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

all that apply)

Disposal Bans

Illegal Dumping

Required - Enter Your Local Government Name: ROBBINSVILLE

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

	MANI	OATE TO THE STATE A	AS REQUIRED BY G.S.	130A-309.	09A.			
		Please submit this form to Lgt	eam@ncdenr.gov by Septembe	er 1, 2018.				
	If you have question	s or need assistance comple	ting this form, please call 91	9-707-8136	or 919-707-8133.			
Per	son Completing This Report: S	SONYA WEBSTER	Titl	e: FINANCE	DIRECTOR			
Ma	iling Address: PO BOX 126		City: ROBBINSVILLE		Zip: 28771			
Pho	one: (828) 479-3250	Fax: (828) 479-9276	;	Date: 7/18/	18			
Em	ail: s.webster@townofrobbinsv	ille.com						
		Gene	eral Instructions					
	ase remember that the time peri- a specific question.			ease check "N	o" if you have nothing to report			
1.	Did your local government ha	ave a Recycling Coordinator or	similar position for FY 17-18?	Yes	🔀 No			
	Name Recycling Coordinator (if different from person completing this report.)							
	Name:	Titl	Title:					
	Address:		City:		Zip:			
	Telephone:	Fax:	Email:					
2.	Did your local government ha	ave a Solid Waste Director or si	imilar position for FY 17-18?	Yes	No			
	If Yes, Name:		Titl	e:				
	Address:		City:		Zip:			
	Telephone:	Fax:	Email:					
3.	Did your local government ha	ave dedicated or part-time Sol	lid Waste Enforcement Staff for	r FY 17-18?	Yes No			
	If Yes, Name:		Titl	e:				
	Address:		City:		Zip:			
	Telephone:	Fax:	Email:					
4.	Did your local government ha	ave solid waste ordinances in p	lace addressing any of the follo	wing during F	Y 17-18? (if yes, please check			

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.

Other, Please Describe:

Littering

	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, X 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 .)					
	our local government DID operate or contract for a recyclables recovery program, please indicate in the owing 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? X 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)					

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction? 800
	b. Number of households eligible to participate in the curbside recycling program: 800
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 300
18.	If your curbside recycling program is operated through a public franchise granted to a private company then please answer the following: Is public participation in the franchise: Voluntary Mandatory Does your franchise consist of: One service district 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? 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? Xes 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) GRAHAM COUNTY RECYCLING CENTER
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. 500
29.	What sector(s) of your community are served by the drop-off recycling program? 🛛 Residential 🗌 Commercial 🔲 Industrial
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites: 1
31.	How many of these locations were staffed with attendants? 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 program	n collect or accep	t televisions from	(check all that ap	oply):	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? Yes No

OTHER PUBLIC RECYCLING PROGRAMS

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

38.	Did your local government operate a multifamily recycling collect	ion program i	that provides on-property	recycling servi	ice for residents
	of multifamily properties in a manner other than through your curl	oside or dropo	off recycling programs?	X Yes	No
39.	Did your local government operate a recycling program to serve c	ommercial or	institutional members of	your communit	ty in a manner
	other than through your curbside or dropoff recycling programs?	Xes Yes	No No		

Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes 40. No No

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 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.

DDOCDAM	Curbside		Drop-off		All "Other" Programs		Total Tons
PROGRAM	🖾 if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear							
Brown							
Green							
Mixed							
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans							
Steel Cans							
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)							
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper							
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							
Comminated (1 1 1							
Commingled tons-check all items collected above							
TOTAL TONS:							

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.

a		**7 4	A H U		T 1 1	36 / 13	<i>A</i> H A H			A H H	D	
S	pecial	Waste	Collections	(Do No)	t Include	Materials	Collected	as part ol	t an HHW	Collection	Program	or Event)
~				(

47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type	Did program collect this material from the public?			# of sites	-	quantities collected / managed. se report in indicated units.			
	Used Motor Oil	X Yes		No	1	100 gallons			lons	
	Used Oil Filters	Xes		No		3 barr	els, or		lbs	
	Used Antifreeze	Xes		No	1		I	45	gallons	
	Batteries, Lead Acid	Xes		No	1	10 # b	atteries, or		lbs	
	Batteries, Dry Cell	Yes		No				1	lbs	
	Fluorescent Bulbs/Lights Containing Mercury	Xes		No			lbs, or	60	# bulbs	
	Propane Tanks	Yes		No			lbs, or		# tanks	
	Used Cooking Oil / Waste Vegetable Oil	Yes		No			lbs, or		gallons	
	Other Special Wastes - please provide waste type here:	Yes		No			·		lbs	
	Pesticide Containers (NCDA Program, not pesticides themselves)	Yes		No			lbs, or		# con- tainers	
	NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)	Yes		No					lbs	
	Latex Paint (do not include paint collected at HHW event or by a paint exchange program)	Yes		No			gals, or		lbs	
	 a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW pr Please list partner(s) <u>GRAHAM COUNTY</u> d. Provide number of citizens / households that e. Did your program accept materials from small 	rogram with a	mate noth	erials duri ner <u>local</u> g our HHW	ng this F covernme collection	Fiscal Year? ent? [X] Yes on program this	No Fiscal Yea		Ten	np. Event
	If yes, please estimate the amount of busines				y Exem	-	pounds	ors)?	res	
	 f. Amounts of individual materials collected by about individual materials is not available, p Note, materials listed here should only be the 	lease simply p	prov	ide total o	quantity	of materials coll	lected by H	HW prog	ram in 48	g below.
	Used Motor Oil (gal)									
	Used Antifreeze (gal)	Lea	d A	cid Batter	ies (lbs)	(Other Batter	ries (lbs)		
	Fluorescent Bulbs / Lights Containir	ng Mercury (ll	bs)							
	 g. Provide Total Quantity of materials collected reported in 48f, please net the weight of those h. Please list HUW/ Collection Contention 	e materials or	ut of	f the total						pounds
	h. Please list HHW Collection Contractor <u>GI</u>									
	i. Estimated cost of HHW / CESQG program of	or event(s)	2,0	000						
Pag	es 3 through 6 should have only been complet	ed by govern	men	ts indica	ting in q	uestion # 14 th	at they DO) provide	recycling	services

All governments answering "Yes" to question # 5 on page 1 should complete the rest of the report with the exception of PART VIII which is only to be completed by Counties.

Part IV. Yard 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.

- Does your local government operate a yard waste program? Yes No If yes please indicate how yard waste is managed by 49. checking all that apply: Collected curbside Collected at convenience center Received at yard waste, compost, or LCID facil.
- Did a storm event significantly impact the amount of yard waste your government managed during FY 17-18? Yes 50. 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	Cubic Yards	Please Provide Name and Location of Facility Receiving Vegetative Materials
End user (to farmer or home-owner)				
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				

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

		_X 2	K=	: 	yd^3
	Size of Truck (in yards)	Avg. no. of times truck fills each week	# of weeks truck is used during year	TOTAL	
		Part V. Solid Wast	e Collection Services		
This s	section concerns your local g	overnment's provision of solid wast	e (garbage) collection services.		
52.	Please complete the following	ng table about your government's sol	id waste collection system.		

	Sector					How is Solid Waste Collected?				Who Collects Solid Waste?	How is Solid Waste Collected?	
	Sector	Insert L	etter -	see codes	s at right	Inse	rt # - s	ee codes at r	right	a. Local government employee	s 1. Once a week at household	
	Residential	Primary	а	Secondary		Primary	1	Secondary		b. By Contract c. Franchise haulers	 Twice a week at household Convenience center/greenbox 	
	Commercial	Primary	d	Secondary		Primary		Secondary		d. Local government not involved in provision of 5. Daily		
	Industrial	Primary	d	Secondary		Primary		Secondary		service	6. Other	
53.	If you provide <u>residential</u> waste collection at single-family households in your jurisdiction, please answer the following questions:											
	What type of collection method is used? 🗌 Fully Automated 🗌 Semi-Automated 🔀 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?											
	What type of collection container is used? 🗌 Government-provided carts 🕅 Resident-provided container 🗌 Bags											
	Do you offer bulky waste collection services? 🗌 Yes 🛛 No											
54.	For municipali		-	-			-			res 🛛 No		
	If so, were whi	te goods	delive	ered to the	e county :	tor mark	teting?	Yes	1	No		
]	Part	VI. So	lid W	aste a	nd F	Recycling	g Edu	icational Activities	5	
55.	Did your local issues / activiti	0						orm citizens art VII, page	-	cally about solid waste man	nagement and / or recycling	
56.	Please estimate	e your an	inual b	udget for	solid wa	ste relat	ed edu	cation and o	outreach	activities: \$2,500		
57.	Does your com	munity	produc	e recyclir	ng educat	ion and	outrea	ch materials	in lang	guages besides English?	Yes No	
	If YES, please	list othe	r langt	ages used	1:							
58.	Please provide	your rec	ycling	website a	address a	nd publi	ic info	mation pho	ne numl	ber if applicable.		

Website:	

Phone #:

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

	Part VII	. Resources f	or Solid Was	te Manageme	ent and Full Co	ost Account	ing
	ficient resources availab			v	0	hese programs.	The following
-	stions deal with funding	•••••••••••••••••••••••••••••••••••••••					
	Did your local governm With regards to funding				ь FY 17-18?	Yes N	0
00.	Tipping fees			eight-based fees (e.g	PAYT) Ti	e tax	
		, es / general fund				hite Goods tax	
	Per househo	•	Grants	<i></i>		sposal Tax	
61.	NC Solid Waste Dispos According to GS 105-1				ents on a quarterly bas	is by the Depart	
	How are disposal tax d	istributions being u	sed?				
62.	If applicable, please pr	ovide your FY 17-1	8 household fees.	(e.g., a. <u>\$45.00</u> per	<u>year</u> per <u>household</u> fo	or solid waste)	
	a. \$	per		per		for solid wast	e
	b. \$	per		per		for recycling	
	c. \$	per		per		for yard wast	e
	d. \$	per		per		for bulky was	ste
	e. \$	per		per		availability fe	ee
	f. \$	per		per		total charge	
63.	Did your local governm are charged a fee by we				garbage during FY 1	-	where residents
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full cos	st accounting annuall	y and to develo	p a system to
			1 / 1	· 1			
64.	If your local governmen	nt contracts for soli	•	•	eport the annual contra	act amount.	
	\$		_ For solid waste	services per year			
	\$		_ For recycling pe	r year			
			OR				
	\$		_ Combined Contr	ract (solid waste, an	d recycling)		
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	cluding materials co			
		# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
M	Iunicipal Solid Waste*						
	Recycling Program**						
	Yard Waste Program						
	Totals	(calculated by form):					
	*for materials collected and	l sent for eventual dispo	sal in a Municipal Solid	Waste or Construction a	and Demolition Landfill.		-
	**for materials collected by					s. Do not include sp	ecial waste services.
66.	If your government operations (round	erates a landfill, trai	nsfer station, yard v). If budgets for di	waste /compost facil fferent facilities are	ity or recycling facilit	y, please provide mpt to allocate c	e total budget for
	Tran	sfer Station Budget	: \$				
	Yard	Waste / Compost I	Facility Budget: \$				
	Recy	cling Facility Budg	get: \$				
67.	What was your governme	ment's total combin	ed annual budget fo	or all solid waste an	d recycling services ir	n 17-18? \$	
20	17 2018 Local Governm	ont Annual Papart	Papart Due Dat	a. Santambar 1 201	8 Submit to: Latoar	n Onedonr gov	Daga 8 of 11

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 num		-			
	Name:					
	Address:				Zip:	
	Telephone: Fa	ıx:		Email:		
69.	Please provide the physical address of the	e primary co	unty white go	ods collection site.		
	Street 1:					
	Street 2:					
	City:			_ State: North Carolina	Zip:	
70.	Please provide the name of the business of Name:	-) from white goods.	
	Street:					
	City:				Zip:	
	Phone: Fax:					
71.	Give amounts / types of CFCs removed.					
	Type of CFC Ren				Amount	
72.	CFCs may be recycled or sent for destruc	ction Give n	ame of firm	lisposal method and amo	unt earned / spent for CE	C disposal
12.	Firm			ethod of Disposal	Amount Earned	Amount Spent
73.	Please report the tonnage of white goods white goods tonnage reported on page 5?		ring FY 2017	-18 in the Recycling Ton	nages table on page 5 (qu	luestion # 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, Wh expenditures White Good Tax Distribution					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 Di	ue Date: Sept	ember 1, 2018 Submit	to: Lgteam@ncdenr.gov	Page 9 of 11

76.		er, and e-mail of person responsible for scrap tires program. Title:							
	Name:			1 itle:					
	Address:								
_	Telephone: Fax:			:					
7.	Please provide the physical address of the primary council Street 1:	• •							
	Street 2:								
	City:			Carolina	Zip:				
8.	Tonnage/Number of scrap tires disposed July 1, 2017- Tons or	June 30, 2018 ((excluding tire						
79.	Tonnage/Number of scrap tires disposed from cleanup Tons or	of state or cou	ntv designated						
30.	Indicate the types of tires collected by the county: Passenger% Heavy True		%	Large Off-Road		%			
1.	List the amount of revenue for the scrap tire program b	by 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:	\$							
32.	County's total scrap tire program contract expenditure excluding costs of nuisance tire cleanups, for FY 17-1	(contract dispo 8.	sal/hauling co	sts), <u>\$</u>					
33.	County's additional scrap tire program expenditure (i.e Labor \$,	ience center c	ost), if any.					
	Site Cost \$								
	Other \$	descr	ribe Other:						
34.	County's contract cost for scrap tire disposal. \$	/ T	'on; \$	/ Tire					
35.	Hauling cost or fuel surcharge, if not included in contra	act cost above	. \$	/ Ton; \$	/ Tire				
36.	Total tipping fees collected for tires not eligible for fra	e disposal. \$							
37.	Total number of tires collected not eligible for free dis	posal:							
38.	If scrap tires were not hauled off site by contracted ser					s 🗌 No			
39.	Name of tire disposal/recycling firm(s):	-	-	_					
ГЕ	MPORARY DISASTER DEBRIS STAGIN								
0.	Does your local government have a plan in place for n	anagement of	disaster debris	? Yes	No				
	If yes, indicate if the plan is a stand-alone plan or in co	njunction with	local governr	ment agencies:	Stand-alone	n conjunctio			
91.	If you indicated having a plan, has the plan been revier requirements for public assistance reimbursement in a			nagement or FEMA to	ensure it meets th	e basic			
92.	Please list the name, contact numbers(s), and e-mail ac your local government: Name: STEVE HOOPER Name:	-	erson(s) in cha	rge of the disaster deb Name:	oris management p	-			
	Phone: (828) 479-3250 Phone:			Phone:					
	E-mail: townofrobbinsville@hotmail.com E-mail			E-mail:					
	7-2018 Local Government Annual Report Report Du	-		Submit to: Lgteam@	nadanr aar	Page 10 of			

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.*

J	5 55 6 1 6	,		· · · · · · · · · · · · · · · · · · ·
Disaster Site #	Site Name		Disaster Site #	Site Name
1	BEAR CREEK US 129S			

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? Yes 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 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

