# **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: <u>http://deq.nc.gov/about/divisions/waste-management/solid-waste-section/annual-reporting</u>
- 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: <u>https://get.adobe.com/reader/</u> - 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



**Required** - Enter Your Local Government Name: Lexington

**State of North Carolina** 

Local Government Report Form

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 t	o Lgteam@ncdenr.gov	by September 1, 2018.
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If you have questions or need assistance completing this form, please call 919-707-8136 or 919-707-8133.

Person Comple	ting This Report: Dirk	c Apt	Title	e: Public Serv	vices M28anager			
Mailing Addres	ss: 28 W. Center St.		City: Lexington	City: Lexington				
Phone: 336-240	)-2097	Fax:		Date: 8/6/20	018			
Email: dwapt@	lexingtonnc.gov							
			General Instructions					
Please remember for a specific qu	-	for the report is JU	LY 1, 2017 through JUNE 30, 2018. Plea	ase check "N	o" if you have nothing to report			
1. Did your	local government have	a Recycling Coord	linator or similar position for FY 17-18?	Yes	🔀 No			
Name Rec	cycling Coordinator (if	different from per	son completing this report.)					
Name:			Title	:				
Address:			City:		Zip:			
Telephon	e:	Fax:	Email:					
2. Did your	local government have	a Solid Waste Dir	ector or similar position for FY 17-18?	X Yes	No			
If Yes, Na	ame: Dirk Apt		Title	Title: Public Services				
Address:	28 W. Center St.		City: Lexington		Zip: 27292			
Telephon	e: 336-240-2097	Fax:	Email: dwapt@	Email: dwapt@lexingtonnc.gov				
3. Did your	local government have	dedicated or part	-time Solid Waste Enforcement Staff for	FY 17-18?	Yes No			
If Yes, Na	ame:		Title	Title:				
Address:			City:		Zip:			
Telephon	e:	Fax:	Email:					
4. Did your label all that ap	-	solid waste ordina	nces in place addressing any of the follow	ving during F	Y 17-18? (if yes, please check			
ΣI	Disposal Bans 🛛 🖂 Ill	egal Dumping	Littering Other, Please Describe	:				
	local government mana , composting)?	ge, provide or con	tract for any solid waste services in FY 17	7-18 (e.g., co X Yes	llection, disposal, recycling,			
	If you answer "I	No'' to question 5	, the report is complete, please email to		cdenr.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.									
6.	Did your local government have a recycling program in place for collecting recyclable materials generated at Yes INO public buildings in FY 17-18?									
7.	Did your local government have any program or policy encouraging or requiring local agencies to Yes No purchase products with recycled content?									
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 17-18?									
	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, Yes No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives?									
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, 2017 through June 30, 2018?									
	My local government <b>DID operate or contract</b> for a recyclables recovery program. ( <b>please continue to question 15</b> )									
	My local government <b>DID NOT operate or contract</b> for recyclables recovery <b>BUT DID participate</b> in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; <b>then go to Part IV on page 7</b> .)									
	With which local government did you participate?									
	My local government <b>DID NOT operate, contract or participate</b> in a recycling program. ( <b>Go to Part IV on page 7</b> .)									
	our local government <b>DID operate or contract</b> for a recyclables recovery program, please indicate in the owing sections the type of program in operation and provide specifics about your program(s).									
CU	RBSIDE RECYCLING PROGRAM									
15.	Did your government operate a Curbside Recycling Program? 🔀 Yes 🗌 No, skip to question # 25									
16.	Who collected the recyclable materials for your local government's curbside recycling program?									
	Local government employees									
	Private contractor (please specify)									
	Franchised hauler (please specify)									
	Other (please specify)									

Other (please specify)	
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17.	Please provide the following information about your community: a. Total number of households in your jurisdiction? 8,500
	b. Number of households eligible to participate in the curbside recycling program: 8,500
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 5,500
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?
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served: 153
21.	How frequently were the curbside recyclables collected?
22.	Other
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:          Iss than 50 gallon cart       65 gallon cart         95 gallon cart       multiple sizes of cart available
DR	OP-OFF RECYCLING PROGRAM
25.	Did your government operate a Drop-off Recycling Program? Yes Xo, 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? All None Some please list # of staffed sites:
EL	ECTRONICS RECYCLING PROGRAM
	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:

2017-2018 Local Government Annual Report Due Date: September 1, 2018 Submit to: Lgteam@ncdenr.gov

33.	Did your electronics	recycling program co	llect 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:Participate with Davidson County Integrated Solid Waste

Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? Xes

#### OTHER PUBLIC RECYCLING PROGRAMS

Plea	se answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by
<u>the l</u>	ocal government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the
Recy	cling Tonnages Chart on pg 5.
38.	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?
39.	Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner other than through your curbside or dropoff recycling programs? Yes Xes No

40. Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? 🗌 Yes 🛛 🕅 No

On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served:
----------------------------------------------------------------------------------------------------------------

Public drop-off recycling sites available for ABC On Premises Permit holders to use

41.	Does your local government operate a program to recycle Construction and Demolition materials?	Yes	🔀 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 each individual material type that was commingled.

DDOCDAM	Curbside		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	$\square$	949					949	
PLASTIC:								
PET #1								
HDPE #2								
All Plastic Bottles	$\square$							
Other Plastic Containers								
Bulky Rigid Plastics								
METAL:								
Aluminum Cans	$\square$							
Steel Cans	$\square$							
White Goods					$\square$			
Other Metal					$\square$	8	8	
PAPER:								
Newsprint (ONP)								
Cardboard (OCC)								
Magazines (OMG)								
Office Paper								
Mixed / Other Paper	$\square$							
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								
Comminaled to a short 11	$  \square  $							
Commingled tons-check all items collected above	$\square$							
TOTAL TONS:		949				8	957	

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 <u>only</u> 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.

a		**7 4	<b>A H U</b>			36 / 13	<b>A H A H</b>			<b>A H H</b>	D	
S	pecial	Waste	Collections	(Do No	t Include	Materials	Collected	as part of	t an HHW	Collection	<b>Program</b>	or Event)

4

Used Motor Oil       Image: Second Seco	47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		n collect this m the public?	# of sites	Data on quar Please re	ntities colle eport in ind	ed.	
Used Antifreeze       Yes       No		Used Motor Oil	Yes	🛛 No				gallons	3
Batteries, Lead Acid       □       Yes       No       it that the state is a state is		Used Oil Filters	Yes	🛛 No		barr	rels, or		lbs
Batteries, Dry Cell       □       Yes       No       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □ <td></td> <td>Used Antifreeze</td> <td>Yes</td> <td>🛛 No</td> <td></td> <td></td> <td></td> <td>ga</td> <td>llons</td>		Used Antifreeze	Yes	🛛 No				ga	llons
Fluorescent Bulbs/Lights Containing Mercury       Yes       No       ibs, or       if balbs, or         Propane Tanks       Yes       No       ibs, or       if tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       ibs, or       if tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       ibs, or       if tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       ibs, or       if tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       ibs, or       if tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       ibs, or       if tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       ibs, or       if con-         Pesticide Disposal Assistance Program, ot       Yes       No       ibs, or       if con-         Itors of the operate a household hazardous waste collection program or event in FY 17-18?       ibs       ibs         HuW collected at a permitted Temporary Event or at a Permanent HW Collection Facility?       Permanent       remp. Even         b. How many days was your HHW program open to accept materials during this Fiscal Year?       .       No         If yes, please respond to the following questions:       a.       No       permanent <td< td=""><td></td><td>Batteries, Lead Acid</td><td>Yes</td><td>🛛 No</td><td></td><td> # t</td><td>oatteries, or</td><td>r</td><td>lbs</td></td<>		Batteries, Lead Acid	Yes	🛛 No		# t	oatteries, or	r	lbs
Propane Tanks       Yes       No       bbs, or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         Pesticide Containers (NCDA Program, not pesticides themselves)       Yes       No       bbs, or       gallons         NCDA Pesticide Disposal Assistance Program       Yes       No       galls, or       bbs       bbs         HW event or by a paint exchange program       Yes       No       galls, or       bbs       bbs         HW event or by a paint exchange program       Yes       No       galls, or       bbs       vert       bs         Aust HHW event or by a paint exchange program       Yes       No       galls, or       vert       bs       No       its         Hue went or by a paint exchange program       Yes       No       galls, or       vert       No       its         Hue weat or by a paint exchange program       Yes       No       No       i		Batteries, Dry Cell	Yes	🛛 No		I			lbs
Used Cooking Oil / Waste Vegetable Oil       Yes       No       ibs, or       gallons         Other Special Wastes - please provide waste       Yes       No       ibs, or       gallons         Other Special Wastes - please provide waste       Yes       No       ibs, or       gallons         Pesticide Containers (NCDA Program, not       Yes       No       ibs, or       gals, or       ibs         NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)       Yes       No       ibs       ibs         NCDA Pesticide Disposal Assistance Program (for management of pesticides not containers)       Yes       No       ibs       ibs         HHW event or by a paint exchange program)       Yes       No       gals, or       ibs       ibs         HWW event or by a paint exchange program)       Qes       No       gals, or       ibs       ibs         HWW event or by a paint exchange program)       Qes       No       gals, or       ibs       ibs         HWW event or by a paint exchange program)       Qes       No       gals, or       ibs       ibs         ItWe went or by a paint exchange program open to accept materials during this Fiscal Year?		Fluorescent Bulbs/Lights Containing Mercury	Yes	🛛 No			lbs, or	# bi	ulbs
Other Special Wastes - please provide waste       Yes       No       Ibs         Pesticide Containers (NCDA Program, not       Yes       No       Ibs, or       #contents         Pesticide Containers (NCDA Program, not       Yes       No       Ibs, or       #contents         NCDA Pesticide Disposal Assistance Program       Yes       No       Ibs, or       #torners         NCDA Pesticide Disposal Assistance Program       Yes       No       Ibs       Ibs         IAtter Paint (do not include paint collected at       Yes       No       Ibs       Ibs         HHW event or by a paint exchange program)       Yes       No       Ibs       Ibs         Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       Ibs         Boid your local government operate a household hazardous waste collection program or event in FY 17-18?       Yes       No         IF ves, please respond to the following questions:       a.       Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility?       Permanent       Temp. Even         b. How many days was your HHW program open to accept materials during this Fiscal Year?		Propane Tanks	Yes	No No			lbs, or	# 1	anks
type here:       Image:		Used Cooking Oil / Waste Vegetable Oil	Yes	No No			lbs, or	ga	llons
pesticides themselves)       Image: Provide number of pesticides in the program of persite in the program of persite in the program of the progra			Yes	No No					lbs
(for management of pesticides, not containers)       Yes       No       Ios         Latex Paint (do not include paint collected at HHW event or by a paint exchange program)       Yes       No       gals, or       Ibs         Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       Ibs         Bit Joyur local government operate a household hazardous waste collection program or event in FY 17-18?       Yes       No         If Yes, please respond to the following questions:       a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility?       Permanent       Temp. Even         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)			Yes	No No			lbs, or		
HHW event or by a paint exchange program)       Yes       No       or       108         Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       18.       Did your local government operate a household hazardous waste collection program or event in FY 17-18?       Yes       No         If Yes, please respond to the following questions:       a.       Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility?       Permanent       Temp. Even         b.       How many days was your HHW Program open to accept materials during this Fiscal Year?       c.       Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)?       Yes       No         Please list partner(s)			Yes	No No					lbs
<ul> <li>18. Did your local government operate a household hazardous waste collection program or event in FY 17-18? Yes No If Yes, please respond to the following questions: <ul> <li>a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event b. How many days was your HHW Program open to accept materials during this Fiscal Year?</li> <li>c. Did you partner or co-sponsor your HHW program with another local government? Yes No</li> <li>Please list partner(s)</li> <li>d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year?</li> <li>e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? Yes No</li> <li>If yes, please estimate the amount of business material managed pounds</li> <li>f. Amounts of individual materials collected by HHW Program: if totals for individual materials collected by HHW program in 48g below. Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in question 47. Used Motor Oil (gal)</li> <li>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.</li> <li>h. Please list HHW Collection Contractor</li> <li>i. Estimated cost of HHW / CESQG program or event(s) \$</li> </ul> </li> <li>Pages 3 through 6 should have only been completed by governments indicating in question #14 that they DO provide recycling services:</li> </ul>			Yes	No No					lbs
<ul> <li>Fluorescent Bulbs / Lights Containing Mercury (lbs)</li></ul>		<ul> <li>Please list partner(s)</li> <li>d. Provide number of citizens / households that</li> <li>e. Did your program accept materials from sma If yes, please estimate the amount of busines</li> <li>f. Amounts of individual materials collected by about individual materials <u>is not</u> available, p Note, materials listed here should only be th Used Motor Oil (gal)</li> </ul>	participated all businesses as material ma y HHW Progr lease simply ose collected Use	in your HHW (Conditionall anaged ram: if totals f provide total c at an HHW P ed Oil Filters	collecti y Exempor or indivi quantity rogram a	on program this pt Small Quanti idual materials a of materials col and should not i # of Barrels,	Fiscal Ye ity Generat pounds are known llected by I include ma or	tors)? Y please itemize HHW program terials listed in lbs.	e below. If data n in 48g below. n question 47.
<ul> <li>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.</li> <li>h. Please list HHW Collection Contractor</li> <li>i. Estimated cost of HHW / CESQG program or event(s) \$</li> </ul>							Other Batte	eries (lbs)	
<ul> <li>h. Please list HHW Collection Contractor</li> <li>i. Estimated cost of HHW / CESQG program or event(s) \$</li> <li>Pages 3 through 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling services</li> </ul>		g. Provide Total Quantity of materials collected	l by HHW Pr	ogram. If ind	ividual				pound
i. Estimated cost of HHW / CESQG program or event(s) \$ Pages 3 through 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling services									
Pages 3 through 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling services		i. Estimated cost of HHW / CESQG program of	or event(s) \$						
		es 3 through 6 should have only been complet	ed by govern	ments indica	ting in g	uestion # 14 th			

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is only to be completed by Counties.

## Part IV. Yard Waste, Mulching and Composting Management

This section concerns management of vegetative materials. Yard waste may not be disposed in sanitary landfills, incinerators, or in unpermitted sites and it is illegal to burn. Composting and mulching are popular management options. Please answer the questions below about your management of vegetative materials. Do not include information on food waste or non-vegetative materials in this section.

- 49. Does your local government operate a yard waste program? ⊠ Yes □ No If yes please indicate how yard waste is managed by checking all that apply: ⊠ Collected curbside □ Collected at convenience center ⊠ Received at yard waste, compost, or LCID facil.
- 50. Did a storm event significantly impact the amount of yard waste your government managed during FY 17-18? 🗌 Yes 🛛 🕅 No
- 51. What quantities of materials were managed by your yard waste program? **Provide information in TONS** OR CUBIC YARDS of
  - organic material (yard waste, brush, limbs, leaves, etc.) managed. For conversion purposes, use 400 lbs./cubic yd.

Destination	Check if used	Tons	Cubic Yards	Please Provide Name and Location of Facility Receiving Vegetative Materials
End user (to farmer or home-owner)				
Your local government's mulch or compost facility	$\boxtimes$	2,400		COL Waste/Water Treatment Plant Glendale Rd. Lexington
Other public mulch or compost facility				
Private mulch or compost facility	$\boxtimes$	1,048		Todco, Roy Lopp Rd. Lexington
Land clearing and inert debris landfill (LCID)				
Energy / Fuel Use (e.g. boiler fuel market)				
Total		3448		

YARD WASTE MANAGEMENT FORMULA: If yard waste quantities are not tracked, you may use this formula below to help you estimate yard waste volume. Calculate for each truck used in your yard waste management program, and then enter the grand total volume managed by program in the appropriate boxes above. *Ex.* 10 yd<sup>3</sup> truck x 3 days/wk x 16 wks = 480 yd<sup>3</sup>

	_X	Σ	K	= _		$yd^3$
Size of Truck (in yards)	Avg. no. of times t	ruck fills each week	# of weeks truck is used during year		TOTAL	

This section concerns your local government's provision of solid waste (garbage) collection services.

52. Please complete the following table about your government's solid waste collection system.

	Sector					How is Solid Waste Collected? Insert # - see codes at right			Who Collects Solid Waste? a. Local government employees	How is Solid Waste Collected?		
	Residential	Primary	A	Secondary		Primary	1	Secondary		<ul> <li>b. By Contract</li> <li>c. Franchise haulers</li> </ul>	2. Twice a week at household 3. Convenience center/greenbox	
	Commercial	Primary	С	Secondary	А	Primary	4	Secondary	6	d. Local government not involved in provision of	<ul><li>4. As needed or by request</li><li>5. Daily</li></ul>	
	Industrial	Primary	D	Secondary	С	Primary		Secondary		service	6. Other	
53.	If you provide	residenti	i <u>al</u> was	te collect	ion at sin	gle-fam	ily hou	seholds in	your juri	isdiction, please answer the	following questions:	
	What type of co	ollection	n metho	od is used	?	Fully A	Autom	ated 🔀	Semi-A	utomated 🗌 Manual	Don't know	
	What is the star	ndard co	ollectio	n frequen	cy? 🔀	Weekl	у [	Two tir	nes per	week Other		
	What is the typical service point for single family household waste? 🔀 Curbside 🗌 Back yard / Back door										ek door	
	What type of collection container is used? 🔀 Government-provided carts 🗌 Resident-provided container 🗌 Bags											
	Do you offer bulky waste collection services? Xes No											
54.	For municipalities - did your government collect white goods at the curb? $\boxtimes$ Yes $\square$ No If so, were white goods delivered to the county for marketing? $\boxtimes$ Yes $\square$ No											
		]	Part	VI. So	lid W	aste a	nd F	Recyclin	g Edu	icational Activities		
55.	Did <b>your local</b> issues / activitie	-	ment l		-			orm citizens art VII, pag	-	cally about solid waste man	nagement and / or recycling	
56.	Please estimate	your an	inual b	udget for	solid wa	ste relate	ed edu	cation and o	outreach	activities: \$2,500		
57.	Does your com	munity	produc	e recyclir	ng educat	ion and	outrea	ch material	s in lang	uages besides English?	Yes 🛛 No	
	If YES, please	list othe	r langu	ages used	1:							
58.	Please provide	your rec	cycling	website a	address a	nd publi	c info	mation pho	ne numl	ber if applicable.		
	Website: www	lexingto	onnc.g	OV						Phone #: 336-24	8-3965	

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	Part V	II. Resources for	Solid Waste Management a	nd Full Cost Accounting
			agement programs are essential for continu solid waste and materials management pro	<i>ued success of these programs. The following</i>
<u>^</u>			• •	-
			rise Fund for solid waste services in FY 17	7-18? $\Box$ Yes $\boxtimes$ No
60. V	•	•	at apply to your local government:	
	Tipping		Volume/weight-based fees (e.g. PAY	
		taxes / general fund		White Goods tax
		ehold charges	Grants	🔀 Disposal Tax
				a quarterly basis by the Department of Revenue. id waste management programs and services.
I	How are disposal ta	ax distributions being used	d?Expand and support Residential & Com	mercial Recycling Rollout Program
62. I	f applicable, please	e provide your FY 17-18 h	nousehold fees. (e.g., a. <u>\$45.00</u> per <u>year</u> p	er <u>household</u> for solid waste)
	**	· ·	per household	
	а. ф	per	per	
	b. \$	per	per	for recycling
	c. \$	per	per	for yard waste
	d. \$	per	per	for bulky waste
-			per	
	f. \$ <u>156</u>	per	per household	total charge
			You-Throw program for residential garba	ge during FY 17-18? (a system where residents Yes No
	rding to GS 130A musers of such co	0	nts are required to conduct full cost acco	unting annually and to develop a system to
64. I	f your local govern	ment contracts for solid w	vaste or recycling services, please report th	e annual contract amount.
	\$		For solid waste services per year	
	\$		1 V	
	Φ		For recycling per year	
			OR	
	\$		Combined Contract (solid waste, and recyc	cling)

65. Collection Programs: Please complete the following table to the best of your ability to display the full costs of your local government's <u>collection programs</u> for waste, recyclables and yard waste including materials collected from convenience centers. **If full cost analysis is not available, please report program budget in Total Cost column.** 

	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
Municipal Solid Waste*	8,500	7,152	841,059	260,604	1,101,633	154
Recycling Program**	8,500	957	138,352	14,355	152,707	159
Yard Waste Program	8,500	3,448	315,400	30,859	396,259	114
Totals (calculated by form):		11,557	1,294,811	305,818	1,650,599	142

\*for materials collected and sent for eventual disposal in a Municipal Solid Waste or Construction and Demolition Landfill.

\*\*for materials collected by public recycling programs including those services offered to commercial and industrial generators. Do not include special waste services.
 66. If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide total budget for facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate costs proportionately. Landfill Budget:

Transfer Station Budget:

Yard Waste / Compost Facility Budget: \$

Recycling Facility Budget:

67. What was your government's total combined annual budget for all solid waste and recycling services in 17-18? \$1,651,017

\$

\$

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# Part VIII. County Mandated Programs

The following questions pertain to programs mandated by N.C. statute to be provided by each county. <u>Only county governments need to</u> <u>complete this section (questions 68 through 96)</u>. Municipalities should skip to Part IX on page 11. Counties - failure to complete Part VIII may result in non-eligibility for grant requests.

WH	IITE GOODS						
68.	Please provide name, address, phone nur		-		• • •	n.	
	Name:				Title:		
	Address:			City:			
	Telephone: Fa	ıx:		Email:			
69.	Please provide the physical address of th	e primary co	ounty white go	oods collection site.			
	Street 1:						
	Street 2:						
	City:			_ State: North Carol	ina	Zip:	
70.	Please provide the name of the business Name:	-			Cs) from white	e goods.	
	Street:						
	City:				ina	Zip:	
	Phone: Fax:						
71.	Give amounts / types of CFCs removed.						
	Type of CFC Ren					ount	
72.	CFCs may be recycled or sent for destru-	ction Give r	name of firm	disposal method and a	mount earned	/ spent for CE(	7 disposal
12.	Firm			Iethod of Disposal		ount Earned	Amount Spent
73.	Please report the tonnage of white goods white goods tonnage reported on page 5		uring FY 2017	• •	Fonnages table	on page 5 (qu	estion # 45). Was
74.	List the amount of revenue for the white	goods progr	am by source	:			
	Revenue collected from sale of scrap:		\$				
	Revenue collected from White Goods Ta	ax Distributi					
	Revenue from other source (e.g. grants):						
	Total Revenue:						
75.	According to the White Goods Law, Whee expenditures White Good Tax Distribute					vities. Give a	mounts and types of
	Operational Expenses:	\$			-		
	Capital Improvements:						
	Clean-up of Illegal White Goods Dumps						
	Total Expenditures:	\$			-		
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76.	Please provide name, address, phone number, and e-n	-	-				
	Name:				1 itle:		
	Address:						
	Telephone: Fax:						
7.	Please provide the physical address of the primary co Street 1:	• 1					
	Street 2:						
	City:			North	Carolina	Zip:	
8.	Tonnage/Number of scrap tires disposed July 1, 2017 Tons or	-June 30, 2	018 ( <u>exclud</u>	ing tire			
9.	Tonnage/Number of scrap tires disposed from cleanu Tons or	p of state or	county des	ignated			
0.	Indicate the types of tires collected by the county: Passenger % Heavy True			%	Large Off-Road		%
31.	List the amount of revenue for the scrap tire program Revenue from Scrap Tire Tax Distributions:	ф.		_			_
	Revenue from Tire Fees:	¢					
	Revenue from Scrap Tire Clean-up Reimbursements						
	Revenue from Scrap Tire Cost-Overrun Grants:	<u>ф</u>					
	Total Revenue:	\$					
32.	County's total scrap tire program contract expenditure excluding costs of nuisance tire cleanups, for FY 17-	e (contract d 18.	lisposal/hau	ling co	sts), \$		
33.	County's additional scrap tire program expenditure (i Labor \$	· · · · · ·	nvenience c	enter c	ost), if any.		
	Site Cost \$						
	Other \$		describe Otl	ner:			
4.	County's contract cost for scrap tire disposal. \$		/ Ton; \$		/ Tire		
5.	Hauling cost or fuel surcharge, if not included in con	tract cost a	bove. \$		/ Ton; \$	/ Tire	
6.	Total tipping fees collected for tires not eligible for f	ree disposal	. \$				
37.	Total number of tires collected not eligible for free d	isposal:					
38.	If scrap tires were not hauled off site by contracted se	rvice provi	der, were th	ey cut a	and disposed in a loca	al landfill? 🔲 Yes	No
39.	Name of tire disposal/recycling firm(s):						
r F.	MPORARY DISASTER DEBRIS STAGIN						
0.	Does your local government have a plan in place for			debris	? Xes	No	
	If yes, indicate if the plan is a stand-alone plan or in o	conjunction	with local g	overnn	nent agencies:	Stand-alone	n conjunctio
1.	If you indicated having a plan, has the plan been revi requirements for public assistance reimbursement in				agement or FEMA to	o ensure it meets th $$ No	e basic
2.	Please list the name, contact numbers(s), and e-mail a	ddress of th	ne person(s)	in cha	rge of the disaster de	bris management p	rogram for
	your local government: Name: Dirk Apt Name	:			Name:		
	Phone: 336-240-2097 Phone				Phone:		
201	E-mail: dwapt@lexingtonnc.gov E-ma 7-2018 Local Government Annual Report <b><i>Report D</i></b>		ptember 1.	2018	E-mail: Submit to: Lgteam@	oncdenr.gov	Page 1

93. Please list the temporary disaster debris staging sites in your county or municipality which have been reviewed for conflicts with the Natural Heritage Program (NHP) and the State Historic Preservation Office (SHPO) through coordination with the Solid Waste Section. *Please note that the vetting of a site prior to a disaster is advantageous to local governments because a staging site which is found to have impacted federal or state resources after a disaster may cause difficulty for local governments when attempting to obtain FEMA reimbursement.* Attach extra sheets, if needed.

Disaster Site #     Site Name     Disaster Site #     Site Name									
Disaster Site #	Site Name	Site Name		Site Name					

94.	Does your plan address the management of house	Yes	No No			
95.	Does your plan address mass animal mortality?	Yes	🔀 No			

#### MANAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES

96. Has your county considered whether to implement a program for the management of abandoned manufactured homes? 🗌 Yes 📃 No

If yes, has your county developed a written plan for the management of abandoned manufactured homes? Yes

### Part IX. Comments

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.

Yard waste carts are implemented into our yard waste collection process. Tuesday's collection route is the first route serviced using this method. Yard waste overhead costs include the purchase of yard waste carts for Tuesday's route only.

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: 919-707-8135

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



No