % Heavy T	ruck	%	Large Off-Road	%
81.	List the amount of revenue for the scrap tire program	•			
	Revenue from Scrap Tire Tax Distributions:				
	Revenue from Tire Fees:				
	Revenue from Scrap Tire Clean-up Reimbursement	s: \$			
	Revenue from Scrap Tire Cost-Overrun Grants:				
	Total Revenue:	\$			
82.	County's total scrap tire program contract expenditue excluding costs of nuisance tire cleanups, for FY 17	re (contract dis -18.	posal/hauling c	costs), \$	
83.	County's additional scrap tire program expenditure (Labor \$		renience center	cost), if any.	
	Site Cost \$				
	Other \$	de	scribe Other: _		
84.	County's contract cost for scrap tire disposal. \$		/ Ton; \$	/ Tire	
85.	Hauling cost or fuel surcharge, if not included in co	ntract cost abo	ove. \$	/ Ton; \$	/ Tire
86.	Total tipping fees collected for tires not eligible for	free disposal.	S		
87.	Total number of tires collected not eligible for free	disposal:			
88.	If scrap tires were not hauled off site by contracted	service provide	r, were they cu	t and disposed in a loca	al landfill? Yes No
89.	Name of tire disposal/recycling firm(s):				
TE	MPORARY DISASTER DEBRIS STAGI	NG SITES			
90.	Does your local government have a plan in place for	r management o	of disaster debr	is? Yes	No
	If yes, indicate if the plan is a stand-alone plan or in	conjunction w	ith local govern	nment agencies:	Stand-alone In conjunction
91.	If you indicated having a plan, has the plan been rev requirements for public assistance reimbursement in			anagement or FEMA to	o ensure it meets the basic  No
92.	Please list the name, contact numbers(s), and e-mail	address of the	person(s) in ch	arge of the disaster del	bris management program for
	your local government:  Name: Name: Name	ne:		Name:	
		-			
	E-mail: E-m				

Natural Heritage Program (Natural Heritage Program (Natura Heritage Progr	NHP) and the State Historic Preservate prior to a disaster is advantageous to local g	overnments because a staging site which is	nation with the Solid Waste Section. found to have impacted federal or state
Disaster Site #	Site Name	Disaster Site #	Site Name
Does your plan address the I		_	a disaster? Yes No
	s annual mortanty:	_	
If yes, has your county deve	loped a written plan for the managem	nent of abandoned manufactured h	omes? Yes No
	Part IX.	Comments	
	Disaster Site #  Does your plan address the r  Does your plan address mass  ANAGEMENT OF ABA  Has your county considered  If yes, has your county devel  this section to elaborate on an	Disaster Site # Site Name  Disaster Site # Site Name  Does your plan address the management of household hazardous poes your plan address mass animal mortality?  ANAGEMENT OF ABANDONED MANUFACTUR. Has your county considered whether to implement a program for If yes, has your county developed a written plan for the management plan for the developed as written plan for the management plan for the developed as written plan for the management plan for the developed as written plan for the management plan for the developed as written plan for the management plan for the management plan for the developed as written plan for the management plan for the	Does your plan address the management of household hazardous waste and white goods following a

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

