## **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



Local Government Report Form

**Required** - Enter Your Local Government Name: Pine Level

### **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

	MANDA	TE TO THE STATE A	S REQUIRED BY G.	S. 130A-309.	09A.	-
	Pl	ease submit this form to Lgtea	um@ncdenr.gov by Septem	ber 1, 2018.		
	If you have questions of	r need assistance completi	ng this form, please call	919-707-8136	or 919-707-8133.	
Per	son Completing This Report: RA	Y STUCKEY	Т	itle: PUBLIC V	VORKS SUPERINTENDE	NT
Ma	iling Address: PO BOX 328		City: PINE LEVEL		Zip: 27568	
Pho	one: 919-965-2284	Fax: 919-965-0066		Date: AUG	UST 9, 2018	
Em	ail: publicworks@pinelevel.org					
		Genera	al Instructions			
	ase remember that the time period a specific question.	for the report is JULY 1, 2017	<sup>7</sup> through JUNE 30, 2018. 1	Please check "N	o" if you have nothing to re	port
1.	Did your local government have	a Recycling Coordinator or s	imilar position for FY 17-18	8? Xes	No	
	Name Recycling Coordinator (if	different from person comple	ting this report.)			
	Name:		T	itle:		
	Address:		City:		Zip:	
	Telephone:	Fax:	Email:			
2.	Did your local government have	a Solid Waste Director or sin	nilar position for FY 17-18?	Yes	No	
	If Yes, Name: RAY STUCK	EY	Т	itle: PUBLIC W	ORKS SUPERINTENDE	ΙT
	Address: PO BOX 328		City: PINE LEVEL		Zip: 27568	
	Telephone: 919-965-2284	Fax: 919-965-0066	Email: publi	cworks@pinele	vel.org	
3.	Did your local government have	dedicated or part-time Solid	d Waste Enforcement Staff	for FY 17-18?	Yes No	
	If Yes, Name:		Т	itle:		
	Address:		City:		Zip:	
	Telephone:	Fax:	Email:			

Did your local government have solid waste ordinances in place addressing any of the following during FY 17-18? (if yes, please check 4. all that apply)

Disposal Bans	Illegal Dumping
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Other, Please Describe: Littering

Did your local government manage, provide or contract for any solid waste services in FY 17-18 (e.g., collection, disposal, recycling, 5. mulching, composting)? X Yes No

If you answer "No" to question 5, the report is complete, please email to Lgteam@ncdenr.gov.

	Part I. Waste Reduction and Recycling Programs Serving Government Facilities						
The	following questions pertain to waste reduction and recycling activities / programs that serve local government facilities.						
6.	Did your local government have a recycling program in place for collecting recyclable materials generated at Yes INO 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 <b>DID operate or contract</b> for a recyclables recovery program. (please continue to question 15)						
	My local government <b>DID NOT operate or contract</b> for recyclables recovery <b>BUT DID participate</b> in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; <b>then go to Part IV on page 7</b> .)						
	With which local government did you participate?						
	My local government <b>DID NOT operate, contract or participate</b> in a recycling program. ( <b>Go to Part IV on page 7</b> .)						
	If your local government <b>DID operate or contract</b> 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)						
	Franchised hauler (please specify)						
	Other (please specify)						

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction? 855
	b. Number of households eligible to participate in the curbside recycling program: 855
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 671
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: 40
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:          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 🛛 No, skip to question # 32
26.	Who collected the recyclable materials for your local government's drop-off recycling program? <ul> <li>Local government employees</li> <li>Private contractor</li> </ul>
	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
- DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was 35. 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: \$

Briefly explain how Electronics Management Funds were spent during FY 2017-18 (please list items purchased if applicable): 36.

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? No

#### 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.	

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

40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders?	Yes	🔀 No
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(	On-site collection services provided	If on-site collection provided, please 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:			

	Clean Wood	Brick, concrete, etc.	Sheetrock	Vinyl siding	Shingles	Metals	Other
42.	Does your local go	overnment have an ordinand	ce regulating the o	construction and dem	olition waste stre	am 🗌 Yes	🔀 No
	with the intention	of encouraging or requiring	g waste reduction	or recycling of these	materials?	105	

Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 17-18. 43. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)

Public Parks Recycling Program	Athletic Field /Venue Recycling Program

- Recycling Service for Special Events / Festivals Pedestrian Recycling Program
- Please identify all "Other" programs or services operated by your government during FY 17-18. (check all that apply and if possible 44 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 each individual material type that was commingled.

DROCRAM	Curbside			Drop-off	All "O	Other'' Programs	Total Tons
PROGRAM	⊠ if Yes	Tons	🛛 if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear	$\square$						
Brown	$\square$						
Green	$\square$						
Mixed	$\square$						
PLASTIC:							
PET #1	$\square$						
HDPE #2	$\square$						
All Plastic Bottles	$\square$						
Other Plastic Containers	$\square$						
Bulky Rigid Plastics							
METAL:							
Aluminum Cans	$\boxtimes$						
Steel Cans	$\square$						
White Goods	$\square$						
Other Metal							
PAPER:							
Newsprint (ONP)	$\square$						
Cardboard (OCC)	$\square$						
Magazines (OMG)	$\square$						
Office Paper	$\square$						
Mixed / Other Paper	$\square$						
Cartons / Aseptic Containers							
WOOD:							
Pallets	$\square$						
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions							
Other Electronics	$\square$						
C&D Materials Recycling							
Commingled tons-check all							
items collected above	$\boxtimes$	32.25					32.25
TOTAL TONS:		32.25					32.25

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

4

Used Motor Oil       Yes       No       gallons         Used Oil Filters       Yes       No       burrels, or       bbs         Batteries, Lead Acid       Yes       No       gallons       bbs         Batteries, Lead Acid       Yes       No       gallons       bbs         Batteries, Dry Cell       Yes       No       bbs       bbs         Propane Tanks       Yes       No       bbs, or       # bulbs         Propane Tanks       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         NCDA Pesticide Disposal Assistance Program       Yes       No       bbs, or       gallons         MCDA Pesticide Disposal Assistance Program       Yes       No       gallons       bbs         Houschold Hazardous Waste Chellwain docalizations       Yes       No       gallos       bbs	47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		n collect this m the public?	# of sites	1 0			
Used Antifreeze               Vestore              No              galons          Batteries, Lead Acid              Yestore              No              # batteries, or               Ibs          Batteries, Dry Cell              Yes               No               # batteries, or               Ibs          Fropane Tanks              Yes               No               Ibs, or               # tanks          Used Coxing Oil / Waste Vegetable Oil               Yes               No               Ibs, or               # tanks          Used Coxing Oil / Waste Vegetable Oil               Yes               No               Ibs, or               gallons          Other Special Wastes - please provide waste               Yes               No               Ibs          Pesticide Containers (NCDA Program, not             pesticides, not containers               Yes               No               gals               Ibs          Household Hazardoss Maste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event               Sol your local govermment oreparta is nous		Used Motor Oil	Yes	🛛 No				gallons	
Batteries, Lead Acid       □       Yes       No       # batteries, or       Its         Batteries, Dry Cell       □       Yes       No       □       Its         Fluorescent Bulbs/Lights Containing Mercury       Yes       No       □       bs, or       # bulbs         Propane Tanks       □       Yes       No       □       bs, or       # tanks         Used Cooking Oil / Waste Vegetable Oil       □       Yes       No       □       bs, or       # tanks         Other Special Wastes - please provide waste       □       Yes       No       □       bs, or       # tanks         Other Special Wastes - please provide waste       □       Yes       No       □       bs, or       # con-         Pesticide Containers (NCDA Program, not       □       Yes       No       □       bs, or       □       tanes         NCDA Pesticide Disposal Assistance Program       Yes       No       □       gals       □       □       bs         HCDA Pesticide Disposal Assistance Program       Yes       No       □       gals       □       □       bs         Hueschold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       48. Did your local government operate a houschold hazardous w		Used Oil Filters	Yes	🛛 No		barr	els, or	lbs	
Batteries, Dry Cell       □       Yes       No       □ <td></td> <td>Used Antifreeze</td> <td>Yes</td> <td>No No</td> <td></td> <td></td> <td></td> <td>gallons</td> <td></td>		Used Antifreeze	Yes	No No				gallons	
Fluorescent Bulbs/Lights Containing Mercury       Yes       No       bs. or       # bulbs         Propane Tanks       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # con-         Pesticide Containers (NCDA Program, not       Yes       No       bs. or       # con-         nearcoment of pesticides, not containers)       Yes       No       gals.       bs         HHW event or by a paint exchange program       Yes       No       gals.       or       bs         Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       48       bd       blo you containers)       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 program tore event in FY 17-18?       Yes       No		Batteries, Lead Acid	Yes	🛛 No		# b	atteries, or	lbs	
Propane Tanks       □       Yes       No       □       bbs, or       # tanks         Used Cooking Oil / Waste Vegetable Oil       □       Yes       No       □       bbs, or       gallons         Other Special Wastes - please provide waste       □       Yes       No       □       bbs, or       gallons         Other Special Wastes - please provide waste       □       Yes       No       □       bbs, or       # con-         Ipsticide Stemsselves)       □       Yes       No       □       bbs, or       # con-         NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)       Yes       No       □       gals, or       □       bbs         HIW event or by a paint exchange program       □       Yes       No       □       gals, or       □       bbs         HOUsehold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       1       Bos       Ibs         How event or by a paint exchange program)       □       Yes       No       □       □       □       □       □       Ibs       Ibs         Husehold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       1       No       □       □       □       <		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       # con- tainers         NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)       Yes       No       Ibs.       # bbs         NUCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)       Yes       No       Ibs.       # bbs         HHW event or by a paint exchange program)       Yes       No       gals.       Ibs.       # bbs         HUSehold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       148. Did your local government operate a household hazardous waste collection program or event in FY 17-182       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?		Fluorescent Bulbs/Lights Containing Mercury	Yes	🖂 No			lbs, or	# bulbs	
Other Special Wastes - please provide waste       Yes       No       Ibs         ivpe here:       Pesticide Containers (NCDA Program, not       Yes       No       Ibs, or       #con-tuiners         NCDA Pesticide Disposal Assistance Program       Yes       No       Ibs, or       #con-tuiners         NCDA Pesticide Disposal Assistance Program       Yes       No       Ibs, or       #toon-tuiners         NCDA Pesticide Disposal Assistance Program       Yes       No       Ibs       Ibs         Lates Paint (do not include paint collected at HWW event or by a paint exchange program)       Yes       No       Ipaint       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 Program or Event       b. How many days was your HHW Program open to accept materials during this Fiscal Year?       Permanent Collegian       Temp. Event         b. How goargam accept materials from small businesses (Conditionally Exempt Small Quantity Generators)?       Yes       No         ff yes, please estimate the amount of business material managed       pounds       f. Amoounts of individual materials collected by HHW		Propane Tanks	Yes	No No			lbs, or	# tanks	
type here:       Image: Second S		Used Cooking Oil / Waste Vegetable Oil	Yes	No No			lbs, or	gallons	
pesticides themselves)       Image: Im			Yes	No No				lbs	
(for management of pesticides, not containers)       Yes       No			Yes	No No			lbs, or		
HHW event or by a paint exchange program)       Image: Yes       Image: No       Image: Or       Image:		· · · ·	Yes	No No				lbs	
<ul> <li>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: <ul> <li>a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event</li> <li>b. How many days was your HHW Program open to accept materials during this Fiscal Year?</li> <li>c. Did you partner or co-sponsor your HHW program with another local government? Yes No</li> <li>Provide number of citizens / households that participated in your HHW collection program this Fiscal Year?</li> <li>e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? Yes No</li> <li>If yes, please estimate the amount of business material managed pounds</li> </ul> </li> <li>f. Amounts of individual materials collected by HHW Program: if totals for individual materials collected by HHW Program in 48g below. Note, materials listed here should only be those collected at an HHW Program. and should not include materials listed in question 47. Used Motor Oil (gal) Lead Acid Batteries (lbs) Other Batteries (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs)</li> <li>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.</li> <li>h. Please list HHW Collection Contractor</li> <li>i. Estimated cost of HHW / CESQG program or event(s) \$</li> </ul>			Yes	No No			-	lbs	
<ul> <li>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.</li> <li>h. Please list HHW Collection Contractor</li> <li>i. Estimated cost of HHW / CESQG program or event(s) \$</li> </ul>		<ul> <li>c. Did you partner or co-sponsor your HHW pr Please list partner(s)</li> <li>d. Provide number of citizens / households that</li> <li>e. Did your program accept materials from sma If yes, please estimate the amount of business</li> <li>f. Amounts of individual materials collected by about individual materials is not available, p Note, materials listed here should only be the Used Motor Oil (gal)</li> <li>Used Antifreeze (gal)</li> </ul>	ogram with a participated all businesses as material ma y HHW Progr lease simply ose collected Use Lea	in your HHW (Conditionall anaged ram: if totals f provide total c at an HHW P ed Oil Filters d Acid Batter	overnma collecti y Exemp or indivi juantity rogram a ies (lbs)	ent? Yes on program this pt Small Quantit idual materials a of materials coll and should not in _ # of Barrels,	Fiscal Year ty Generator pounds are known pl lected by HI nclude mate or	rs)? Yes hease itemize below HW program in 48 rials listed in quest lbs.	v. If data g below. tion 47.
reported in 48f, please net the weight of those materials out of the total listed here.		_							
i. Estimated cost of HHW / CESQG program or event(s) \$		reported in 48f, please net the weight of those		ut of the total	listed he	ere.			pounds
		i. Estimated cost of HHW / CESOG program of	or event(s) \$						
	Pag						at thev DO	provide recvcling	services.

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				Check if used Tons Cu		Cubi	Cubic Varde		ame and Location of Facility g Vegetative Materials	
	End user (to fa	rmer or	home-	owner)								
	Your local gov	ernment	's mul	ch or com	post facilit	у 🗌						
	Other public m	ulch or o	compo	st facility		$\square$		200.98			JOHNSTON COUNTY	LANDFILL
	Private mulch of	or comp	ost fac	ility								
	Land clearing a	and inert	t debris	s landfill (	LCID)							
	Energy / Fuel U	Jse (e.g.	boiler	fuel mark	tet)							
		r	Total					200.98				
	YARD WASTE MANAGEMENT FORMULA: If estimate yard waste volume. Calculate for each tru volume managed by program in the appropriate box 2 Ton truck = 2.70 yards X 2					ruck used	l in g	your yard wa	iste ma	nagemen	t program, and the	en enter the grand total
	Size of Truc	k (in yard	s)	Avg. no.	of times true	ck fills each	1 wee	ek # of weeks	truck is	used during	g year	TOTAL
				Pa	art V. S	Solid V	Va	ste Colle	ction	ı Servi	ces	
	section concern	•			*	•						
52.	Please complet									on system	l.	
	Sector			see codes				Waste Colle ee codes at ri			llects Solid Waste?	How is Solid Waste Collected?
	Residential	Primary	A	Secondary	-	·	1	Secondary	8	b. By Co	ontract	es 1. Once a week at household 2. Twice a week at household
	Commercial	Primary	A	Secondary	Р	rimary	1	Secondary		d. Local	nise haulers government not ed in provision of	<ol> <li>Convenience center/greenbox</li> <li>As needed or by request</li> </ol>
	Industrial	Primary	C	Secondary	Р	rimary	6	Secondary		service	5. Daily 6. Other	
53.	If you provide	resident	ial was	ste collecti	on at sing	le-family	hou	iseholds in y	our jur	isdiction,	please answer the	e following questions:
	What type of c	ollection	n meth	od is used	?	Fully Au	tom	ated 🖂 S	Semi-A	utomated	l 🗌 Manual	Don't know
	What is the star	ndard co	ollectio	on frequen	cy?	Weekly		Two tim	es per	week	Other	
	What is the typ	ical serv	vice po	int for sin	gle family	househo	ld w	vaste?	Curl	bside	Back yard / Ba	ck door
	What type of co	ollection	n conta	iner is use	d?	Governm	nent-	-provided car	ts	Reside	ent-provided conta	ainer 🗌 Bags
	Do you offer b	ulky was	ste col	lection ser	vices?	Xes Yes		No				
54.	For municipalit If so, were whi									Yes 🗌 No	No	
		]	Part	VI. So	lid Wa	ste an	d F	Recycling	g Edı	ication	nal Activitie	S
55.	Did <b>your local</b> issues / activitie	-	_		-	-		orm citizens art VII, page	-	cally abo	ut solid waste ma	nagement and / or recycling
56.	Please estimate	your ar	nnual b	udget for	solid wast	e related	edu	cation and ou	ıtreach	activitie	s: \$	
57.	Does your com	munity	produc	e recyclin	g educatio	on and ou	trea	ch materials	in lang	guages be	sides English?	Yes No
If YES, please list other languages used:												
58.	Please provide your recycling website address and public information phone number if applicable.											

Website:

Phone #:

	Par	t VII. Resources fo	or Solid Waste Ma	nagement and F	ull Cos	t Accounting	
		available to solid waste ma funding of your community'				rse programs. The f	ollowing
-		government operate an Ente		· · ·	X Yes	s 🗌 No	
		funding sources, check all	*				
00.	•	ing fees		sed fees (e.g. PAYT)	Tire	tax	
		erty taxes / general fund		-		e Goods tax	
		nousehold charges			$\square$ Disp		
61.		e Disposal Tax proceeds are		al governments on a quar			of Revenue.
		S 105-187.63 these funds m					
		al tax distributions being us			-		
62.	If applicable, pl	lease provide your FY 17-1	8 household fees. (e.g., a.	<u>\$45.00</u> per <u>year</u> per <u>hou</u>	<u>sehold</u> for	solid waste)	
		per month					
	α. φ	per	P			for solid waste	
	b. \$	per	p	er		for recycling	
	c. \$	per	p	oer		for yard waste	
	d. \$	per	p	oer		for bulky waste	
	e. \$	per	p	oer		availability fee	
	f. \$ <u>20</u>	per month	p	household		total charge	
63.		government operate a Pay-A					e residents
	are charged a fe	e by weight or volume for	he amount of trash they dis	scard) Yes	N	0	
	cording to GS 13 orm users of suc	<i>30A-309.08</i> , local governm h costs.	nents are required to cond	luct full cost accounting	annually a	and to develop a sy	vstem to
64.	If your local go	vernment contracts for solid	l waste or recycling service	es, please report the annu	al contract	amount.	
	\$		For solid waste services	per year			
	\$		For recycling per year				
			OR				
	\$		_ Combined Contract (soli	d waste, and recycling)			
65.	collection progr	rams: Please complete the fams for waste, recyclables blease report program but	and yard waste including n	naterials collected from c			

not a valuole, please report program suaget in rour 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*	855	883.25	114,107	28,988.3	143,095	162			
Recycling Program**	ecycling Program** 855		32,405	0	32,405	1,004			
Yard Waste Program	855	200.98	57,612	3,620.8	61,232	304			
Totals	(calculated by form):	1,116.48	204,124	32,609.1	236,732	212			

\*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? \$236,732

\$

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### 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 nur		-	-		
	Name:					
	Address:			City:		
	Telephone: Fa	ıx:		Email:		
69.	Please provide the physical address of th	e primary co	ounty white go	ods collection site.		
	Street 1:					
	Street 2:					
	City:			State: North Carolina	Zip:	
70.	Please provide the name of the business	-			from white goods.	
	Name:					
	Street:				7:	
	City:					
	Phone: Fax:					
71.	Give amounts / types of CFCs removed.		rds of CFC rei	noval, and copy of certific	Amount	rming extraction.
	Type of CFC Ren	loveu			Amount	
72.	CFCs may be recycled or sent for destruction <b>Firm</b>	ction. Give n		disposal method and amou [ <b>ethod of Disposal</b>	Amount Earned	C disposal. Amount Spent
			14	letiou of Disposal		
73.	Please report the tonnage of white goods white goods tonnage reported on page 55		uring FY 2017	-18 in the Recycling Tonr	nages table on page 5 (qu	lestion # 45). Was
74.	List the amount of revenue for the white	goods progra	am by source:			
	Revenue collected from sale of scrap:		\$			
	Revenue collected from White Goods Ta	ax Distributio				
	Revenue from other source (e.g. grants):					
	Total Revenue:					
75.	According to the White Goods Law, Whee expenditures White Good Tax Distribution					mounts and types of
	Operational Expenses:	\$				
	Capital Improvements:					
	Clean-up of Illegal White Goods Dumps					
	Total Expenditures:	\$				
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SC	RAP TIRES						
76.	Please provide name, address, phone number, and e-ma	-	-				
	Name:				1itle:	7.	
	Address:						
	Telephone: Fax:						
77.		• 1					
	Street 2:			North	Carolina	7in:	
78.	Tonnage/Number of scrap tires disposed July 1, 2017-J	une 30, 201	8 ( <u>exclud</u>	<u>ling</u> tire			
79.	Tonnage/Number of scrap tires disposed from cleanup	of state or c	county de	signated			
80.	Indicate the types of tires collected by the county: Passenger% Heavy Truc			%	Large Off-Road		%
81.	List the amount of revenue for the scrap tire program b	y source:					
	Revenue from Scrap Tire Tax Distributions:	\$					
	Revenue from Tire Fees:	\$				-	
	Revenue from Scrap Tire Clean-up Reimbursements:	\$				-	
	Revenue from Scrap Tire Cost-Overrun Grants:					-	
	Total Revenue:	\$					
82.	County's total scrap tire program contract expenditure ( excluding costs of nuisance tire cleanups, for FY 17-18	contract dis	sposal/ha	uling co	sts), \$		
83.	County's additional scrap tire program expenditure (i.e. Labor \$	<i>,</i>	venience	center c	ost), if any.		
	Site Cost \$						
	Other \$	de	escribe Ot	her:			
84.	County's contract cost for scrap tire disposal. \$		/ Ton; \$		/ Tire		
85.	Hauling cost or fuel surcharge, if not included in contra	act cost abo	ove. \$		/ Ton; \$	/ Tire	
86.	Total tipping fees collected for tires not eligible for fre	e disposal.	\$				
87.	Total number of tires collected not eligible for free disp	posal:					
88.	If scrap tires were not hauled off site by contracted serv	vice provide	er, were th	ney cut	and disposed in a lo	ocal landfill?	es No
89.	Name of tire disposal/recycling firm(s):						
TE	MPORARY DISASTER DEBRIS STAGINO	<b>J SITES</b>					
90.	Does your local government have a plan in place for m	anagement	of disaste	r debris	? Xes	No No	
	If yes, indicate if the plan is a stand-alone plan or in co	njunction w	vith local	governi	nent agencies:	] Stand-alone	In conjunction
91.	If you indicated having a plan, has the plan been review requirements for public assistance reimbursement in a c				hagement or FEMA	to ensure it meets	the basic
92.	Please list the name, contact numbers(s), and e-mail ad your local government:	dress of the	person(s	) in cha	rge of the disaster d	lebris management	program for
	Name:COUNTY OF JOHNSTONName:				Name:		
	Phone: <u>919-989-5050</u> Phone:				Phone:		
	E-mail: kimrobertson@johnstonnc.com E-mail:				E-mail:		

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Please list the temporary disaster debris staging sites in your county or municipality which have been reviewed for conflicts with the 93. 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? 🛛 Yes 🗌 No
95.	Does your plan address mass animal mortality? Xes No
MA	NAGEMENT 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 ves, has your county developed a written plan for the management of abandoned manufactured homes? XYes No

If yes, has your county developed a written plan for the management of abandoned manufactured homes? XYes

#### 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.

Editor Comment (TN): Pulled #67 from #65 table "total cost"

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://deg.nc.gov/conservation/ recycling/local-government-recycling-assistance or e-mail us at Lgteam@ncdenr.gov

