

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



Required - Enter Your Local Government Name: Misenheimer

State of North Carolina

Department of Environmental Quality Division of Waste Management & Division of Environmental Assistance and Customer Service

Local Government Report Form

Solid Waste and Materials Management Annual Report July 1, 2017 -- June 30, 2018

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

		Please submit this form to Lgte	eam@ncdenr.gov by Septer	nber 1, 2018.	
	If you have questi	ons or need assistance complet	ing this form, please call	919-707-8136	or 919-707-8133.
Per	rson Completing This Report	: Anita Blair	,	Title: Administra	tor
Ma	iling Address: PO Box 100		City: Misenheimer		Zip: 28109-0100
Pho	one: 704-463-1234	Fax: 704-463-1107		Date: 8/30/1	8
Em	nail: clerk@villageofmisenehi	imernc.gov			
		Gener	ral Instructions		 -
	ase remember that the time po	eriod for the report is JULY 1, 201	7 through JUNE 30, 2018.	Please check "No	o" if you have nothing to report
1.	Did your local government	have a Recycling Coordinator or	similar position for FY 17-2	18? Yes	⊠ No
	Name Recycling Coordina	tor (if different from person compl	leting this report.)		
	Name:		,	Title:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
2.	Did your local government	have a Solid Waste Director or sign	milar position for FY 17-18	? Yes	⊠ No
	If Yes, Name:			Title:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
3.	Did your local government	have dedicated or part-time Sol	id Waste Enforcement Staff	f for FY 17-18?	Yes No
	If Yes, Name:			Title:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
4.	Did your local government all that apply)	have solid waste ordinances in pla	ace addressing any of the fo	llowing during F	Y 17-18? (if yes, please check
	Disposal Bans	☐ Illegal Dumping ☐ Littering	ng Other, Please Desc	cribe:	
5.	Did your local government mulching, composting)?	manage, provide or contract for a	ny solid waste services in F	Y 17-18 (e.g., col	llection, disposal, recycling,
	If you answ	ver ''No'' to question 5, the repo	ort is complete, please emo	uil to Lgteam@n	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. 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) Waste Management Franchised hauler (please specify) Other (please specify)

1/.	Please provide the following information about your community:
	a. Total number of households in your jurisdiction? 130
	b. Number of households eligible to participate in the curbside recycling program: 130
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 130
18.	If your curbside recycling program is operated through a <u>public franchise granted to a private company</u> then please answer the following: Is public participation in the franchise: Voluntary or Mandatory Does your franchise consist of: One service district or Multiple service districts
19.	What sector(s) of your community was served by the curbside recycling program? ☐ Residential ☐ Commercial ☐ Industrial
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served:
21.	How frequently were the curbside recyclables collected? Once a week Every other week / biweekly Other
22.	Please describe the collection containers used: ☐ Bins ☐ Blue bags ☐ Multi-bin system ☐ Roll-out carts
23.	Please describe the method / style of recyclable materials handling: curb-sort (collector separates material as collected)
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used: less than 50 gallon cart
DR	OP-OFF RECYCLING PROGRAM
25.	Did your government operate a Drop-off Recycling Program? Yes No, skip to question # 32
26.	Who collected the recyclable materials for your local government's drop-off recycling program? Local government employees Private contractor
	Other (please specify)
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program: source-separated (citizens separate materials by type) single stream / commingled dual / two stream (paper separated from cans/bottles) don't know / other
28.	Please estimate the number of households served by your drop-off recycling program.
29.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:
31.	How many of these locations were staffed with attendants?
EL	ECTRONICS RECYCLING PROGRAM
mate	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? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
	other than through your curbside or dropoff recycling programs? Yes No
40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served:
	Public drop-off recycling sites available for ABC On Premises Permit holders to use
41.	Does your local government operate a program to recycle Construction and Demolition materials? Yes No If yes, please check all materials that were recycled and report tonnages in tonnage table on page 5:
	☐ Clean Wood ☐ Brick, concrete, etc. ☐ Sheetrock ☐ Vinyl siding ☐ Shingles ☐ Metals ☐ Other
42.	Does your local government have an ordinance regulating the construction and demolition waste stream with the intention of encouraging or requiring waste reduction or recycling of these materials?
43.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 17-18. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	☐ Public Parks Recycling Program ☐ Athletic Field /Venue Recycling Program
	Pedestrian Recycling Program Recycling Service for Special Events / Festivals
44.	Please identify all "Other" programs or services operated by your government during FY 17-18. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	Public School Recycling Program
	Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)
	Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events
	Organics / Food Waste Recycling other than yard waste program
	Oyster Shell Recycling Program
	Other Programs (please specify)
	Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.

RECYCLING TONNAGES FROM PUBLIC PROGRAMS

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

DDOCD AM	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							
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans							
Steel Cans							
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)							
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper	\boxtimes						
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions					 		
Other Electronics					$\perp \perp$		
C&D Materials Recycling					 		
					$\perp \perp$		
					\perp		
Commingled tons-check al items collected above		11.76					11.76
TOTAL TONS:		11.76					11.76
101112101101					ı		-11.70

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	1 0	n collect this m the public?	# of sites	Data on quanti Please repo	ties collected ort in indicat				
	Used Motor Oil	Yes	⊠ No		gallons		gallons			
	Used Oil Filters	Yes	⊠ No		barrel	s, or	lbs			
	Used Antifreeze	Yes	⊠ No			-	gallons			
	Batteries, Lead Acid	Yes	⊠ No		# bat	teries, or	lbs			
	Batteries, Dry Cell	Yes	⊠ No				lbs			
	Fluorescent Bulbs/Lights Containing Mercury	Yes	⊠ No		lb	os, or	# bulbs			
	Propane Tanks	Yes	⊠ No		lb	os, or	# tanks			
	Used Cooking Oil / Waste Vegetable Oil	Yes	⊠ No		lb	os, or	gallons			
	Other Special Wastes - please provide waste type here:	Yes	⊠ No			•	lbs			
	Pesticide Containers (NCDA Program, not pesticides themselves)	Yes	⊠ No		lb	os, or	# containers			
	NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)	Yes	⊠ No				lbs			
	Latex Paint (do not include paint collected at HHW event or by a paint exchange program)	Yes	⊠ No		ا ا	als, or	lbs			
	Did your local government operate a household If Yes, please respond to the following question a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program of c. Did you partner or co-sponsor your HHW program of the collected at a permitted Tempora of the collected	s: ary Event or a pen to accept i	t a Permanent materials duri	HHW (Collection Facility Fiscal Year?		Yes No	mp. Event		
	Please list partner(s) d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year? e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? Yes 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 below. If data about individual materials <u>is not</u> available, please simply provide total quantity of 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) Used Oil Filters # of Barrels, or lbs.									
	Used Antifreeze (gal)	Lea	d Acid Batter	ies (lbs)	Ot	her Batteries	s (lbs)			
	Fluorescent Bulbs / Lights Containing	ng Mercury (l	bs)							
	g. Provide Total Quantity of materials collected reported in 48f, please net the weight of thosh. Please list HHW Collection Contractor	e materials or	ut of the total	listed he	ere.			pound —		
	_							_		
	i. Estimated cost of HHW / CESQG program of es 3 through 6 should have only been complet					t they DO n	rovide recycline	o sprvicos		
· ug	os o monagni o snoum nuve omy ocen complet	on by govern	mones mucu	ung m	Incomon # 17 mm	i incy DO P	rorius recycilliz	, DUI VILLE		

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.

			v. Yard was						
		0						landfills, incinerator	
								e answer the question terials in this section.	
			operate a yard wast					ow yard waste is man	
	•	_	•				•	vaste, compost, or LC	
60.	_		tly impact the amou				•	-	
1.	What quantities	s of materials	were managed by y	our yard w	aste program?	Provide inform	nation in TONS (OR CUBIC YARDS	of
	organic mater	rial (yard was	te, brush, limbs, le	eaves, etc.)	managed. For	conversion pur	*	•	
		Destinat	ion	Check if used	Tons	Cubic Yards		Name and Location of F ng Vegetative Materials	acility
	End user (to fa	rmer or home	-owner)						
	Your local gov	ernment's mu	lch or compost facil	lity 🗌					
	Other public m	ulch or comp	ost facility						
	Private mulch	or compost fa	cility						
	Land clearing a	and inert debr	is landfill (LCID)						
	Energy / Fuel U	Use (e.g. boile	er fuel market)						
		Total							
								ormula below to help	
	•					_	1 0	en enter the grand tot	al
	volume manage	ed by progran	n in the appropriate X	boxes abov	Ye. Ex. 10 yas X	truck x 3 aays/	$WK \times IO WKS = 480$		13
	Size of Truc	olz (in vorda)	Avg. no. of times tr	mak fills asah		tenals is used durin		TOTAL	yd^3
	Size of True	K (III yarus)			Vaste Colle			101112	
This	saation aonaam	ug wayın lagal g	overnment's provisi						
			ig table about your s						
				ī .	lid Waste Coll	ootod9	ollects Solid Waste?	How is Solid Wests C	alloated?
	Sector		- see codes at right	II .		ight VIIIO C		How is Solid Waste Co es 1. Once a week at house	
	Residential	Primary b	Secondary b	Primary 1	Secondary	1 b. By C		2. Twice a week at house3. Convenience center/g	ehold
	Commercial	Primary	Secondary	Primary	Secondary	d. Loca	l government not	4. As needed or by reque	
	Industrial	Primary	Secondary	Primary	Secondary	servi	1	5. Daily6. Other	
3.	If you provide	residential wa	ste collection at sin	gle-family	households in y	our jurisdiction	n, please answer th	e following questions):
	What type of c	ollection meth	nod is used?	Fully Auto	omated S	Semi-Automate	d Manual	Don't know	
	What is the sta	ndard collecti	on frequency?	Weekly	☐ Two tim	nes per week	Other		
	What is the typ	oical service p	oint for single famil	ly househol	d waste?	Curbside [Back yard / Ba	ack door	
	What type of c	ollection cont	ainer is used?	Governme	ent-provided car	rts Resid	lent-provided cont	ainer Bags	
	Do you offer b	ulky waste co	llection services?	X Yes	☐ No				
4.		•	government collect	_		Yes	⊠No		
	If so, were whi		vered to the county f		<u> </u>	☐ No			
			t VI. Solid Wa			-			
5.	Did your local issues / activiti		-		inform citizens o Part VII, page		out solid waste ma	nnagement and / or red	cycling
66.	Please estimate	your annual	budget for solid was	ste related e	education and o	utreach activitie	es: \$		
7.	Does your com	nmunity produ	ce recycling educat	ion and out	reach materials	in languages b	esides English? [Yes No	
	If YES, please	list other lang	guages used:						
8.	Please provide	your recyclin	g website address a	nd public ir	nformation phor	ne number if ap	plicable.		
	Website:						Phone #: 704-4	63-1234	

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

	ficient resources availab estions deal with funding				-	these programs. T	The following
59.	Did your local governm With regards to funding Tipping fees Property tax	nent operate an Ente g sources, check all s es / general fund	erprise Fund for sol that apply to your land Volume/we Sale of recy	id waste services in local government: eight-based fees (e.g	g. PAYT)	Yes No	
61.	Per househo NC Solid Waste Dispos According to GS 105-1	sal Tax proceeds are 87.63 these funds n	nust be used by a ci	ity of county solely	ents on a quarterly ba for solid waste mana		
62	How are disposal tax d If applicable, please pr	_				for solid waste)	
02.					year per nousenota j)
		_		-			
	d. \$	per		per		for bulky wast	e
	e. \$	per		per		availability fee	<u>e</u>
	f. \$	per		per		total charge	
63.	Did your local governmare charged a fee by we			•		7-18? (a system v	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
64.	If your local government	nt contracts for soli	d waste or recycling	g services, please re	port the annual contr	act amount.	
	\$		_ For solid waste s	services per year			
	\$		_ For recycling per	r year			
	¢10.70¢		OR				
	\$19,526		_	act (solid waste, an			
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials co			
		# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
N	Iunicipal Solid Waste*	130	144.9			14,645	101
	Recycling Program**	130	11.76			4,881	415
	Yard Waste Program						
		(calculated by form):	156.66			19,526	124
66.	*for materials collected and **for materials collected by If your government ope facility operations (rour proportionately. Lan	y public recycling progra erates a landfill, trar	ams including those serv nsfer station, yard w). If budgets for dif	vices offered to commercy waste /compost facil ferent facilities are	cial and industrial generate ity or recycling facili	ty, please provide empt to allocate co	total budget for osts
		sfer Station Budget					
	•	cling Facility Budg	•				
67.	What was your government	ment's total combine	ed annual budget fo	or all solid waste an	d recycling services i	n 17-18? \$ <u>19,400</u>	

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 i			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:	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					
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

