

## 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: <a href="http://deq.nc.gov/about/divisions/waste-management/solidwaste-section/annual-reporting">http://deq.nc.gov/about/divisions/waste-management/solidwaste-section/annual-reporting</a>

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: <a href="https://get.adobe.com/reader/">https://get.adobe.com/reader/</a>. Please <a href="https://get.adobe.com/reader/">DO NOT complete this form using Adobe Acrobat Pro.</a>

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

2019



Local Government Report Form

Required: Select your Local Government Name HOOKERTON

## **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 as	ssistance completing this form, please co	all 919	0-707-8147 o	r 919-707-8133.		
Per	son Completing This Report: April H. Vins	son	Title	: Town Clerk	/ Finance Officer		
Ma	iling Address: P.O. Box 296	City: Hookerton			Zip: 28538		
Pho	one: 252-747-3816			Date: 07-16-	2019		
Em	ail: ahbaker@embarqmail.com						
		General Instructions					
	ase remember that the time period for the repart a specific question.	port is JULY 1, 2018 through JUNE 30, 201	9. Plea	ase check "No	" if you have nothing to report		
1.	Did your local government have a Recycli	ing Coordinator or similar position for FY 1	8-19?	Yes	⊠ No		
	Name Recycling Coordinator (if different	from person completing this report.)					
	Name:		Title	:			
	Address:	City:			Zip:		
	Telephone:	Email:					
2.	Did your local government have a Solid W	Vaste Director or similar position for FY 18-	19?	Yes	⊠ No		
	If Yes, Name:		Title	:			
	Address:	City:	_		Zip:		
	Telephone:	Email:					
3.	Did your local government have dedicate	d or part-time Solid Waste Enforcement St	aff for	FY 18-19?	∑ Yes □ No		
	If Yes, Name: Richard Green		Title	: Maintenance			
	Address: 303 E. Main Street	City: Hookerton			Zip: 28538		
	Telephone: <u>252-747-3816</u>	Email: ahbaker@embarqmail.com					
4.	Did your local government have solid was all that apply)	ste ordinances in place addressing any of the	follow	ving during FY	7 18-19? (if yes, please check		
	☑ Disposal Bans    ☐ Illegal Dumping    ☐ Littering    ☐ Construction & Demolition    ☐ Other:						
5.	Did your local government manage, provi mulching, composting)?	de or contract for any solid waste services in  No	n FY 18	8-19 (e.g., coll	lection, 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? Yes No
7.	Did your local government have any program or policy encouraging or requiring local agencies to purchase products with recycled content? Yes 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? Yes 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?
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? $\square$ Yes $\bowtie$ No
12.	Did your local government offer a waste exchange or reuse program?
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 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 DID NOT operate, contract or participate in a recycling program. (Go to Part IV on page 7.)
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.	a. Total number of households in your jurisdiction?
	b. Number of households eligible to participate in the curbside recycling program:
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary):
18.	If your curbside recycling program is operated through a <u>public franchise granted to a private company</u> then please answer the following:  Is public participation in the franchise:  Voluntary or Mandatory  Does your franchise consist of:  One service district or Multiple service districts
19.	What sector(s) of your community was served by the curbside recycling program?  Residential Commercial Industrial
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served:
21.	How frequently were the curbside recyclables collected?  Once a week  Every other week / biweekly  Other
22.	Please describe the collection containers used:  Bins Blue bags Multi-bin system Roll-out carts
23.	Please describe the method / style of recyclable materials handling:  curb-sort (collector separates material as collected) single stream / commingled dual / two stream don't know / other
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 collect or accept televisions from (check all that apply): Residences Businesses
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?
OT	HER PUBLIC RECYCLING PROGRAMS
	only programs operated or contracted for <u>by the local government</u> . The tonnage of any materials collected by the following programs uld 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?   Yes  No
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?   Yes No
39.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes 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
40.	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
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

PDO CD AN	Cı	ırbside	Dr	op-off	All "Oth	er" Programs	Total Tons
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated form)
LASS:							,
lear							
rown							
reen							
lixed							
LASTIC:							
ET #1							
DPE #2							
ll Plastic Bottles							
ther Plastic Containers							
ulky Rigid Plastics							
ETAL:							
luminum Cans							
teel Cans							
APER:							
lewsprint (ONP)							
ardboard (OCC)							
fagazines (OMG)							
office Paper							
lixed / Other Paper							
artons / Aseptic Containers							
OOD:							
allets							
other Wood - DO NOT		Report all to	ns in Other colun	ın			
eport yard waste tons her	e						
THER MATERIALS:							
extiles (clothes etc)							
elevisions							
ther Electronics							
&D Materials Recycling	5	Report all to	ons in Other colun	1 <i>n</i>			
hite Goods		rieport ant to					
ther Metal							
ommingled tons-check a ems collected above*							
TOTAL TONS:							
*If you checked com	mingled, whic	h material reco	very facility do	es your comm	unity use:		

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

Special Waste Collections (Do Not Include Materials Collected as part of an HHW Collection Program or Event) Did program collect this **Special Waste Programs for Collecting** # of Data on quantities collected / managed. material from the public? Materials from Citizens by Material Type Please report in indicated units. sites Used Motor Oil Yes gallons Used Oil Filters barrels, or lbs Yes Used Antifreeze Yes gallons # batteries, or Batteries, Lead Acid Yes 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 Yes llbs type here: Pesticide Containers (NCDA Program, not # con-Yes lbs, or pesticides themselves) tainers NCDA Pesticide Disposal Assistance Program Yes lbs (for management of pesticides, not containers) Latex Paint (do not include paint collected at gals, Yes lbs HHW event or by a paint exchange program) Household Hazardous Waste (HHW) and Very Small Quantity Generator (VSQG) Program or Event 47. Did your local government operate a household hazardous waste collection program or event in FY 18-19? No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event b. How many days was your HHW Program open to accept materials during this Fiscal Year? c. Did you partner or co-sponsor your HHW program with another <u>local government?</u> Yes Please list partner(s) d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year? e. Did your program accept materials from small businesses (Very Exempt Small Quantity Generators)? If yes, please estimate the amount of business material managed f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize below. If data about individual materials is not available, please simply provide total quantity of materials collected by HHW program in 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 Batteries (lbs) Other Batteries (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs) g. Provide Total Quantity of materials collected by HHW Program. If individual materials were pounds reported in 47f, please net the weight of those materials out of the total listed here. h. Please list HHW Collection Contractor i. Estimated cost of HHW / VSQG program or event(s) \$ Pages 3 through 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling services.

All governments answering "Yes" to question #5 on page 1 should complete the rest of the report with the exception of Questions #66 - #88 which are for Counties only.

		Part	t IV. Yard V	Vaste,	, Mul	ching and	l C	composting	g Managem	ent	
			ed in sanitary land e materials in this			rs, or in unpe	rmi	tted sites and i	t is illegal to burn	n. Do not include inform	ıtio
<b>1</b> 8.		_	ent operate a yard ∑ Collected curb	_	_		_		•	w yard waste is managed aste, compost, or LCID t	-
19.	Did a storm ev	ent signific	cantly impact the	amount	of yard	waste your go	veri	nment manage	d during FY 18-19	9? Xes No	
50.	What quantities of materials were managed by your yard waste program? <b>Provide information in TONS OR CUBIC YARDS of organic material (yard waste, brush, limbs, leaves, etc.) managed</b> . For conversion purposes, use 400 lbs./cubic yd.										
		Destin	nation		Check if used	Tons		Cubic Yards	Facility	Name and Location	
	End user (to fa	rmer or ho	ome-owner)				or				
	Your local gov	ernment's	mulch or compost	facility			or				
	Other public m	ulch or co	mpost facility				or				
	Private mulch	or compost	t facility				or				
	Land clearing a	and inert de	ebris landfill (LCI	(D)	$\boxtimes$	11.55	or		Greene County Landfill		
	Energy / Fuel U	Jse (e.g. bo	oiler fuel market)				or				
		То	tal			11.55	or				
	volume manag	ed by prog	ram in the approp	riate bo	xes abov	Ye. Ex. 10 c	ubic	yard truck x 3	days/wk x 16 wks	en enter the grand total $y = 480$ cubic yards	ırds
	Size of Truc	k (in yards)						ruck is used during		TOTAL	
51.	Please complet		wing table about y	our gov	vernmen	t's solid wast	e (ga				
	Sector		ollects Solid Was ter - see codes at 1	ll ll		lid Waste Co - see codes a		.h.	llects Solid Waste?	How is Solid Waste Collec s 1. Once a week at household	ted?
	Residential	Primary	b Secondary	b Pri	mary	1 Secondary	T	b. By Co	ntract	2. Twice a week at household	
	Commercial	Primary	b Secondary	b Pri	mary	1 Secondary		d. Local	government not	Convenience center/greenl     As needed or by request	юх
	Industrial	Primary	b Secondary	b Pri	mary	1 Secondary		1 involv	red in provision of e	<ul><li>5. Daily</li><li>6. Other</li></ul>	
52.	If you provide	residential	waste collection	at single	e-family	households in	ı yo	ur jurisdiction,	please answer the	e following questions:	
	What type of c	ollection n	nethod is used?	F	ully Aut	omated $\sum$	Se	emi-Automated	l Manual	Don't know	
	What is the star	ndard colle	ection frequency?	$\bigvee$ W	Veekly	Two	ime	s per week	Other		
	What is the typical service point for single family household waste?										
	What type of c	ollection c	ontainer is used?	☐ G	overnm	ent-provided	cart	s Reside	ent-provided conta	niner Bags	
	Do you offer b	ulky waste	collection service	es?	Yes	⊠ No					
53.		•	our government c		_			Yes No	No		
		Pa	art VI. Solid	Was	te and	l Recycli	ng	Education	nal Activities	S	
54.	Did <b>your local</b> issues / activiti	_	ent have an educa ☐ Yes	-	_	inform citize o Part VII, pa			ut solid waste ma	nagement and / or recycl	ing
55.	Please estimate	your annu	ual budget for soli	d waste	related o	education and	lout	treach activitie	s: \$		_
56.	Does your com	munity pro	oduce recycling e	ducation	and out	reach materia	als i	n languages be	sides English?	Yes No	
	If YES, please	list other l	anguages used: _								

	Part VII	. Resources f	or Solid Was	te Manageme	ent and Full C	ost Accounti	ng			
57.	Did your local governn	nent operate an Ent	erprise Fund for so	lid waste services in	FY 18-19?	Yes No				
58.	1	1		,	1 ,	, ,				
	•		·							
	•		•							
	Tons Collected   Collection Cost   Disposal Cost (tipping fees paid)   Including overhead   Served   Served									
59.	•	•	•		D					
	_ 11 0				_					
		•		yclables	W	hite Goods tax				
60		-		follow example form	vat):					
00.		•	,	1		for solid waste				
	a. \$ 1/	per	1	per llousent	Jid	for solid waste				
	b. \$	per		per		for recycling				
	c. \$	per		per		for yard waste				
	d. \$	per		per		for bulky wast	e			
	e. \$	per		per		availability fee	<u>;                                    </u>			
	f. \$ <u>17</u>	per month	1	per househo	old	total charge				
61.							where residents			
	are charged a fee by we	eight or volume for	the amount of trash	n they discard)	Yes No	. •				
			ments are required	to conduct full cos	st accounting annual	lly and to develop	a system to			
62	If your local governmen	nt contracts for soli	d waste or recyclin	g services, please re	eport the annual cont	ract amount.				
٥		• • • • • • • • • • • • • • • • • •	·		pero une unimur cenu					
	<del></del>		<del>_</del>	1 2						
	Ψ		_	i yeai						
	¢			4 (1: 14	41:)					
	<b>D</b>		_ Combined Conti	ract (solid waste, an	a recycling)					
63.										
					llected from conveni	ence centers. If fu	ll cost analysis is			
	not available, please i		diget in Total Cost	Column.	D: 10	Total Cost	Cost Per Ton			
			Tons Collected	Collection Cost		-	Managed			
					(tipping rees para)		(calculated by form)			
M	<del>-</del>		222.98			25,875.21	110			
			11.55			15 225 00				
							1,327			
		• •		-		41,211.2	17:			
61										
04.										
	• •		, o			•				
		Waste / Compost 1								
	Recy	cling Facility Budg	get: \$							
65.	What was your government	ment's total combin	ed annual budget fo	or all solid waste an	d recycling services	in 18-19? \$				

# Part VIII. Mandated Programs

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

WH	ITE GOODS						
66.	Please provide name, address, phone number		•	•	Title.	s program.	
	Name:					Zip:	
	Telephone: Fax:						
67.	Please provide the physical address of the pri						
	Street 1:	-	-				
	Street 2:						
	City:			State:	North Carolina	Zip:	
68.	Please provide the name of the business or pe			_	• • •	•	
	Street:						
	City:					Zip:	
	Phone: Fax:			Email	:		
69.	Give amounts / types of CFCs removed. Atta		ds of CFC remo	oval, ar	nd copy of certificat	. ,,,,	rming extraction.
	Type of CFC Remove	d				Amount	
70.	CFCs may be recycled or sent for destruction	Give n	ame of firm di	l snosal :	method and amount	earned / spent for CF0	⊂ disnosal
70.	Firm	a. Give in			f Disposal	Amount Earned	Amount Spent
71.	Please report the tonnage of white goods collewhite goods tonnage reported on page 5?	ected du	ring FY 2018-1	9 in th	e Recycling Tonnaş	ges table on page 5 (qu	estion # 43). Was
72.	List the amount of revenue for the white good	ds progra	nm by source:				
	Revenue collected from sale of scrap:		\$				
	Revenue collected from White Goods Tax Di	istributio	ons: \$				
	Revenue from other source (e.g. grants):		\$				
	Total Revenue:		\$				
73.	According to the White Goods Law, White C expenditures White Good Tax Distributions v						mounts and types of
	Clean-up of Illegal White Goods Dumps: \$						
	Total Expenditures: \$						

	RAPTIRES	'1 C	11.0								
/4.	Please provide name, address, phone number, and e-ma	•	•	1 1 0	am.						
	Address:		City:		Zip:						
	Telephone: Fax:		Email	:							
75.	Please provide the physical address of the primary cour Street 1:	_									
	Street 2:										
	City:		State: North	Carolina	Zip:						
76	Tonnage/Number of scrap tires disposed July 1, 2018-J Tons or	June 30, 20	019 ( <u>excluding</u> tire	es from cleanup o Number of tires	of nuisance sites)						
77.	Tonnage/Number of scrap tires disposed from cleanup  Tons or	of scrap tires disposed from cleanup of state or county designated nuisance sites  Tons or  Number of tires									
78.	Indicate the types of tires collected by the county:  Passenger % Heavy Truck		Large Off-Road	%	Agricultural	%					
79.	List the amount of revenue for the scrap tire program b 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 (excluding costs of nuisance tire cleanups, for FY 18-19	(contract o	lisposal/hauling co	osts), \$							
81.	County's additional scrap tire program expenditure (i.e. Labor \$		nvenience 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	bove. \$	/ Ton; \$	/ Tire						
84.	Total tipping fees collected for tires not eligible for fre	e disposal	. \$								
85.	Total number of tires collected not eligible for free dis-										
86.	If scrap tires were not hauled off site by contracted serv	vice provi									
87.	Name of tire disposal/recycling firm(s):			- -							
MA	NAGEMENT OF ABANDONED MANUFA	ACTUR	ED HOMES E	BY COUNTIE	ES						
88.	Has your county considered whether to implement a pr	ogram for	the management	of abandoned ma	nufactured homes?	Yes No					
	If yes, has your county developed a written plan for the	managen	nent of abandoned	l manufactured h	omes? Yes	No					
TE	MPORARY DISASTER DEBRIS STAGINO	G SITES	S - Counties ar	nd Municipali	ties						
89.	Does your local government have a plan in place for m	•		<del></del>	☐ No						
	If yes, indicate if the plan is a stand-alone plan or in co	•			Stand-alone	_					
90.	If you indicated having a plan, has the plan been review requirements for public assistance reimbursement in a			nagement or FEN  Yes	IA to ensure it meets t No	he basic					

91. Please list the name, contact numbers(s), and e your local government:  Name: April H. Vinson			e-mail address of the person(s) in charge of the Name: Robert E. Taylor			ne disaster debris management program for  Name: Tyler S. Shirley	
	Phone: 252-747-381	Phone: 252-747	7-3816		Phone: 252-747-3816		
	E-mail: ahbaker@embar	E-mail: btaylor74	7@yaho	o.com	E-mail: hookertoncar3@gmail.com		
92.	Natural Heritage Progra Please note that the vetting of	am (NHP) and the State f a site prior to a disaster is	Office (SHPO) through	have been reviewed for conflicts with hocordination with the Solid Waste be which is found to have impacted federal or sment. Attach extra sheets, if needed.	Section.		
	Disaster Site #	Site N	Name 1		Disaster Site #	Site Name	
	DS40-004	Town of Hook	erton temp site				
93.	Does your plan address	the management of: [	Household haz		waste Mass an White g	imal mortality	
94.	Does your plan include	coordination with NC	DOT on clearing	roads	and waste in the right	of way? Xes No	
			Part IX.				

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 <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

