

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: Morganton

State of North Carolina

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

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

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

		Please submit this form to Lg	gteam@ncdenr.gov by Septer	nber 1, 2018.	
	If you have questio	ns or need assistance compl	leting this form, please call	919-707-8136	or 919-707-8133.
Per	rson Completing This Report:	Joseph Scott Lookadoo		Title: Director of	of Public Works
Ma	niling Address: PO Box 3448		City: Morganton		Zip: 28680
Pho	one: (828) 438-5248	Fax: (828) 438-536	58	Date: 7/16	/2018
Em	nail: slookadoo@ci.morganton.	nc.us			
		Ger	neral Instructions		
	ase remember that the time per a specific question.	iod for the report is JULY 1, 2	017 through JUNE 30, 2018.	Please check "N	No" if you have nothing to report
1.	Did your local government l	have a Recycling Coordinator of	or similar position for FY 17-	18? Yes	⊠ No
	Name Recycling Coordinate	or (if different from person com	ppleting this report.)		
	Name:			Γitle:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
2.	Did your local government l	have a Solid Waste Director or	similar position for FY 17-18	? Xes	□ No
	If Yes, Name: Richard C	ope		Γitle: Sanitation	Superentendent
	Address: 96 Kirk St		City: Morganton		Zip: 28655
	Telephone:	Fax:	Email: rcop	e@ci.morganto	n.nc.us
3.	Did your local government l	have dedicated or part-time S	olid Waste Enforcement Staff	f for FY 17-18?	Yes No
	If Yes, Name:			Γitle:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
4.	Did your local government lall that apply)	nave solid waste ordinances in	place addressing any of the fo	llowing during	FY 17-18? (if yes, please check
	∑ Disposal Bans [☑ Illegal Dumping ☑ Litte	ring Other, Please Desc	eribe:	
5.	Did your local government is mulching, composting)?	manage, provide or contract for	r any solid waste services in F	Y 17-18 (e.g., co	ollection, disposal, recycling, No
	If you answe	er ''No'' to question 5, the re	port is complete, please emo	il to Lgteam@i	ncdenr.gov.

Part I. Waste Reduction and Recycling Programs Serving Government Facilities The following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. Did your local government have a recycling program in place for collecting recyclable materials generated at X No public buildings in FY 17-18? 7. Did your local government have any program or policy encouraging or requiring local agencies to X No purchase products with recycled content? Did your local government have a program in place to collect and recycle spent fluorescent lights X 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? X Yes 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: Swap shop/shed Number of sheds in use? Paint exchange Number of gallons recovered? 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? Yes \bowtie 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) Franchised hauler (please specify) Other (please specify)

1/.	Please provide the following information about your community:
	a. Total number of households in your jurisdiction?
	b. Number of households eligible to participate in the curbside recycling program:
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary):
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) 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
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 Republic Services 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. 8,000
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: 1
31.	How many of these locations were staffed with attendants?
EL	ECTRONICS RECYCLING PROGRAM
	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.	Did your community operate an electronics recycling program in FY 17-18? Yes No, skip to question # 38
	If you did operate an electronics recycling program, please indicate style of program:
	☐ Permanent - Curbside Collection ☐ Permanent - Drop-off ☐ Scheduled Collection Day or Event ☐ Part of HHW Program
	If you offer curbside collection of electronics is it: by appointment or unscheduled
	If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:

33.	Did your electronics recycling program collect or accept televisions from (check all that apply): Residences Businesses
34.	Did your electronics recycling program collect or accept computer equipment from (check all that apply): Residences Businesses
35.	DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was eligible to receive proceeds from the State Electronics Management Fund in February of 2018, please provide the following information:
	Electronics Management Fund balance as of July 1, 2017: \$
	Electronics Management Funds received from DEQ during FY 17-18 (Feb 2018 distribution): \$
	Electronics Management Funds spent during FY 17-18: \$
	Electronics Management Fund balance as of June 30, 2018: \$
36.	Briefly explain how Electronics Management Funds were spent during FY 2017-18 (please list items purchased if applicable):
37.	If you did operate an electronics recycling program, please provide the following information about your vendor / contractor: Name of electronics recycling vendor(s) during FY 17-18:
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?
OT	THER PUBLIC RECYCLING PROGRAMS
the	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
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

PD CCD ANS	Cu	ırbside	D	rop-off	All "Ot	ther" Programs	Total Tons
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear							
Brown							
Green							
Mixed				73.33			73.33
PLASTIC:			<u> </u>				
PET #1							
HDPE #2							
All Plastic Bottles				39.41			39.41
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans				3.06			3.06
Steel Cans				6.11			6.11
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)				36.04			36.04
Cardboard (OCC)				162			162
Magazines (OMG)							
Office Paper							
Mixed / Other Paper				104.66			104.66
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons her	е						
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled tons-check a	111						_
items collected above				10.1			10.1
TOTAL TONS:				424.61			424.61

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)

17.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		n collect this m the public?	# of sites			ected / manage licated units.	d.
	Used Motor Oil	Yes	⊠ No				gallons	
	Used Oil Filters	Yes	⊠ No		bar	rels, or		lbs
	Used Antifreeze	Yes	⊠ No			<u>'</u>	gal	llons
	Batteries, Lead Acid	Yes	⊠ No		# t	oatteries, o	r	lbs
	Batteries, Dry Cell	Yes	⊠ No					lbs
	Fluorescent Bulbs/Lights Containing Mercury	Yes	⊠ No			lbs, or	# bı	ılbs
	Propane Tanks	Yes	⊠ No			lbs, or	# t	anks
	Used Cooking Oil / Waste Vegetable Oil	Yes	⊠ No			lbs, or	gal	llons
	Other Special Wastes - please provide waste type here:	Yes	⊠ No				'	lbs
	Pesticide Containers (NCDA Program, not pesticides themselves)	☐ Yes	⊠ No			lbs, or		con- iners
	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			gals, or		lbs
	 If Yes, please respond to the following question a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program op d. Provide number of citizens / households that e. Did your program accept materials from small figures, please estimate the amount of business f. Amounts of individual materials collected by 	ry Event or a coen to accept rogram with a participated all businesses ss material ma	materials duri nother <u>local</u> g in your HHW (Conditionall	overnme collection	ent? Yes on program this pt Small Quanti	No S Fiscal Ye ity Generat pounds	tors)? Ye	
	about individual materials is not available, p Note, materials listed here should only be th	lease simply	provide total o	quantity	of materials co	llected by l	HHW program	in 48g below.
	Used Motor Oil (gal)							
	Used Antifreeze (gal)					Other Batte	eries (lbs)	
	Fluorescent Bulbs / Lights Containir		'					
	g. Provide Total Quantity of materials collected reported in 48f, please net the weight of thoseh. Please list HHW Collection Contractor	se 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 complete					hat thev D	O provide rec	vcling services
~	ough o siroura rare only been complet	THE OF AUTUIN	viewelu		TO DO DO IN A T U	y D	- promore	, BUI FULL

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 V	Vocto Mul	ching and (Compostin	a Managama	ant .
This	section concer						andfills, incinerators, or in
ınpe	rmitted sites an		nposting and mi	ulching are pop	ular manageme	nt options. Please	answer the questions below
19.		l government operate a yard					w yard waste is managed by
	_					•	aste, compost, or LCID facil.
50.		ent significantly impact the	•		_	•	
51.		s of materials were managed ial (yard waste, brush, lim					
		Destination	Check if used	_	Cubic Yards	Please Provide N	lame and Location of Facility g Vegetative Materials
	End user (to fa	rmer or home-owner)			100		
	Your local gov	ernment's mulch or compos	t facility 🗵		3,000		
	Other public m	ulch or compost facility		1,914.5		Burke County mulch fac	ility
	Private mulch of	or compost facility					
	Land clearing a	and inert debris landfill (LC	ID)				
	Energy / Fuel U	Jse (e.g. boiler fuel market)					
		Total		1914.5	3100		
		E MANAGEMENT FORM					
		vaste volume. Calculate for					
	volume manage	ed by program in the approp X 15	oriate boxes abov	x 20	truck x 3 aays/v	$\begin{array}{r} vk \ x \ 10 \ wks = 480 \\ = 3000 \end{array}$	ya³ vd³
	Size of Truc		imes truck fills each		truck is used during		TOTAL
			t V. Solid V				
This	section concern	s your local government's p					
52.	Please complet	e the following table about	<u> </u>			t .	
	Sector	Who Collects Solid Was	III .		77 HU CU	ollects Solid Waste?	How is Solid Waste Collected?
	Residential	Insert Letter - see codes at Primary a Secondary	Primary Primary	Secondary	a. Local b. By Co		s 1. Once a week at household 2. Twice a week at household
			c Primary	Secondary	c. Francl	nise haulers government not	3. Convenience center/greenbox4. As needed or by request
	Industrial	Primary a Secondary Primary C Secondary	D .	4 Secondary	T	ed in provision of	5. Daily 6. Other
-2							
53.	• •	residential waste collection	_ `	_ `	v	<u> </u>	
	• •	ollection method is used?	Fully Aut		Semi-Automated	<u></u>	Don't know
		ndard collection frequency?	2	_	ies per week	Other	
	What is the typ	ical service point for single	family househol	ld waste?	Curbside	Back yard / Bac	ck door
	What type of co	ollection container is used?	Governm	ent-provided car	rts Reside	ent-provided conta	iner Bags
	Do you offer be	ılky waste collection servic	es? Xes	☐ No			
54.	-	ies - did your government of the goods delivered to the co	_		∑ Yes ☐ No	No	
		Part VI. Solid	l Waste and	d Recycling	g Education	nal Activities	
55.	Did your local issues / activities	_		inform citizens to Part VII, page	-	ut solid waste mar	nagement and / or recycling
56.	Please estimate	your annual budget for sol				s: \$	
57.	Does your com	munity produce recycling e	ducation and ou	treach materials	in languages be	sides English?	Yes No
	If YES, please	list other languages used:					
58.	Please provide	your recycling website add	ress and public in	nformation phor	ne number if app	olicable.	
	Website: www	.ci.morganton.nc.us/index.p	hp/departments/	/public-works		Phone #: (828) 4	38-5248

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

00	ficient resources availab			v	v	these programs. T	The following
•	Did your local governm			e e	1 0	Yes No	.
	With regards to funding	_	_		111710.	103	,
	Tipping fees			eight-based fees (e.g	. PAYT) T	ire tax	
		es / general fund	Sale of recy	yclables		Vhite Goods tax	
	Per househo	- C	Grants		_	isposal Tax	
61.	NC Solid Waste Dispos According to GS 105-1						
	How are disposal tax d	•					
62.	If applicable, please pr						
	a. \$ 12	per month	l	per househo	old	for solid waste	
	b. \$	per		per		for recycling	
					1.1		
	d. \$ 25	per collec	tion	pernousenc	DIG	for bulky wast	e
	e. \$	per		per		availability fee	<u> </u>
	f. \$	per		per		total charge	
63.	Did your local governmare charged a fee by we					17-18? (a system v] No	where residents
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full cos	t accounting annua	lly and to develop	a system to
64.	If your local governmen	nt contracts for soli	d waste or recycling	g services, please re	port the annual cont	ract amount.	
					•		
	17,010		OR	year			
	\$			act (solid waste, and	d recycling)		
65.	Collection Programs: P collection programs for not available, please re	waste, recyclables	and yard waste inc	luding materials col			
	, ·	# 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*	8,000	5,840	586,752		586,752	100
	Recycling Program**	8,000	424.6	49,684		49,684	117
	Yard Waste Program	8,000	2,914.5	449,537		449,537	154
	Totals	(calculated by form):	9,179.1	1,085,973		1,085,973	118
	*for materials collected and	_	=				
	**for materials collected by		-		_	_	
66.	If your government operations (round)	nd to nearest dollar)). If budgets for dif	ferent facilities are			
		dfill Budget:					-
		sfer Station Budget	•				
		Waste / Compost I					
	·	cling Facility Budg					
67.	What was your governr	ment's total combine	ed annual budget fo	or all solid waste and	d recycling services	in 17-18? \$	

Part VIII. County Mandated Programs

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

WH	ITE GOODS					
68.	Please provide name, address, phone number, and	e-mail of person	respons	_	program.	
	Name:			Title:		
	Address:	C	ity:		Zip:	
	Telephone: Fax:			Email:		
69.	Please provide the physical address of the primary	county white goo	ods colle	ection site.		
	Street 1:					
	Street 2:					
	City:				Zip:	
70.	Please provide the name of the business or person Name:				om white goods.	
	Street:					
	City:		State:	North Carolina	Zip:	
	Phone: Fax:					
71.	Give amounts / types of CFCs removed. Attach rec					
	Type of CFC Removed				Amount	_
72.	CFCs may be recycled or sent for destruction. Give	e name of firm, d	isposal	method and amount	earned / spent for CF0	C disposal.
	Firm	M	ethod of	f Disposal	Amount Earned	Amount Spent
73.	Please report the tonnage of white goods collected white goods tonnage reported on page 5? Ye	•	·18 in th	e Recycling Tonnag	es table on page 5 (qu	estion # 45). Was
74.	List the amount of revenue for the white goods pro	ogram by source:				
	Revenue collected from sale of scrap:	\$				
	Revenue collected from White Goods Tax Distribu	utions: \$				
	Revenue from other source (e.g. grants):	\$				
	Total Revenue:	\$				
75.	According to the White Goods Law, White Good expenditures White Good Tax Distributions were used to the Cook of th					mounts and types of
	Operational Expenses: \$					
	~					
	Clean-up of Illegal White Goods Dumps: \$					
	Total Expenditures: \$					

SC.	RAP TIRES					
76.	Please provide name, address, phone number, and e-n Name:	•	-			
	Address:				Zip:	
	Telephone: Fax:		Emai	1:		
77.	Please provide the physical address of the primary con Street 1:	-				
	Street 2:					
	City:		State: North	n Carolina	Zip:	
78.	Tonnage/Number of scrap tires disposed July 1, 2017 Tons or	-June 30, 201	8 (<u>excluding</u> tin	res from cleanup of nu Number of tires	iisance sites)	
79.	Tonnage/Number of scrap tires disposed from cleanu Tons or		ounty designate	ed nuisance sites Number of tires		
80.	Indicate the types of tires collected by the county: Passenger % Heavy True	ck	%	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 Reimbursements:					
	Revenue from Scrap Tire Cost-Overrun Grants:					
	Total Revenue:	\$				
82.	County's total scrap tire program contract expenditure excluding costs of nuisance tire cleanups, for FY 17-1	(contract dis	posal/hauling c	osts), \$		
83.	County's additional scrap tire program expenditure (i. 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 cont	ract cost abo	ove. \$	/ Ton; \$	/ Tire	
86.	Total tipping fees collected for tires not eligible for fi	ee disposal. S	S			
87.	Total number of tires collected not eligible for free di	sposal:				
88.	If scrap tires were not hauled off site by contracted se	rvice provide	r, were they cu	t and disposed in a loc	al landfill? Yes	No
89.	Name of tire disposal/recycling firm(s):					
TE	MPORARY DISASTER DEBRIS STAGIN					
90.	Does your local government have a plan in place for i	nanagement (of disaster debr	is? Yes	No No	
	If yes, indicate if the plan is a stand-alone plan or in c	onjunction w	ith local govern	nment agencies:	Stand-alone In conju	nction
91.	If you indicated having a plan, has the plan been revier requirements for public assistance reimbursement in a			anagement or FEMA t	to ensure it meets the basic No	
92.	Please list the name, contact numbers(s), and e-mail a	ddress of the	person(s) in ch	arge of the disaster de	bris management program	for
	your local government: Name: Name	:		Name:		
						
	E-mail: E-mai					
						

Disaster Site #	Site Name	Disaster Site #	Site Name
Does your plan address the	management of household hazardous	waste and white goods following	ng a disaster? Yes No
Does your plan address ma	ass animal mortality? Yes	No	
NAGEMENT OF AB	ANDONED MANUFACTURE	ED HOMES BY COUNT	CIES
Has your county considere	d whether to implement a program for	the management of abandoned	manufactured homes? Yes
If yes, has your county dev	reloped a written plan for the managem	ent of abandoned manufactured	d homes? Yes No
nis section to elaborate on a		Comments essary. We would appreciate y	our comments about this report or
his section to elaborate on a	Part IX. (any info provided in your report as nece	Comments essary. We would appreciate y	our comments about this report or
his section to elaborate on a	Part IX. (any info provided in your report as nece	Comments essary. We would appreciate y	our comments about this report or o
his section to elaborate on a	Part IX. (any info provided in your report as nece	Comments essary. We would appreciate y	our comments about this report or o
his section to elaborate on a	Part IX. (any info provided in your report as nece	Comments essary. We would appreciate y	our comments about this report or o
his section to elaborate on a	Part IX. (any info provided in your report as nece	Comments essary. We would appreciate y	our comments about this report or o
his section to elaborate on a	Part IX. (any info provided in your report as nece	Comments essary. We would appreciate y	our comments about this report or o
his section to elaborate on a	Part IX. (any info provided in your report as nece	Comments essary. We would appreciate y	our comments about this report or o
his section to elaborate on a	Part IX. (any info provided in your report as nece	Comments essary. We would appreciate y	our comments about this report or o

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

