

#### 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: Holly Ridge

## 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 Septem	nber 1, 2018.	
	If you have que	estions or need assistance com	pleting this form, please call 9	919-707-8136 or 919-707-8133.	
Perso	on Completing This Rep	ort: Heather Reynolds	Т	Fitle: Town Clerk	
Mailing Address: PO BOX 145			City: Holly Ridge	Zip: 28445	
Phon	ne: 910-329-7081	Fax: 910-329-15	93	Date: 08/06/2018	
Ema	il: townclerk@townofho	ollyridge.net			_
		G	General Instructions		
	e remember that the tim specific question.	e period for the report is JULY 1.	, 2017 through JUNE 30, 2018. I	Please check "No" if you have nothing to re	port
1.	Did your local government	nent have a Recycling Coordinato	r or similar position for FY 17-18	8? Yes No	
	Name Recycling Coord	inator (if different from person co	ompleting this report.)		
	Name:		T	Fitle:	
	Address:		City:	Zip:	
	Telephone:	Fax:	Email:		
2.	Did your local government	nent have a Solid Waste Director	or similar position for FY 17-18?	? Yes No	
	If Yes, Name:		Т	Title:	
	Address:		City:	Zip:	
	Telephone:	Fax:	Email:		
3.	Did your local government	nent have <b>dedicated</b> or part-time	Solid Waste Enforcement Staff	for FY 17-18? Yes No	
	If Yes, Name:		Т	Title:	
	Address:		City:	Zip:	
	Telephone:	Fax:	Email:		
4.	Did your local governmall that apply)	nent have solid waste ordinances i	in place addressing any of the following	llowing during FY 17-18? (if yes, please che	ck
	Disposal Bans		ttering Other, Please Descr	ribe:	
5.	Did your local government mulching, composting)	- 1	for any solid waste services in FY	Y 17-18 (e.g., collection, disposal, recycling)  Yes No	,
	If you a	nswer "No" to auestion 5 the	renort is complete please emai	il to Loteam@ncdenr oov	

#### 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 Yes No 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? X 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) Waste Industries Franchised hauler (please specify) Other (please specify)

17.	Please provide the following information about your community:  a. Total number of households in your jurisdiction? 1,599						
	b. Number of households eligible to participate in the curbside recycling program: 1,500						
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 1,375						
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)						
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 i	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? $\  \  \  \  \  \  \  \  \  \  \  \  \ $
	other than through your curbside or dropoff recycling programs?   Yes   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 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

DD OCD AND	Curbside			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)							
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 al items collected above		251.86					251.86
TOTAL TONS:		251.86					251.86
					1		

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)

17.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		n collect this n the public?	# of sites			cted / managed. cated units.	
	Used Motor Oil	Yes	⊠ No				gallons	
	Used Oil Filters	Yes	⊠ No		barre	els, or	lbs	
	Used Antifreeze	Yes	⊠ No			•	gallons	
	Batteries, Lead Acid	Yes	⊠ No		# ba	atteries, or	lbs	
	Batteries, Dry Cell	Yes	⊠ No				lbs	
	Fluorescent Bulbs/Lights Containing Mercury	Yes	⊠ No			lbs, or	# bulbs	
	Propane Tanks	Yes	⊠ No			lbs, or	# tanks	
	Used Cooking Oil / Waste Vegetable Oil	Yes	⊠ No			lbs, or	gallons	
	Other Special Wastes - please provide waste type here:	Yes	⊠ No				lbs	
	Pesticide Containers (NCDA Program, not pesticides themselves)	Yes	⊠ No			lbs, or	# containers	
	NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)	☐ Yes	⊠ No				lbs	
	Latex Paint (do not include paint collected at HHW event or by a paint exchange program)	Yes	⊠ No			gals, or	lbs	
18.	Did your local government operate a household If Yes, please respond to the following question a. Was HHW collected at a permitted Tempora	hazardous wa	aste collection	prograi	m or event in FY	7 17-18?	☐ Yes ⊠ N	np. Event
	b. How many days was your HHW Program or	en to accept i	materials duri	ng this F	Fiscal Year?			
	<ul><li>c. Did you partner or co-sponsor your HHW pr Please list partner(s)</li></ul>	ogram with a	nother <u>local</u> g	overnm	ent? Yes	No No		
	d. Provide number of citizens / households that		•		1 0		' <u>-</u>	
	e. Did your program accept materials from sma If yes, please estimate the amount of business			-	pt Small Quantit	•	ors)? Yes	⊠ No
	<ul> <li>f. Amounts of individual materials collected by about individual materials <u>is not</u> available, p Note, materials listed here should only be the</li> </ul>	lease simply p	provide total c	luantity	of materials coll	ected by H	IHW program in 4	8g below.
	Used Motor Oil (gal)	Use	d Oil Filters		_ # of Barrels, o	or	lbs.	
	Used Antifreeze (gal)	Lea	d Acid Batteri	ies (lbs)		Other Batte	ries (lbs)	
	Fluorescent Bulbs / Lights Containing	ng Mercury (ll	os)		_			
	g. Provide Total Quantity of materials collected reported in 48f, please net the weight of thos							pounds
	h. Please list HHW Collection Contractor							
	i. Estimated cost of HHW / CESQG program of	or event(s) \$						
Pag	es 3 through 6 should have only been complet	ed by govern	ments indicat	ting in d	guestion # 14 th	at they D(	) provide recyclin	g services.

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.

	Part IV. Yard Wast				<u> </u>	
	section concerns management of vegetative m				•	
	ermitted sites and it is illegal to burn. Composting tyour management of vegetative materials. Do n					
49.					_	ow yard waste is managed by
17.	checking all that apply:  Collected curbside [				•	
50.	Did a storm event significantly impact the amount					
51.						
	organic material (yard waste, brush, limbs, lea		1	conversion pur		•
	Destination	Check if used	Tons	Cubic Yards		Name and Location of Facility ag Vegetative Materials
	End user (to farmer or home-owner)					
	Your local government's mulch or compost facili	ty 🗌				
	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:					
	estimate yard waste volume. Calculate for each t volume managed by program in the appropriate by					
	X	oxes abov	X	Truck x 5 days/v	- WK X 10 WKS = 400	yd³
	Size of Truck (in yards)  Avg. no. of times tru	ck fills each	<del></del>	s truck is used durin	g vear	TOTAL
				ection Servi		
This	section concerns your local government's provision					
52.						
	Sector Who Collects Solid Waste?			I WIII CO	ollects Solid Waste?	How is Solid Waste Collected?
	Insert Letter - see codes at right			a. Local b. By Co		es 1. Once a week at household
	Residential B A		1 Secondary	c. Franc	hise haulers	<ul><li>2. Twice a week at household</li><li>3. Convenience center/greenbox</li></ul>
	Commercial B B		1 Secondary		government not yed in provision of	<ul><li>4. As needed or by request</li><li>5. Daily</li></ul>
	Industrial Primary D Secondary B	Primary	6 Secondary	servic	e	6. Other
53.	If you provide <u>residential</u> waste collection at sing	le-family	households in y	our jurisdiction	, please answer th	e following questions:
	What type of collection method is used? $\square$	Fully Aut	tomated S	Semi-Automated	d Manual	Don't know
	What is the standard collection frequency? $\square$	Weekly	Two tim	nes per week	Other	
	What is the typical service point for single family	househo	ld waste?	Curbside [	Back yard / Ba	ack door
	What type of collection container is used?	Governm	ent-provided ca	rts Resid	ent-provided cont	ainer Bags
	Do you offer bulky waste collection services?	Yes	No No			
54.	For municipalities - did your government collect				No	
	If so, were white goods delivered to the county for			□ No		
	Part VI. Solid Wa		• `	_		
55.	Did <b>your local government</b> have an education prissues / activities? Yes No (If	_	inform citizens to Part VII, page	•	out solid waste ma	inagement and / or recycling
56.	Please estimate your annual budget for solid was	te related	education and o	utreach activitie	es: \$	
57.	Does your community produce recycling education	on and ou	treach materials	in languages be	esides English? [	Yes No
	If YES, please list other languages used:					
58.	Please provide your recycling website address an	d public i	nformation pho	ne number if app	plicable.	
	Website:				Phone #:	

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

	ficient resources ave stions deal with fun						continued success of ent programs.	these programs.	The following
_	Did your local gov					_		Yes No	)
	With regards to fur	_		-					
	Tipping	_			eight-based		g. PAYT)	ire tax	
	Propert	y taxes / general	fund	Sale of rec	cyclables		V	Vhite Goods tax	
	Per hou	sehold charges		Grants				Disposal Tax	
61.							ents on a quarterly ba for solid waste mana		
	How are disposal	tax distributions	being us	sed?					
62.	If applicable, pleas	se provide vour I	- FY 17-18	8 household fees.	(e.g., a. \$4.	5.00 per	<u>year</u> per <u>household</u>	for solid waste)	
									2
	b. \$ 4.13	per	month		per	cart		for recycling	
	c. \$	per			per			for yard waste	:
	d. \$	per			per			for bulky was	te
	e. \$	per			per			availability fee	<u>e</u>
	f. \$ \frac{19.32}{}	per	month		per	househo	old	total charge	
63.	Did your local gov are charged a fee b		-		-		garbage during FY  Yes	17-18? (a system v No	where residents
	cording to GS 130A orm users of such c		governn	nents are required	l to conduct	full cos	st accounting annua	lly and to develop	a system to
			c 1: 1	1		1			
64.							eport the annual cont	ract amount.	
	\$			_ For solid waste	services per	year			
	\$			For recycling pe	er year				
				OR					
	\$280,297.6			Combined Cont	ract (solid v	aste, an	d recycling)		
65.		s for waste, recy	clables a	and yard waste inc	cluding mate		ity to display the full llected from conveni		
		# of House	holds				Disposal Cost	Total Cost	Cost Per Ton
		serve	<b>I</b>	Tons Collected	Collection	n Cost	(tipping fees paid)	including overhead	Managed (calculated by form)
N	Iunicipal Solid Wa	ste*						280,297.6	
	Recycling Program	m**							
	Yard Waste Prog	ram							
	Te	otals (calculated by	y form):					280,297.6	
	*for materials collected	ed and sent for event	ual dispos	al in a Municipal Solic	d Waste or Con	struction a	and Demolition Landfill.		
				_			cial and industrial generat	_	
66.			t dollar).	. If budgets for di	fferent facil	ities are	ity or recycling facil combined, please at	tempt to allocate co	
		Transfer Station	Budget:	\$					=
				acility Budget: \$					
	]	Recycling Facilit	ty Budge	et:	\$				
67.	What was your go	vernment's total	combine	d annual budget f	or all solid	waste an	d recycling services	in 17-18? \$ <u>291,50</u>	6

## **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: \$					

Name:	<b>SC</b> .	KAP TIKES						
Address:    City:    Zip:    Telephone:    Fax:    Finail:    Telephone:    Fax:    Finail:    Telephone:    Fax:    Finail:    Telephone:    Street   Finail:    Stre	76.	•						
Telephone: Fax: Email:  77. Please provide the physical address of the primary county scrap tires collection site.  Street 1:  Street 2:  City: State: North Carolina						Zip:		
Street 1:  Street 2:  City:  State: North Carolina  Zip:  78. Tonnage/Number of scrap tires disposed July 1, 2017-June 30, 2018 (excluding tires from cleamp of nuisance sites)  Tons or  Number of tires  79. Tonnage/Number of scrap tires disposed from cleamp of state or county designated misance sites  79. Tonnage/Number of scrap tires disposed from cleamp of state or county designated misance sites  80. Indicate the types of tires collected by the county:  Passenger  Wheavy Truck  List the amount of revenue for the scrap tire program by source:  Revenue from Scrap Tire Tax Distributions:  Revenue from Scrap Tire Tax Distributions:  Revenue from Scrap Tire Clean-up Reimbursements:  Revenue from Scrap Tire Clean-up Reimbursements:  Revenue from Scrap Tire Clost-Overrun Grants:  Total Revenue:  S  County's total scrap tire program contract expenditure (contract disposal/hauling costs),  Scratchiding costs of nuisance tire cleanups, for FY 17-18.  83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any.  Labor  Site Cost  Other  describe Other:  44. County's contract cost for scrap tire disposal.  5 / Tor; \$ / Tire  84. County's contract cost for scrap tire disposal.  85. Total inpring fees collected for tires not eligible for free disposal.  86. Total lipping fees collected for dires 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 provider, were they cut and disposed in a local landfill? \( \text{Yes} \) \( \text{No} \)  No  1				Emai	1:			
Street 2: City: State: North Carolina	77.	Please provide the physical address of the primary	county scrap tin	es collection sit	e.			
City: State: North Carolina Zip:  78. Tonnage/Number of scrap tires disposed July 1, 2017-June 30, 2018 (excluding tires from cleanup of nuisance sites)  Number of tires  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites  Number of tires  80. Indicate the types of tires collected by the county;  Passenger		Street 1:						
78. Tonnage/Number of scrap tires disposed July 1, 2017-June 30, 2018 (excluding tires from cleanup of nuisance sites)  Tons or Number of tires  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites  Tons or Number of tires  80. Indicate the types of tires collected by the county:  Passenger								
Tons or Number of tires  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites   Tons or Number of tires  80. Indicate the types of tires collected by the county:     Passenger		City:		_ State: North	n Carolina	Zip:		
Tons or   Number of tires	78.		017-June 30, 202 or	18 ( <u>excluding</u> tin	res from cleanup of nu _Number of tires	isance sites)		
Passenger	79.			county designate				
Revenue from Scrap Tire Tax Distributions: \$   Revenue from Tire Fees: \$   Revenue from Tire Fees: \$   Revenue from Scrap Tire Clean-up Reimbursements: \$   Revenue from Scrap Tire Clean-up Reimbursements: \$   Revenue from Scrap Tire Cost-Overrun Grants: \$   Total Revenue: \$   Revenue from Scrap Tire Cost-Overrun Grants: \$   Total Revenue: \$   Revenue from Scrap Tire Cost-Overrun Grants: \$   Total Revenue: \$   Revenue from Scrap Tire Program contract expenditure (contract disposal/hauling costs), \$   Revenue from Scrap tire program expenditure (i.e. labor, convenience center cost), if any.   Labor	80.	Indicate the types of tires collected by the county: Passenger % Heavy	Truck	%	Large Off-Road	%		
Revenue from Tire Fees: \$   Revenue from Scrap Tire Clean-up Reimbursements: \$   Revenue from Scrap Tire Cost-Overrun Grants: \$   Revenue from Scrap Tire Cost-Overrun Grants: \$   Total Revenue: \$   Revenue from Scrap Tire Cost-Overrun Grants: \$   Total Revenue: \$   S   Revenue from Scrap Tire Cost-Overrun Grants: \$   S   S   S   S   S   S   S   S   S	81.	1 1 0	,					
Revenue from Scrap Tire Clean-up Reimbursements: \$ Revenue from Scrap Tire Cost-Overrun Grants: \$ Total Revenue: \$ Scounty's total scrap tire program contract expenditure (contract disposal/hauling costs), \$ excluding costs of nuisance tire cleanups, for FY 17-18.  83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any. Labor \$ Site Cost \$ Other \$ describe Other:  84. County's contract cost for scrap tire disposal. \$ If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill? Yes No  89. Name of tire disposal/recycling firm(s):    Temporary Disastra Debris Staging of the person of disaster debris? Yes No   If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Yes No   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:   Heather Reynolds   Name:   Name:     Phone: 910-329-7081   Phone:   Phone:		•						
Revenue from Scrap Tire Cost-Overrun Grants: \$ Total Revenue: \$  Total Revenue: \$  Seconty's total scrap tire program contract expenditure (contract disposal/hauling costs), \$ excluding costs of nuisance tire cleanups, for FY 17-18.  Sounty's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any.  Labor \$ Site Cost \$ Other \$ County's contract cost for scrap tire disposal. \$ Total viping fees collected for tires not eligible for free disposal. \$ Total tipping fees collected for tires not eligible for free disposal. \$  Revenue from Scrap tire disposal firm(s):  TEMPORARY DISASTER DEBRIS STAGING SITES  90. Does your local government have a plan in place for management of disaster debris? Yes No If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies: Stand-alone In conjunction  11. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Yes No  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: Heather Reynolds Name: Name:  Phone: 910-329-7081 Phone: Phone:								
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Other   \$   describe Other:	83.	T -1		venience center	cost), if any.			
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Name:Heather ReynoldsName:Name:Phone:910-329-7081Phone:Phone:	92.		il address of the	person(s) in ch	arge of the disaster de	bris management program for		
Phone: 910-329-7081 Phone: Phone:		•	me:		Name:			

	Disaster Site #	Site Name		Disaster Site #	Site Name
	DS67-072	Holly Ridge HR1			
94.	Does your plan address the r	management of household hazardou	s waste	e and white goods followin	g a disaster? Yes No
95.	Does your plan address mass	s animal mortality? Yes	⊠ No		
MA]	NAGEMENT OF ABA	NDONED MANUFACTUR	ED F	HOMES BY COUNT	IES
96.	Has your county considered	whether to implement a program fo	r the m	nanagement of abandoned	manufactured homes?  Yes  No
	If yes, has your county devel	loped a written plan for the manager	ment o	f abandoned manufactured	homes? Yes No
		Part IX.	Con	nments	
		y info provided in your report as ne agement in North Carolina. Thank			our comments about this report or other

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

