

## **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, 2018 - June 30, 2019

## Submit this form to Lgteam@ncdenr.gov by September 1, 2019.

On the following pages, you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2018-2019. 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

You can download a blank copy of this form from this web site: <u>http://deq.nc.gov/about/divisions/waste-management/</u>solidwaste-section/annual-reporting

This form must be completed electronically using Adobe Reader. It is suggested that you complete the form using the latest version of Adobe Reader which can be downloaded for free at: <u>https://get.adobe.com/reader/</u>. Please <u>DO NOT</u> 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. Name the file Community Name LGAR 2018-19. For example, Aberdeen LGAR 2018-19.

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:

Sandy Skolochenko, phone: 919-707-8147, email: sandy.skolochenko@ncdenr.gov Matt James, phone: 919-707-8133, email: matt.james@ncdenr.gov

Form Year



**Required:** Select your Local Government Name HARMONY

# State of North Carolina

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

### 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 September 1, 2019.

If you have questions or need assistance completing this form, please call 919-707-8147 or 919-707-8133.

| Per | son Completing This Report: Wanda Edwa                                | ırds 7  | Title: Town  | Clerk/Finance Director               |
|-----|---|---|--------------|--------------------------------------|
| Ma  | iling Address: P O Box 118  | City: Harmony                                     |              | Zip: 28634                           |
| Pho | one: 704-546-2339   |   | Date: 0      | 8-27-2019                            |
| Em  | ail: harmonync@yadtel.net   |   |              |                                      |
|     |   | General Instructions                              |              |                                      |
|     | ase remember that the time period for the rep<br>a specific question. | port is JULY 1, 2018 through JUNE 30, 2019.       | Please check | k "No" if you have nothing to report |
| 1.  | Did your local government have a Recycl                               | ing Coordinator or similar position for FY 18-1   | 9? 🗌 Ye      | s 🛛 No                               |
|     | Name Recycling Coordinator (if different                              | from person completing this report.)              |              |                                      |
|     | Name:   | Т   | Title:       |                                      |
|     | Address:  | City:   |              | Zip:                                 |
|     | Telephone:  | Email:  |              |                                      |
| 2.  | Did your local government have a Solid V                              | Waste Director or similar position for FY 18-195  | ? Ye         | s 🛛 No                               |
|     | If Yes, Name:   | Т   | Title:       |                                      |
|     | Address:  | City:   |              | Zip:                                 |
|     | Telephone:  | Email:  |              |                                      |
| 3.  | Did your local government have <b>dedicate</b>                        | ed or part-time Solid Waste Enforcement Staff     | for FY 18-1  | 9? 🗌 Yes 🔀 No                        |
|     | If Yes, Name:   | Т   | Title:       |                                      |
|     | Address:  | City:   |              | Zip:                                 |
|     | Telephone:  | Email:  |              |                                      |
| 4.  | Did your local government have solid was all that apply)              | ste ordinances in place addressing any of the fol | -            |                                      |
|     | Disposal Bans Illegal Dumping   | Littering Construction & Demoli                   | tion 🖂 🤇     | Other: Section 12 Iredell Code       |
| 5.  | Did your local government manage, provi<br>mulching, composting)? Xes | ide or contract for any solid waste services in F | Y 18-19 (e.g | ., collection, disposal, recycling,  |

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   |
|-----|--|
| 6.  | Did your local government have a recycling program in place for collecting recyclable materials generated at public buildings in FY 18-19? Xes No  |
| 7.  | Did your local government have any program or policy encouraging or requiring local agencies to purchase products with recycled content? $\Box$ Yes $\bigotimes$ No  |
| 8.  | Did your local government have a program in place to collect and recycle spent fluorescent lights generated from the public buildings and facilities that were operated by your government in FY 18-19? $\Box$ Yes $\boxtimes$ No  |
|     | 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, reduction of single use plastics, food waste reduction, or promoting reuse and donation? $\Box$ Yes $\boxtimes$ No  |
| 12. | Did your local government offer a waste exchange or reuse program?  Yes No   |
| 13. | If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public:   |
|     | Swap shop/shed Number of sheds in use? Paint exchange Number of gallons recovered?   |
|     | Other (e.g. pallet exchange, etc.)   |
| PU  | BLIC RECYCLING SERVICES  |
| 14. | Which of the following responses best describes your recyclables recovery activities for the period July 1, 2018 through June 30, 2019? Choose <b>ONE</b> option that best applies.  |
|     | My local government <b>DID operate or contract</b> for a recyclables recovery program. (please continue to question 15)  |
|     | 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> .)  |
| CU  | RBSIDE RECYCLING PROGRAM   |
| 15. | Did your government operate a Curbside Recycling Program? 🗌 Yes 🗌 No, skip to question # 25  |
| 16. | Who collected the recyclable materials for your local government's curbside recycling program?   |
|     | Local government employees   |
|     | Private contractor (please specify)  |
|     | 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?   |
|-----|---|
|     | 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:<br>Is public participation in the franchise: Voluntary or Mandatory<br>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?  |
| 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?   |
|     | 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  |
| DR  | OP-OFF RECYCLING PROGRAM  |
| 24. | Did your government operate a Drop-off Recycling Program? Yes No, skip to question # 31   |
| 25. | Who collected the recyclable materials for your local government's drop-off recycling program?  Local government employees  Private contractor  |
|     | Other (please specify)  |
| 26. | 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           |
| 27. | Please estimate the number of households served by your drop-off recycling program.   |
| 28. | What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial  |
| 29. | How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:   |
| 30. | How many of these locations were staffed with attendants? All None Some please list # of staffed sites:   |
| EL  | ECTRONICS RECYCLING PROGRAM   |
| 31. | Did your community operate an electronics recycling program in FY 18-19? Yes No, skip to question # 37  |
|     | 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:   |
|     |   |

| 32. | Did your electronics | recycling program colle | ect or accept televisions t | from (check all th | nat apply): 🗌 Residences | Businesses |
|-----|----------------------|-------------------------|-----------------------------|--------------------|--------------------------|------------|
|     | 2                    |                         | 1                           | (                  |                          |            |

- 33. Did your electronics recycling program collect or accept computer equipment from (check all that apply): Residences Businesses
- 34. 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, 2018: \$

Electronics Management Funds received from DEQ during FY 18-19 (Feb 2019 distribution): \$

Electronics Management Funds spent during FY 18-19: \$

Electronics Management Fund balance as of June 30, 2019: \$

35. Briefly explain how Electronics Management Funds were spent during FY 2018-19 (please list items purchased if applicable):

36. 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 18-19:

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

#### **OTHER PUBLIC RECYCLING PROGRAMS**

*List only programs operated or contracted for by the local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.* 

| 37. | 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?                    |  |  |  |  |  |  |  |  |  |
|-----|---|--|--|--|--|--|--|--|--|--|
| 38. | 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?<br>Yes No  |  |  |  |  |  |  |  |  |  |
| 39. | 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:       No |  |  |  |  |  |  |  |  |  |
|     | Public drop-off recycling sites available for ABC On Premises Permit holders to use   |  |  |  |  |  |  |  |  |  |
| 40. | Does your local government operate a program to recycle Construction and Demolition materials? Yes No<br>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   |  |  |  |  |  |  |  |  |  |
| 41. | Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 18-19. (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   |  |  |  |  |  |  |  |  |  |
| 42. | Please identify all "Other" programs or services operated by your government during FY 18-19. (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**

- 43. 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, 2018 through JUNE 30, 2019. 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 on page 6 in the SPECIAL WASTE section of this report.
  - c. 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.

|  |          | Curbside        |            | Drop-off | All "C                 | Other" Programs | Total Tons                      |  |
|--|----------|-----------------|------------|----------|------------------------|-----------------|---------------------------------|--|
| PROGRAM  | 🛛 if Yes | Tons            | ⊠ if Yes   | Tons     | ⊠ if Yes               | Tons            | (totals are calculated by form) |  |
| GLASS:   |          |                 |            |          |                        |                 |                                 |  |
| Clear  |          |                 |            |          |                        |                 |                                 |  |
| Brown  |          |                 |            |          |                        |                 |                                 |  |
| Green  |          |                 |            |          |                        |                 |                                 |  |
| Mixed  |          |                 |            |          |                        |                 |                                 |  |
| PLASTIC:   |          |                 |            |          |                        |                 |                                 |  |
| PET #1   |          |                 |            |          |                        |                 |                                 |  |
| HDPE #2  |          |                 |            |          |                        |                 |                                 |  |
| All Plastic Bottles                              |          |                 |            |          |                        |                 |                                 |  |
| Other Plastic Containers                         |          |                 |            |          |                        |                 |                                 |  |
| Bulky Rigid Plastics                             |          |                 |            |          |                        |                 |                                 |  |
| METAL:   |          |                 |            |          |                        |                 |                                 |  |
| Aluminum Cans                                    |          |                 |            |          |                        |                 |                                 |  |
| Steel Cans                                       |          |                 |            |          |                        |                 |                                 |  |
| PAPER:   |          |                 |            |          |                        |                 |                                 |  |
| Newsprint (ONP)                                  |          |                 |            |          |                        |                 |                                 |  |
| Cardboard (OCC)                                  |          |                 |            |          |                        |                 |                                 |  |
| Magazines (OMG)                                  |          |                 |            |          |                        |                 |                                 |  |
| Office Paper                                     |          |                 |            |          |                        |                 |                                 |  |
| Mixed / Other Paper                              |          |                 |            |          |                        |                 |                                 |  |
| Cartons / Aseptic Containers                     |          |                 |            |          |                        |                 |                                 |  |
| WOOD:  |          |                 |            |          |                        |                 |                                 |  |
| Pallets  |          |                 |            |          |                        |                 |                                 |  |
| Other Wood - DO NOT                              |          | Report all tons | in Other c | olumn    |                        |                 |                                 |  |
| report yard waste tons here                      |          |                 |            |          |                        |                 |                                 |  |
| OTHER MATERIALS:<br>Textiles (clothes etc)       |          |                 |            |          |                        |                 |                                 |  |
| Televisions                                      |          |                 |            |          |                        |                 |                                 |  |
| Other Electronics                                |          |                 |            |          |                        |                 |                                 |  |
| C&D Materials Recycling                          |          |                 |            |          |                        |                 |                                 |  |
| White Goods                                      |          | Report all tons | in Other c | olumn    |                        |                 |                                 |  |
| Other Metal                                      |          |                 |            |          |                        |                 |                                 |  |
|  |          |                 |            |          | $\vdash \vdash \vdash$ |                 |                                 |  |
|  |          |                 |            |          |                        |                 |                                 |  |
| Commingled tons-check all items collected above* |          |                 |            |          |                        |                 |                                 |  |
| TOTAL TONS:                                      |          |                 |            |          |                        |                 |                                 |  |

44. \*If you checked commingled, which material recovery facility does your community use:

45. **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 cardboard disposal ban results in private cardboard recycling (and you have a way to track the tons collected)

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

## Part III. Special Waste Collections

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 46 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 # 46 but instead report with HHW materials in question # 47.

| 46. | Special Waste Programs for Collecting<br>Materials <u>from Citizens</u> by Material Type   | Did program collect this material from the public?   | # of<br>sites                               | 1   |                    | ollected / mana<br>indicated units | <u> </u>          |           |  |  |  |  |  |
|-----|--|--|---|---|--------------------|------------------------------------|-------------------|-----------|--|--|--|--|--|
|     | Used Motor Oil   | Yes  |   |   |                    | gallo                              | ons               |           |  |  |  |  |  |
|     | Used Oil Filters   | Yes  |   | barr  | rels, or           |                                    | lbs               |           |  |  |  |  |  |
|     | Used Antifreeze  | Yes  |   |   |                    |                                    | gallons           |           |  |  |  |  |  |
|     | Batteries, Lead Acid   | Yes  |   | # b   | patteries,         | , or                               | lbs               |           |  |  |  |  |  |
|     | Batteries, Dry Cell  | Yes  |   |   |                    |                                    | lbs               |           |  |  |  |  |  |
|     | Fluorescent Bulbs/Lights Containing Mercury  | Yes  |   |   | lbs, or            | #                                  | bulbs             |           |  |  |  |  |  |
|     | Propane Tanks  | Yes  |   |   | lbs, or            |                                    | # tanks           |           |  |  |  |  |  |
|     | Used Cooking Oil / Waste Vegetable Oil   | Yes  |   |   | lbs, or            |                                    | gallons           |           |  |  |  |  |  |
|     | Other Special Wastes - please provide waste type here:   | 🗌 Yes  |   |   | · ·                |                                    | lbs               |           |  |  |  |  |  |
|     | Pesticide Containers (NCDA Program, not pesticides themselves)   | Yes  |   |   | lbs, or            |                                    | # con-<br>tainers |           |  |  |  |  |  |
|     | NCDA Pesticide Disposal Assistance Program<br>(for management of pesticides, not containers)   | Yes  |   |   |                    |                                    | lbs               |           |  |  |  |  |  |
|     | Latex Paint (do not include paint collected at<br>HHW event or by a paint exchange program)  | Yes  |   |   | gals,<br>or        |                                    | lbs               |           |  |  |  |  |  |
|     | <ul> <li>a. Was HHW collected at a permitted Tempora</li> <li>b. How many days was your HHW Program op</li> <li>c. Did you partner or co-sponsor your HHW pr</li> <li>Please list partner(s)</li> <li>d. Provide number of citizens / households that</li> <li>e. Did your program accept materials from smaller of using the second second</li></ul> | open to accept materials during<br>rogram with another <u>local</u> g<br>participated in your HHW<br>all businesses (Very Exemp<br>as material managed | ng this F<br>overnme<br>collecti<br>t Small | Fiscal Year?<br>ent? Yes<br>on program this<br>Quantity Gener | S Fiscal Stators)? |                                    | Yes               | np. Event |  |  |  |  |  |
|     | 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 47g below. Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in question 46.   |  |   |   |                    |                                    |                   |           |  |  |  |  |  |
|     | Used Motor Oil (gal)   | Used Oil Filters   |   | _ # of Barrels,   | or                 | lbs.                               |                   |           |  |  |  |  |  |
|     | Used Antifreeze (gal)  | Lead Acid Batter   | ies (lbs)                                   |   | Other Ba           | atteries (lbs)                     |                   |           |  |  |  |  |  |
|     |  | Fluorescent Bulbs / Lights Containing Mercury (lbs)  |   |   |                    |                                    |                   |           |  |  |  |  |  |
|     | g. Provide Total Quantity of materials collected<br>reported in 47f, please net the weight of those  |  |   |   |                    |                                    |                   | pounds    |  |  |  |  |  |
|     | h. Please list HHW Collection Contractor   |  |   |   |                    |                                    |                   | _         |  |  |  |  |  |
|     | i. Estimated cost of HHW / VSQG program or   | event(s) \$  |   |   |                    |                                    |                   |           |  |  |  |  |  |
| All | es 3 through 6 should have only been complet<br>governments answering "Yes" to question #5 o<br>ch are for Counties only.  |  |   |   |                    |                                    |                   |           |  |  |  |  |  |

#### Special Waste Collections (Do Not Include Materials Collected as part of an HHW Collection Program or Event)

2018-2019 Local Government Annual Report *Report Due Date: September 1, 2019* Submit to: Lgteam@ncdenr.gov

### Part IV. Yard Waste, Mulching and Composting Management

Yard waste may not be disposed in sanitary landfills, incinerators, or in unpermitted sites and it is illegal to burn. Do not include information on food waste or non-vegetative materials in this section.

- 48. Does your local government operate a yard waste program? Yes No If yes please indicate how yard waste is managed by checking all that apply: Collected curbside Collected at convenience center Received at yard waste, compost, or LCID facil.
- 49. Did a storm event significantly impact the amount of yard waste your government managed during FY 18-19? 🗌 Yes 🛛 No
- 50. What quantities of materials were managed by your yard waste program? **Provide information in TONS** <u>OR</u> **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 | Facility Name and Location |
|---|------------------|------|----|-------------|----------------------------|
| End user (to farmer or home-owner)                |                  |      | or |             |                            |
| Your local government's mulch or compost facility |                  |      | or |             |                            |
| Other public mulch or compost facility            |                  |      | or |             |                            |
| Private mulch or compost facility                 |                  |      | or |             |                            |
| Land clearing and inert debris landfill (LCID)    |                  |      | or |             |                            |
| Energy / Fuel Use (e.g. boiler fuel market)       |                  |      | or |             |                            |
| Total   |                  |      | or |             |                            |

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 cubic yard truck x 3 days/wk x 16 wks = 480* cubic yards

|                          | Х                   | X                    |                                      | = |       | cubic yards |
|--------------------------|---------------------|----------------------|--------------------------------------|---|-------|-------------|
| Size of Truck (in yards) | Avg. no. of times t | ruck fills each week | # of weeks truck is used during year |   | TOTAL |             |
|                          | Part V.             | Solid Wast           | e Collection Services                |   |       |             |

51. Please complete the following table about your government's solid waste (garbage) collection system.

|   | Sector                                     |           |                | ts Solid V  |            |           |         | Waste Collee codes at 1      |           | Who Collects Solid Waste?    | How is Solid Waste Collected?   |  |  |
|---|--|-----------|----------------|-------------|------------|-----------|---------|------------------------------|-----------|------------------------------|---|--|--|
|   | Residential                                | Primary   | b              | Secondary   |            | Primary   | 1       | Secondary                    | Igni      | b. By Contract               | 5   |  |  |
|   | Commercial                                 | Primary   | b              | Secondary   |            | Primary   | 6       | Secondary                    |           | d. Local government not      | <ol> <li>Convenience center/greenbox</li> <li>As needed or by request</li> <li>Daily</li> </ol> |  |  |
|   | Industrial                                 | Primary   | a              | Secondary   |            | Primary   |         | Secondary                    |           | 1                            | 6. Other  |  |  |
| 52.   | If you provide                             | resident  | <u>ial</u> was | te collect  | ion at sin | gle-fam   | ily hou | seholds in                   | your juri | isdiction, please answer the | following questions:  |  |  |
|   | What type of c                             | ollectior | n metho        | od is used  | ?          | Fully A   | Autom   | ated                         | Semi-A    | utomated 🔀 Manual            | Don't know  |  |  |
|   | What is the star                           | ndard co  | ollectio       | n frequen   | cy?        | Weekl     | у [     | Two tir                      | nes per   | week Other                   |   |  |  |
|   | What is the typ                            | ical serv | vice po        | int for sin | igle famil | ly house  | hold w  | vaste?                       | Curł      | oside 🗌 Back yard / Bac      | k door  |  |  |
| What type of collection container is used? 🛛 Government-provided carts 🗌 Resident-provided container 🗌 Bags |  |           |                |             |            |           |         |                              | ner Bags  |                              |   |  |  |
|   | Do you offer b                             | ulky was  | ste coll       | lection set | rvices?    | Y         | es      | 🔀 No                         |           |                              |   |  |  |
| 53.   | For municipali<br>If so, were whi          |           |                | 0           |            |           | 0       |                              |           | ∕es ⊠No<br>No                |   |  |  |
|   |  | ]         | Part           | VI. So      | lid W      | aste a    | nd F    | Recyclin                     | g Edu     | icational Activities         |   |  |  |
| 54.   | Did <b>your local</b><br>issues / activiti | 0         | ment l         |             |            |           |         | orm citizens<br>art VII, pag |           | cally about solid waste man  | agement and / or recycling  |  |  |
| 55.   | Please estimate                            | e your ar | nnual b        | udget for   | solid wa   | ste relat | ed edu  | cation and o                 | outreach  | activities: \$               |   |  |  |
| 56.   | Does your com                              | munity    | produc         | e recyclin  | ng educat  | ion and   | outrea  | ch materials                 | s in lang | uages besides English?       | ]Yes 🗌 No   |  |  |
|   | If YES, please                             | list othe | r langu        | ages used   | 1:         |           |         |                              |           |                              |   |  |  |

|     | Part VI  | I. Resources f   | or Solid Was                               | te Manageme  | ent and Full C                       | ost Accounti                                | ing   |
|-----|--|--|--|--|--------------------------------------|---|---|
|     | Did your local govern<br>NC Solid Waste Dispo<br>According to GS 105-                                  | osal Tax proceeds ar   | e distributed to elig                      | ible local governme  | nts on a quarterly ba                |   | nent of Revenue.                                |
|     | Did your local govern  |  | -  |  |                                      | Yes No                                      |   |
|     | If yes, how are dispos   |  | 1  |  |                                      |   | -   |
| 59. | What other funding so  |  |  |  |                                      |   |   |
|     |  | es<br>xes / general fund<br>old charges  |  | eight-based fees (e.g<br>yclables  | · —                                  | ire tax<br>White Goods tax                  |   |
| 60. | If applicable, please p  | •  |  | 1 0  | <i>,</i>                             |   |   |
|     | ex: \$ \$75.00   | per  | year                                       | per  | household                            | for solid waste                             | 2   |
|     | a. \$  | per  |  | per  |                                      | for solid waste                             | 2   |
|     | b. \$  | per  |  | per  |                                      | for recycling                               |   |
|     | c. \$  | per  |  | per  |                                      | for yard waste                              | ;   |
|     | d. \$  | per  |  | per  |                                      | for bulky was                               | te  |
|     | e. \$  | per  |  | per  |                                      | availability fe                             | e   |
|     | f. \$  | per  |  | per  |                                      | total charge                                |   |
| Ac  | Did your local govern<br>are charged a fee by w<br>cording to GS 130A-30                               | veight or volume for 09.08, local governme                                     | the amount of trash                        | they discard)  | ] Yes 🛛 No                           | · •   |   |
| inf | orm users of such cost   | S.   |  |  |                                      |   |   |
| 62. | If your local governme   | ent contracts for soli   | d waste or recycling                       | g services, please re  | port the annual cont                 | ract amount.                                |   |
|     | \$25,000   |  | For solid waste s                          | ervices per year   |                                      |   |   |
|     | \$   |  | For recycling per                          | r year   |                                      |   |   |
|     |  |  | OR   |  |                                      |   |   |
|     | \$   |  | _ Combined Contr                           | act (solid waste, and  | d recycling)                         |   |   |
| 63. | Collection Programs:<br>collection programs for<br>not available, please                               | or waste, recyclables  | and yard waste inc                         | luding materials col   |                                      |   |   |
|     |  | # of Households<br>served  | Tons Collected                             | Collection Cost  | Disposal Cost<br>(tipping fees paid) | Total Cost<br>including<br>overhead         | Cost Per Ton<br>Managed<br>(calculated by form) |
| N   | Iunicipal Solid Waste <sup>3</sup>   | *261   | 339  | 21,500   |                                      | 21,500                                      | 63  |
|     | <b>Recycling Program</b> **  | k  |  |  |                                      |   |   |
|     | Yard Waste Program   | 1  |  |  |                                      |   |   |
|     | Total  | S (calculated by form):  | 339  | 21,500   |                                      | 21,500                                      | 63  |
|     | *for materials collected ar  | nd sent for eventual dispo   | sal in a Municipal Solid                   | Waste or Construction a  | nd Demolition Landfill.              |   | [   |
| 64. | **for materials collected<br>If your government op<br>facility operations (rou<br>proportionately. Lan | by public recycling progr<br>perates a landfill, tran<br>und to nearest dollar | ams including those serven station, yard w | vices offered to commerc<br>vaste /compost facili<br>ferent facilities are | ial and industrial generat           | ity, please provide<br>tempt to allocate co | total budget for                                |
|     | Trai   | nsfer Station Budget   | : \$                                       |  |                                      |   |   |
|     | Yar  | d Waste / Compost l  | Facility Budget: \$                        |  |                                      |   |   |
|     | Rec  | ycling Facility Budg   | get: \$                                    |  |                                      |   |   |
| 65. | What was your govern   | ment's total combin  | ed annual budget fo                        | or all solid waste and   | d recycling services                 | in 18-19? \$21,500                          |   |
|     | 18-2019 Local Governm  |  | _  |  |                                      |   | Page 8 of 11                                    |

## Part VIII. Mandated Programs

The following questions pertain to programs mandated by NC statute. **Only Counties** need to complete questions 66 through 88. Failure to complete Part VIII may result in non-eligibility for grant funding. **Municipalities** should skip to question 89 on page 10.

| L   | IITE GOODS   |                   |  |                          |                    |  |  |
|-----|--|-------------------|--|--------------------------|--------------------|--|--|
| 66. | Please provide name, address, phone number, and  | ls program.       |  |                          |                    |  |  |
|     | Name:  |                   |  |                          |                    |  |  |
|     | Address:   |                   | City:  |                          |                    |  |  |
|     | Telephone: Fax:  |                   | Email:   |                          |                    |  |  |
| 67. | Please provide the physical address of the primary county white goods collection site.   |                   |  |                          |                    |  |  |
|     | Street 1:  |                   |  |                          |                    |  |  |
|     | Street 2:  |                   |  |                          |                    |  |  |
|     | City:  |                   |  | Zip:                     |                    |  |  |
| 68. | Please provide the name of the business or person that removes the refrigerant gases (CFCs) from white goods.  |                   |  |                          |                    |  |  |
|     | Name:  |                   |  |                          |                    |  |  |
|     | Street:  |                   |  |                          |                    |  |  |
|     | City:  |                   |  | Zip:                     |                    |  |  |
|     | Phone: Fax:  |                   |  |                          |                    |  |  |
| 69. |  |                   |  |                          |                    |  |  |
| 09. | Type of CFC Removed  |                   | emoval, and copy of certification of person(s) performing extraction. Amount |                          |                    |  |  |
|     | v 1  |                   |  |                          |                    |  |  |
|     |  |                   |  |                          |                    |  |  |
|     |  |                   |  |                          |                    |  |  |
|     |  |                   |  |                          |                    |  |  |
|     |  |                   |  |                          |                    |  |  |
| 70  |  |                   |  |                          |                    |  |  |
| 70. | CFCs may be recycled or sent for destruction. Giv  |                   | ethod of Disposal  | Amount Earned            | Amount Spent       |  |  |
|     |  |                   | iction of Disposal   |                          |                    |  |  |
|     |  |                   |  |                          |                    |  |  |
|     |  |                   |  |                          |                    |  |  |
|     |  |                   |  | . 11                     |                    |  |  |
| 71. | Please report the tonnage of white goods collected white goods tonnage reported on page 5? $\Box$ Ye   |                   | -19 in the Recycling Tonna   | iges table on page 5 (qu | testion # 43). Was |  |  |
| 72. | List the amount of revenue for the white goods pr  |                   |  |                          |                    |  |  |
| 12. | Revenue collected from sale of scrap:  |                   |  |                          |                    |  |  |
|     | Revenue collected from White Goods Tax Distrib   | ·                 |  |                          |                    |  |  |
|     | Revenue from other source (e.g. grants):   |                   |  |                          |                    |  |  |
|     |  |                   |  |                          |                    |  |  |
|     | Total Revenue:   | \$                |  |                          |                    |  |  |
| 73. | According to the White Goods Law, White Good Tax Distributions must be spent on white goods activities. Give amounts and types of expenditures White Good Tax Distributions were used for (do not include funds received from grants). |                   |  |                          |                    |  |  |
|     | Operational Expenses: \$   |                   |  |                          |                    |  |  |
|     | Capital Improvements: \$   |                   |  |                          |                    |  |  |
|     | Clean-up of Illegal White Goods Dumps: \$  |                   |  |                          |                    |  |  |
|     | Total Expenditures: \$   |                   |  |                          |                    |  |  |
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| SC: | RAP TIRES  |            |                       |                  |                     |                |
|-----|--|------------|-----------------------|------------------|---------------------|----------------|
| 74. | Please provide name, address, phone number, and e-mail of person responsible for scrap tires program.     Name: Title:                       |            |                       |                  |                     |                |
|     | Address:   |            |                       |                  | Zip:                |                |
|     | Telephone: Fax:  |            |                       |                  |                     |                |
| 75. | Please provide the physical address of the primary cour<br>Street 1:   | nty scrap  | tires collection site | е.               |                     |                |
|     | Street 2:  |            |                       |                  |                     |                |
|     | City:  |            |                       | Carolina         | Zip:                |                |
| 76  | Tonnage/Number of scrap tires disposed July 1, 2018-J  | une 30, 2  |                       | es from cleanup  | of nuisance sites)  |                |
| 77. |  |            |                       |                  |                     |                |
| 78. | Indicate the types of tires collected by the county:<br>Passenger% Heavy Truck   | %          | Large Off-Road        | <u>و</u>         | 6 Agricultural      | %              |
| 79. | List the amount of revenue for the scrap tire program b  | y source:  |                       |                  |                     |                |
|     | Revenue from Scrap Tire Tax Distributions:   |            |                       |                  |                     |                |
|     | Revenue from Scrap Tire Fees:  |            |                       |                  |                     |                |
|     | Revenue from Scrap Tire Clean-up Reimbursements:   | \$         |                       |                  |                     |                |
|     | Revenue from Scrap Tire Cost-Overrun Grants:   |            |                       |                  |                     |                |
|     | Total Revenue:   | \$         |                       |                  |                     |                |
| 80. | County's total scrap tire program contract expenditure (<br>excluding costs of nuisance tire cleanups, for FY 18-19                          | contract   | disposal/hauling co   | osts), \$        |                     |                |
| 81. | County's additional scrap tire program expenditure (i.e. Labor \$  |            | onvenience center     | cost), if any.   |                     |                |
|     | Site Cost \$   |            |                       |                  |                     |                |
|     | Other \$   |            | describe Other:       |                  |                     |                |
| 82. | County's contract cost for scrap tire disposal. \$   |            | / Ton; \$             | / Tire           |                     |                |
| 83. | Hauling cost or fuel surcharge, if not included in contra  | act cost a | above. \$             | / Ton; \$        | / Tire              |                |
| 84. | Total tipping fees collected for tires not eligible for free disposal. \$  |            |                       |                  |                     |                |
| 85. | Total number of tires collected not eligible for free disposal:  |            |                       |                  |                     |                |
| 86. | If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill? $\Box$ Yes $\Box$ No |            |                       |                  |                     |                |
| 87. | Name of tire disposal/recycling firm(s):   |            |                       |                  |                     |                |
| MA  | NAGEMENT OF ABANDONED MANUFA   |            |                       |                  |                     |                |
| 88. | Has your county considered whether to implement a pr   |            |                       |                  |                     | Yes No         |
|     | If yes, has your county developed a written plan for the   | manager    | nent of abandoned     | l manufactured 1 | nomes? Yes          | 🗌 No           |
| TE  | MPORARY DISASTER DEBRIS STAGINO  | - SITE     | S - Counties ar       | nd Municinal     | ities               |                |
| 89. | Does your local government have a plan in place for management of disaster debris? Yes No  |            |                       |                  |                     |                |
|     | If yes, indicate if the plan is a stand-alone plan or in co  | njunction  | with local govern     | ment agencies:   | Stand-alone         | In conjunction |
| 90. | If you indicated having a plan, has the plan been review<br>requirements for public assistance reimbursement in a c                          |            |                       | inagement or FEI | MA to ensure it mee | ts the basic   |

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91. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:

| Name:   | Name:   | Name:   |
|---------|---------|---------|
| Phone:  | Phone:  | Phone:  |
| E-mail: | E-mail: | E-mail: |

92. 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.

| Disaster Site #       | Site Name                              |    | Disaster Site # | Site Name     |
|-----------------------|--|----|-----------------|---------------|
|                       |  |    |                 |               |
|                       |  |    |                 |               |
|                       |  |    |                 |               |
|                       |  |    |                 |               |
|                       |  |    |                 |               |
| Does your plan addres | s the management of: Household hazardo | us | waste Mass anii | mal mortality |

White goods

94. Does your plan include coordination with NC DOT on clearing roads and waste in the right of way? Yes No

Abandoned vessels

93.

#### **Part IX. Comments**

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

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

Sandy Skolochenko, email: sandy.skolochenko@ncdenr.gov phone: 919-707-8147 Matt James, email: matt.james@ncdenr.gov phone 919-707-8133

#### **THIS FORM IS DUE SEPTEMBER 1, 2019**

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

