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: <u>http://deq.nc.gov/about/divisions/waste-management/solid-waste-section/annual-reporting</u>
- 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: <u>https://get.adobe.com/reader/</u> - 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

Environmental Quality

Required - Enter Your Local Government Name: Pilot Mountain

State of North Carolina

Local Government Report Form

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	Lgteam@ncdenr.gov by	September 1, 2018.
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If you have questions or need assistance completing this form, please call 919-707-8136 or 919-707-8133.

Per	son Completing This Repo	rt: Ronald L. Holt	Title	e: Public Wo	rks Director
Ma	iling Address: 124 West M	ain Street, Box 1	City: Pilot Mountain		Zip: 27041
Pho	one: (336) 368-2248 Ext: 10	005 Fax:		Date: Augu	st 28, 2018
Em	ail: rholt@pilotmountainnc	c.org			
			General Instructions		
	se remember that the time a specific question.	period for the report is JULY	1, 2017 through JUNE 30, 2018. Plea	ase check "N	o" if you have nothing to report
1.	Did your local governme	nt have a Recycling Coordinat	or or similar position for FY 17-18?	Yes	🔀 No
	Name Recycling Coordin	nator (if different from person o	completing this report.)		
	Name:		Title	:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
2.	Did your local governme	nt have a Solid Waste Director	or similar position for FY 17-18?	Yes	🔀 No
	If Yes, Name:		Title	:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
3.	Did your local governme	nt have dedicated or part-tim	e Solid Waste Enforcement Staff for	FY 17-18?	Yes No
	If Yes, Name:		Title	:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
4.	Did your local governme all that apply)	nt have solid waste ordinances	in place addressing any of the follow	ving during F	Y 17-18? (if yes, please check
	Disposal Bans	\bigotimes Illegal Dumping \bigotimes L	ittering Other, Please Describe	:	
5.	Did your local governme mulching, composting)?	nt manage, provide or contract	for any solid waste services in FY 1'	7-18 (e.g., co X Yes	llection, disposal, recycling,
		swer "No" to question 5, the	report is complete, please email to		

	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.					
6.	Did your local government have a recycling program in place for collecting recyclable materials generated at Yes No public buildings in FY 17-18?					
7.	Did your local government have any program or policy encouraging or requiring local agencies to Yes No purchase products with recycled content?					
8.	Did your local government have a program in place to collect and recycle spent fluorescent lights 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					
SO	URCE REDUCTION / REUSE					
9.	Did your local government have a backyard composting program? Yes No					
10.	If yes, please check all backyard composting activities that apply:					
	Education Demonstration site(s) Bin distribution/sales Number of Bins distributed?					
11.	Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives?					
12.	Did your local government offer a waste exchange or reuse program? Yes 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.)					
PU	BLIC RECYCLING SERVICES					
14.	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).					
CU	RBSIDE RECYCLING PROGRAM					
15.	Did your government operate a Curbside Recycling Program? 🔀 Yes 🗌 No, skip to question # 25					
16.	Who collected the recyclable materials for your local government's curbside recycling program?					
	Local government employees					
	Private contractor (please specify) Waste Management					
	Franchised hauler (please specify)					
	Other (please specify)					

17.	 Please provide the following information about your community: a. Total number of households in your jurisdiction? 900 					
	b. Number of households eligible to participate in the curbside recycling program: 540					
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 475					
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?					
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?					
22	Conter					
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 Collected Collected					
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used: Iss than 50 gallon cart 65 gallon cart 95 gallon cart multiple sizes of cart available					
DR	OP-OFF RECYCLING PROGRAM					
25.	Did your government operate a Drop-off Recycling Program? Yes Xo, 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? All None Some please list # of staffed sites:					
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 Xo, 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 progra	am collect or acce	pt 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?

OTHER PUBLIC RECYCLING PROGRAMS

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

	Did your local government operate a multifamily recycling collection program that provides on-property recycling service for residen	ts
	of multifamily properties in a manner other than through your curbside or dropoff recycling programs? Yes No	
39.	Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner	ſ
	other than through your curbside or dropoff recycling programs? \Box Yes \boxtimes No	

40.	Does your local government	t provide recycling	services to Alcoholic	Beverage Commission	permit holders?	Yes	No No
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On-site collection services provided If on-site collection provided, please	e estimate # of ABC accounts served:
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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:			

		siung	Jimgies	Inicials	
42.	Does your local government have an ordinance regulating the construction a with the intention of encouraging or requiring waste reduction or recycling or	and demolition to these materia	waste stream als?	m Yes	X No

Vinvl siding

Shingles

Metals

Other

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

Clean Wood Brick concrete etc Sheetrock

- 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 each individual material type that was commingled.

DROCRAM	(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		5.96					5.96
Brown		3.72					3.72
Green		5.21					5.21
Mixed							
PLASTIC:							
PET #1		2.35					2.35
HDPE #2		5.21					5.21
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans		1.49					1.49
Steel Cans		3.72					3.72
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)		46.17					46.17
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper							
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled tons-check all							
items collected above							
TOTAL TONS:		73.83					73.83

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 <u>only</u> 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.

a		**7 4	A H U			36 / 13	A H A H			A H H	D	
S	pecial	Waste	Collections	(Do No	t Include	Materials	Collected	as part of	t an HHW	Collection	Program	or Event)

4

Used Motor Oil □ Yes No	47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		n collect this m the public?	# of sites	-		ected / manage icated units.	ed.				
Used Antifreeze □ yes No gallons Batteries, Lead Acid □ Yes No		Used Motor Oil	Yes	🛛 No				gallons	5				
Batteries, Lead Acid Yes No # batteries, or bbs Batteries, Dry Cell Yes No Ibs ibs Fluorescent Bulbs/Lights Containing Mercury Yes No Ibs, or # bulbs Propane Tanks Yes No Ibs, or # bulbs Other Special Wastes - please provide waste Yes No Ibs, or # anks Used Cooking Oil / Waste Vegetable Oil Yes No Ibs, or # anks Used Cooking Oil / Waste Vegetable Oil Yes No Ibs, or # anks Used Cooking Oil / Waste Vegetable Oil Yes No Ibs, or # anks Use hore: Yes No Ibs, or # con- tainers NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) Yes No Ibs Huwerhold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event 48. Did your local government operate a household hazardous waste collection program or event in FY 17-18? Yes No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permane		Used Oil Filters	Yes	🛛 No		barı	rels, or		lbs				
Batteries, Dry Cell Yes No		Used Antifreeze	Yes	🛛 No				ga	llons				
Pluorescent Bulbs/Lights Containing Mercury Yes No ibs. or # bulbs Propane Tanks Yes No ibs. or # tanks Used Cooking Oil / Waste Vegetable Oil Yes No ibs. or # tanks Used Cooking Oil / Waste Vegetable Oil Yes No ibs. or # tanks Other Special Wastes - please provide waste Yes No ibs. or # tanks Pesticide Containers (NCDA Program, not Yes No ibs. or # compesticides themselves) NDDA Pesticide Disposal Assistance Program Yes No ibs # compesticides.not containers) Itares Paint (do not include paint collected at HHW event or by a paint exchange program) Yes No gals. or ibs Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event 48. Did your local government operate a household hazardous waste collection program or event in FY 17-18? Yes No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Focility? Permanent Temp. Eve b. Ho your program accept materials and using this Fiscal Year? . Did your program accept materials and any and bu		Batteries, Lead Acid	Yes	🛛 No		#t	patteries, or	r	lbs				
Propane Tanks		Batteries, Dry Cell	Yes	🛛 No					lbs				
Used Cooking Oil / Waste Vegetable Oil Yes No Ibs, or gallons Other Special Wastes - please provide waste type here: Yes No Ibs, or gallons Pesticide Containers (NCDA Program, not pesticides themselves) Yes No Ibs, or galos, or galos, or NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) Yes No gals, or ibs HHW event or by a paint exchange program Yes No gals, or ibs HUW event or by a paint exchange program Yes No gals, or ibs HUW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Eve b. How many days was your HHW program open to accept materials during this Fiscal Year? No Pesse ist partner(s) d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year? No Pesse itemp opum as f. Amounts of individual materials form small businesses (Conditionally Exempt Small Quantity of materials are known please itemize below. If da about individual materials iscollected by HHW Program: if totals for individual materials instel were may Yes No e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity of		Fluorescent Bulbs/Lights Containing Mercury	Yes	🛛 No			lbs, or	# b	ulbs				
Other Special Wastes - please provide waste type here: Yes No Ibs Other Special Wastes - please provide waste type here: Yes No Ibs Pesticide Containers (NCDA Program, not pesticides themselves) Yes No Ibs, or Its NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers) Yes No Ibs Ibs Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Yes No gals, Ibs Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event 48 Did your local government operate a household hazardous waste collection program or event in FY 17-18? Yes No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Eve b. How many days was your HHW program open to accept materials during this Fiscal Year? Eoid you partner or co-sponsor your HHW program with another local government? Yes No Please list partner(s)		Propane Tanks	Yes	No No			lbs, or	#	tanks				
type here: Image: Second S		Used Cooking Oil / Waste Vegetable Oil	Yes	No No			lbs, or	ga	llons				
pesticides themselves) Image restricted Disposal Assistance Program (for management of pesticides, not containers) Yes No Its Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Yes No gals, or Its HUW event or by a paint exchange program) Yes No gals, or Its HUW event or by a paint exchange program) Yes No gals, or Its HUW event or by a paint exchange program) Yes No gals, or Its HUW event or by a paint exchange program) Yes No gals, or Its HUW event or by a paint exchange program) Yes No gals, or Its HUW event or by a paint exchange program Yes No Permanent FY 17-18? Yes No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event b. How many days was your HHW program open to accept materials during this Fiscal Year?			Yes	No No					lbs				
(for management of pesticides, not containers) Yes No Its Latex Paint (do not include paint collected at HHW event or by a paint exchange program) Yes No gals, or Its Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event 10s No Its 48. Did your local government operate a household hazardous waste collection program or event in FY 17-18? Yes No Its a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Eve b. How many days was your HHW program open to accept materials during this Fiscal Year? . . c. Did you partner or co-sponsor your HHW program with another local government? Yes No Please list partner(s)			No No			lbs, or							
HHW event or by a paint exchange program) Yes Image: No or Image: No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event Did you partner or co-sponsor your HHW program open to accept materials during this Fiscal Year? Image: No Please list partner(s) Image: No Please: No Please list individual materials from small bu			Yes	No No					lbs				
 48. Did your local government operate a household hazardous waste collection program or event in FY 17-18? Yes No If Yes, please respond to the following questions: a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event b. How many days was your HHW program open to accept materials during this Fiscal Year? c. Did you partner or co-sponsor your HHW program with another local government? Yes No 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 f. Amounts of individual materials collected by HHW Program: if totals for individual materials collected by HHW Program. If total quantity of materials listed in question 47 Used Motor Oil (gal) Used Motor Oil (gal) Used Oil Filters # of Barrels, or bls. Used Antifreeze (gal) Event Lead Acid Batteries (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs) g. Provide Total Quantity of materials collected by HHW Program. If individual materials were reported in 48f, please net the weight of those materials out of the total listed here. h. Please list HHW Collection Contractor i. Estimated cost of HHW / CESQG program or event(s) \$ 		· · · · · ·	Yes	No No					lbs				
Fluorescent Bulbs / Lights Containing Mercury (lbs)		 Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma If yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, p Note, materials listed here should only be th Used Motor Oil (gal) 	all businesses all businesses s material ma y HHW Progr lease simply ose collected Use	in your HHW (Conditionall anaged ram: if totals f provide total c at an HHW P ed Oil Filters	or indivi quantity	on program this of Small Quanti dual materials of materials col and should not i _ # of Barrels,	s Fiscal Yea ity Generate pounds are known llected by H include mate or	ors)? Y please itemize HW program terials listed in lbs.	e below. If data n in 48g below. n question 47.				
 g. Provide Total Quantity of materials collected by HHW Program. If individual materials were reported in 48f, please net the weight of those materials out of the total listed here. h. Please list HHW Collection Contractor i. Estimated cost of HHW / CESQG program or event(s) \$ 							Other Batte	eries (lbs)					
 h. Please list HHW Collection Contractor i. Estimated cost of HHW / CESQG program or event(s) \$ 		g. Provide Total Quantity of materials collected by HHW Program. If individual materials were											
i. Estimated cost of HHW / CESQG program or event(s) \$			h Please list HHW Collection Contractor										
		i. Estimated cost of HHW / CESQG program	or event(s) \$										
rages 5 intough 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling servic	Pag						hat they D	O provide red	cycling services				

2017-2018 Local Government Annual Report *Report Due Date: September 1, 2018* Submit to: Lgteam@ncdenr.gov

is only to be completed by Counties.

Part IV. Yard Waste, Mulching and Composting Management

This section concerns management of vegetative materials. Yard waste may not be disposed in sanitary landfills, incinerators, or in unpermitted sites and it is illegal to burn. Composting and mulching are popular management options. Please answer the questions below about your management of vegetative materials. Do not include information on food waste or non-vegetative materials in this section.

- 49. Does your local government operate a yard waste program? ⊠ Yes □ No If yes please indicate how yard waste is managed by checking all that apply: ⊠ Collected curbside □ Collected at convenience center □ Received at yard waste, compost, or LCID facil.
- 50. Did a storm event significantly impact the amount of yard waste your government managed during FY 17-18? 🗌 Yes 🛛 No
- 51. What quantities of materials were managed by your yard waste program? Provide information in TONS OR CUBIC YARDS of
 - organic material (yard waste, brush, limbs, leaves, etc.) managed. For conversion purposes, use 400 lbs./cubic yd.

Destination		Tons	Cubic Yards	Please Provide Name and Location of Facility Receiving Vegetative Materials
End user (to farmer or home-owner)	\boxtimes	213.6		
Your local government's mulch or compost facility				
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		213.6		

YARD WASTE MANAGEMENT FORMULA: If yard waste quantities are not tracked, you may use this formula below to help you estimate yard waste volume. Calculate for each truck used in your yard waste management program, and then enter the grand total volume managed by program in the appropriate boxes above. *Ex. 10 yd³ truck x 3 days/wk x 16 wks = 480 yd³*

Size of Truck (in yards)	Avg. no. of times truck fills each week	# of weeks truck is used during year	TOTAL

Part V. Solid Waste Collection Services

This section concerns your local government's provision of solid waste (garbage) collection services.

52. Please complete the following table about your government's solid waste collection system.

	Sector			Iow is Solid Waste Collected?			Who Collects Solid Waste?	How is Solid Waste Collected?					
			Letter -	see codes	U		rt # - se	ee codes at 1	right	a. Local government employees			
	Residential	Primary	b	Secondary		Primary	1	Secondary		 b. By Contract c. Franchise haulers 	 Twice a week at household Convenience center/greenbox As needed or by request Daily 		
	Commercial	Primary		Secondary		Primary		Secondary		d. Local government not involved in provision of			
	Industrial	Primary		Secondary		Primary		Secondary		service	6. Other		
53.	If you provide	residenti	<u>ial</u> was	te collect	ion at sin	gle-fam	ily hou	seholds in	your juri	isdiction, please answer the	following questions:		
	What type of co	ollection	n metho	od is used	?	Fully A	Autom	ated 🔀	Semi-A	utomated 🗌 Manual	Don't know		
	What is the standard collection frequency? 🔀 Weekly 🗌 Two times per week 🗌 Other												
	What is the typical service point for single family household waste? 🛛 🖾 Curbside 🗌 Back yard / Back door												
	What type of collection container is used? 🛛 Government-provided carts 🗌 Resident-provided container 🗌 Bags									iner 🗌 Bags			
	Do you offer be	ulky was	ste coll	ection ser	rvices?	Ye	es	No					
54.	For municipalit If so, were whi												
	7	-							2	icational Activities	2		
55.	Did vour local								0		nagement and / or recycling		
	issues / activitio				-			art VII, pag	-				
56.	Please estimate	your an	inual b	udget for	solid wa	ste relate	ed edu	cation and c	outreach	activities: \$			
57.	Does your com	munity]	produc	e recyclir	ng educat	ion and	outrea	ch materials	s in lang	uages besides English?	Yes No		
	If YES, please	list othe	r langu	ages used	1:								
58.	Please provide	your rec	cycling	website a	address a	nd publi	c info	mation pho	ne numl	ber if applicable.			
	Website:									Phone #:			

	Part VII. Resour	ces for Solid Waste M	Ianagement and Fu	all Cost Ac	counting
		aste management programs are munity's solid waste and materi		cess of these pr	ograms. The following
59. Did you	r local government operate	an Enterprise Fund for solid was	ste services in FY 17-18?	Yes	🔀 No
60. With re	gards to funding sources, ch	eck all that apply to your local g	government:		
[Tipping fees		based fees (e.g. PAYT)	Tire tax	
		fund Sale of recyclable	es	White Go	
2	Per household charges	Grants		Disposal 7	
		eeds are distributed to eligible lo funds must be used by a city of			
How ar	e disposal tax distributions l	being used?			
62. If applie	cable, please provide your F	Y 17-18 household fees. (e.g., c	a. <u>\$45.00</u> per <u>year</u> per <u>hous</u>	<u>ehold</u> for solid	waste)
a. \$ _	10.43 per	Month	per Household	for s	olid waste
b.\$_	per		per	for r	ecycling
c. \$	per		per	for y	vard waste
d. \$	per		per	for b	oulky waste
e. \$	per		per	avai	lability fee
f. \$	per		_ per	total	charge
		a Pay-As-You-Throw program to the amount of trash they		ng FY 17-18?(a system where residents
	to GS 130A-309.08, local g s of such costs.	overnments are required to con	nduct full cost accounting	annually and t	o develop a system to
64. If your	local government contracts	for solid waste or recycling serv	ices, please report the annua	al contract amo	unt.
\$		For solid waste service	es per year		
\$		For recycling per year			
		OR			
\$6	2,000	Combined Contract (se	olid waste, and recycling)		
65. Collecti	on Programs: Please comple	ete the following table to the best	st of your ability to display t	he full costs of	your local government's

collection programs for	waste, recyclables	and yard waste inc	cluding materials coll	lected from conven	ience centers. If fu	ill cost analys
not available, please r	eport program bu	dget in Total Cost	column.			

	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
Municipal Solid Waste*	540	346.6	41,333.33		41,333.33	119
Recycling Program**	Program** 540	73.83	20,666.67		20,666.67	279
Yard Waste Program	540	213.6	20,000		20,000	93
Totals	(calculated by form):	634.03	82,000		82,000	129

*for materials collected and sent for eventual disposal in a Municipal Solid Waste or Construction 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.
66. If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide total budget for facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate costs proportionately. Landfill Budget:

Transfer Station Budget:

Yard Waste / Compost Facility Budget: \$

Recycling Facility Budget:

67. What was your government's total combined annual budget for all solid waste and recycling services in 17-18? \$82,000

\$

\$

2017-2018 Local Government Annual Report *Report Due Date: September 1, 2018* Submit to: Lgteam@ncdenr.gov

Part VIII. County Mandated Programs

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

WH	IITE GOODS										
68.	Please provide name, address, phone number, and e-mail of person responsible for white goods program.										
	Name:		<u> </u>	Title:							
	Address:			City:							
	Telephone: Fa	ıx:		Email:							
69.	Please provide the physical address of th	e primary co	ounty white go	oods collection site.							
	Street 1:										
	Street 2:										
	City:			_ State: North Carol	lina	Zip:					
70.	Please provide the name of the business Name:	-			Cs) from whit	e goods.					
	Street:										
	City:				ina	Zip:					
	Phone: Fax:										
71.	Give amounts / types of CFCs removed.										
	Type of CFC Ren					ount					
72.	CFCs may be recycled or sent for destru-	ction Give r	name of firm	disposal method and a	mount earned	/ spent for CE(7 disposal				
12.	Firm			Iethod of Disposal		ount Earned	Amount Spent				
73.	Please report the tonnage of white goods white goods tonnage reported on page 5		uring FY 2017		Fonnages table	e on page 5 (qu	estion # 45). Was				
74.	List the amount of revenue for the white	goods progr	am by source	:							
	Revenue collected from sale of scrap:		\$								
	Revenue collected from White Goods Ta	ax Distributi									
	Revenue from other source (e.g. grants):										
	Total Revenue:										
75.	According to the White Goods Law, Whee expenditures White Good Tax Distribute						mounts and types of				
	Operational Expenses:	\$			_						
	Capital Improvements:										
	Clean-up of Illegal White Goods Dumps										
	Total Expenditures:	\$			-						
201	17-2018 Local Government Annual Report	Report D	ue Date: Sep	tember 1, 2018 Subr	- mit to: Lgteam	@ncdenr.gov	Page 9 of 11				

6.	Please provide name, address, phone number, and e-mail of person responsible for scrap tires program.									
	Name:		1 ttle:							
	Address:									
	Telephone: Fax:		Ema	il:						
7.	Please provide the physical address of the primary county scrap tires collection site.									
	Street 1:									
	Street 2:									
	City:									
3.	Tonnage/Number of scrap tires disposed July 1, 2017-June 30, 2018 (<u>excluding</u> tires from cleanup of nuisance sites)Tons orNumber of tires									
).		nnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sitesTons orNumber of tires								
).	Indicate the types of tires collected by the county: Passenger % Heavy Tr	uck	%	Large Off-Road	%					
	List the amount of revenue for the scrap tire program	by sourc	e:							
	Revenue from Scrap Tire Tax Distributions:	\$								
	Revenue from Tire Fees:	\$								
	Revenue from Scrap Tire Clean-up Reimbursements	: \$								
	Revenue from Scrap Tire Cost-Overrun Grants:	<i></i>								
	Total Revenue:	\$								
2.	County's total scrap tire program contract expenditur excluding costs of nuisance tire cleanups, for FY 17-	e (contrac 18.	et disposal/hauling o	costs), \$						
3.	County's additional scrap tire program expenditure (i Labor \$		convenience center	cost), if any.						
	Site Cost \$									
	Other \$		describe Other:							
ŀ.	County's contract cost for scrap tire disposal. \$		/ Ton; \$	/ Tire						
j.	Hauling cost or fuel surcharge, if not included in cor	ntract cost	above. \$	/ Ton; \$	/ Tire					
j.	Total tipping fees collected for tires not eligible for	free dispo	sal. \$							
	Total number of tires collected not eligible for free c	_								
8.										
).										
	MPORARY DISASTER DEBRIS STAGIN									
).	Does your local government have a plan in place for			ris? Yes	No					
	f yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies: Stand-alone In conjunctio									
•	If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event?									
	Please list the name, contact numbers(s), and e-mail your local government:			harge of the disaster de	bris management program for					
	Name: Name	e:		Name:						
	Phone: Phone	e:		Phone:						
	E-mail: E-ma			E-mail:						

93. Please list the temporary disaster debris staging sites in your county or municipality which have been reviewed for conflicts with the Natural Heritage Program (NHP) and the State Historic Preservation Office (SHPO) through coordination with the Solid Waste Section. *Please note that the vetting of a site prior to a disaster is advantageous to local governments because a staging site which is found to have impacted federal or state resources after a disaster may cause difficulty for local governments when attempting to obtain FEMA reimbursement.* Attach extra sheets, if needed.

Disaster Site #	Site Name		Disaster Site #	Site Name			

94.	Does your plan address the management of household hazardous waste and white goods following a disaster?						
95.	Does your plan address mass animal mortality?						
MANAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES							
96.	Has your county considered whether to implement a program for the management of abandoned manufactured homes? 🗌 Yes 📄 No						
	If yes, has your county developed a written plan for the management of abandoned manufactured homes? Yes No						

Part IX. Comments

Use this section to elaborate on any info provided in your report as necessary. We would appreciate your comments about this report or other matters regarding solid waste management in North Carolina. Thank you for your time. You may submit additional sheets if needed.

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 <u>https://deq.nc.gov/conservation/</u>recycling/local-government-recycling-assistance or e-mail us at Lgteam@ncdenr.gov

