

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: https://get.adobe.com/reader/ - 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

2018



Local Government Report Form

Required - Enter Your Local Government Name: Stanly County

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 Lgte	am@ncdenr.gov by Septen	nber 1, 2018.	
If you have question	s or need assistance completi	ing this form, please call	919-707-8136	or 919-707-8133.
Person Completing This Report: T	Todd Lowder	,	Γitle: Director S	olid Waste
Mailing Address: 1000 N. 1st Stree	t	City: Albemarle		Zip: 28001
Phone: 704-986-3698	Fax: 704-986-3853		Date:	
Email: tlowder@stanlycountync.go)V			
	Gener	al Instructions		
Please remember that the time period for a specific question.	od for the report is JULY 1, 201	7 through JUNE 30, 2018.	Please check "N	To" if you have nothing to report
1. Did your local government ha	we a Recycling Coordinator or s	similar position for FY 17-1	8? Xes	☐ No
Name Recycling Coordinator	(if different from person comple	eting this report.)		
Name: same as above		,	Γitle:	
Address:		City:		Zip:
Telephone:	Fax:	Email:		
2. Did your local government ha	we a Solid Waste Director or sir	milar position for FY 17-18	? Xes	No
If Yes, Name: Todd Lowd	er	,	Γitle: Director So	olid Waste
Address: 1000 N. 1st Street		City: Albemarle		Zip: <u>28001</u>
Telephone: 704-986-3698	Fax: 704-986-3853	Email: tlow	der@stanlycoun	itync.gov
3. Did your local government ha	we dedicated or part-time Soli	id Waste Enforcement Staff	for FY 17-18?	Yes No
If Yes, Name:			Γitle:	
Address:		City:		Zip:
Telephone:	Fax:	Email:		
4. Did your local government ha all that apply)	ive solid waste ordinances in pla	ace addressing any of the fo	llowing during I	FY 17-18? (if yes, please check
☐ Disposal Bans 🔀	Illegal Dumping Litterin	g Other, Please Desc	eribe:	
5. Did your local government m mulching, composting)?	anage, provide or contract for ar	ny solid waste services in F	Y 17-18 (e.g., co	ollection, disposal, recycling, No
If you answer	· ''No'' to question 5, the repo	rt is complete, please ema	il to Lgteam@i	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? 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) Franchised hauler (please specify) Other (please specify)

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction?
	b. Number of households eligible to participate in the curbside recycling program:
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary):
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 Other 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: less than 50 gallon cart
DR	OP-OFF RECYCLING PROGRAM
25.	Did your government operate a Drop-off Recycling Program? Yes No, skip to question # 32
26.	Who collected the recyclable materials for your local government's drop-off recycling program? Local government employees Private contractor Republic Service LLC
	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) 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. 11,706
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: 9
31.	How many of these locations were staffed with attendants?
EL	ECTRONICS RECYCLING PROGRAM
mat	Is 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. 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: 1

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: \$0
	Electronics Management Funds received from DEQ during FY 17-18 (Feb 2018 distribution): \$ 4,950.79
	Electronics Management Funds spent during FY 17-18: \$
	Electronics Management Fund balance as of June 30, 2018: \$0
36.	Briefly explain how Electronics Management Funds were spent during FY 2017-18 (please list items purchased if applicable):
	Processing and disposing of electronics
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: Southern Environmental Solutions of the Carolinas
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? Yes No
OT	THER PUBLIC RECYCLING PROGRAMS
<u>the</u> <u>l</u>	use answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for <u>by local government</u> . 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.	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? $\ \ \ \ \ \ \ \ \ \ \ \ \ $
39.	Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner other than through your curbside or dropoff recycling programs? \square Yes \boxtimes 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

PROGRAM		ırbside		Orop-off	All "C	Other'' Programs	Total Tons
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							24342)
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 her	re U						
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions					\boxtimes	41.26	41.26
Other Electronics						4.25	4.25
C&D Materials Recycling	g						
Commingled tons-check a items collected above				493.12			493.12
TOTAL TONS:	+ - +			493.12		45.51	538.63
TOTAL TONS:				473.12		+J.J1	338.03

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)

<u> </u>									
Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type	1 0			# of sites					
sed Motor Oil	⊠ Yes		No	9			11,043 gal	lons	
sed Oil Filters	∑ Yes		No	9	12 barr	els, or		lbs	
sed Antifreeze	⊠ Yes		No	9			580	gallons	
atteries, Lead Acid	Yes	\boxtimes	No		# t	atteries	, or	lbs	
atteries, Dry Cell	Yes	X	No				·	lbs	
luorescent Bulbs/Lights Containing Mercury	Yes	\boxtimes	No			lbs, or		# bulbs	
ropane Tanks	Yes	\boxtimes	No			lbs, or		# tanks	
sed Cooking Oil / Waste Vegetable Oil	⊠ Yes		No	_ 1	4,828	lbs, or		gallons	
ther Special Wastes - please provide waste type here:	Yes	\boxtimes	No					lbs	
	⊠ Yes		No	11		lbs, or	1.	.5 # containers	
	Yes	\boxtimes	No					lbs	
· · · · · · · · · · · · · · · · · · ·	Yes		No			gals, or		lbs	
ehold Hazardous Waste (HHW) and Condit	ionally Exem	ıpt S	Small Qu	antity G	enerator (CES	SQG) P	rogram or E	vent	
		_					_		O
Yes, please respond to the following question	is:								
	•					ity?	Permanent	∑ Te	mp. Even
. How many days was your HHW Program op	en to accept i	mate	erials duri	ng this F	Fiscal Year? 1				
	ogram with a	noth	ner <u>local</u> g	overnme	ent? X Yes		No		
							25.4		
		•			1 0			7 5	
* * *				• •	_	•	_	」Yes [⊠ No
about individual materials is not available, p	lease simply p	orov	ide total o	quantity (of materials col	lected b	y HHW prog	gram in 4	8g below.
Used Motor Oil (gal)	Use	d O	il Filters		_ # of Barrels,	or	lbs.		
Fluorescent Bulbs / Lights Containing	ng Mercury (lb	os)							
						51	,092		pound
						arolinae	ECOFLO N	JCDAC'	
				CH VIII OIII.	nontai oi tiic Ci		, 2001 20, 1	, CD/IC	·
	-			. •			DO 11	7.	
	Special Waste Programs for Collecting Materials from Citizens by Material Type Jeed Motor Oil Jeed Oil Filters Jeed Antifreeze Jeatteries, Lead Acid Jeatteries, Dry Cell Juorescent Bulbs/Lights Containing Mercury Tropane Tanks Jeed Cooking Oil / Waste Vegetable Oil Jother Special Wastes - please provide waste type here: Jesticide Containers (NCDA Program, not esticides themselves) JCDA Pesticide Disposal Assistance Program for management of pesticides, not containers) Jeatex Paint (do not include paint collected at HW event or by a paint exchange program) Jehold Hazardous Waste (HHW) and Condit Joid your local government operate a household Jeas HHW collected at a permitted Tempora Jehow many days was your HHW Program of Did you partner or co-sponsor your HHW pr Please list partner(s) City of Albemarle Provide number of citizens / households that Did your program accept materials from sma If yes, please estimate the amount of busines Amounts of individual materials collected by about individual materials is not available, p Note, materials listed here should only be th Used Motor Oil (gal) Used Antifreeze (gal) Fluorescent Bulbs / Lights Containir Provide Total Quantity of materials collected reported in 48f, please net the weight of thos Please list HHW Collection Contractor Ref Estimated cost of HHW / CESQG program of	Materials from Citizens by Material Type Seed Motor Oil	Special Waste Programs for Collecting Materials from Citizens by Material Type Sed Motor Oil	Did program collect this materials from Citizens by Material Type Sed Motor Oil Yes No No No No No No No N	Special Waste Programs for Collecting Materials from Citizens by Material Type Sized Motor Oil Yes No 9	Did program collect this materials from Citizens by Material Type Did program collect this material from the public? Sites Data on quar Materials from Citizens by Material Type Sites Data on quar Materials from Citizens by Material Type Sites Data on quar Materials from Citizens by Material Type Sites Data on quar Materials from Citizens Sites Data on quar Materials from Citizens Sites Data on quar Materials from Citizens Data on quar Materials from Citizens Data on quar Materials from Citizens Data on quar Materials (Sites Data on	Did program collect this # of Please report in Materials from Citizens by Material Type Materials from the public? sites Please report in Sed Motor Oil Yes No 9 12 barrels, or Sed Oil Filters Yes No 9 12 barrels, or Sed Oil Filters Yes No 9 12 barrels, or Sed Oil Filters Yes No 9 12 barrels, or Sed Oil Filters Yes No 9 12 barrels, or Sed Oil Filters Yes No 9 12 barrels, or Sed Oil Filters Yes No 9 12 barrels, or Sed Oil Filters Yes No 1 Sed Cooking Oil / Waste Vegetable Oil Yes No 1 4.828 Ibs, or Sed Cooking Oil / Waste Vegetable Oil Yes No 1 4.828 Ibs, or Sed Cooking Oil / Waste Vegetable Oil Yes No 1 4.828 Ibs, or Sed Cooking Oil / Waste Vegetable Oil Yes No 1 Ibs, or Seticide Containers (NCDA Program, not esticides themselves) Yes No 1 Ibs, or Sed Cooking Oil Filters Yes No Ibs, or S	Did program collect this materials from Citizens by Material Type	Materials from Citizens by Material Type material from the public? sites Please report in indicated units.

Pages 3 through 6 should have only been completed by governments indicating in question # 14 that 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.

This	section concerns management of vegetative management	<u> </u>				
	rmitted sites and it is illegal to burn. Compostin					
	ut your management of vegetative materials. Do no					
49.						ow yard waste is managed by
~ 0	checking all that apply: Collected curbside				-	-
50.	Did a storm event significantly impact the amoun	-			-	
51.	What quantities of materials were managed by yo organic material (yard waste, brush, limbs, lea					
	Destination	Check if used	Tons	Cubic Yard		Name and Location of Facility ng Vegetative Materials
	End user (to farmer or home-owner)					
	Your local government's mulch or compost facilit	у 🗆				
	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 to volume managed by program in the appropriate b					
	X					vd^3
	Size of Truck (in yards) Avg. no. of times true					TOTAL
	Part V. S	Solid V	Vaste Colle	ction Ser	vices	
This	section concerns your local government's provisio					
52.					em.	
	Sector Who Collects Solid Waste? Insert Letter - see codes at right			ight VIII	Collects Solid Waste?	How is Solid Waste Collected? ees 1. Once a week at household
	Residential Primary A Secondary B P	rimary	3 Secondary	3 b. By	Contract	2. Twice a week at household3. Convenience center/greenbox
	Commercial	rimary	Secondary	d. Lo	cal government not volved in provision of	4. As needed or by request 5. Daily
	Industrial Primary D Secondary P	rimary	Secondary		vice	6. Other
53.	If you provide <u>residential</u> waste collection at sing	le-family	households in y	our jurisdicti	on, please answer th	ne following questions:
	What type of collection method is used?	Fully Aut	tomated S	Semi-Automa	ated 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	househo	ld waste?	Curbside	Back yard / B	ack door
	What type of collection container is used?	Governm	ent-provided car	rts Res	sident-provided con	tainer Bags
	Do you offer bulky waste collection services?	Yes	☐ No			
54.	For municipalities - did your government collect If so, were white goods delivered to the county for	_		Yes No	No	
	Part VI. Solid Wa	ste and			onal Activitie	es
55.	Did your local government have an education pr		•	_		
		_	to Part VII, page			, ,
56.	Please estimate your annual budget for solid wast	e related	education and o	utreach activi	ties: \$	
57.	Does your community produce recycling education	on and ou	treach materials	in languages	besides English?	Yes No
	If YES, please list other languages used:					
58.	Please provide your recycling website address and	d public i	nformation phor	ne number if		
	Website:				Phone #:	

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

00				anagement progran y's solid waste and n			v	these programs. T	The following
59.	Did yo With r	our local governmegards to funding Tipping fees	nent operate an Ent g sources, check all s es / general fund	erprise Fund for soll that apply to your limber Volume/wee Sale of reco	lid waste servic local governme eight-based fee	ces in FY	AYT) T	Yes No ire tax Thite Goods tax isposal Tax	
61.		olid Waste Dispos	sal Tax proceeds ar	re distributed to elig must be used by a ci			on a quarterly ba	sis by the Departm	
		•	•	used? Upkeep and O					
62.			•	18 household fees. (
	a. \$		per year		per <u>no</u>	usemora		for solid waste	
	b. \$		per		per			for recycling	
	c. \$		per		per			for yard waste	
	d. \$		per		per			for bulky wast	e
	e. \$		per		per			availability fee	<u>:</u>
	f. \$	75	per year		per ho	usehold		total charge	
63.	-	_		As-You-Throw programs the amount of trash	-	_		17-18? (a system v No	where residents
		to GS 130A-309 ers of such costs.		ments are required	to conduct ful	ll cost ac	ccounting annual	ly and to develop	a system to
64.	If your	r local governmen	nt contracts for sol	id waste or recycling	g services, plea	ase repor	t the annual contr	ract amount.	
	\$			For solid waste s	services per yea	ar			
	\$			For recycling per	r year				
	Φ.			OR					
	\$			Combined Contr					
65.	collect	ion programs for	waste, recyclables	following table to to and yard waste incudget in Total Cost	luding materia				
			# of Households served	Tons Collected	Collection C	OST	Disposal Cost pping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
M	[unicipa	al Solid Waste*	11,706	6,475.64	278,45	52.52	124,810.76	457,458.32	70
	Recycl	ling Program**	11,706	493.12	16,53	33.69	59,634.73	114,370.33	23
	Yard V	Waste Program							
			(calculated by form):				184,445.49	571,828.65	82
66.	**for: If your facility	materials collected by r government ope v operations (roun	y public recycling progr erates a landfill, tra	osal in a Municipal Solid rams including those servensfer station, yard very. The budgets for different station of the serven s	vices offered to co vaste /compost fferent facilitie	mmercial a facility of s are con	and industrial generate or recycling facili	ty, please provide empt to allocate co	total budget for
		Trans	sfer Station Budge	t: \$					
		Yard	Waste / Compost	Facility Budget: \$					
			cling Facility Budg						
67.	What v	was your governi	ment's total combin	ned annual budget fo	or all solid was	te and re	ecycling services i	in 17-18? \$ <u>1,135,0</u>	23

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, phon	e number, and e-	mail of person	respons	•	program.	
	Name:				Title: _		
	Address:			City:		Zip:	
	Telephone:						
69.	Please provide the physical address	of the primary co	ounty white go	ods coll	ection site.		
	Street 1:						
	Street 2:						
	City:						
70.	Please provide the name of the busing Name:	-				om white goods.	
	Street:						
	City:			State:	North Carolina	Zip:	
	Phone: F	ax:		Email:	:		
71.	Give amounts / types of CFCs remo		ords of CFC rer	noval, aı	nd copy of certificati		rming extraction.
	Type of CFC	Removed				Amount	
				+			
				+			
72.	CFCs may be recycled or sent for de	estruction Give:	nama of firm	disposal	mothod and amount	parned / spont for CE	C disposal
12.	Firm	zaruction. Give i			f Disposal	Amount Earned	
73.	Please report the tonnage of white g white goods tonnage reported on pa		uring FY 2017	-18 in th	e Recycling Tonnag	ges table on page 5 (qu	nestion # 45). Was
74.	List the amount of revenue for the v	white goods prog	ram by source:				
	Revenue collected from sale of scra	p:	\$				
	Revenue collected from White Goo	ds Tax Distribut	ions: \$				
	Revenue from other source (e.g. gra	unts):	\$				
	Total Revenue:		\$				
75.	According to the White Goods Law expenditures White Good Tax Distr						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:	-	•		
	Address:				
	Telephone: Fax:		Emai	1:	
77.	Please provide the physical address of the primary of	ounty scrap tire	es collection sit	e.	
	Street 1:				
	Street 2:				
	City:		State: North	n Carolina	Zip:
78.	Tonnage/Number of scrap tires disposed July 1, 201 Tons of	7-June 30, 201 or	8 (<u>excluding</u> ti	res from cleanup of nu _Number of tires	isance sites)
79.	Tonnage/Number of scrap tires disposed from clean Tons of		ounty designate	ed nuisance sites Number of tires	
80.	Indicate the types of tires collected by the county: Passenger % Heavy T	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 expenditue excluding costs of nuisance tire cleanups, for FY 17	re (contract dis -18.	posal/hauling c	costs), \$	
83.	County's additional scrap tire program expenditure (Labor \$		renience center	cost), if any.	
	Site Cost \$				
	Other \$	de	scribe Other: _		
84.	County's contract cost for scrap tire disposal. \$		/ Ton; \$	/ Tire	
85.	Hauling cost or fuel surcharge, if not included in co	ntract cost abo	ove. \$	/ Ton; \$	/ Tire
86.	Total tipping fees collected for tires not eligible for	free disposal.	S		
87.	Total number of tires collected not eligible for free	disposal:			
88.	If scrap tires were not hauled off site by contracted	service provide	r, 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	r management o	of disaster debr	is? Yes	No
	If yes, indicate if the plan is a stand-alone plan or in	conjunction w	ith local goverr	nment agencies:	Stand-alone In conjunction
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	person(s) in ch	arge of the disaster del	bris management program for
	your local government: Name: Name: Name	ne:		Name:	
		-			
	E-mail: E-m				

	resources after a disaster may caus Disaster Site #	Site Name	Disaster Site #	Site Name
94.	Does your plan address the r	nanagement of household hazardo	ous waste and white goods follow	ving a disaster? Yes No
	Does your plan address mass		No	, and a substitution of the substitution of th
		NDONED MANUFACTU	RED HOMES BY COUN	NTIES
				ed manufactured homes? X Yes N
	If yes, has your county devel	loped a written plan for the manag	gement of abandoned manufactur	red homes? Xes No
		Part IX	K. Comments	
				your comments about this report or othe
LCA f	his section to elaborate on an	iv into provided in voiir report as:		
			•	•
			•	submit additional sheets if needed.
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Matt James, email: matt.james@ncdenr.gov phone 919-707-8133

Wendy Worley, email: wendy.worley@ncdenr.gov phone: 919-707-8136

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

