

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: Leland

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	o Lgteam@ncdenr.gov by Septeml	per 1, 2018.
If you	have questions or need assistance con	mpleting this form, please call 9	19-707-8136 or 919-707-8133.
Person Completing	This Report: Wyatt Richardson	Ti	tle: Operation Services Director
Mailing Address: 1	02 Town Hall Drive	City: Leland	Zip: 28451
Phone: 910332-465	51 Fax:		Date: 8/8/2018
Email: wrichardson	n@townofleland.com		
		General Instructions	
for a specific questi	ion.	-	Please check "No" if you have nothing to report
·	l government have a Recycling Coordinat	•	? Yes No
Name Recycli	ing Coordinator (if different from person of	completing this report.)	
Name:		Ti	tle:
Address:		City:	Zip:
Telephone:	Fax:	Email:	
2. Did your loca	l government have a Solid Waste Director	r or similar position for FY 17-18?	☐ Yes
If Yes, Name	:	Ti	tle:
Address:		City:	Zip:
Telephone:	Fax:	Email:	
3. Did your loca	l government have dedicated or part-tim	ne Solid Waste Enforcement Staff f	for FY 17-18? Yes No
If Yes, Name	: Shannon Hodges	Ti	tle: Code Enforcement Officer
Address: 102	Town Hall Drive	City: Leland	Zip: 28451
Telephone: 9	10-371-3390 Fax:	Email: shodg	es@townofleland.com
4. Did your loca all that apply)	l government have solid waste ordinances		owing during FY 17-18? (if yes, please check
Disp	osal Bans 🔀 Illegal Dumping 🔀 L	ittering Other, Please Descri	ibe:
5. Did your loca mulching, cor	0 1	t for any solid waste services in FY	17-18 (e.g., collection, disposal, recycling, Yes No
	If you answer "No" to question 5, the	e renort is complete, please email	to Loteam@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 Yes No generated from the public buildings and facilities that were operated by your government in FY 17-18? Part II. Waste Reduction and Recycling Programs Serving the Public SOURCE REDUCTION / REUSE Did your local government have a backyard composting program? Yes X No If yes, please check all backyard composting activities that apply: Education Demonstration site(s) Bin distribution/sales Number of Bins distributed? Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes X No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives? Did your local government offer a waste exchange or reuse program? Yes X No 13 If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public: Paint exchange Number of gallons recovered? Swap shop/shed Number of sheds in use? Other (e.g. pallet exchange, etc.) PUBLIC RECYCLING SERVICES Which of the following responses best describes your recyclables recovery activities for the period July 1, 2017 through June 30, 2018? My local government **DID operate or contract** for a recyclables recovery program. (please continue to question 15) My local government DID NOT operate or contract for recyclables recovery BUT DID participate in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; then go to Part IV on page 7.) With which local government did you participate? My local government **DID NOT operate**, contract or participate in a recycling program. (Go to Part IV on page 7.) If your local government **DID** operate or contract for a recyclables recovery program, please indicate in the following sections the type of program in operation and provide specifics about your program(s). CURBSIDE RECYCLING PROGRAM Did your government operate a Curbside Recycling Program? X Yes No, skip to question # 25 Who collected the recyclable materials for your local government's curbside recycling program? 16. Local government employees Private contractor (please specify) Waste Industries Inc. Franchised hauler (please specify) Other (please specify)

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction? 8,813
	b. Number of households eligible to participate in the curbside recycling program: 8,813
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 7,800
18.	If your curbside recycling program is operated through a <u>public franchise granted to a private company</u> then please answer the following Is public participation in the franchise: Voluntary or Mandatory Does your franchise consist of: One service district or Multiple service districts
19.	What sector(s) of your community was served by the curbside recycling program? Residential Commercial Industrial
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served:
21.	How frequently were the curbside recyclables collected? Once a week Every other week / biweekly Other
22.	Please describe the collection containers used: ☐ Bins ☐ Blue bags ☐ Multi-bin system ☐ Roll-out carts
23.	Please describe the method / style of recyclable materials handling: curb-sort (collector separates material as collected)
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used: less than 50 gallon cart
DR	OP-OFF RECYCLING PROGRAM
25.	Did your government operate a Drop-off Recycling Program? Yes No, skip to question # 32
26.	Who collected the recyclable materials for your local government's drop-off recycling program? Local government employees Private contractor
	Other (please specify)
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program: source-separated (citizens separate materials by type) single stream / commingled dual / two stream (paper separated from cans/bottles) don't know / other
28.	Please estimate the number of households served by your drop-off recycling program.
29.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:
31.	How many of these locations were staffed with attendants?
EL	ECTRONICS RECYCLING PROGRAM
mate	se 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.
32.	Did your community operate an electronics recycling program in FY 17-18? Yes No, skip to question # 38
	If you did operate an electronics recycling program, please indicate style of program:
	Permanent - Curbside Collection Permanent - Drop-off Scheduled Collection Day or Event Part of HHW Program
	If you offer curbside collection of electronics is it: by appointment or unscheduled
	If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:

33.	Did your electronics recycling program collect or accept televisions from (check all that apply): Residences Businesses
34.	Did your electronics recycling program collect or accept computer equipment from (check all that apply): Residences Businesses
35.	DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was eligible to receive proceeds from the State Electronics Management Fund in February of 2018, please provide the following information:
	Electronics Management Fund balance as of July 1, 2017: \$
	Electronics Management Funds received from DEQ during FY 17-18 (Feb 2018 distribution): \$
	Electronics Management Funds spent during FY 17-18: \$
	Electronics Management Fund balance as of June 30, 2018: \$
36.	Briefly explain how Electronics Management Funds were spent during FY 2017-18 (please list items purchased if applicable):
37.	If you did operate an electronics recycling program, please provide the following information about your vendor / contractor: Name of electronics recycling vendor(s) during FY 17-18:
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?
OT	THER PUBLIC RECYCLING PROGRAMS
the i	ase answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ycling Tonnages Chart on pg 5.
38. 39.	Did your local government operate a multifamily recycling collection program that provides on-property recycling service for residents of multifamily properties in a manner other than through your curbside or dropoff recycling programs? $\ \ \ \ \ \ \ \ \ \ \ \ \ $
	other than through your curbside or dropoff recycling programs? Yes No
40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes 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

DDOCD AM	Cu	ırbside		Drop-off	All "C	Other" Programs	Total Tons
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear							
Brown							
Green							
Mixed							
PLASTIC:	<u> </u>						
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:	<u> </u>						
Aluminum Cans							
Steel Cans							
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)							
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper							
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled tons-check al items collected above		1,381					1,381
TOTAL TONS:		1,381					1,381
1011111101101		-,- 01			I		-,501

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)

Batteries, Lead Acid	77. Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type	Did progran	n collect this n the public?	# of sites	Data on quantities		_
Used Antifreeze	Used Motor Oil	Yes	⊠ No			gall	ons
Batteries, Lead Acid	Used Oil Filters	Yes	⊠ No		barrels, o	or	lbs
Batteries, Dry Cell	Used Antifreeze	Yes	⊠ No				gallons
Pluorescent Bulbs/Lights Containing Mercury Yes No Ibs, or # bulbs Propane Tanks Yes No Ibs, or # tanks Used Cooking Oil / Waste Vegetable Oil Yes No Ibs, or gallons Other Special Wastes - please provide waste type here: Pharmaceuticals Yes No Ibs, or Both Stanks Pesticide Containers (NCDA Program, not pesticides themselves) Yes No Ibs, or # ton-pesticides themselves) NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) Yes No Ibs, or # ton-pesticides themselves) NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) Yes No Ibs, or # ton-pesticides themselves Ibs, or Ibs, or Ibs, Ibs, or Ibs,	Batteries, Lead Acid	Yes	⊠ No		# batter	ies, or	lbs
Propane Tanks	Batteries, Dry Cell	Yes	⊠ No				lbs
Used Cooking Oil / Waste Vegetable Oil	Fluorescent Bulbs/Lights Containing Mercury	Yes	⊠ No		lbs, o	or #	# bulbs
Other Special Wastes - please provide waste type here:Pharmaceuticals Pesticide Containers (NCDA Program, not pesticides themselves) NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Latex Paint (do not include paint collected at HHW event or by a paint exchange program or Event B. Did your local government operate a household hazardous waste collection program or event in FY 17-18?	Propane Tanks	Yes	⊠ No		lbs, o	or	# tanks
type here:Pharmaceuticals	Used Cooking Oil / Waste Vegetable Oil	Yes	⊠ No		lbs, o	or	gallons
pesticides themselves) NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Ves No gals, or lbs Journal Selected at HHW event or by a paint exchange program (Pesticides) Journal Selected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Teb. How many days was your HHW Program open to accept materials during this Fiscal Year? C. Did your partner or co-sponsor your HHW program with another local government? No 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 (Conditionally Exempt Small Quantity Generators)? Yes If yes, please estimate the amount of business material managed pounds f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize beld about individual materials is not available, please simply provide total quantity of materials collected by HHW program in 4 Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in que Used Motor Oil (gal) Lead Acid Batteries (lbs) Other Batteries (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs) g. Provide Total Quantity of materials oul of the total listed here. Please list HHW Collection Contractor.		× Yes	☐ No	1			80 lbs
Yes No	· · · · · · · · · · · · · · · · · · ·	Yes	⊠ No		lbs, c	or	
HHW event or by a paint exchange program) Yes	1	Yes	⊠ No				lbs
8. Did your local government operate a household hazardous waste collection program or event in FY 17-18? Yes 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 Te 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 local government? Yes No 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 (Conditionally Exempt Small Quantity Generators)? Yes If yes, please estimate the amount of business material managed pounds f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize beld about individual materials is not available, please simply provide total quantity of materials collected by HHW program in 4 Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in que 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 reported in 48f, please net the weight of those materials out of the total listed here. b. Please list HHW Collection Contractor.	` *	Yes	⊠ No		-		lbs
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 reported in 48f, please net the weight of those materials out of the total listed here. h. Please list HHW Collection Contractor.	 a. Was HHW collected at a permitted Tempora 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 small figures, please estimate the amount of business f. Amounts of individual materials collected by about individual materials is not available, p 	participated all businesses material may HHW Program burners of the participated all businesses as material may HHW Program burners of the participated and the participated are simply participated and the participated are simply participated and the participated are participated as a simply participated are participated are participated as a simply participated are participated are participated and participated are particip	in your HHW (Conditionall maged ram: if totals forovide total of	collection or individuantity	ent? Yes on program this Fisc pt Small Quantity Ge pour idual materials are knot materials collecte	No al Year? enerators)? ads nown please item d by HHW progr	nize below. If cam in 48g bel
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 reported in 48f, please net the weight of those materials out of the total listed here. h. Please list HHW Collection Contractor	· · · · · · · · · · · · · · · · · · ·			Ü			u iii question -
g. Provide Total Quantity of materials collected by HHW Program. If individual materials were reported in 48f, please net the weight of those materials out of the total listed here.	Used Antifreeze (gal)	L.ea	d Acid Batter	ies (lhs)	Other	Batteries (lbs)	
g. Provide Total Quantity of materials collected by HHW Program. If individual materials were reported in 48f, please net the weight of those materials out of the total listed here.							
	g. Provide Total Quantity of materials collected reported in 48f, please net the weight of those	d by HHW Pr	ogram. If ind ut of the total	ividual i	materials were ere.		po
i. Estimated cost of HHW / CESQG program or event(s) \$	i. Estimated cost of HHW / CESOG program of	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 PART VIII which is only to be completed by Counties.

	s section concerns management of		Yard waste ma	y not be dispo	sed in sanitary l	andfills, incinerator	
	ermitted sites and it is illegal to bu ut your management of vegetative m						
	Does your local government opera checking all that apply: Collection Did a storm event significantly im What quantities of materials were organic material (yard waste, br	ate a yard waste programeted curbside	n? Yes cted at convenien I waste your gove waste program?	No If yes ace center Remarks R	please indicate ho eceived at yard wa d during FY 17-18 ation in TONS O	w yard waste is man aste, compost, or LC 3? Yes N R CUBIC YARDS	aged by ID facil Vo
	Destination	Check used		Cubic Yards	Please Provide N	Tame and Location of I g Vegetative Materials	
	End user (to farmer or home-owner				Receiving	y vegetative Materials	
	Your local government's mulch or	<u> </u>					
	Other public mulch or compost fac		418.83		Brunswick County Com	post Facility	
	Private mulch or compost facility	-					
	Land clearing and inert debris land	dfill (LCID)					
	Energy / Fuel Use (e.g. boiler fuel	l market)					
	Total		418.83				
	YARD WASTE MANAGEMENT estimate yard waste volume. Calc volume managed by program in th	culate for each truck use he appropriate boxes abo	d in your yard water Ex . 10 yd^3	aste managemen truck x 3 days/v	t program, and the $wk \ x \ 16 \ wks = 480$	on enter the grand to yd^3	tal
		avg. no. of times truck fills each				TOTAL	yd^3
	Size of Truck (iii yards)	Part V. Solid					
This	s section concerns your local govern						
52.	Please complete the following table				1.		
	Sector Who Collects So Insert Letter - see	olid Waste? How is Stocker at right Insert	Solid Waste Coll # - see codes at ri	ight Will Co	ollects Solid Waste?	How is Solid Waste C	
	Residential Primary d Seco	ondary d Primary	Secondary	b. By Co		2. Twice a week at hous3. Convenience center/g	ehold
	Commercial	ondary d Primary	Secondary	d. Local	government not red in provision of	4. As needed or by requests. Daily	
	Industrial Primary d Seco	ondary d Primary	Secondary	servic		6. Other	
3.	If you provide <u>residential</u> waste co	ollection at single-famil	y households in y	our jurisdiction	, please answer the	e following questions	s:
	What type of collection method is	s used?	atomated S	Semi-Automated	d Manual	Don't know	
	What is the standard collection fre	equency?	☐ Two tim	nes per week	Other		
	What is the typical service point for	or single family househ	old waste?	Curbside	Back yard / Back	ck door	
	What type of collection container	is used? Governi	ment-provided car	rts Reside	ent-provided conta	iner Bags	
	Do you offer bulky waste collection	on services? Yes	☐ No				
54.	For municipalities - did your gove If so, were white goods delivered to	_		Yes No	∑ No		
	Part VI	. Solid Waste ar	d Recycling	g Education	nal Activities	S	
55.	Did your local government have issues / activities?		o inform citizens to Part VII, page		out solid waste man	nagement and / or re	cycling
6.	Please estimate your annual budge	et for solid waste related	l education and or	utreach activitie	s: \$500		
57.	Does your community produce rec	cycling education and o	utreach materials	in languages be	sides English?	Yes No	
	If YES, please list other languages	s used:					
8.	Please provide your recycling web	bsite address and public	information phor	ne number if app	olicable.		
	Website: https://www.townoflelar	nd com/denartments/tra	sh-recycling		Phone #: 910-40	18-3092	

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

	ficient resources availab estions deal with funding					these programs.	The following
59.	Did your local governm With regards to funding Tipping fees Property tax	nent operate an Ente g sources, check all s les / general fund	erprise Fund for sol that apply to your land Volume/we Sale of recy	id waste services in local government: eight-based fees (e.g	FY 17-18?	Yes ⊠ No ire tax /hite Goods tax)
61.	Per househo NC Solid Waste Dispos According to GS 105-1	sal Tax proceeds are			nts on a quarterly ba		
62	How are disposal tax d If applicable, please pr	•				for solid waste)	
02.					<u>year per nousenota</u> j		2
		-		_			
	d. \$	per		per		for bulky was	te
	e. \$	per		per		availability fee	<u>e</u>
	f. \$	per		per		total charge	
63.	Did your local government are charged a fee by we			•		17-18? (a system v] No	where residents
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full cos	t accounting annual	lly and to develop	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.	
	\$		_ For solid waste s	services per year			
	\$445,000		_ For recycling per	r year			
	\$		OR Combined Centr	ract (solid waste, and	d recycling)		
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	following table to t and yard waste inc	he best of your abili luding materials col	ty to display the full		
		# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
N	Iunicipal Solid Waste*						
	Recycling Program**	8,813	1,381	456,817.23		456,817.23	330
	Yard Waste Program	8,813	418.83	7,814.35	39,622.19	53,886.71	128
		(calculated by form):	1,799.83	464,631.58		510,703.94	283
66.	Trans	y public recycling progra erates a landfill, trar	ams including those serves are station, yard we have a serve as for different station. If budgets for different serves are serves as for the serves are serves as	vices offered to commerce vaste /compost facilities are of the compost facilities are of the composition of	ial and industrial generate ity or recycling facili	ity, please provide empt to allocate co	total budget for
	·	cling Facility Budg	•				_
67.	What was your government	ment's total combine	ed annual budget fo	or all solid waste and	d recycling services i	in 17-18? \$ <u>420,00</u>	0

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 responsible for white goods program. Name: Title:							
	Name:		1itle:				
	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 .	KAP TIKES					
76.	Please provide name, address, phone number, and Name:	•	-			
	Address:				Zip:	
	Telephone: Fax:		Email	l:		
77.	Please provide the physical address of the primary Street 1:					
	Street 2:					
	City:		State: North	Carolina	Zip:	
78.	Tonnage/Number of scrap tires disposed July 1, 20 Tons	017-June 30, 201 or	8 (<u>excluding</u> tir	es from cleanup of n Number of tires	uisance sites)	
79.	Tonnage/Number of scrap tires disposed from clea		ounty designate	d nuisance sites Number of tires		
80.	Indicate the types of tires collected by the county: Passenger % Heavy	Ггиск	%	Large Off-Road		%
81.	List the amount of revenue for the scrap tire progra	•				
	Revenue from Scrap Tire Tax Distributions:					
	Revenue from Tire Fees:					
	Revenue from Scrap Tire Clean-up Reimbursemer					
	Revenue from Scrap Tire Cost-Overrun Grants:					
	Total Revenue:	\$				
82.	County's total scrap tire program contract expendit excluding costs of nuisance tire cleanups, for FY 1	ure (contract dis 7-18.	posal/hauling co	osts),		
83.	County's additional scrap tire program expenditure Labor \$		venience center o	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 c	ontract cost abo	ove. \$	/ Ton; \$	/ Tire	
86.	Total tipping fees collected for tires not eligible fo	r free disposal. S	\$			
87.	Total number of tires collected not eligible for free					
88.	If scrap tires were not hauled off site by contracted	service provide	r, were they cut	and disposed in a loc	cal landfill? Yes	No
89.	Name of tire disposal/recycling firm(s):					
TE	MPORARY DISASTER DEBRIS STAG					
90.	Does your local government have a plan in place for	or management	of disaster debri	s? Xes	☐ No	
	If yes, indicate if the plan is a stand-alone plan or i	n conjunction w	ith local govern	ment agencies:	Stand-alone In c	conjunction
91.	If you indicated having a plan, has the plan been re- requirements for public assistance reimbursement is			nagement or FEMA Yes	to ensure it meets the No	basic
92.	Please list the name, contact numbers(s), and e-ma	il address of the	person(s) in cha	arge of the disaster de	ebris management prog	gram for
	your local government: Name: Brent Lockamy Na	me: David Holl	is	Name: Ro	onnie Hayes	
	<u> </u>	one: 910-371-01			0-632-2028	
		nail: dhollis@town			yes@townofleland.com	

Disaster Site #	Site Name	Disaster Site #	Site Name
	Leland Municipal Park DS		
Does your plan address	the management of household hazardous v	waste and white goods following	g a disaster? Yes No
5. Does your plan address	mass animal mortality? Yes	No	
ANAGEMENT OF A	ABANDONED MANUFACTURE	ED HOMES BY COUNTI	ES
	ered whether to implement a program for t	the management of abandoned n	nanufactured homes? Yes X No
Has your county consid	ered whiteher to improme a program for	U	
	developed a written plan for the manageme	<u> </u>	homes? Yes No

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-assistance or e-mail us at Lgteam@ncdenr.gov

