

### State of North Carolina

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

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

Please submit this form to Lgteam@ncdenr.gov by September 1, 2018.

On the following pages you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2017-2018. Each North Carolina County and Municipality is required to complete this report annually. Completion and submission of this report will fulfill the annual reporting mandate to the state as required by G.S. 130A-309.09A. Failure to complete and submit this report could result in the local government being excluded from distributions of Solid Waste Disposal Tax Proceeds and other Department of Environmental Quality grants.

#### **Instructions:**

Each local government should determine which staff member is responsible for preparing and submitting the annual report and ensure that the report is completed and submitted before the reporting deadline on September 1, 2018.

Options for obtaining a blank copy of this form:

- $1-download\ a\ copy\ of\ the\ form\ from\ this\ web\ site:\ \underline{http://deq.nc.gov/about/divisions/waste-management/solid-waste-section/annual-reporting}$
- 2 call the Division of Environmental Assistance and Customer Service at 877-623-6748
- 3 request a copy of the form by sending an email to Lgteam@ncdenr.gov.

This form must be completed electronically using Adobe Reader. Adobe Reader can be downloaded for free at the following web site: <a href="https://get.adobe.com/reader/">https://get.adobe.com/reader/</a> - it is suggested that you complete the form using the latest version of Adobe Reader. Please <a href="DO NOT">DO NOT</a> complete this form using Adobe Acrobat Pro.

Complete the form by entering responses in the appropriate fields using Adobe Reader. Please save a copy of the completed form to your computer for your records by using the "Save As" option and choosing an appropriate file name. When naming the file, please include your community's name as a part of the file name.

After completing the report form, please submit a copy electronically to the Division of Environmental Assistance and Customer Service by attaching the report file to an email to Lgteam@ncdenr.gov

If you need assistance completing or submitting this form, please feel free to contact one of the following Division of Environmental Assistance and Customer Service staff members:

Wendy Worley, phone: 919-707-8136, email: wendy.worley@ncdenr.gov Matt James, phone: 919-707-8133, email: matt.james@ncdenr.gov

Form Year

2018



Local Government Report Form

**Required** - Enter Your Local Government Name: Ronda

## **State of North Carolina**

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

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

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

		Please submit this form to L	gteam@ncdenr.gov by <b>Se</b>	otember 1, 2018.			
	If you have quest	ions or need assistance comp	leting this form, please o	call 919-707-8130	6 or 919-707-8133.		
Per	son Completing This Report	: Talesa Carter	Title: Town Clerk				
Ma	iling Address: PO Box 398		City: Ronda		Zip: 28670		
Phone: 336-835-2061 Fax: 336-83		Fax: 336-835-8200	)	Date: 8/24	4/18		
Em	ail: administration@townofr	onda.org					
		Ge	neral Instructions				
	ase remember that the time page a specific question.	eriod for the report is JULY 1, 2	2017 through JUNE 30, 20	18. Please check "	No" if you have nothing to report		
1.		t have a Recycling Coordinator	or similar position for FY	17-18? Yes	⊠ No		
	Name Recycling Coordina	tor (if different from person cor	mpleting this report.)				
	Name:			Title:			
	Address:		City:		Zip:		
	Telephone:	Fax:	Email:				
2.	Did your local governmen	t have a Solid Waste Director or	similar position for FY 17	'-18? Yes	No No		
	If Yes, Name:			Title:			
	Address:		City:		Zip:		
	Telephone:	Fax:	Email:				
3.	Did your local governmen	t have dedicated or part-time S	Solid Waste Enforcement S	Staff for FY 17-18?	Yes No		
	If Yes, Name:		Title:				
	Address:		City:		Zip:		
	Telephone:	Fax:	Email:				
4.	Did your local governmen all that apply)	t have solid waste ordinances in	place addressing any of th	e following during	FY 17-18? (if yes, please check		
	Disposal Bans	☐ Illegal Dumping ☐ Little	ering Other, Please I	Describe:			
5.	Did your local governmen mulching, composting)?	t manage, provide or contract fo	r any solid waste services i	in FY 17-18 (e.g., o	collection, disposal, recycling,  No		
	If you ans	wer "No" to question 5, the re	enort is complete, please o	email to Leteam@	ncdenr.gov.		

### Part I. Waste Reduction and Recycling Programs Serving Government Facilities The following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. Did your local government have a recycling program in place for collecting recyclable materials generated at X □ No public buildings in FY 17-18? 7. Did your local government have any program or policy encouraging or requiring local agencies to X No purchase products with recycled content? Did your local government have a program in place to collect and recycle spent fluorescent lights X No Yes generated from the public buildings and facilities that were operated by your government in FY 17-18? Part II. Waste Reduction and Recycling Programs Serving the Public SOURCE REDUCTION / REUSE Did your local government have a backyard composting program? Yes X No If yes, please check all backyard composting activities that apply: Education Demonstration site(s) Bin distribution/sales Number of Bins distributed? Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes X No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives? Did your local government offer a waste exchange or reuse program? Yes X No 13 If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public: Paint exchange Number of gallons recovered? Swap shop/shed Number of sheds in use? Other (e.g. pallet exchange, etc.) PUBLIC RECYCLING SERVICES Which of the following responses best describes your recyclables recovery activities for the period July 1, 2017 through June 30, 2018? My local government **DID operate or contract** for a recyclables recovery program. (please continue to question 15) My local government DID NOT operate or contract for recyclables recovery BUT DID participate in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; then go to Part IV on page 7.) With which local government did you participate? My local government **DID NOT operate**, contract or participate in a recycling program. (Go to Part IV on page 7.) If your local government **DID** operate or contract for a recyclables recovery program, please indicate in the following sections the type of program in operation and provide specifics about your program(s). **CURBSIDE RECYCLING PROGRAM** Did your government operate a Curbside Recycling Program? X Yes No, skip to question # 25 Who collected the recyclable materials for your local government's curbside recycling program? 16. Local government employees Private contractor (please specify) Foothills Sanitation and Recycling Franchised hauler (please specify) Other (please specify)

17.	Please provide the following information about your community:  a. Total number of households in your jurisdiction? 206
	b. Number of households eligible to participate in the curbside recycling program: 206
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 206
18.	If your curbside recycling program is operated through a <u>public franchise granted to a private company</u> then please answer the following:  Is public participation in the franchise:  Voluntary or Mandatory  Does your franchise consist of:  One service district or Multiple service districts
19.	What sector(s) of your community was served by the curbside recycling program?  Residential Commercial Industrial
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served:
21.	How frequently were the curbside recyclables collected?  Once a week  Every other week / biweekly  Other
22.	Please describe the collection containers used:  Bins Blue bags Multi-bin system Roll-out carts
23.	Please describe the method / style of recyclable materials handling:  curb-sort (collector separates material as collected)
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used:    less than 50 gallon cart
DR	OP-OFF RECYCLING PROGRAM
25.	Did your government operate a Drop-off Recycling Program?
26.	Who collected the recyclable materials for your local government's drop-off recycling program?  Local government employees  Private contractor
	Other (please specify)
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program:  source-separated (citizens separate materials by type) single stream / commingled dual / two stream (paper separated from cans/bottles) don't know / other
28.	Please estimate the number of households served by your drop-off recycling program.
29.	What sector(s) of your community are served by the drop-off recycling program?   Residential Commercial Industrial
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:
31.	How many of these locations were staffed with attendants?
EL	ECTRONICS RECYCLING PROGRAM
mate	Is answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any perials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.  Did your community operate an electronics recycling program in FY 17-18? Yes No, skip to question # 38  If you did operate an electronics recycling program, please indicate style of program:  Permanent - Curbside Collection Permanent - Drop-off Scheduled Collection Day or Event Part of HHW Program If you offer curbside collection of electronics is it: by appointment or unscheduled  If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:

33.	Did your electronics recycling program collect or accept televisions from (check all that apply):   Residences   Businesses
34.	Did your electronics recycling program collect or accept computer equipment from (check all that apply):   Residences  Businesses
35.	DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was eligible to receive proceeds from the State Electronics Management Fund in February of 2018, please provide the following information:
	Electronics Management Fund balance as of July 1, 2017: \$
	Electronics Management Funds received from DEQ during FY 17-18 (Feb 2018 distribution): \$
	Electronics Management Funds spent during FY 17-18: \$
	Electronics Management Fund balance as of June 30, 2018: \$
36.	Briefly explain how Electronics Management Funds were spent during FY 2017-18 (please list items purchased if applicable):
37.	If you did operate an electronics recycling program, please provide the following information about your vendor / contractor:  Name of electronics recycling vendor(s) during FY 17-18:
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?
OT	THER PUBLIC RECYCLING PROGRAMS
the	ase answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ycling Tonnages Chart on pg 5.
38. 39.	Did your local government operate a multifamily recycling collection program that provides on-property recycling service for residents of multifamily properties in a manner other than through your curbside or dropoff recycling programs? $\  \  \  \  \  \  \  \  \  \  \  \  \ $
	other than through your curbside or dropoff recycling programs? Yes No
40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served:
	Public drop-off recycling sites available for ABC On Premises Permit holders to use
41.	Does your local government operate a program to recycle Construction and Demolition materials?  Yes  No If yes, please check all materials that were recycled and report tonnages in tonnage table on page 5:
	☐ Clean Wood ☐ Brick, concrete, etc. ☐ Sheetrock ☐ Vinyl siding ☐ Shingles ☐ Metals ☐ Other
42.	Does your local government have an ordinance regulating the construction and demolition waste stream with the intention of encouraging or requiring waste reduction or recycling of these materials? $\square$ Yes
43.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 17-18. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	☐ Public Parks Recycling Program ☐ Athletic Field /Venue Recycling Program
	Pedestrian Recycling Program Recycling Service for Special Events / Festivals
44.	Please identify all "Other" programs or services operated by your government during FY 17-18. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	Public School Recycling Program
	Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)
	Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events
	Organics / Food Waste Recycling other than yard waste program
	Oyster Shell Recycling Program
	Other Programs (please specify)
	Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.

#### RECYCLING TONNAGES FROM PUBLIC PROGRAMS

- 45. a. Enter data in the table below for ALL recycling programs operated or contracted for by your local government. Provide TONNAGES (or estimates) for each material collected for the period JULY 1, 2017 through JUNE 30, 2018. DO NOT include materials that were not collected or managed by your local government either directly or under contract to a private service provider.
  - b. Do NOT report YARD WASTE, TIRES, HHW, USED OIL, OIL FILTERS, ANTI-FREEZE, BATTERIES or other SPECIAL WASTE tonnages on this page - these items should be reported in other sections of report form. See page 6 for SPECIAL WASTES.
  - c. Please report materials collected in tons only. Please only extend numbers to two decimal places (x.xx).
  - d. If you collected single stream or other commingled materials, record Tons in the "Commingled tons" row and then check the box for each individual material type that was commingled

		Curbside		Drop-off	All "C	Other" Programs	<b>Total Tons</b>
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear		1					1
Brown		0.5					0.5
Green		1					1
Mixed	$\boxtimes$	0.75					0.75
PLASTIC:							
PET #1		1.5					1.5
HDPE #2		1					1
All Plastic Bottles		9					9
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans		5					5
Steel Cans	$\boxtimes$	2.25					2.25
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)	$\boxtimes$	2					2
Cardboard (OCC)	$\boxtimes$	0.5					0.5
Magazines (OMG)		1					1
Office Paper		2					2
Mixed / Other Paper	$\boxtimes$	1.245					1.245
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:							
Commingled tons-check all items collected above							
TOTAL TONS:		28.745					28.745

46. RECYCLING TONNAGE AS A RESULT OF POLICY OR ORDINANCE: complete this section for materials that were recycled as a result of local government ordinances or policies but that were NOT collected or managed directly by your local government recycling program. E.g. a corrugated cardboard disposal ban supported by a reporting mechanism for collecting data on private recycling tonnages.

Material Type	Tons Diverted	Describe the mechanism that caused these materials to be recovered and data collection method

## **Part III. Special Waste Collections**

This section concerns local government programs for managing materials that require special handling or that are banned from landfilling. Please provide responses and data as indicated below considering services provided to the public. Please do not include data on materials that were accepted and then disposed of in a landfill. Do not include materials generated exclusively by government operations (e.g. motorfleet services). Question 47 is about materials accepted outside of any Household Hazardous Waste (HHW) Program or event. If special wastes were only accepted as a part of an HHW Program or HHW event and were not collected by separate recycling efforts then do not record materials in question #47 but instead report with HHW materials in question #48.

Special Waste Collections (Do Not Include Materials Collected as part of an HHW Collection Program or Event) Did program collect this # of **Special Waste Programs for Collecting** Data on quantities collected / managed.

	material mo	m the public?	sites	Please repor	rt in indic	cated units.	
Used Motor Oil	Yes	⊠ No				gallons	
Used Oil Filters	Yes	⊠ No		barrels	, or	lbs	
Used Antifreeze	Yes	⊠ No		-		gallons	
Batteries, Lead Acid	Yes	⊠ No		# batte	eries, or	lbs	
Batteries, Dry Cell	Yes	⊠ No		'		lbs	
Fluorescent Bulbs/Lights Containing Mercury	Yes	⊠ No		lbs	s, or	# bulbs	
Propane Tanks	Yes	⊠ No		lbs	s, or	# tanks	
Used Cooking Oil / Waste Vegetable Oil	Yes	No No		lbs	s, or	gallons	
Other Special Wastes - please provide waste type here:	Yes	☐ No		1	ı <del></del>	lbs	
Pesticide Containers (NCDA Program, not pesticides themselves)	Yes	☐ No		lbs	s, or	# containers	
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		gal		lbs	
sehold Hazardous Waste (HHW) and Condi	ionally Exen	npt Small Ou	antity G	enerator (CESO	G) Progr	am or Event	
Did your local government operate a household	•		-	_		Yes No	)
If Yes, please respond to the following question							
a. Was HHW collected at a permitted Tempora	ary Event or a	t a Permanent	HHW C	ollection Facility?	? Pe	ermanent Tem	np. Even
b. How many days was your HHW Program of	en to accept	materials duri	ng this F	iscal Year?			
c. Did you partner or co-sponsor your HHW p	rogram with a	another <u>local</u> g	overnme	nt? Yes	No No		
Please list partner(s)							
d. Provide number of citizens / households that	t participated	in your HHW	collectio	on program this Fi	scal Year	?	
e. Did your program accept materials from sm If yes, please estimate the amount of busines		•		•	Generator ounds	rs)? Yes 🔀	No
f. Amounts of individual materials collected b about individual materials <u>is not</u> available, p	lease simply	provide total o	quantity o	of materials collec	ted by H	HW program in 48	g below.
Note, materials listed here should only be th	ose conected						
Note, materials listed here should only be th				_ # of Barrels, or		_ lbs.	
	Use	ed Oil Filters					
Note, materials listed here should only be th  Used Motor Oil (gal)	Use	ed Oil Filters	ies (lbs)	Oth			
Note, materials listed here should only be the Used Motor Oil (gal)  Used Antifreeze (gal)  Fluorescent Bulbs / Lights Containing. Provide Total Quantity of materials collecte reported in 48f, please net the weight of those	Use Leang Mercury (l d by HHW Prose materials o	ed Oil Filters and Acid Batter bs) cogram. If indut of the total	ies (lbs) ividual n listed her	Oth naterials were re.	er Batter	ies (lbs)	
Note, materials listed here should only be the Used Motor Oil (gal)  Used Antifreeze (gal)  Fluorescent Bulbs / Lights Containing. Provide Total Quantity of materials collecte reported in 48f, please net the weight of those	Use Leang Mercury (l d by HHW Prose materials o	ed Oil Filters and Acid Batter bs) cogram. If indut of the total	ies (lbs) ividual n listed her	Oth naterials were	er Batter	ies (lbs)	pound

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.

	s section concerns management of vegetative n	naterials.	Yard waste ma	y not be dispo	osed in sanitary	landfills, incinerators, or is		
	ermitted sites and it is illegal to burn. Composti ut your management of vegetative materials. Do r							
49.	Does your local government operate a yard wast				_	ow yard waste is managed by		
<b>4</b> 2.	checking all that apply: Collected curbside			-	-			
50.	Did a storm event significantly impact the amou				•	* · · · · · · · · · · · · · · · · · · ·		
51.								
	organic material (yard waste, brush, limbs, le		managed. For	conversion pur		./cubic yd.  Name and Location of Facility		
	Destination	Check if used	Tons	Cubic Yards		g Vegetative Materials		
	End user (to farmer or home-owner)							
	Your local government's mulch or compost facil	-						
	Other public mulch or compost facility							
	Private mulch or compost facility							
	Land clearing and inert debris landfill (LCID)							
	Energy / Fuel Use (e.g. boiler fuel market)							
	Total							
	YARD WASTE MANAGEMENT FORMULA:							
	estimate yard waste volume. Calculate for each truck used in your yard waste management program, and then enter the grand total volume managed by program in the appropriate boxes above. Ex. $10 \text{ yd}^3 \text{ truck } x \text{ 3 days/wk } x \text{ 16 wks} = 480 \text{ yd}^3$							
	X					$yd^3$		
	Size of Truck (in yards) Avg. no. of times tr	uck fills each	week # of weeks	s truck is used durir	g year	TOTAL		
	Part V.	Solid V	Vaste Colle	ection Serv	ices			
	s section concerns your local government's provisi							
52.	Please complete the following table about your government's solid waste collection system.  Who Collects Solid Waste? How is Solid Waste Collected?  Who Collects Solid Waste? How is Solid Waste Collected?							
	Sector Who Collects Solid Waste? Insert Letter - see codes at right	1		ight Will C	ollects Solid Waste?	How is Solid Waste Collected? es 1. Once a week at household		
	Residential Primary B Secondary	Primary	1 Secondary	b. By C		Twice a week at household     Convenience center/greenbox		
	Commercial Primary D Secondary	Primary	Secondary	d. Local	government not	4. As needed or by request		
	Industrial Primary D Secondary	Primary	Secondary	servio	ved in provision of ce	5. Daily 6. Other		
53.	If you provide <u>residential</u> waste collection at sin	gle-family	households in y	our jurisdiction	, please answer the	e following questions:		
	What type of collection method is used?	Fully Aut	omated 🔀 S	Semi-Automate	d Manual	Don't know		
	What is the standard collection frequency?	Weekly	Two tim	nes per week	Other			
	What is the typical service point for single family household waste?   Curbside   Back yard / Back door							
	What type of collection container is used?   Government-provided carts   Resident-provided container   Bags							
	Do you offer bulky waste collection services?	Yes	No No					
54.	For municipalities - did your government collect	U		Yes	No			
	If so, were white goods delivered to the county f			☐ No				
	Part VI. Solid Wa		• •	_				
55.	Did <b>your local government</b> have an education prissues / activities? Yes No (If	_	inform citizens o Part VII, page		out solid waste ma	nagement and / or recycling		
56.	Please estimate your annual budget for solid was	ste related o	education and o	utreach activitie	es: \$			
57.	Does your community produce recycling educate	ion and out	treach materials	in languages be	esides English?	Yes No		
	If YES, please list other languages used:							
58.	Please provide your recycling website address an	nd public ii	nformation phor	ne number if ap				
	Website:				Phone #:			

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

	ficient resources availab estions deal with funding			*		these programs.	The following
59.	Did your local governm With regards to funding Tipping fees Property tax	nent operate an Ente g sources, check all s es / general fund	erprise Fund for sol that apply to your I Volume/we Sale of reco	lid waste services in local government: eight-based fees (e.g	FY 17-18?	Yes Normal National N	lo
61.	Per househo NC Solid Waste Dispos According to GS 105-1	sal Tax proceeds ar			nts on a quarterly b		
62	How are disposal tax d  If applicable, please pr	_				for solid wasta)	
02.				per	_		te
		_		per			
	c. \$	per		per		for yard was	te
	d. \$	per		per		for bulky wa	ste
	e. \$	per		per		availability f	<u>ee</u>
	f. \$	per		per		total charge	
63.	Did your local governmare charged a fee by we			•	· · _	17-18? (a system ] No	where residents
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full cos	t accounting annua	lly and to develo	p a system to
64.	If your local government	nt contracts for soli	d waste or recycling	g services, please re	port the annual cont	ract amount.	
	\$		_ For solid waste s	services per year			
	\$		For recycling per	r year			
	¢20.050.02		OR				
	\$30,058.92		_	ract (solid waste, and			
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials col			
		# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
N	Iunicipal Solid Waste*	206	0	25,000	0		
	Recycling Program**	206	28.745	5,058.92	0		
	Yard Waste Program	0	0	0	0		_
		(calculated by form):	28.745	30,058.92			
66.	*for materials collected and **for materials collected by If your government ope facility operations (rous proportionately. Lan	y public recycling progr erates a landfill, trai	ams including those servansfer station, yard v  ). If budgets for dif	vices offered to commerce vaste /compost facilities are of	ial and industrial generality or recycling facil	ity, please provid tempt to allocate	e total budget for
		sfer Station Budget					
	Yard	Waste / Compost I	Facility Budget: \$				_
		cling Facility Budg					_
67.	What was your governi	ment's total combin	ed annual budget fo	or all solid waste and	d recycling services	in 17-18? \$30,05	8.92

## **Part VIII. County Mandated Programs**

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

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

SC.	RAP TIRES					
76.	Please provide name, address, phone number, and e-Name:	nd e-mail of person responsible for scrap tires program.  Title:				
	Address:					
	Telephone: Fax:		Emai	il:		
77.	Please provide the physical address of the primary c	ounty scrap tires	collection sit	te.		
	Street 1:					
	Street 2:					
	City:		State: North	n Carolina	Zip:	
78.	Tonnage/Number of scrap tires disposed July 1, 201  Tons o	7-June 30, 2018 (	excluding tin	res from cleanup of nu _Number of tires	isance sites)	
79.	Tonnage/Number of scrap tires disposed from clean Tons o		nty designate	ed nuisance sites _Number of tires		
80.	Indicate the types of tires collected by the county: Passenger % Heavy To	ruck	%	Large Off-Road	%	
81.	List the amount of revenue for the scrap tire program	•				
	Revenue from Scrap Tire Tax Distributions:					
	Revenue from Tire Fees:					
	Revenue from Scrap Tire Clean-up Reimbursement	s: \$				
	Revenue from Scrap Tire Cost-Overrun Grants:					
	Total Revenue:	\$				
82.	County's total scrap tire program contract expenditu excluding costs of nuisance tire cleanups, for FY 17	re (contract dispo	sal/hauling c	costs),		
83.	County's additional scrap tire program expenditure ( Labor \$		ience center	cost), if any.		
	Site Cost \$					
	Other \$	descr	ribe Other: _			
84.	County's contract cost for scrap tire disposal. \$	/ T	on; \$	/ Tire		
85.	Hauling cost or fuel surcharge, if not included in co	ntract cost above	.\$	/ Ton; \$	/ Tire	
86.	Total tipping fees collected for tires not eligible for	free disposal. \$ _				
87.	Total number of tires collected not eligible for free					
88.	If scrap tires were not hauled off site by contracted s	service provider,	were they cu	t and disposed in a loca	al landfill?  Yes No	
89.	Name of tire disposal/recycling firm(s):					
TE	MPORARY DISASTER DEBRIS STAGI	NG SITES				
90.	Does your local government have a plan in place for	management of	disaster debr	ris? Yes	No	
	If yes, indicate if the plan is a stand-alone plan or in	conjunction with	local govern	nment agencies:	Stand-alone	
91.	If you indicated having a plan, has the plan been rev requirements for public assistance reimbursement in			anagement or FEMA to	o ensure it meets the basic No	
92.	Please list the name, contact numbers(s), and e-mail	address of the pe	rson(s) in ch	arge of the disaster del	bris management program for	
	your local government:  Name: Name	ie:		Name:		
		ne:		<del></del>		
	E-mail: E-m					

Natural Heritage Program (N Please note that the vetting of a site	(HP) and the State Historic Preserva prior to a disaster is advantageous to local	ation Office (SHPO) thro governments because a staging	ough coordination with the Solid Waste Section. g site which is found to have impacted federal or state
	Site Name		
•			following a disaster? Yes No
• •	ammar mortanty:	<b>_</b>	
Has your county considered v	whether to implement a program for	r the management of aba	ndoned manufactured homes?   Yes   No
If yes, has your county development	oped a written plan for the manager	ment of abandoned manu	factured homes? Yes No
	Part IX.	Comments	
1	Natural Heritage Program (N Please note that the vetting of a site resources after a disaster may cause Disaster Site #  Does your plan address the m Does your plan address mass NAGEMENT OF ABA Has your county considered w If yes, has your county developments this section to elaborate on any	Natural Heritage Program (NHP) and the State Historic Preserve Please note that the vetting of a site prior to a disaster is advantageous to local resources after a disaster may cause difficulty for local governments when atten Disaster Site # Site Name  Does your plan address the management of household hazardour Does your plan address mass animal mortality? Yes  NAGEMENT OF ABANDONED MANUFACTUR  Has your county considered whether to implement a program for If yes, has your county developed a written plan for the management Part IX.  this section to elaborate on any info provided in your report as ne	Does your plan address the management of household hazardous waste and white goods

This form is to be submitted electronically. If you require assistance, please contact one of these NC DEACS staff members:

Matt James, email: matt.james@ncdenr.gov phone 919-707-8133 Wendy Worley, email: wendy.worley@ncdenr.gov phone: 919-707-8136

The Division of Environmental Assistance and Customer Service Local Government Assistance Team is ready to assist you in any way we can. Please visit our Web site at <a href="https://deq.nc.gov/conservation/recycling/local-government-recycling-assistance">https://deq.nc.gov/conservation/recycling-local-government-recycling-assistance</a> or e-mail us at Lgteam@ncdenr.gov

