

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: Maiden

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 t	o Lgteam@ncdenr.gov by Se	ptember 1, 2018.				
	If you have questi	ons or need assistance co	mpleting this form, please	call 919-707-813	6 or 919-707-8133.			
Per	son Completing This Report:	Micah Beal		Title: Street D	epartment Supervisor			
Ma	iling Address: 19 N. Main Av	ve	City: Maiden		Zip: 28650			
Pho	one: 828-428-5000	Fax:		Date: 8/2	3/18			
Em	ail:							
			General Instructions					
	ase remember that the time po a specific question.	eriod for the report is JULY	1, 2017 through JUNE 30, 20	18. Please check '	'No" if you have nothing to report			
1.	Did your local government	have a Recycling Coordinat	tor or similar position for FY	17-18? Yes	No No			
	Name Recycling Coordinate	tor (if different from person	completing this report.)					
	Name:							
	Address:		City:		Zip:			
	Telephone:	Fax:	Email:					
2.	Did your local government	have a Solid Waste Directo	r or similar position for FY 17	7-18? Yes	No No			
۷.	If Yes, Name:			Title:				
	Address:		City:		Zip:			
	Telephone:	Fax:	Email:					
3.	Did your local government	Did your local government have dedicated or part-time Solid Waste Enforcement Staff 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	s in place addressing any of the	ne following during	g FY 17-18? (if yes, please check			
	∑ Disposal Bans	Illegal Dumping □ I	Littering Other, Please I	Describe:				
5.	Did your local government mulching, composting)?	manage, provide or contrac	t for any solid waste services	in FY 17-18 (e.g., X Yes	collection, disposal, recycling,			
	If you area	ver "No" to question 5 th	a ranart is complete place	amail to I ataami				

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? 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) Republic Service Franchised hauler (please specify) Other (please specify)

1/.	Please provide the following information about your community:					
	a. Total number of households in your jurisdiction? 1,473					
	b. Number of households eligible to participate in the curbside recycling program: 1,443					
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 1,400					
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)					
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?					
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	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.					
32.						
	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	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? Yes No Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner
	other than through your curbside or dropoff recycling programs? Yes No
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

DD OCD AND	Curbside			Drop-off	All "C	Other" Programs	Total Tons
PROGRAM	⊠ if Yes	Tons	⊠ if Yes		⊠ 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:							
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		229.61					229.61
TOTAL TONS:		229.61					229.61
Part of the second seco					-		

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)

47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		n collect this n the public?	# of sites			eted / managed.	
τ	Jsed Motor Oil	Yes	⊠ No				gallons	
τ	Jsed Oil Filters	Yes	⊠ No		barre	ls, or	lbs	
U	Jsed Antifreeze	Yes	⊠ No			'	gallons	
В	Batteries, Lead Acid	Yes	⊠ No		# ba	itteries, or	lbs	
Е	Batteries, Dry Cell	Yes	⊠ No				lbs	
F	Fluorescent Bulbs/Lights Containing Mercury	Yes	⊠ No		1	bs, or	# bulbs	
P	ropane Tanks	Yes	⊠ No		1	bs, or	# tanks	
τ	Jsed Cooking Oil / Waste Vegetable Oil	Yes	⊠ No		1	bs, or	gallons	
C	Other Special Wastes - please provide waste type here:	Yes	⊠ No			·	lbs	
	Pesticide Containers (NCDA Program, not esticides themselves)	Yes	⊠ No		1	bs, or	# containers	
	NCDA Pesticide Disposal Assistance Program for management of pesticides, not containers)	Yes	⊠ No				lbs	
	atex Paint (do not include paint collected at HHW event or by a paint exchange program)	Yes	⊠ No			gals, or	lbs	
Ii a b	Did your local government operate a household of Yes, please respond to the following question. Was HHW collected at a permitted Tempora. How many days was your HHW Program of Did you partner or co-sponsor your HHW program of Please list partner(s)	s: ary Event or a pen to accept i	t a Permanent materials duri	HHW (Collection Facility Fiscal Year?		Yes N	mp. Event
d	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 No If yes, please estimate the amount of business material managed pounds							
						No		
f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize about individual materials is not available, please simply provide total quantity of materials collected by HHW program. Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in					HW program in 4	g below.		
	Used Motor Oil (gal)	Use	d Oil Filters		# of Barrels, o	or	_ lbs.	
	Used Motor Oil (gal) Used Antifreeze (gal)	Lea	d Acid Batteri	ies (lbs)	0	ther Batter	ies (lbs)	
	Fluorescent Bulbs / Lights Containing	ng Mercury (ll	os)					
	Provide Total Quantity of materials collected reported in 48f, please net the weight of those	•	_					pounds
	Please list HHW Collection Contractor —							
	Estimated cost of HHW / CESQG program of							
Pages	3 through 6 should have only been complete	ed by gavern	ments indicat	tino in 1	auestion # 14 th	at they DO	nrovide recyclin	o corv

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.

		Part I	V. Yard Was	te, Mul	ching and	Compostin	g Managem	ent
ипре	rmitted sites an	d it is illegal	to burn. Composts	ing and mi	alching are pop	ular manageme	nt options. Pleas	e answer the questions below
49. 50. 51.	checking all the Did a storm even What quantities	at apply: \(\sigma\) ent significant s of materials	Collected curbside tly impact the amou were managed by y	Collectent of yard wour yard w	ted at convenien waste your gove raste program?	ce center Rernment manage	eceived at yard w d during FY 17-1 ation in TONS (8? Yes No CR CUBIC YARDS of
		Destinati	ion	Check if used	Tons	Cubic Yards		Name and Location of Facility ng Vegetative Materials
	End user (to fa	rmer or home	-owner)	\boxtimes				
	Your local gov	ernment's mu	lch or compost facil	ity 🗌				
	Part V. section concerns your local government's provis Please complete the following table about your Who Collects Solid Waste? Insert Letter - see codes at right Residential Primary b Secondary b Commercial Primary d Secondary d Industrial Primary d Secondary d If you provide residential waste collection at sin What type of collection method is used? What is the standard collection frequency? What is the typical service point for single fami What type of collection container is used? Do you offer bulky waste collection services? For municipalities - did your government collection services are white goods delivered to the county of the co		\boxtimes			Catawba County landfi	111	
Private mulch or compost facility								
	Land clearing a	and inert debri	is landfill (LCID)					
	Energy / Fuel U	Use (e.g. boile	r fuel market)					
		Total						
	estimate yard v volume manage	vaste volume.	Calculate for each in the appropriate	truck used	in your yard wa	aste managemen	t program, and th	en enter the grand total
		ck (in yards)	Avg. no. of times tr	uck fills each		s truck is used durin		TOTAL
			-			ction Servi		
This			overnment's provisi	ion of solid	waste (garbage	e) collection serv	vices.	
52.	Please complet			ī			l .	
		Insert Letter	- see codes at right		lid Waste Colle - see codes at ri 1 Secondary	ight Will Co		How is Solid Waste Collected? es 1. Once a week at household 2. Twice a week at household
		D.::	Canandamy	Primary Primary	6 Secondary Secondary	6 d. Local	government not red in provision of	3. Convenience center/greenbox4. As needed or by request5. Daily6. Other
52			u u		1 1. d			
53.	What type of collection method is used?					Don't know		
	Do you offer b	ulky waste co	llection services?	Yes Yes	☐ No			
54.	_	-	-	_		☐ Yes ☐ No	No	
		Part	t VI. Solid Wa	aste and	d Recycling	g Education	nal Activitie	es
55.	•		-		inform citizens o Part VII, page		out solid waste ma	anagement and / or recycling
56.	Please estimate	your annual	budget for solid was	ste related	education and or	utreach activitie	s: \$	
57.	Does your com	nmunity produ	ce recycling educat	ion and out	treach materials	in languages be	sides English? [Yes No
	If YES, please	_						
58.	Please provide	your recyclin	g website address a	nd public ii	nformation phor	ne number if app	olicable.	
	Website:						Phone #:	

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

	ficient resources availab stions deal with funding					these programs.	The following
_	Did your local governn			_		Yes No)
	With regards to funding	-	•				
	☐ Tipping fees			eight-based fees (e.g	g. PAYT) Ti	re tax	
		es / general fund	Sale of rec	yclables	\square W	hite Goods tax	
	Per househo	_	Grants	•	Di	sposal Tax	
61.	NC Solid Waste Dispos According to GS 105-1						
	How are disposal tax d	listributions being u	sed?garbage cans				
62.	If applicable, please pr	ovide your FY 17-1	8 household fees.	(e.g., a. \$45.00 per	year per household f	or solid waste)	
	a. \$	•	•				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 government are charged a fee by we			-		7-18? (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	ly and to develop	a system to
			1				
64.	If your local government		•	-	eport the annual contr	act amount.	
	\$		_ For solid waste s	services per year			
	\$		_ For recycling pe	r year			
			OR				
	\$218,748.63		_ Combined Contr	ract (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			
	/ L	# of Households			Disposal Cost	Total Cost	Cost Per Ton
		served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	including overhead	Managed (calculated by form)
M	Iunicipal Solid Waste*	1,473				238,262.32	
	Recycling Program**	1,443					
	Yard Waste Program				_ _		
		(calculated by form):				238,262.32	
	*for materials collected and						
	**for materials collected b		_		_	_	
66.	If your government operations (rous						
	· ·	nd to nearest donar, idfill Budget:	•	Φ	-	-	OSIS
				·			_
		sfer Station Budget					
		Waste / Compost I					
	•	cling Facility Budg					
67.	What was your government	ment's total combin	ed annual budget fo	or all solid waste an	d recycling services is	n 17-18? \$ <u>238,26</u>	2.32

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, phon	e number, and e-	mail of person	respons	•	program.	
	Name:				Title: _		
	Address:			City:		Zip:	
	Telephone:						
69.	Please provide the physical address	of the primary co	ounty white go	ods coll	ection site.		
	Street 1:						
	Street 2:						
	City:						
70.	Please provide the name of the busing Name:	-				om white goods.	
	Street:						
	City:			State:	North Carolina	Zip:	
	Phone: F	ax:		Email:	:		
71.	Give amounts / types of CFCs remo		ords of CFC rer	noval, aı	nd copy of certificati		rming extraction.
	Type of CFC	Removed				Amount	
				+			
				+			
72.	CFCs may be recycled or sent for de	estruction Give:	nama of firm	disposal	mothod and amount	parned / spont for CE	C disposal
12.	Firm	zaruction. Give			f Disposal	Amount Earned	
73.	Please report the tonnage of white g white goods tonnage reported on pa		uring FY 2017	-18 in th	e Recycling Tonnag	ges table on page 5 (qu	nestion # 45). Was
74.	List the amount of revenue for the v	white goods prog	ram by source:				
	Revenue collected from sale of scra	p:	\$				
	Revenue collected from White Goo	ds Tax Distribut	ions: \$				
	Revenue from other source (e.g. gra	unts):	\$				
	Total Revenue:		\$				
75.	According to the White Goods Law expenditures White Good Tax Distr						mounts and types of
	Operational Expenses:	\$					
	Capital Improvements:						
	Clean-up of Illegal White Goods D						
	Total Expenditures:	\$					

SC.	RAP TIRES						
76.	Please provide name, address, phone number, and e Name:	d e-mail of person responsible for scrap tires program. Title:					
	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.		r of scrap tires disposed from cleanup of state or county designated 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						

Natural Heritage Program (N Please note that the vetting of a site	(HP) and the State Historic Preserva prior to a disaster is advantageous to local	ation Office (SHPO) thro governments because a staging	ough coordination with the Solid Waste Section. g site which is found to have impacted federal or state
	Site Name		
•			following a disaster? Yes No
• •	ammar mortanty:	_	
Has your county considered v	whether to implement a program for	r the management of aba	ndoned manufactured homes? Yes No
If yes, has your county development	oped a written plan for the manager	ment of abandoned manu	factured homes? Yes No
	Part IX.	Comments	
1	Natural Heritage Program (N Please note that the vetting of a site resources after a disaster may cause Disaster Site # Does your plan address the m Does your plan address mass NAGEMENT OF ABA Has your county considered w If yes, has your county developments this section to elaborate on any	Natural Heritage Program (NHP) and the State Historic Preserve Please note that the vetting of a site prior to a disaster is advantageous to local resources after a disaster may cause difficulty for local governments when atten Disaster Site # Site Name Does your plan address the management of household hazardour Does your plan address mass animal mortality? Yes NAGEMENT OF ABANDONED MANUFACTUR Has your county considered whether to implement a program for If yes, has your county developed a written plan for the management Part IX. this section to elaborate on any info provided in your report as ne	Does your plan address the management of household hazardous waste and white goods

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

