

### 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: Saint James

## 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.

			mpleting this form, please c			
Per	son Completing This Report:	Gary Brown		Title: Town M	lanager	
Mai	ling Address: 4140 Southpor	t-Supply Road	City: St. James		Zip: 28461	
Pho	ne: 910 253-4730	Fax: 910 253-4	732	Date:		
Em	ail: gbrown@stjames.town					
DI			General Instructions	10. 70.	//A.Y. N. 10	
	se remember that the time portions specific question.	eriod for the report is JULY	1, 2017 through JUNE 30, 201	18. Please check	"No" if you have nothing to repor	
1.	Did your local government	have a Recycling Coordinat	tor or similar position for FY 1	7-18? Yes	No No	
	Name Recycling Coordinate	tor (if different from person	completing this report.)			
	Name:			Title:		
	Address:		City:		Zip:	
	Telephone:	Fax:	Email:			
2.	Did your local government	have a Solid Waste Director	r or similar position for FY 17	-18? Yes	⊠ No	
	If Yes, Name:			Title:		
	Address:		City:		Zip:	
	Telephone:	Fax:	Email:			
3.	Did your local government	have dedicated or part-tim	ne Solid Waste Enforcement S	taff for FY 17-18	? Yes No	
	If Yes, Name:			Title:		
	Address:		City:		Zip:	
	Telephone:	Fax:	Email:			
4.	Did your local government all that apply)	have solid waste ordinances	s in place addressing any of the	e following during	g FY 17-18? (if yes, please check	
	Disposal Bans	☐ Illegal Dumping ☐ I	Littering Other, Please D	escribe:		
5.	Did your local government mulching, composting)?	manage, provide or contract	t for any solid waste services in	n FY 17-18 (e.g.,	collection, disposal, recycling,	

### 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) Waste Industries Franchised hauler (please specify) Other (please specify)

17.	Please provide the following information about your community:  a. Total number of households in your jurisdiction? 3,304							
	b. Number of households eligible to participate in the curbside recycling program: 3,304							
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 3,304							
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 ☐ 95 gallon cart ☐ multiple sizes of cart available							
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 Waste Industries							
	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. 3,500							
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   please list # of staffed sites:							
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 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 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?
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

DD CCD AM	Curbside		Drop-off		All "Other" Programs		<b>Total Tons</b>	
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)				62.84			62.84	
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								
Document Shredding						7.88	7.88	
Commingled tons-check al items collected above		985					985	
TOTAL TONS:		985		62.84		7.88	1,055.72	

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)

47. Special Waste Programs for Materials from Citizens by	0		n collect this m the public?	# of sites			ected / manage licated units.	ed.
Used Motor Oil		Yes	⊠ No				gallons	s
Used Oil Filters		Yes	⊠ No		barr	rels, or	<u>'</u>	lbs
Used Antifreeze		Yes	⊠ No			<u>'</u>	ga	allons
Batteries, Lead Acid		Yes	⊠ No		# 1	oatteries, o	r	lbs
Batteries, Dry Cell		Yes	⊠ No					lbs
Fluorescent Bulbs/Lights Conta	aining Mercury	Yes	⊠ No			lbs, or	# b	ulbs
Propane Tanks		Yes	⊠ No			lbs, or	# 1	tanks
Used Cooking Oil / Waste Veg	getable Oil	Yes	⊠ No			lbs, or	ga	allons
Other Special Wastes - please p type here:	provide waste	Yes	⊠ No				·	lbs
Pesticide Containers (NCDA P pesticides themselves)	rogram, not	Yes	⊠ No			lbs, or		con- ainers
NCDA Pesticide Disposal Assi (for management of pesticides,	_	Yes	⊠ No					lbs
Latex Paint (do not include pai HHW event or by a paint excha		Yes	⊠ No			gals, or		lbs
If Yes, please respond to the fo a. Was HHW collected at a pe b. How many days was your F c. Did you partner or co-spons Please list partner(s)  d. Provide number of citizens e. Did your program accept m If yes, please estimate the a	ermitted Tempora HHW Program op sor your HHW pr / households that aterials from sma	ry Event or a een to accept of ogram with a participated	materials durinother <u>local</u> gin your HHW (Conditionall	overnme collection	ent? Yes  on program this	□ No		Temp. Event
<ul> <li>f. Amounts of individual materials is about individual materials is Note, materials listed here s</li> </ul>	s not available, plandshould only be the	lease simply pose collected	provide total c at an HHW P	quantity rogram a	of materials co	llected by linclude ma	HHW progran	n in 48g below.
Used Motor Oil (ga								
Used Antifreeze (ga						Other Batte	eries (lbs)	
Fluorescent Bulbs /			-		_			
<ul><li>g. Provide Total Quantity of n reported in 48f, please net the</li><li>h. Please list HHW Collection</li></ul>	he weight of thos	e materials o	ut of the total	listed he	re.			pound
i. Estimated cost of HHW / C								
Pages 3 through 6 should have on						hat thev D	O provide red	cycling 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.

This	section concer	rns management of vegetative man	<u> </u>			0	
ınpe	ermitted sites an	d it is illegal to burn. Composting	and mu	lching are popi	ular manageme	ent options. Please	e answer the questions below
abou		nent of vegetative materials. Do not					
19.	-	al government operate a yard waste p	_		-	_	ow yard waste is managed by
50.	_	at apply:	-		_	•	-
50. 51.		s of materials were managed by you	•		_	•	
		ial (yard waste, brush, limbs, leav					
		Destination	Check if used	Tons	Cubic Yards		Name and Location of Facility g Vegetative Materials
	End user (to fa	rmer or home-owner)					
	Your local gov	ernment's mulch or compost facility	_				
	Other public m	ulch or compost facility	$\boxtimes$	1,036		Brunswick County Con	npost Facility
	Private mulch	or compost facility					
	Land clearing a	and inert debris landfill (LCID)					
	Energy / Fuel U	Use (e.g. boiler fuel market)					
		Total		1036			
	YARD WAST	E MANAGEMENT FORMULA: If	yard wa	ste quantities ar	e not tracked, y	you may use this fo	ormula below to help you
		vaste volume. Calculate for each tru					
	volume manag	ed by program in the appropriate bo			truck x 3 days/	$wk \ x \ 16 \ wks = 480$	
	- C: CT	XX			. 1: 11:	=	TOTAL $yd^3$
	Size of Truc						TOTAL
This	saction concern	s your local government's provision		Vaste Colle			
52.		te the following table about your government is provision.					
		Who Collects Solid Waste?				ollects Solid Waste?	How is Solid Waste Collected?
	Sector	Insert Letter - see codes at right			aht Willo C		es 1. Once a week at household
	Residential	Primary d Secondary Pri	mary	1 Secondary	b. By C	Contract chise haulers	<ul><li>2. Twice a week at household</li><li>3. Convenience center/greenbox</li></ul>
	Commercial			Secondary Secondary	d. Loca	l government not ved in provision of	4. As needed or by request 5. Daily
	Industrial	Primary d Secondary Pri	mary (	Secondary	servi		6. Other
53.	If you provide	residential waste collection at single	e-family	households in y	our jurisdiction	n, please answer the	e following questions:
	What type of c	ollection method is used?	ully Aut	omated S	Semi-Automate	ed Manual	Don't know
	What is the sta	ndard collection frequency?   W	Veekly	Two tim	es per week	Other	
	What is the typ	pical service point for single family h	nousehol	d waste?	Curbside [	Back yard / Ba	ck door
	What type of c	ollection container is used?	overnme	ent-provided car	rts Resid	lent-provided conta	ainer Bags
	Do you offer b	ulky waste collection services?	Yes	☐ No			
54.		ties - did your government collect w				⊠No	
	If so, were whi	te goods delivered to the county for		<u> </u>	No No	T A 40 040	
	5:1	Part VI. Solid Was		•			
55.	Did <b>your local</b> issues / activiti	government have an education profes? $\square$ Yes $\square$ No (If N	_	inform citizens o Part VII, page		out solid waste ma	nagement and / or recycling
56.	Please estimate	e your annual budget for solid waste	related e	education and or	utreach activitie	es: \$	
57.	Does your com	nmunity produce recycling education	n and out	reach materials	in languages b	esides English?	Yes No
	-	list other languages used:					
58.	Please provide	your recycling website address and	public ir	nformation phor	e number if ap	plicable.	
	Website: https	://www.townofstjamesnc.org/				Phone #: 910 25	53-4730

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

	ficient resources availab stions deal with funding			*	,	f these programs.	The following
-	Did your local governm	•		_		Yes No	)
	With regards to funding	•	•			7105	,
	Tipping fees			eight-based fees (e.g	g. PAYT)	Γire tax	
	Property tax	es / general fund	Sale of recy	yclables		White Goods tax	
	Per househo	Ü	Grants			Disposal Tax	
61.	NC Solid Waste Dispos According to GS 105-1	87.63 these funds n	nust be used by a ci	ity of county solely	for solid waste man	agement programs	
	How are disposal tax d	<u> </u>					
62.	If applicable, please pro	ovide your FY 17-1	8 household fees. (	e.g., a. <u>\$45.00</u> per	<u>year</u> per <u>household</u>	for solid waste)	
							2
					old		
	c. \$ 54	per <u>year</u>		per househo	old	for yard waste	
	d. \$	per		per		for bulky was	te
	e. \$	per		per		availability fe	<u>e</u>
	f. \$	per		per		total charge	
63.	Did your local governmare charged a fee by we	nent operate a Pay-A	As-You-Throw prog	gram for residential	garbage during FY	_	where residents
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full cos	st accounting annua	ally and to develop	a system to
64.	If your local governmen	nt contracts for soli	d waste or recycling	g services, please re	port the annual con	tract amount.	
				_	1		
	Ψ102,773		OR	i yeai			
	\$			and (aclid weets, on	d maarralin a)		
	· · · · · · · · · · · · · · · · · · ·		_	act (solid waste, and			
65.	Collection Programs: P collection programs for not available, please re	waste, recyclables	and yard waste inc	luding materials col		•	_
	[	# of Households			Disposal Cost	Total Cost	Cost Per Ton
		served	Tons Collected	Collection Cost	(tipping fees paid)	including overhead	Managed (calculated by form)
M	Iunicipal Solid Waste*			-			
	Recycling Program**	3,304	1,048	162,775		180,775	172
	Yard Waste Program	2,888	1,036	150,606	0	158,606	153
	Totals	(calculated by form):	2,084	313,381	0	339,381	162
	*for materials collected and	_	_				
	**for materials collected by						
66.	If your government ope						
	facility operations (rour proportionately. Lan	dfill Budget:	_	2	_	_	OSIS
	Transfer Station Budget: \$						-
	Yard	Waste / Compost I	Facility Budget: \$				
		cling Facility Budg	, ,				
67.	What was your governr		-		d recycling services	in 17-18? \$339.38	1
	J = 5 - 51111		0.000		, , , , , , , , , , , , , , , , , , , ,	- · · · <u></u>	

## **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, phone number, and	e-mail of person res	sponsi	_	program.		
	Name:		Title:				
	Address:	City	/:		Zip:		
	Telephone: Fax:			Email:			
69.	Please provide the physical address of the primary	county white good	s colle	ction site.			
	Street 1:						
	Street 2:						
	City:				Zip:		
70.	Please provide the name of the business or person to Name:			ant gases (CFCs) from	m white goods.		
	Street:						
	City:	S	State:	North Carolina	Zip:		
	Phone: Fax:						
71.	Give amounts / types of CFCs removed. Attach rec	cords of CFC remov	val, an	d copy of certification	on of person(s) perfor	ming extraction.	
	Type of CFC Removed				Amount		
72.	CFCs may be recycled or sent for destruction. Give	e name of firm, disp	posal 1	nethod and amount	earned / spent for CFO	C disposal.	
	Firm	Metl	hod of	Disposal	<b>Amount Earned</b>	<b>Amount Spent</b>	
73.	Please report the tonnage of white goods collected white goods tonnage reported on page 5? $\qquad$ Yes	•	8 in the	e Recycling Tonnage	es table on page 5 (qu	estion # 45). Was	
74.	List the amount of revenue for the white goods pro	gram by source:					
	Revenue collected from sale of scrap:	\$					
	Revenue collected from White Goods Tax Distribu	utions: \$					
	Revenue from other source (e.g. grants):	\$					
	Total Revenue:	\$					
75.	According to the White Goods Law, White Good of expenditures White Good Tax Distributions were used to the Cook of					mounts and types of	
	Operational Expenses: \$						
	Capital Improvements: \$						
	Clean-up of Illegal White Goods Dumps: \$						
	Total Expenditures: \$						

Name:   Title:   Address:   City:   Zip:   Title:	<b>5</b> C.	KAP TIKES				
Address:	76.	•				
Telephone: Fax:   Famil:   T77. Please provide the physical address of the primary county scrap tires collection site.   Street 1:   Street 2:   State:   Street 3:   Street 2:   State:   Street 3:   Street 4:   Street 6:   Street 6:   Street 6:   Street 7:   State:   Street 6:   Street 7:   State:   Street 7:   State:   Street 7:   State:   Street 8:						Zip:
Street 1:  Street 2:  City:  State: North Carolina  Zip:  78. Tonnage/Number of scrap tires disposed July 1, 2017-June 30, 2018 (excluding tires from cleamup of nuisance sites)  Tons or  Number of tires  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated misance sites  Tons or  Number of tires  80. Indicate the types of tires collected by the county:  Passenger  81. List the amount of revenue for the scrap tire program by source:  Revenue from Scrap Tire Tax Distributions:  82. Revenue from Scrap Tire Clean-up Reimbursements:  83. Revenue from Scrap Tire Clean-up Reimbursements:  84. County's total scrap tire program contract expenditure (contract disposal/hauling costs),  85. Site Cost S  Other  86. County's diditional scrap tire program expenditure (i.e. labor, convenience center cost), if any.  Labor  Site Cost S  Other  87. Total number of tires collected for tires not eligible for free disposal.  88. County's contract cost for scrap tire disposal.  89. Total humber of tires collected not eligible for free disposal.  80. Name of tire disposal/recycling firm(s):  TEMPORARY DISASTER DEBRIS STAGING SITES  90. Does your local government have a plan in place for management of disaster debris?   81. You indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster creen?  81. Value:  82. Name:  83. Mane:  84. Name:  85. Mane:  86. Mane:  86. Total humber of tires collected not eligible for free disposal.  87. Total number of tires collected not eligible for free disposal.  88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill?   87. No Name of tire disposal/recycling firm(s):  88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill?   88. If scrap tires were not hauled off site by contracted service provider, were they				Emai	1:	
Street 2: City: State: North Carolina	77.	Please provide the physical address of the primary	county scrap tin	res collection sit	e.	
City: State: North Carolina Zip:  78. Tonnage/Number of scrap tires disposed July 1, 2017-June 30, 2018 (excluding tires from cleanup of nuisance sites)  Number of tires  79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites  Number of tires  80. Indicate the types of tires collected by the county:  Passenger		Street 1:				
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Passenger	79.			county designate		
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Other   \$     describe Other:	83.	T -1		venience center	cost), if any.	
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90. Does your local government have a plan in place for management of disaster debris?    Yes    No  If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies:    Stand-alone    In conjunction on the plan is a stand-alone plan or in conjunction with local government agencies:    Stand-alone    In conjunction on the plan is a stand-alone plan or in conjunction with local government agencies:    Stand-alone    In conjunction on the plan is a stand-alone plan or in conjunction with local government or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event?    Yes    No  Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government:  Name:    Name:    Name:    Phone:    Phone:    Phone:    Phone:    Phone:    Name:    Phone:    Name:    Na	89.	Name of tire disposal/recycling firm(s):				
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Name: Mary Nash  Phone: 610 212-8974  Phone: Phone: Phone: Phone:	92.		il address of the	e person(s) in ch	arge of the disaster de	bris management program for
Phone: 610 212-8974 Phone: Phone:		•	me:		Name:	
		Phone: 610 212-8974 Pho				

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

Disaster Site #	Site Name	Disaster Site #	Site Name
DS 10-049	St. James Debris Site 1		
DS 10-050	St. James Debris Site 2		
DS 10-063	St. James Debris Site 3		

94.	1. Does your plan address the management of household hazardous waste and white goods following a disaster? Yes No							
95.	5. Does your plan address mass animal mortality? Yes No							
MA	MANAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES							
96.	. Has your county considered whether to implement a program for the mana	agement of abandoned man	nufactured homes?	Yes No				
	If yes, has your county developed a written plan for the management of ab	oandoned manufactured hor	omes? 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.

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

Community sent updated yard waste totals 8/28 and editor updated

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

