

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: http://deq.nc.gov/about/divisions/waste-management/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: https://get.adobe.com/reader/. Please DO NOT complete this form using Adobe Acrobat Pro.

Complete the form by entering responses in the appropriate fields using Adobe Reader. Please save a copy of the completed form to your computer for your records by using the "Save As" option. 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 KANNAPOLIS

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	rson Completing This Report: WILMER MELTON, III	Ti	itle: DIRECTOR OF PUBLIC WORKS			
Ma	iling Address: 401 LAUREATE WAY	City: KANNAPOLIS Zip: 28081				
Pho	one: 704-791-0480		Date: AUGUST 30, 2019			
Em	nail: WMELTON@KANNAPOLISNC.GOV					
		eral Instructions				
	ase remember that the time period for the report is JULY 1, 20 a specific question.	018 through JUNE 30, 2019. P	lease check "No" if you have nothing to report			
1.	Did your local government have a Recycling Coordinator of	or similar position for FY 18-19	? Xes No			
	Name Recycling Coordinator (if different from person com	pleting this report.)				
Pleas for a 1.	Name:	Ti	itle:			
	Address:	City:	Zip:			
	Telephone: Email:					
2.	Did your local government have a Solid Waste Director or	similar position for FY 18-19?	∑ Yes ☐ No			
2.	If Yes, Name:	Ti	itle:			
	Address:	City:	Zip:			
	Telephone: Email:					
3.	Did your local government have dedicated or part-time Se	olid Waste Enforcement Staff f	For FY 18-19? Yes No			
 2. 3. 	If Yes, Name:	Ti	itle:			
	Address:	City:	Zip:			
	Telephone: Email:					
4.	Did your local government have solid waste ordinances in pall that apply)	place addressing any of the follo	owing during FY 18-19? (if yes, please check			
	□ Disposal Bans □ Illegal Dumping □ Littering	Construction & Demoliti	ion Other:			
5.	Did your local government manage, provide or contract for mulching, composting)?	any solid waste services in FY	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? Yes No
7.	Did your local government have any program or policy encouraging or requiring local agencies to purchase products with recycled content? \square Yes \square 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? 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? Yes 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 ONE option that best applies.
	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.)
CU	RBSIDE RECYCLING PROGRAM
15.	Did your government operate a Curbside Recycling Program? X Yes No, skip to question # 25
16.	Who collected the recyclable materials for your local government's curbside recycling program?
	Local government employees
	Private contractor (please specify) WASTE MANAGEMENT, INC.
	Franchised hauler (please specify)
	Other (please specify)

1/.	Please provide the following information about your community:
	a. Total number of households in your jurisdiction? 18,253
	b. Number of households eligible to participate in the curbside recycling program: 18,253
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 13,692
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
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: 147
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)
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?
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: 1

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):
26	If any did are not are all the nice are not as a second of the fellowing information about a second of the second
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: ELECTRONIC RECYCLERS INTERNATIONAL, INC.
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? \(\times \) Yes \(\times \) No
O.T.	
	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.
snou	and be listed in the Other Column in the Recycling Tollhages Chart on pg 3.
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? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
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:
	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 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
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.

PDOCD AM	Curbside			Drop-off	All "(Other" Programs	Total Tons	
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)	
GLASS:								
Clear								
Brown	\boxtimes							
Green								
Mixed								
PLASTIC:								
PET #1	\boxtimes							
HDPE #2								
All Plastic Bottles								
Other Plastic Containers								
Bulky Rigid Plastics								
METAL:								
Aluminum Cans								
Steel Cans	\boxtimes							
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 co	olumn				
report yard waste tons here								
OTHER MATERIALS:								
Textiles (clothes etc)	-							
Televisions	-					31.563	31.563	
Other Electronics	-					3.732	3.732	
C&D Materials Recycling		Report all tons	in Other co	olumn				
White Goods								
Other Metal								
Commingled tons-check all items collected above*		3,489.25					3,489.25	
TOTAL TONS:		3,489.25				35.295	3,524.545	

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

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

Submit to: Lgteam@ncdenr.gov

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.

	Did program collect this	# of	Data on quantities coll	_
Materials from Citizens by Material Type	material from the public?	sites	Please report in inc	
Used Motor Oil	Yes			gallons
Used Oil Filters	Yes		barrels, or	lbs
Used Antifreeze	Yes			gallons
Batteries, Lead Acid	Yes		# batteries, o	r 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	# containers
NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)	Yes			lbs
Latex Paint (do not include paint collected at HHW event or by a paint exchange program)	Yes Yes		gals, or	lbs
If Yes, please respond to the following questions	S.			
a. Was HHW collected at a permitted Temporab. How many days was your HHW Program op	•		· · · · · · · · · · · · · · · · · · ·	Permanent Tem
*	en to accept materials during	ng this F	iscal Year?	Permanent Tem
 b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW pr Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma 	participated in your HHW ill businesses (Very Exemp	ng this F overnme	iscal Year? ent? Yes No on program this Fiscal Ye Quantity Generators)?	
 b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW pr Please list partner(s) d. Provide number of citizens / households that 	participated in your HHW ill businesses (Very Exemps material managed HHW Program: if totals foliase simply provide total questions of the same simply provide total questions.)	overnme collection t Small (on program this Fiscal Year pounds Quantity Generators)? pounds dual materials are known of materials collected by	ear?Yes please itemize below HHW program in 47g
 b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW predease list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from smalf yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, please is not available, please your materials listed here should only be the Used Motor Oil (gal) 	participated in your HHW all businesses (Very Exemp s material managed HHW Program: if totals for the dease simply provide total questions collected at an HHW Program used Oil Filters	overnme collection t Small (or indivi- quantity (rogram a	on program this Fiscal Year? On program this Fiscal Year Quantity Generators)? pounds dual materials are known of materials collected by and should not include ma # of Barrels, or	ear? Yes please itemize below HHW program in 47g aterials listed in questi
 b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW pr Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from smalf yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, pl 	participated in your HHW all businesses (Very Exemp s material managed HHW Program: if totals for the dease simply provide total questions collected at an HHW Program used Oil Filters	overnme collection t Small (or indivi- quantity (rogram a	on program this Fiscal Year? On program this Fiscal Year Quantity Generators)? pounds dual materials are known of materials collected by and should not include ma # of Barrels, or	ear? Yes please itemize below HHW program in 47g aterials listed in questi
 b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW predease list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from smalf yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, please is not available, please your materials listed here should only be the Used Motor Oil (gal) 	participated in your HHW all businesses (Very Exemp s material managed HHW Program: if totals for lease simply provide total questions of the collected at an HHW Program: Used Oil Filters Lead Acid Batteri	collectic t Small (or indivi- quantity (rogram a	on program this Fiscal Year? On program this Fiscal Year Quantity Generators)? pounds dual materials are known of materials collected by and should not include ma # of Barrels, or Other Batt	ear? Yes please itemize below HHW program in 47g aterials listed in questi
b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW pr Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma If yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, pl Note, materials listed here should only be the Used Motor Oil (gal) Used Antifreeze (gal)	participated in your HHW all businesses (Very Exemp s material managed HHW Program: if totals for lease simply provide total of ose collected at an HHW Program: Lead Acid Batteri g Mercury (lbs) I by HHW Program. If indice materials out of the total if	collection to Small (continuantity of cogram and cogram	on program this Fiscal Year? On program this Fiscal Year Quantity Generators)? ———————————————————————————————————	ear? Yes please itemize below HHW program in 47g terials listed in questi lbs. eries (lbs)

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

which are for Counties only.

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		Part I	V. Yard Wasto	e, Mulo	ching and	l C	omposting	g Managemo	ent
			in sanitary landfills, in naterials in this sectio		rs, or in unpe	rmii	tted sites and i	t is illegal to burn	n. Do not include informatio
18.	-	_	t operate a yard waste Collected curbside					•	w yard waste is managed by aste, compost, or LCID facil
19.	Did a storm ev	ent significan	tly impact the amoun	t of yard v	waste your go	ven	nment manageo	d during FY 18-19	9? Yes No
50.			were managed by yo ste, brush, limbs, lea						OR CUBIC YARDS of /cubic yd.
		Destinat	ion	Check if used	Tons		Cubic Yards	Facility	Name and Location
	End user (to fa	rmer or home	e-owner)			or			
	Your local gov	ernment's mu	ılch or compost facilit	у 🗌		or			
	Other public m	ulch or comp	ost facility	\boxtimes	3,251.76	or			
	Private mulch	or compost fa	eility			or			
	Land clearing a	and inert debr	ris landfill (LCID)			or			
	Energy / Fuel U	Jse (e.g. boile	er fuel market)			or			
		Total	l		3251.76	or			
			n in the appropriate b X	oxes abov	ye. Ex. 10 ci	ıbic	yard truck x 3	days/wk x 16 wks	cubic yards
	Size of Truc	k (in yards)	Avg. no. of times true						TOTAL
			Part V. S	Solid W	Vaste Col	lec	tion Servi	ces	
51.	Please complet	e the following	ng table about your go	vernmen	t's solid waste	e (ga	ırbage) collecti	on system.	
	Sector		ll l		lid Waste Co			llects Solid Waste?	How is Solid Waste Collected?
			Secondary B	Insert #	- see codes a	t rıg	a. Local		s 1. Once a week at household 2. Twice a week at household
	Residential	. В	B		0 1		c. Franch	ise haulers	3. Convenience center/greenbox
	Commercial Industrial	Primary B Primary D	B	rimary	Secondary Secondary			government not ed in provision of	4. As needed or by request5. Daily6. Other
	Illuusulai	, р	, D				Scivico	-	o. Other
52.	If you provide	residential wa	aste collection at sing	le-family	households ir	yo	ur jurisdiction,	please answer the	e following questions:
	What type of c	ollection met	hod is used?	Fully Aut	omated	Se	emi-Automated	l Manual	Don't know
	What is the star	ndard collect	ion frequency?	Weekly	Two t	ime	s per week	Other	
	What is the typ	ical service p	point for single family	househol	d waste?	\times	Curbside	Back yard / Back	ck door
	What type of c	ollection con	tainer is used?	Governme	ent-provided	cart	s Reside	ent-provided conta	iner Bags
	Do you offer b	ulky waste co	ollection services?	X Yes	☐ No				
53.	-	•	r government collect vered to the county fo	_			Yes No	No	
		Par	t VI. Solid Wa	ste and	l Recyclii	ng	Education	nal Activities	S
54.	Did your local issues / activiti		*	_	inform citize o Part VII, pa	-		ut solid waste man	nagement and / or recycling
55.	Please estimate	your annual	budget for solid wast	e related o	education and	out	reach activities	s: \$ <u>12,500</u>	
56.	Does your com	munity produ	ace recycling education	n and out	reach materia	ıls iı	n languages be	sides English? 🛭	Yes No
	If YES, please	list other lang	guages used: SPANIS	SH					

	Part VII	. Resources f	or Solid Was	te Manageme	nt and Full C	ost Accounti	ng		
57.	Did your local governm	nent operate an Ente	erprise Fund for sol	id waste services in	FY 18-19?	Yes No)		
58.	NC Solid Waste Dispos								
	According to GS 105-1		•						
	Did your local governm If yes, how are disposa		_			2_3			
50	What other funding sou				sai oi soilu waste, ie	cycling and yard w	aste		
39.	Tipping fees	•	•	eight-based fees (e.g	PAYT) T	ire tax			
		es / general fund			· —	White Goods tax			
	Per househo	_	Grants						
60.	If applicable, please pr	•							
	ex: \$ \$75.00	per	year	per	household	for solid waste	2		
	a. \$	per		per		for solid waste			
	b. \$	per		per		for recycling			
	c. \$	per		per		for yard waste			
	d. \$	per		per		for bulky wast	e		
	e. \$	per		per		availability fee	e		
	f. \$ 15.6	per MON	TH	per HOUSE	CHOLD	total charge			
61.	Did your local governm						where residents		
	are charged a fee by we								
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full cos	t accounting annua	lly and to develop	a system to		
62.	If your local government	nt contracts for soli	d waste or recyclin	g services, please re	port the annual cont	ract amount.			
	\$1,549,887.34 For solid waste services per year								
	\$432,581.17		For recycling pe	r year					
			OR						
	\$1,982,468.51 Combined Contract (solid waste, and recycling)								
63.	Collection Programs: Please complete the following table to the best of your ability to display the full costs of your local government's								
	collection programs for	waste, recyclables	and yard waste inc	luding materials col					
	not available, please r		dget in Total Cost	column.		Total Cost	Cost Per Ton		
		# of Households	Tons Collected	Collection Cost	Disposal Cost	including	Managed		
		served			(tipping fees paid)	overhead	(calculated by form)		
M	lunicipal Solid Waste*		16,432.46	1,549,887.34		2,201,147.89	13:		
	Recycling Program**		3,489.25	432,581.17	250,312.08	682,893.25	19:		
	Yard Waste Program		3,251.76	463,459	65,059.76	528,518.76	162		
		(calculated by form):	23,173.47	2,445,927.51	966,632.39	3,412,559.9	14′		
	*for materials collected and					B 1.1			
64	**for materials collected by If your government open								
0	facility operations (roun								
	proportionately. Land	lfill Budget:	\$						
	Trans	sfer Station Budget	: \$						
	Yard	Waste / Compost I	Facility Budget: \$						
	Recy	cling Facility Budg	get: \$						
65.	What was your government	ment's total combine	ed annual budget fo	or all solid waste and	d recycling services	in 18-19? \$			

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. <u>Municipalities</u> should skip to question 89 on page 10.

WH	ITE GOODS						
66.	Please provide name, address, pho		•	-	ible for white goods Title:	program.	
	Name:						
	Address:			City:		Zip:	
	Telephone:						
67.	Please provide the physical address	s of the primary co	ounty white go	ods colle	ection site.		
	Street 1:						
	Street 2:						
	City:			_ State:	North Carolina	Zip:	
68.	Please provide the name of the bus Name:				- , ,	om white goods.	
	Street:				N. 4. C. 1'	7.	
	City:			State:	North Carolina	Zıp:	
	Phone:						
69.	Give amounts / types of CFCs rem		rds of CFC rer	noval, ar	nd copy of certification	. , , , .	ming extraction.
	Type of CF	. Removed				Amount	
				+			
				+			
				+			
				+			
70	CEC 1 1 1 1 1 1 CEC	1	CC	1' 1		1 / C CE	G 1' 1
70.	CFCs may be recycled or sent for Firm	destruction. Give i			f Disposal	Amount Earned	
71.	Please report the tonnage of white white goods tonnage reported on p		uring FY 2018 \inc No	-19 in th	e Recycling Tonnag	ges table on page 5 (qu	nestion # 43). Was
72.	List the amount of revenue for the	white goods prog	ram by source:				
	Revenue collected from sale of sc	rap:	\$				
	Revenue collected from White Go	ods Tax Distribut					
	Revenue from other source (e.g. g	rants):					
	Total Revenue:		\$				
73.	According to the White Goods La expenditures White Good Tax Dis						mounts and types of
	Operational Expenses:	\$					
	Capital Improvements:						
	Clean-up of Illegal White Goods I						
	Total Expenditures:	\$					

	RAP TIRES									
74.	Please provide name, address, phone number, and e-ma	•	1	1 1 0	am.					
	Address:		City:		Zip:					
	Telephone: Fax:		Emai	1:						
75.	Please provide the physical address of the primary cour Street 1:									
	Street 2:									
	City:		State: North	n Carolina	Zip:					
76	Tonnage/Number of scrap tires disposed July 1, 2018-J Tons or	June 30, 20	019 (<u>excluding</u> tir	res from cleanup o Number of tires	of nuisance sites)					
77.	Tonnage/Number of scrap tires disposed from cleanup Tons or	f 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	d %	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 c	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 contr	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	posal:								
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 I	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	e managen	nent of abandoned	d manufactured h	omes? Yes	No				
TE	MPORARY DISASTER DEBRIS STAGINO									
89.	Does your local government have a plan in place for m	•			□ 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			anagement or FEN	AA to ensure it meets No	the basic				

91.	 Please list the name, contact numbers(s), and e your local government: Name: WILMER MELTON, III 		e-mail address of the Name:	ne per	son(s) in charge of the	ne disaster debris management program for Name:		
	Phone: 704-791-048	0	Phone:			Phone:		
	E-mail: WMELTON@K	CANNAPOLISNC.GOV	E-mail:			E-mail:		
92.	Please list the temporar Natural Heritage Progra Please note that the vetting of resources after a disaster may	am (NHP) and the Stat fa site prior to a disaster is	e Historic Preserva advantageous to local g	tion C	Office (SHPO) through ments because a staging site	h coordination wi	th the Solid Waste Secure impacted federal or state	tion.
	Disaster Site #	Site 1	Vame		Disaster Site #		Site Name	
				_				
93.	Does your plan address	the management of: [Household haza	rdous	waste Mass an	imal mortality		
		[Abandoned vess	els	☐ White go	oods		
94.	Does your plan include	coordination with NC	DOT on clearing r	oads a	and waste in the right	of way? X	es No	
			Part IX.	Con	nments			

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 https://deq.nc.gov/conservation/recycling-local-government-recycling-assistance or e-mail us at Lgteam@ncdenr.gov

