

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: **NEWTON GROVE**

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 Lgt	eam@ncdenr.gov by September 1	, 2018.
	If you have questi	ons or need assistance comple	ting this form, please call 919-7	707-8136 or 919-707-8133.
Per	rson Completing This Report	: AMANDA TURNER	Title:	ΓOWN CLERK
Ma	ailing Address: PO BOX 4		City: NEWTON GROVE	Zip: 28366
Pho	one: 910-594-0827	Fax: 910-236-9018	D	Pate: 10/16/18
Em	nail: TOWNCLERK@NEWT	ONGROVE.NET		
		Gene	eral Instructions	
	ase remember that the time passe a specific question.	eriod for the report is JULY 1, 20	17 through JUNE 30, 2018. Please	check "No" if you have nothing to report
1.	Did your local government	t have a Recycling Coordinator or	similar position for FY 17-18?	Yes No
	Name Recycling Coordina	tor (if different from person comp	pleting this report.)	
	Name:		Title:	
	Address:		City:	Zip:
	Telephone:	Fax:	Email:	
2.	Did your local government	t have a Solid Waste Director or s	imilar position for FY 17-18?	Yes No
۷.	If Yes, Name:		Title:	
	Address:		City:	Zip:
	Telephone:	Fax:	Email:	
3.	Did your local government	have dedicated or part-time So	lid Waste Enforcement Staff for FY	Y 17-18?
	If Yes, Name:		Title:	
	Address:		City:	Zip:
	Telephone:	Fax:	Email:	
4.	Did your local government all that apply)	have solid waste ordinances in p	lace addressing any of the followin	g during FY 17-18? (if yes, please check
	Disposal Bans	☐ Illegal Dumping ☐ Litteri	ing Other, Please Describe:	
5.	Did your local government mulching, composting)?	manage, provide or contract for a	•	8 (e.g., collection, disposal, recycling, Yes No
	If you area	nor "No" to question 5 the ren	ort is complete please email to I	ateam@nedonr acv

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

	Curbside			Drop-off		r'' Programs	Total Tons (totals are calculated by form)	
PROGRAM	⊠ if Yes Tons		⊠ if Yes	⊠ if Yes Tons		Tons		
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								
Cartons / Aseptic Containers								
WOOD:								
Pallets								
Other Wood - DO NOT								
report yard waste tons here								
OTHER MATERIALS:								
Textiles (clothes etc)								
Televisions					\perp			
Other Electronics					\perp			
C&D Materials Recycling								
					<u> </u>			
			<u> </u>					
Commingled tons-check all items collected above								
TOTAL TONS:			_					
DECYCLING TONN	ACEACAI		OLICY OD C					

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)

	Programs for Collecting Citizens by Material Type		n collect this m the public?	# of sites			lected / manag dicated units.	ed.	
Used Motor Oil		Yes	⊠ No				gallor	S	
Used Oil Filters		Yes	⊠ No		barr	els, or	•	lbs	
Used Antifreeze		Yes	⊠ No			<u>'</u>	g	allons	
Batteries, Lead Ac	eid	Yes	⊠ No		# t	atteries, c	or	lbs	
Batteries, Dry Cell	1	Yes	⊠ No					lbs	
Fluorescent Bulbs/	Lights Containing Mercury	Yes	⊠ No			lbs, or	# t	oulbs	
Propane Tanks		Yes	⊠ No			lbs, or _	#	tanks	
Used Cooking Oil	/ Waste Vegetable Oil	Yes	⊠ No			lbs, or _	g	allons	
Other Special Was	stes - please provide waste	Yes	⊠ No					lbs	
Pesticide Containe pesticides themsel	ers (NCDA Program, not ves)	Yes	⊠ No			lbs, or		con-	
	Disposal Assistance Program of pesticides, not containers)	☐ Yes	⊠ No					lbs	
	ot include paint collected at a paint exchange program)	Yes	No No			gals, or		lbs	
 b. How many day c. Did you partne Please list partre d. Provide numbe e. Did your prografy yes, please est f. Amounts of incabout individual Note, materials Used Manual Library Used A 	er of citizens / households that cam accept materials from smastimate the amount of business dividual materials collected by all materials is not available, possible listed here should only be the Motor Oil (gal) Antifreeze (gal)	participated all businesses as material may HHW Prograte lease simply pose collected Use Lea	in your HHW (Conditionall anaged ram: if totals f provide total cat an HHW Pad Oil Filters d Acid Batter	collection of individuantity rogram a	ent? Yes on program this of Small Quanticular materials a of materials colund should not in # of Barrels,	Fiscal Ye ty Genera pounds are known lected by nclude ma	ear?	ee belom in 4	8g below. stion 47.
	scent Bulbs / Lights Containing				_				
reported in 48f.	Quantity of materials collected, please net the weight of those W Collection Contractor	•	ut of the total	listed he	ere.				pound
i. Estimated cost	of HHW / CESQG program of the complete ould have only been complete output the complet								

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.

This	rartiv. Taru was	<u> </u>				
	section concerns management of vegetative remitted sites and it is illegal to burn. Compost					
	at your management of vegetative materials. Do					
49.	Does your local government operate a yard was checking all that apply: Collected curbside			-	•	ow yard waste is managed by
50.	Did a storm event significantly impact the amou				•	
51.	What quantities of materials were managed by y	-		_	_	
	organic material (yard waste, brush, limbs, le					
	Destination	Check if used	Tons	Cubic Yards		Name and Location of Facility g Vegetative Materials
	End user (to farmer or home-owner)					
	Your local government's mulch or compost facil	lity 🔲				
	Other public mulch or compost facility					
	Private mulch or compost facility					
	Land clearing and inert debris landfill (LCID)					
	Energy / Fuel Use (e.g. boiler fuel market)					
	Total					
	YARD WASTE MANAGEMENT FORMULA					
	estimate yard waste volume. Calculate for each					
	volume managed by program in the appropriateX					vd ³
	Size of Truck (in yards) Avg. no. of times to					TOTAL
			Vaste Colle			
This	section concerns your local government's provise					
52.	•					
	Sector Who Collects Solid Waste? Insert Letter - see codes at right	II		ight Will C	ollects Solid Waste?	How is Solid Waste Collected? es 1. Once a week at household
	Residential Primary B Secondary	Primary	1 Secondary	b. By C		2. Twice a week at household3. Convenience center/greenbox
	Commercial Primary Secondary	Primary	Secondary	d. Local	government not	4. As needed or by request
	Industrial Primary Secondary	Primary	Secondary	servio	ved in provision of ce	5. Daily 6. Other
53.	If you provide <u>residential</u> waste collection at sin	gle-family	households in y	our jurisdiction	, please answer the	e following questions:
	What type of collection method is used?	Fully Aut	tomated S	Semi-Automate	d Manual	Don't know
	What is the standard collection frequency?	Weekly	☐ Two tim	nes per week	Other	
	What is the typical service point for single famil	ly househol	ld waste?	Curbside [Back yard / Ba	ck door
	What type of collection container is used?	Governm	ent-provided ca	rts Resid	ent-provided conta	ainer Bags
	Do you offer bulky waste collection services?	Yes	No No			
54.	For municipalities - did your government collec	C		Yes	No	
	If so, were white goods delivered to the county			☐ No		
	Part VI. Solid W		• •	_		
55.	Did your local government have an education prissues / activities? Yes No (I		inform citizens to Part VII, page		out solid waste ma	nagement and / or recycling
56.	Please estimate your annual budget for solid wa	ste related	education and o	utreach activitie	es: \$	
57.	Does your community produce recycling educat	tion and ou	treach materials	in languages be	esides English?	Yes No
	If YES, please list other languages used:					
58.	Please provide your recycling website address a	and public in	nformation phoi	ne number if ap	plicable.	
	Website:				Phone #:	

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

	ficient resources availab estions deal with funding					these programs.	The following		
•	Did your local governn			0		Yes No)		
60.	With regards to funding	g sources, check all	that apply to your	local government:	_				
	Tipping fees			eight-based fees (e.g	· —	re tax			
	☐ Property tax ☐ Per househo	es / general fund	Sale of recy Grants	yclables		hite Goods tax isposal Tax			
61.	NC Solid Waste Dispos	0		ible local governme		_	nent of Revenue.		
	According to GS 105-1								
	How are disposal tax d	•							
62.	If applicable, please pr								
	a. \$ \frac{11.75}{}	per montr	1	per contain	er	for solid waste	e		
	b. \$	per		per		for recycling			
	c. \$	per		per		for yard waste	;		
	d. \$	per		per		for bulky was	te		
	e. \$	per		per		availability fe	<u>e</u>		
	f. \$ 11.75	per month	1	per contain	er	total charge			
63.	Did your local governm								
	are charged a fee by we					No			
	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 recyclin	g services, please re	port the annual contr	act amount.			
	\$32,761.96		For solid waste s	-					
	\$		For recycling per						
	·		OR	J • • •					
	\$		Combined Contr	act (solid waste, an	d recycling)				
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials co					
	200 u (u 200) p 20 u 20 2	# of Households			Disposal Cost	Total Cost	Cost Per Ton		
		served	Tons Collected	Collection Cost	(tipping fees paid)	including overhead	Managed (calculated by form)		
\mathbf{N}	Iunicipal Solid Waste*	229	301.82			32,761.96	108		
	Recycling Program**								
	Yard Waste Program								
	Totals	(calculated by form):	301.82			32,761.96	108		
	*for materials collected and	<u> </u>	sal in a Municipal Solid	Waste or Construction a	and Demolition Landfill.				
	**for materials collected by public recycling programs including those services offered to commercial and industrial generators. Do not include special waste services. If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide total budget for								
66.									
	* *	facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate costs proportionately. Landfill Budget: \$							
	Tran	sfer Station Budget	:: \$				_		
	Yard	Waste / Compost l	Facility Budget: \$						
		cling Facility Budg							
67.	What was your governi	ment's total combin	ed annual budget fo	or all solid waste an	d recycling services i	n 17-18? \$36,000			

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, phor	ne number, and e	-mail of persor	respons	•	program.	
	Name:				Title: _		
	Address:		(City:		Zip:	
	Telephone:						
69.	Please provide the physical address	of the primary of	county white go	ods coll	ection site.		
	Street 1:						
	Street 2:						
	City:						
70.	Please provide the name of the bus Name:	-				om white goods.	
	Street:						
	City:			State:	North Carolina	Zip:	
	Phone:	Fax:		_ Email	:		
71.	Give amounts / types of CFCs reme		ords of CFC rea	moval, aı	nd copy of certificati		rming extraction.
	Type of CF(Removed				Amount	
				-			
				-			
72	CECs man be married an east for a	lastmatica Cias		4:1		and for CE	C diamana1
72.	CFCs may be recycled or sent for o	lestruction. Give			f Disposal	Amount Earned	
					•		
73.	Please report the tonnage of white white goods tonnage reported on pa		_		e Recycling Tonnag	ges table on page 5 (qu	nestion # 45). Was
74.	List the amount of revenue for the	white goods prog	gram by source				
	Revenue collected from sale of scr	ap:	\$				
	Revenue collected from White Goo	ods Tax Distribut	tions: \$				
	Revenue from other source (e.g. gr	ants):	\$				
	Total Revenue:		\$				
75.	According to the White Goods Law expenditures White Good Tax Dist						mounts and types of
	Operational Expenses:	\$					
	Capital Improvements:						
	Clean-up of Illegal White Goods D						
	Total Expenditures:	\$					

5 C.	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.		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 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						
							

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

