

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: https://get.adobe.com/reader/ - it is suggested that you complete the form using the latest version of Adobe 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 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:

Lake Santeetlah

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 L	gteam@ncdenr.gov by Sept o	ember 1, 2018.	
	If you have questic	ons or need assistance comp	leting this form, please ca	ll 919-707-8136	or 919-707-8133.
Per	son Completing This Report:	Kim Matheson		Title: Town Adr	ministrator
Ma	iling Address: 16 Marina Dr		City: Robbinsville		Zip: 28771
Pho	one: 828-479-8190	Fax: 828-479-0248	3	Date: 08-03	3-18
Em	ail: info@townoflakesanteetla	h.org			
		Ger	neral Instructions		
	ase remember that the time pe a specific question.	riod for the report is JULY 1, 2	2017 through JUNE 30, 2018	. Please check "N	No" if you have nothing to report
1.	•	have a Recycling Coordinator	or similar position for FY 17	-18? Yes	No No
	Name Recycling Coordinate	or (if different from person con	npleting this report.)		
	Name:			Title:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
2.	Did your local government	have a Solid Waste Director or	similar position for FY 17-1	8? Yes	No No
	If Yes, Name:			Title:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
3.	Did your local government	have dedicated or part-time S	Solid Waste Enforcement Sta	off for FY 17-18?	Yes No
	If Yes, Name:			Title:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
4.	Did your local government all that apply)	have solid waste ordinances in	place addressing any of the	following during I	FY 17-18? (if yes, please check
	Disposal Bans	Illegal Dumping Litte	ering Other, Please De	scribe:	
5.	Did your local government mulching, composting)?	manage, provide or contract for	r any solid waste services in	FY 17-18 (e.g., co	ollection, disposal, recycling, No
	If you answ	er ''No'' to question 5, the re	port is complete, please en	nail to Leteam@1	ncdenr.gov.

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

1/.	Please provide the following information about your community:
	a. Total number of households in your jurisdiction?
	b. Number of households eligible to participate in the curbside recycling program:
	c. Provide the number of households 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 Roll-out carts
23.	Please describe the method / style of recyclable materials handling: curb-sort (collector separates material as collected) single stream / commingled dual / two stream don't know / other
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used: less than 50 gallon cart
DR	OP-OFF RECYCLING PROGRAM
25.	Did your government operate a Drop-off Recycling Program? Yes No, skip to question # 32
26.	Who collected the recyclable materials for your local government's drop-off recycling program? Local government employees Private contractor
	Other (please specify)
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program: source-separated (citizens separate materials by type) 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. 100
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: 1
31.	How many of these locations were staffed with attendants? All None Some please list # of staffed sites:
EL	ECTRONICS RECYCLING PROGRAM
	use answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any erials 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	HER PUBLIC RECYCLING PROGRAMS
<u>the</u> <u>l</u>	se answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by ocal government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ocling 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? $\ \ \ \ \ \ \ \ \ \ \ \ \ $
40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes No
	On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served:
	Public drop-off recycling sites available for ABC On Premises Permit holders to use
41.	Does your local government operate a program to recycle Construction and Demolition materials? Yes No If yes, please check all materials that were recycled and report tonnages in tonnage table on page 5:
	☐ Clean Wood ☐ Brick, concrete, etc. ☐ Sheetrock ☐ Vinyl siding ☐ Shingles ☐ Metals ☐ Other
42.	Does your local government have an ordinance regulating the construction and demolition waste stream with the intention of encouraging or requiring waste reduction or recycling of these materials?
43.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 17-18. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	☐ Public Parks Recycling Program ☐ Athletic Field /Venue Recycling Program
	☐ Pedestrian Recycling Program ☐ Recycling Service for Special Events / Festivals
44.	Please identify all "Other" programs or services operated by your government during FY 17-18. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	Public School Recycling Program
	Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)
	Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events
	Organics / Food Waste Recycling other than yard waste program
	Oyster Shell Recycling Program
	Other Programs (please specify)
	Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.

RECYCLING TONNAGES FROM PUBLIC PROGRAMS

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

DD OCD AM	Cu	ırbside	D	rop-off	All "C	Other'' Programs	Total Tons
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear							
Brown							
Green							
Mixed							
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans							
Steel Cans							
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 her	e						
OTHER MATERIALS:							
Textiles (clothes etc)	 						
Televisions	 						
Other Electronics	 						
C&D Materials Recycling							
	\bot \sqsubseteq \bot						
Commingled tons-check a items collected above				13.9			13.9
TOTAL TONS:	+ - +		_	13.9			13.9
TOTAL TONS.				13.9			15.9

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?			
	c. Did you partner or co-sponsor your HHW pr Please list partner(s)	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
	 f. Amounts of individual materials collected by about individual materials <u>is not</u> available, p Note, materials listed here should only be the 	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.

						•					g Managem		
			-						-		sed in sanitary nt options. Please		
											on-vegetative mat		
49.			_								please indicate ho		
	•	_			•		_			•	eceived at yard w	•	
50.											d during FY 17-1		No No
51.											ation in TONS <u>(</u> coses, use 400 lbs		ARDS of
		Des	tinatio	on		Check used		Tons	Cubi	c Yards	Please Provide l Receivin	Name and Loca g Vegetative N	
	End user (to fa	rmer or	home-	owner)									
	Your local gov	ernment	's mul	ch or com	post facilit	у 🗆							
	Other public m	ulch or	compo	st facility									
	Private mulch	or comp	ost fac	ility									
	Land clearing	and inert	debris	landfill (LCID)								
	Energy / Fuel 1	Use (e.g.	boiler	fuel mar	ket)								
		,	Total										
											ou may use this fo		
											t program, and th $vk \times 16 wks = 480$		rand total
	volume manag	ed by pr	_	m me ap	propriate o	oxes ab	ove.	Ex. 10 ya ⁵	ігиск х	t 5 aays/v	$VK \times IO WKS = 400$	ya ^s	yd^3
	Size of Truc	ck (in yard			. of times true	k fills ea	ich wee	k # of week	s truck is	used during	g year	TOTAL	ya
				-				ste Colle					
This	section concern	s your le	ocal go										
52.	Please complet				<u> </u>					n system			
	Sector	Insert I		see code	at right	Insert	t # - se	waste Collee codes at 1		a. Local	llects Solid Waste? government employee	es 1. Once a weel	Waste Collected? k at household
	Residential	Primary	a	Secondary		rimary	3	Secondary		b. By Co	ntract nise haulers		ek at household e center/greenbox
	Commercial	Primary		Secondary		rimary		Secondary			government not ed in provision of	4. As needed of 5. Daily	or by request
	Industrial	Primary		Secondary	Pi	rimary		Secondary		servic		6. Other	
53.	If you provide	resident	<u>ial</u> was	te collect	ion at singl	e-famil	ly hou	seholds in	your jur	isdiction,	please answer th	e following q	uestions:
	What type of c	ollection	n metho	od is used	?	Fully A	utoma	ated	Semi-A	utomated	l Manual	Don't k	inow
	What is the sta	ndard co	ollectio	n frequen	cy?	Weekly	, [Two tir	nes per	week	Other		
	What is the typ	oical serv	vice po	int for sir	gle family	househ	old w	aste?	Curl	bside [Back yard / Ba	ck door	
	What type of c	ollection	onta	iner is us	ed?	Govern	ment-	provided ca	arts	Reside	ent-provided cont	ainer	Bags
	Do you offer b	ulky wa	ste coll	ection se	rvices?	Ye	S	☐ No					
54.	For municipali	ties - dic	l your	governme	nt collect v	white go	oods a	t the curb?		Yes	No		
	If so, were whi									No			
									_		nal Activitie		
55.	Did your local issues / activiti	_			-	_		orm citizens art VII, pag	-	cally abo	ut solid waste ma	nagement and	d / or recycling
56.	Please estimate	e your ar	nual b	udget for	solid wast	e relate	d edu	cation and o	outreach	activitie	s: \$		
57.	Does your com	nmunity	produc	e recyclii	ng educatio	n and c	outread	ch materials	s in lang	guages be	sides English?	Yes	No
	If YES, please	list othe	r langu	ages use	1:								
58.	Please provide	your rec	cycling	website	address and	l public	infor	mation pho	ne num	ber if app	olicable.		
	Website:										Phone #:		

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

	ficient resources availab estions deal with funding				-	these programs.	The following
_	Did your local governm			_		Yes No)
	With regards to funding	_	_				
	Tipping fees			eight-based fees (e.g	· —	ire tax	
		es / general fund	_	yclables		hite Goods tax	
61	Per househo NC Solid Waste Dispos	_	Grants	ibla local governme		isposal Tax	nant of Payanua
01.	According to GS 105-1	87.63 these funds r	nust be used by a ci	ty of county solely			
	How are disposal tax d	•					
62.	If applicable, please pr	•		•			
	a. \$	per		per		for solid waste	e
	b. \$	per		per		for recycling	
	c. \$	per		per		for yard waste	;
	d. \$	per		per		for bulky was	te
	e. \$	per		per		availability fe	<u>e</u>
	f. \$	per		per		total charge	
63.	Did your local governmare charged a fee by we					17-18? (a system ⁻] No	where residents
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full cos	st accounting annual	lly and to develor	a system to
64.	If your local government	nt contracts for soli	d waste or recycling	g services, please re	port the annual contr	ract amount.	
	\$99		For solid waste s	ervices per year			
	\$		For recycling per	r vear			
	·		OR	- J - 5.1.2			
	\$			act (solid waste, an	d recycling)		
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials co			
	not available, picase i	# of Households			Disposal Cost	Total Cost	Cost Per Ton
		served	Tons Collected	Collection Cost	(tipping fees paid)	including overhead	Managed (calculated by form)
N	Iunicipal Solid Waste*						
	Recycling Program**	196	11,060		-	99	(
	Yard Waste Program						
	Totals	(calculated by form):	11,060			99	
	*for materials collected and	_	_				
66	**for materials collected by If your government open						
00.	facility operations (rou						
	* *	dfill Budget:			, I	•	_
	Trans	sfer Station Budget	: \$				
	Yard	Waste / Compost l	Facility Budget: \$				
		cling Facility Budg					
67.	What was your government	ment's total combin	ed annual budget fo	or all solid waste an	d recycling services	in 17-18? \$	

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	Amount Earned	Amount Spent
73.	Please report the tonnage of white goods collected white goods tonnage reported on page 5? Ye	•	·18 in th	e Recycling Tonnag	es table on page 5 (qu	estion # 45). Was
74.	List the amount of revenue for the white goods pro	ogram by source:				
	Revenue collected from sale of scrap:	\$				
	Revenue collected from White Goods Tax Distribu	utions: \$				
	Revenue from other source (e.g. grants):	\$				
	Total Revenue:	\$				
75.	According to the White Goods Law, White Good expenditures White Good Tax Distributions were used to the Cook of th					mounts and types of
	Operational Expenses: \$					
	~					
	Clean-up of Illegal White Goods Dumps: \$					
	Total Expenditures: \$					

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

Disaster Site #	cause difficulty for local governments when atter Site Name	Disaster Site #	Site Name
04. Does your plan address t	he management of household hazardou	s waste and white goods follow	wing a disaster? Yes No
 Does your plan address r 		No	
	BANDONED MANUFACTUE	FD HOMES BY COU	NTIES
	red whether to implement a program for		
	eveloped a written plan for the manage		
if yes, has your county d			red nomes:
	Part IX.	Comments	
	n any info provided in your report as no	ecessary. We would appreciate	e your comments about this report or other
matters regarding solid waste	n any info provided in your report as no management in North Carolina. Thank	ecessary. We would appreciate you for your time. You may s	submit additional sheets if needed.
natters regarding solid waste in SS notes (post data download)	n any info provided in your report as no management in North Carolina. Thank - Q#45 removed 11,000 tons from Otl	ecessary. We would appreciate you for your time. You may s	submit additional sheets if needed.
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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 https://deq.nc.gov/conservation/recycling-local-government-recycling-assistance or e-mail us at Lgteam@ncdenr.gov

