Solid Waste and Materials Management Annual Report

July 1, 2014 -- June 30, 2015

COMPLETION AND SUBMISSION OF THIS REPORT WILL FULFILL THE ANNUAL REPORTING MANDATE TO THE STATE AS REQUIRED BY G.S. 130A-309.09A.

Please submit this form to lgteam@ncdenr.gov by September 1, 2015.

If you have questions about completing this form, please call 919-707-8121 or 919-707-8139. If you have questions about the reporting requirement, please call 919-707-8200 or contact your Regional Environmental Senior Specialist.

Person Completing This Report: Margaret Nelms  
Title: Mayor

Mailing Address: 391 NC 58  
City: Louisburg  
Zip: 27549

Phone: 919-853-3164  
Fax:  
Date: 9/8/15  
Email: 

General Instructions

Please remember that the time period for the report is JULY 1, 2014 through JUNE 30, 2015. Please check “No” if you have nothing to report for a specific question.

1. Did your local government have a Recycling Coordinator or similar position for FY 14-15?  
   ☐ Yes  ☒ No

   Name Recycling Coordinator (if different from person completing this report.)

   Name:  
   Title:  

   Address:  
   City:  
   Zip:  

   Telephone:  
   Fax:  
   Email:  

2. Did your local government have a Solid Waste Director or similar position for FY 14-15?  
   ☐ Yes  ☒ No

   If Yes, Name:  
   Title:  

   Address:  
   City:  
   Zip:  

   Telephone:  
   Fax:  
   Email:  

3. Did your local government have dedicated or part-time Solid Waste Enforcement Staff for FY 14-15?  
   ☐ Yes  ☒ No

   If Yes, Name:  
   Title:  

   Address:  
   City:  
   Zip:  

   Telephone:  
   Fax:  
   Email:  

4. Did your local government have solid waste ordinances in place addressing any of the following during FY 14-15? (if yes, please check all that apply)
   ☐ Disposal Bans  ☐ Illegal Dumping  ☐ Littering  ☐ Other, Please Describe:  

5. Did your local government manage, provide or contract for any solid waste services in FY 14-15 (e.g., collection, disposal, recycling, mulching, composting)?  
   ☐ Yes  ☒ No

If you answer "No" to question 5, the report is complete, please email to lgteam@ncdenr.gov.
### Part I. Waste Reduction and Recycling Programs Serving Government Facilities

The following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. An example of source reduction at government facilities is duplex or two-sided copying.

6. Did your local government have an in-house / government building recycling program in place for FY 14-15?  
   - [ ] Yes  
   - [ ] No

7. Did your local government have any program or policy encouraging or requiring local agencies to purchase products with recycled content?  
   - [ ] Yes  
   - [ ] No

8. Did your local government have a program in place to collect and recycle spent fluorescent lights generated from public buildings?  
   - [ ] Yes  
   - [ ] No

### Part II. Waste Reduction and Recycling Programs Serving the Public

**SOURCE 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, phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives?  
    - [ ] Yes  
    - [ ] No

12. Did your local government offer a waste exchange or reuse program?  
    - [ ] Yes  
    - [ ] No

13. If yes, 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.)

**PUBLIC RECYCLING SERVICES**

14. Which of the following responses best describes your recyclables recovery activities for the period July 1, 2014 through June 30, 2015?  
    - [ ] 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 what 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 you **DID operate or contract** for a recyclables recovery program, please indicate the type of program in operation and provide specifics about your program(s).

**CURBSIDE RECYCLING PROGRAM**

15. Did your government operate a Curbside Recycling Program?  
    - [ ] Yes  
    - [ ] No, skip to question # 26

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)
17. Please answer the following questions about your community.
   a. Total number of households? ____________________________
   b. Number of households served by curbside recycling? ____________________________
   c. Please estimate the number of households that regularly participate in the program? ____________________________

18. If your curbside recycling program is operated through a public franchise system 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) □ single stream / commingled
   □ dual / two stream □ don't know / other

24. If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used:
   □ less than 50 gallon cart □ 65 gallon cart
   □ 95 gallon cart □ multiple sizes of cart available

25. If you use roll-out carts for curbside recycling, please indicate the calendar year you implemented service with carts: ____________________________

DROP-OFF RECYCLING PROGRAM

26. Did your government operate a Drop-off Recycling Program? □ Yes □ No, skip to question # 33

27. Who collected the recyclable materials for your local government's drop-off recycling program?
   □ Local government employees □ Private contractor
   □ Other (please specify) ____________________________

28. 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

29. Please estimate the number of households served by your drop-off recycling program. ____________________________

30. What sector(s) of your community are served by the drop-off recycling program? □ Residential □ Commercial □ Industrial

31. How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites: ____________________________

32. How many of these locations were staffed with attendants? □ All □ None □ Some □ please list # of staffed sites: ____________________________

PUBLIC ELECTRONICS RECYCLING PROGRAM

Please answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any materials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.

33. Did your community operate an electronics recycling program in FY 14-15? □ Yes □ No, skip to question # 39
   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
34. Did your electronics recycling program collect or accept televisions from (check all that apply):  
☐ Residences  ☐ Businesses

35. Did your electronics recycling program collect or accept computer equipment from (check all that apply):  
☐ Residences  ☐ Businesses

36. DENR 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, please provide the following information:

   Electronics Management Fund balance as of July 1, 2014:  $
   
   Electronics Management Funds received from DENR during FY 14-15:  $
   
   Electronics Management Funds spent during FY 14-15:  $
   
   Electronics Management Fund balance as of June 30, 2015:  $

37. Please explain how Electronics Management Funds were spent during FY 2014-15 (please list items purchased if applicable):

38. 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 14-15:

   Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?  
☐ Yes  ☐ No

OTHER PUBLIC RECYCLING PROGRAMS

Please answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by the local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.

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

40. 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

41. 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

42. 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

43. 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?  
☐ Yes  ☐ No

44. Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 14-15. (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

45. Please identify all “Other” programs or services operated by your government during FY 14-15. (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

46. 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, 2014 through JUNE 30, 2015. 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.

<table>
<thead>
<tr>
<th>PROGRAM</th>
<th>Curbside</th>
<th>Drop-off</th>
<th>All &quot;Other&quot; Programs</th>
<th>Total Tons</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Collect?</td>
<td>Tons</td>
<td>Collect?</td>
<td>Tons</td>
</tr>
<tr>
<td></td>
<td>if Yes</td>
<td></td>
<td>if Yes</td>
<td></td>
</tr>
<tr>
<td>GLASS:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clear</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brown</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Green</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mixed</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PLASTIC:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PET #1</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HDPE #2</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All Plastic Bottles</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Plastic Containers</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bulky Rigid Plastics</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>METAL:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aluminum Cans</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Steel Cans</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White Goods</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Metal</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PAPER:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newsprint (ONP)</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cardboard (OCC)</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Magazines (OMG)</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office Paper</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mixed / Other Paper</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cartons / Aseptic Containers</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WOOD:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pallets</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Wood - DO NOT report yard waste tons here</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OTHER MATERIALS:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Textiles (clothes etc...)</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Televisions</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Electronics</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C&amp;D Recovery</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Commingled tons-check all items collected above</td>
<td>⊙</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL TONS:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

47. If you have a reliable mechanism for gathering data, complete this section for materials that were recycled as a direct 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.

<table>
<thead>
<tr>
<th>Material Type</th>
<th>Tons Diverted</th>
<th>Describe the mechanism that caused these materials to be recovered and data collection method</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part III. Special Wastes

This section concerns local government programs for managing materials that require special handling or that are banned from landfilling. Please answer the questions and complete the table below indicating whether you operate programs to accept these materials from the public for recycling. Please do not include materials that were accepted and then disposed of in a landfill, and please do not include tires which should be reported by counties only in PART VIII (page 10).

When completing the table below, please do not include materials generated exclusively by government operations (e.g. motor-fleet services). Only information on services provided to the public should be included below. Do not include information about Electronics Recycling Programs in this section, see page 3 and 4 instead, and please report electronics recycling tons on page 5.

If special wastes were only accepted as a part of an Household Hazardous Waste (HHW) Program or event and were not collected by separate recycling efforts then do not record materials in the chart below but instead report with HHW materials in question # 49.

<table>
<thead>
<tr>
<th>48. Special Waste Programs for Collecting Materials from Citizens by Material Type</th>
<th>Did your local government provide public collection of this material outside of an HHW Program?</th>
<th>Please list # of sites</th>
<th>Provide data on quantities collected / managed. Please report in indicated units.</th>
<th>Could businesses use service?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Used Motor Oil</strong></td>
<td>Yes</td>
<td></td>
<td>gallons</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Used Oil Filters</strong></td>
<td>Yes</td>
<td></td>
<td>Barrels, or lbs</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Used Antifreeze</strong></td>
<td>Yes</td>
<td></td>
<td>gallons</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Batteries, Lead Acid</strong></td>
<td>Yes</td>
<td></td>
<td># batteries, or lbs</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Batteries, Dry Cell</strong></td>
<td>Yes</td>
<td></td>
<td>lbs</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Fluorescent Bulbs/Lights Containing Mercury</strong></td>
<td>Yes</td>
<td></td>
<td>lbs, or # bulbs</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Propane Tanks</strong></td>
<td>Yes</td>
<td></td>
<td>lbs, or # tanks</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Used Cooking Oil / Waste Vegetable Oil</strong></td>
<td>Yes</td>
<td></td>
<td>lbs, or gallons</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Other Special Wastes - please provide waste type here:</strong></td>
<td>Yes</td>
<td></td>
<td>lbs</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Pesticide Containers (NCDA Program, not pesticides themselves)</strong></td>
<td>Yes</td>
<td></td>
<td>lbs, or # containers</td>
<td>n/a</td>
</tr>
<tr>
<td><strong>NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)</strong></td>
<td>Yes</td>
<td></td>
<td>lbs</td>
<td>n/a</td>
</tr>
<tr>
<td><strong>Latex Paint (do not include paint collected at HHW event or by a paint exchange program)</strong></td>
<td>Yes</td>
<td></td>
<td>gals, or lbs</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event**

49. Did your local government operate a household hazardous waste collection program or event in FY 14-15?  Yes  No

If Yes, please respond to the following questions:

a. Was HHW collected at a permanent/ongoing program or a temporary/one-day collection event?  Permanent  Temp. Event

b. How many days did your HHW Program operate during the year?  

b. Did you partner or co-sponsor your HHW program with another local government?  Yes  No

Please list partner(s)  

c. How many participants did your HHW collection program serve?  

If yes, please estimate the amount of business material managed (in pounds)  pounds

e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)?  Yes  No

f. Total quantity of materials collected by HHW / CESQG Program (in pounds)  pounds

g. Contractor(s) involved  

h. Estimated cost of HHW / CESQG program or event(s)  

---

Pages 3 through 6 should have only been completed by those governments that indicated on 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 IV. Yard Waste, Mulching and Composting Management

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 do not include information on food waste recycling in this section.

50. Does your local government collect yard waste at curbside? □ Yes □ No
51. Did a storm event significantly impact the amount of yard waste your government managed during FY 14-15? □ Yes □ No
52. 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.

<table>
<thead>
<tr>
<th>Destination</th>
<th>Check if used</th>
<th>Tons</th>
<th>Cubic Yards</th>
<th>Please Provide Name of Destination</th>
</tr>
</thead>
<tbody>
<tr>
<td>End user (to farmer or home-owner)</td>
<td>□</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Your local government's mulch or compost facility</td>
<td>□</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other public mulch or compost facility</td>
<td>□</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Private mulch or compost facility</td>
<td>□</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Land clearing and inert debris landfill (LCID)</td>
<td>□</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Energy / Fuel Use (e.g. boiler fuel market)</td>
<td>□</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 yd³ truck x 3 days/wk x 16 wks = 480 yd³

\[
\text{Size of Truck (in yards)} \times \text{Avg. no. of times truck fills each week} \times \text{# of weeks truck is used during year} = \text{TOTAL yd}^3
\]

Part V. Solid Waste Collection & Disposal

Please answer the following questions regarding your local government's provision of solid waste collection and disposal services.

53. Please complete the following table regarding your solid waste collection (curbside or drop-off programs) and disposal program.

<table>
<thead>
<tr>
<th>Sector</th>
<th>Who Collects Solid Waste?</th>
<th>How is Solid Waste Collected?</th>
<th>Who Collects Solid Waste?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Insert Letter - see codes at right</td>
<td>Insert No. - see codes at right</td>
<td>a. Local government employees</td>
</tr>
<tr>
<td></td>
<td>Primary</td>
<td>Secondary</td>
<td>Primary</td>
</tr>
<tr>
<td>Residential</td>
<td>Primary</td>
<td>Secondary</td>
<td>Primary</td>
</tr>
<tr>
<td>Commercial</td>
<td>Primary</td>
<td>Secondary</td>
<td>Primary</td>
</tr>
<tr>
<td>Industrial</td>
<td>Primary</td>
<td>Secondary</td>
<td>Primary</td>
</tr>
</tbody>
</table>

54. If you provide residential waste collection at single-family households in your jurisdiction, please answer the following questions:

What type of collection method is used? □ Fully Automated □ Semi-Automated □ Manual □ Don't know
What is the standard collection frequency? □ Weekly □ Two times per week □ Other
What is the typical service point for single family household waste? □ Curbside □ Back yard / Back door
What type of collection container is used? □ Government-provided carts □ Resident-provided container □ Bags
Do you offer bulky waste collection services? □ Yes □ No
If so, were white goods delivered to the county for marketing? □ Yes □ No

Part VI. Solid Waste and Recycling Educational Activities

56. Did your local government have an education program to inform citizens specifically about solid waste management and / or recycling issues / activities? □ Yes □ No (If No, skip to Part VII, page 8)
57. Please estimate your annual budget for solid waste related education and outreach activities: $ 
58. Does your community produce recycling education and outreach materials in languages besides English? □ Yes □ No
If YES, please list other languages used: 
59. Please provide your recycling website address and public information phone number if applicable.

Website: Hotline:  

2014-2015 Local Government Annual Report Report Due Date: September 1, 2015 Submit to: lgteam@ncdenr.gov Page 7 of 11
Part VII. Resources for Solid Waste Management and Full Cost Accounting

Sufficient resources available to solid waste management programs are essential for continued success of these programs. The following questions deal with resources allocated to solid waste management programs.

60. Did your local government operate an Enterprise Fund for solid waste services in FY 14-15?  
   [ ] Yes  [ ] No

61. With regards to funding sources, check all that apply to your local government:
   [ ] Tipping fees  [ ] Volume/weight-based fees (e.g. PAYT)  [ ] Tire tax
   [ ] Property taxes / general fund  [ ] Sale of recyclables  [ ] White Goods tax
   [ ] Per household charges  [ ] Grants  [ ] Disposal Tax

62. NC Solid Waste Disposal Tax proceeds are distributed to eligible local governments on a quarterly basis by the Department of Revenue. According to GS 105-187.63 these funds must be used by a city or county solely for solid waste management programs and services. How are disposal tax distributions being used?

63. If applicable, please provide your FY 14-15 household fees. (e.g., a. $45.00 per year per household for solid waste)
   a. $ __________________ per __________________ per ________________ for solid waste
   b. $ __________________ per __________________ per ________________ for recycling
   c. $ __________________ per __________________ per ________________ for yard waste
   d. $ __________________ per __________________ per ________________ for bulky waste
   e. $ __________________ per __________________ per ________________ availability fee
   f. $ __________________ per __________________ per ________________ total charge

64. Did your local government have a Pay-As-You-Throw program for residential garbage? (Residents are charged by weight or volume for the amount of trash disposed.)  
   [ ] Yes  [ ] No

According to GS 130A-309.08, local governments are required to conduct full cost accounting annually and to develop a system to inform users of such costs.

65. If your local government contracts for solid waste or recycling services, please report the annual contract amount.
   $ __________________ For solid waste services per year
   $ __________________ For recycling per year
   OR
   $ __________________ Combined Contract (solid waste and recycling)

66. Collection Programs: Please complete the following table to the best of your ability to display the full costs of your local government's various collection programs. If full cost analysis is not available, please report program budget in Total Cost column.

<table>
<thead>
<tr>
<th># of Households served</th>
<th>Tons Collected</th>
<th>Collection Cost</th>
<th>Disposal Cost (tipping fees paid)</th>
<th>Total Cost including overhead</th>
<th>Calculated Cost Per Ton Managed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Municipal Solid Waste*</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recycling Program**</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yard Waste Program</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Calculated Totals:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*for materials collected and sent for eventual disposal in a Municipal Solid Waste or Construction and Demolition Landfill, or through incineration

**for materials collected by public recycling programs including those services offered to commercial and industrial generators

67. If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide total budget for facility operations. If budgets are combined, please attempt to allocate costs proportionately.

   Landfill Budget: $ __________________
   Transfer Station Budget: $ __________________
   Yard Waste / Compost Facility Budget: $ __________________
   Recycling Facility Budget: $ __________________
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 this Part may result in non-eligibility for grant requests.

### WHITE GOODS

68. Give name, address, phone number, and e-mail of person responsible for white goods program.
   
   Name: ____________________________________________
   Title: ____________________________________________
   Address: ____________________________________________
   City: ___________ Zip: ___________
   Telephone: ____________________ Fax: ____________________ Email: ____________________

69. Please provide the physical address of the primary county white goods collection site.
   
   Street 1: ____________________________________________
   Street 2: ____________________________________________
   City: ___________________________ State: North Carolina Zip: ___________

70. Please provide the name of the business or person that removes the refrigerant gases (CFCs) from white goods.
   
   Name: ____________________________________________
   Address: ____________________________________________
   City: ___________________________ State: North Carolina Zip: ___________
   Telephone: ____________________ Fax: ____________________ Email: ____________________

71. Give amounts / types of CFCs removed. Attach records of CFC removal, and copy of certification of person(s) performing extraction.

<table>
<thead>
<tr>
<th>Type of CFC Removed</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

72. CFCs may be recycled or sent for destruction. Give name of firm, disposal method and amount earned / spent for CFC disposal.

<table>
<thead>
<tr>
<th>Firm</th>
<th>Method of Disposal</th>
<th>Amount Earned</th>
<th>Amount Spent</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

73. Tonnage of White Goods Collected (include scrap metal):

74. List the amount of revenue for the white goods program by source:

   Revenue collected from sale of scrap: $ ____________________

   Revenue collected from White Goods Tax Distributions: $ ____________________

   Revenue from other source (e.g. grants): $ ____________________

   Total Revenue: $ ____________________

75. According to the White Goods Law, White Good Tax Distributions must be spent on white goods activities. Give amounts and types of expenditures White Good Tax Distributions were used for (do not include funds received from grants).

   Operational Expenses: $ ____________________

   Capital Improvements: $ ____________________

   Clean-up of Illegal White Good Dumps: $ ____________________

   Total Expenditures: $ ____________________
SCRAP TIRES

76. Give name, address, phone number, and e-mail of person responsible for scrap tires program.
   Name: _______________________________ Title: _______________________________
   Address: ___________________________ City: ___________________________ Zip: ______
   Telephone: _________________________ Fax: ______________________________ Email: ____________

77. Please provide the physical address of the primary county scrap tires collection site.
   Street 1: ____________________________________________________________
   Street 2: ____________________________________________________________
   City: ___________________________ State: North Carolina Zip: ____________

78. Tonnage/Number of scrap tires disposed July 1, 2014-June 30, 2015 (excluding tires from cleanup of nuisance sites)
   Tons or ____________ Number of tires ____________

79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites
   Tons or ____________ Number of tires ____________

80. Indicate the types of tires collected by the county:
   Passenger ______%  Heavy Truck ______%  Large Off-Road ______%

81. List the amount of revenue for the scrap tire program by source:
   Revenue from Scrap Tire Tax Distributions: $ ______________________________
   Revenue from Tire Fees: $ ______________________________
   Revenue from Scrap Tire Clean-up Reimbursements: $ _____________________
   Revenue from Scrap Tire Cost-Overrun Grants: $ _________________________
   Total Revenue: $ ______________________________________________________

82. County's total scrap tire program contract expenditure (contract disposal/hauling costs), excluding costs of nuisance tire cleanups, for FY 14-15.
   $ ______________________________

83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any.
   Labor $ ______________________________
   Site Cost $ ______________________________
   Other $ ______________________________ describe Other: ______________________________

84. County's contract cost for scrap tire disposal. $ _______ / Ton; $ _______ / Tire

85. Hauling cost or fuel surcharge, if not included in contract cost above. $ _______ / Ton; $ _______ / Tire

86. Total tipping fees collected for tires not eligible for free disposal. $ ______________________________

87. Total number of tires collected not eligible for free disposal: ______________________________

88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill?  ☐ Yes  ☐ No

89. Name of tire disposal/recycling firm(s): ________________________________________________

TEMPORARY DISASTER DEBRIS STAGING SITES

90. Does your local government have a plan in place for management of disaster debris?  ☐ Yes  ☐ No
   If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies:  ☐ Stand-alone  ☐ In conjunction

91. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event?  ☐ Yes  ☐ No

92. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:
   Name: ___________________________ Name: ___________________________ Name: ___________________________
   Phone: ___________________________ Phone: ___________________________ Phone: ___________________________
   E-mail: ___________________________ E-mail: ___________________________ E-mail: ___________________________
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.

<table>
<thead>
<tr>
<th>Disaster Site #</th>
<th>Site Name</th>
<th>Disaster Site #</th>
<th>Site Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

94. Does your plan address the management of household hazardous waste and white goods following a disaster?  □ Yes □ No

95. Does your plan address mass animal mortality?  □ Yes □ No

**MANAGEMENT OF ABANDONED MANUFACTURED HOMES**

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 □ No

**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. Attach additional sheets if needed.

---

This form is to be submitted electronically. If you require assistance, please contact one of these NC DEACS staff members:

Joseph Fitzpatrick, email: joseph.fitzpatrick@ncdenr.gov  phone 919-707-8121
Rob Taylor, email: rob.taylor@ncdenr.gov  phone: 919-707-8139

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 [http://portal.ncdenr.org/web/deao/recycling/localgov](http://portal.ncdenr.org/web/deao/recycling/localgov) or e-mail us at lgteam@ncdenr.gov