## **State of North Carolina**



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

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

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

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

Instructions:

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

Options for obtaining a blank copy of this form:

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

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

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

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

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

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

Form Year



Local Government Report Form

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

### **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.

If you have questions or need assistance completing this form, please call 919-707-8136 or 919-707-8133.

Person Completing This Report: Gary W. Davis				Title: Town Manager			
Ma	iling Address: P.O. Box 10			City: Stantonsburg		Zip: 27883-0010	
Pho	one: 252-238-3608	Fax: 252-	238-2696		Date: Augus	st 8, 2018	
Em	ail: gdavis@townofstantonsbur	g.com					
			General Ir	istructions			
	se remember that the time perior a specific question.	od for the report is J	ULY 1, 2017 thr	ough JUNE 30, 2018. Plea	ase check "No	o" if you have nothing to report	
1.	Did your local government ha	we a Recycling Coo	rdinator or simil	ar position for FY 17-18?	Yes	🔀 No	
	Name Recycling Coordinator	(if different from pe	erson completing	g this report.)			
	Name:			Title	:		
	Address:		i	City:		Zip:	
	Telephone:	Fax:		Email:			
2.	Did your local government ha	ve a Solid Waste D	irector or similar	position for FY 17-18?	Yes	No	
	If Yes, Name:			Title	:		
	Address:			City:		Zip:	
	Telephone:	Fax:		Email:			
3.	Did your local government ha	ve dedicated or pa	<b>rt-time</b> Solid W	aste Enforcement Staff for	FY 17-18?	Yes No	
	If Yes, Name:			Title	:		
	Address:		í	City:		Zip:	
	Telephone:	Fax:		Email:			
4.	Did your local government ha all that apply)	we solid waste ordir	ances in place a			Y 17-18? (if yes, please check	
	⊠ Disposal Bans	Illegal Dumping	Littering	Other, Please Describe	: Pick-up lin	nits and restrictions	
5.	Did your local government m mulching, composting)?	anage, provide or co	ontract for any so	blid waste services in FY 17	7-18 (e.g., co X Yes	llection, disposal, recycling,	
	If you answer	· ''No'' to question	5, the report is	complete, please email to	) Lgteam@n	cdenr.gov.	

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

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction? 376		
	b. Number of households eligible to participate in the curbside recycling program: 376		
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 225		
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?		
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served: 20		
21.	How frequently were the curbside recyclables collected? Once a week Every other week / biweekly Other		
22.	Please describe the collection containers used:   Bins   Multi-bin system     Roll-out carts		
23.	Please describe the method / style of recyclable materials handling:         □ curb-sort (collector separates material as collected)       □ single stream / commingled         □ dual / two stream       □ don't know / other		
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used:         Iss than 50 gallon cart       65 gallon cart         95 gallon cart       multiple sizes of cart available		
DR	OP-OFF RECYCLING PROGRAM		
25.	Did your government operate a Drop-off Recycling Program? Yes Xo, skip to question # 32		
26.	Who collected the recyclable materials for your local government's drop-off recycling program?  Local government employees  Private contractor		
	Other (please specify)		
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program:         source-separated (citizens separate materials by type)       single stream / commingled         dual / two stream (paper separated from cans/bottles)       don't know / other		
28.	Please estimate the number of households served by your drop-off recycling program.		
29.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial		
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:		
31.	How many of these locations were staffed with attendants? All None Some please list # of staffed sites:		
EL	ECTRONICS RECYCLING PROGRAM		
	ise answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any erials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.		
32.	Did your community operate an electronics recycling program in FY 17-18? Xes 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: $\Box$ by appointment or $\boxtimes$ 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 of	ollect or accept televisions fron	n (check all that apply):	Residences	Businesses

- 34. Did your electronics recycling program collect or accept computer equipment from (check all that apply): Residences Businesses
- DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was 35. eligible to receive proceeds from the State Electronics Management Fund in February of 2018, please provide the following information:

Electronics Management Fund balance as of July 1, 2017: \$

Electronics Management Funds received from DEQ during FY 17-18 (Feb 2018 distribution): \$

Electronics Management Funds spent during FY 17-18: \$

Electronics Management Fund balance as of June 30, 2018: \$

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

37. If you did operate an electronics recycling program, please provide the following information about your vendor / contractor: Name of electronics recycling vendor(s) during FY 17-18: Wilson County (interlocal agreement)

Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? No

#### **OTHER PUBLIC RECYCLING PROGRAMS**

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

50.	The your local government operate a mathaning recycling concerton program that provides on property recycling service for residents
	of multifamily properties in a manner other than through your curbside or dropoff recycling programs? Yes No
	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? 🗌 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:	
--	--

41.	Does your local government operate a program to recycle Construction and Demolition materials?	X Yes	No 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.		overnment have an ordinan of encouraging or requiring	0 0			am Yes	No No

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

Public Parks Recycling Program	Athletic Field /Venue Recycling Program

- Recycling Service for Special Events / Festivals Pedestrian Recycling Program
- Please identify all "Other" programs or services operated by your government during FY 17-18. (check all that apply and if possible 44 indicate tonnages on page 5 in "Other" column)
  - Public School Recycling Program
  - Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)
  - Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events
  - Organics / Food Waste Recycling other than yard waste program
  - **Oyster Shell Recycling Program**
  - Other Programs (please specify)

Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.

#### **RECYCLING TONNAGES FROM PUBLIC PROGRAMS**

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

DDOCDAM	Curbside		Drop-off		All "O	ther'' Programs	Total Tons
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear							
Brown							
Green							
Mixed							
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans							
Steel Cans							
White Goods					$\square$	10	10
Other Metal					$\square$	75	75
PAPER:							
Newsprint (ONP)							
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper							
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc) Televisions							
					$\square$		
Other Electronics						25	25
C&D Materials Recycling						35	35
Commingled tons-check all							
items collected above		13.24					13.24
TOTAL TONS:		13.24				120	133.24

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

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

### Part III. Special Waste Collections

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

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

4

about individual materials <u>is not</u> available, please simply provide total quantity of materials collected by HHW program in 48g below Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in question 47 Used Motor Oil (gal) Used Oil Filters # of Barrels, or lbs. Used Antifreeze (gal) Lead Acid Batteries (lbs) Other Batteries (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs) g. Provide Total Quantity of materials collected by HHW Program. If individual materials were	47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		n collect this m the public?	# of sites	-		es collected / managed. rt in indicated units.		
Used Antifreeze       □       yes       No      gallons         Batteries, Lead Acid       □       Yes       No		Used Motor Oil	Yes	🛛 No				gallons	5	
Batteries, Lead Acid       Yes       No       # batteries, or       bbs         Batteries, Dry Cell       Yes       No       Ibs       ibs         Fluorescent Bulbs/Lights Containing Mercury       Yes       No       Ibs, or       # bulbs         Propane Tanks       Yes       No       Ibs, or       # bulbs         Other Special Wastes - please provide waste       Yes       No       Ibs, or       # anks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       Ibs, or       # anks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       Ibs, or       # anks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       Ibs, or       # anks         Use hore:       Yes       No       Ibs, or       # con- tainers         NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)       Yes       No       Ibs         Huwerhold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       48.       Did your local government operate a household hazardous waste collection program or event in FY 17-18?       Yes       No         If Yes, please respond to the following questions:       a.       Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility?       Permane		Used Oil Filters	Yes	🛛 No		barı	rels, or		lbs	
Batteries, Dry Cell       Yes       No		Used Antifreeze	Yes	🛛 No				ga	llons	
Pluorescent Bulbs/Lights Containing Mercury       Yes       No       ibs. or       # bulbs         Propane Tanks       Yes       No       ibs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       ibs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       ibs. or       # tanks         Other Special Wastes - please provide waste       Yes       No       ibs. or       # tanks         Pesticide Containers (NCDA Program, not       Yes       No       ibs. or       # compesticides themselves)         NDDA Pesticide Disposal Assistance Program       Yes       No       ibs       # compesticides.not containers)         Itares Paint (do not include paint collected at HHW event or by a paint exchange program)       Yes       No       gals. or       ibs         Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       48. Did your local government operate a household hazardous waste collection program or event in FY 17-18?       Yes       No         If Yes, please respond to the following questions:       a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Focility?       Permanent       Temp. Eve         b. Ho your program accept materials and using this Fiscal Year?       .       Did your program accept materials and any and bu		Batteries, Lead Acid	Yes	🛛 No		#t	patteries, or	r	lbs	
Propane Tanks		Batteries, Dry Cell	Yes	🛛 No					lbs	
Used Cooking Oil / Waste Vegetable Oil       Yes       No       Ibs, or       gallons         Other Special Wastes - please provide waste type here:       Yes       No       Ibs, or       gallons         Pesticide Containers (NCDA Program, not pesticides themselves)       Yes       No       Ibs, or       galos, or       galos, or         NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)       Yes       No       gals, or       ibs         HHW event or by a paint exchange program       Yes       No       gals, or       ibs         HUW event or by a paint exchange program       Yes       No       gals, or       ibs         HUW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility?       Permanent       Temp. Eve         b. How many days was your HHW program open to accept materials during this Fiscal Year?       No       Pesse ist partner(s)         d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year?       No       Pesse itemp opum as         f. Amounts of individual materials form small businesses (Conditionally Exempt Small Quantity of materials are known please itemize below. If da about individual materials iscollected by HHW Program: if totals for individual materials instel were may       Yes       No         e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity of		Fluorescent Bulbs/Lights Containing Mercury	Yes	🛛 No			lbs, or	# b	ulbs	
Other Special Wastes - please provide waste type here:       Yes       No       Ibs         Other Special Wastes - please provide waste type here:       Yes       No       Ibs         Pesticide Containers (NCDA Program, not pesticides themselves)       Yes       No       Ibs, or       Its         NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)       Yes       No       Ibs       Ibs         Latex Paint (do not include paint collected at HHW event or by a paint exchange program)       Yes       No       gals,       Ibs         Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       48       Did your local government operate a household hazardous waste collection program or event in FY 17-18?       Yes       No         If Yes, please respond to the following questions:       a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility?       Permanent       Temp. Eve         b. How many days was your HHW program open to accept materials during this Fiscal Year?       Eoid you partner or co-sponsor your HHW program with another local government?       Yes       No         Please list partner(s)		Propane Tanks	Yes	No No			lbs, or	#	tanks	
type here:       Image: Second S		Used Cooking Oil / Waste Vegetable Oil	Yes	No No			lbs, or	ga	llons	
pesticides themselves)       Image restricted Disposal Assistance Program (for management of pesticides, not containers)       Yes       No       Its         Latex Paint (do not include paint collected at HHW event or by a paint exchange program)       Yes       No       gals, or       Its         HUW event or by a paint exchange program)       Yes       No       gals, or       Its         HUW event or by a paint exchange program)       Yes       No       gals, or       Its         HUW event or by a paint exchange program)       Yes       No       gals, or       Its         HUW event or by a paint exchange program)       Yes       No       gals, or       Its         HUW event or by a paint exchange program)       Yes       No       gals, or       Its         HUW event or by a paint exchange program       Yes       No       Permanent FY 17-18?       Yes       No         If Yes, please respond to the following questions:       a.       Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility?       Permanent       Temp. Event         b. How many days was your HHW program open to accept materials during this Fiscal Year?			Yes	No No					lbs	
(for management of pesticides, not containers)       Yes       No       Its         Latex Paint (do not include paint collected at HHW event or by a paint exchange program)       Yes       No       gals, or       Its         Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       10s       No       Its         48. Did your local government operate a household hazardous waste collection program or event in FY 17-18?       Yes       No       Its         a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility?       Permanent       Temp. Eve         b. How many days was your HHW program open to accept materials during this Fiscal Year?       .       .         c. Did you partner or co-sponsor your HHW program with another local government?       Yes       No         Please list partner(s)			Yes	No No			lbs, or			
HHW event or by a paint exchange program)       Yes       Image: No       or       Image: No       If Yes, please respond to the following questions:       a.       Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility?       Permanent       Temp. Event       b.       How many days was your HHW Program open to accept materials during this Fiscal Year?       Image: No       Please list partner(s)       Image: No       Please list Hest isto is not so individual materials collected by			Yes	No No					lbs	
<ul> <li>48. Did your local government operate a household hazardous waste collection program or event in FY 17-18? Yes No If Yes, please respond to the following questions: <ul> <li>a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event b. How many days was your HHW program open to accept materials during this Fiscal Year?</li> <li>c. Did you partner or co-sponsor your HHW program with another local government? Yes No</li> <li>Please list partner(s)</li> <li>d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year?</li> <li>e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? Yes No</li> <li>If yes, please estimate the amount of business material managed pounds</li> <li>f. Amounts of individual materials collected by HHW Program: if totals for individual materials collected by HHW Program. If total quantity of materials listed in question 47 Used Motor Oil (gal)</li> <li>Used Oil Filters # of Barrels, or bls.</li> <li>Used Antifreeze (gal)</li> <li>Event Lead Acid Batteries (lbs)</li> <li>Fluorescent Bulbs / Lights Containing Mercury (lbs)</li> <li>g. Provide Total Quantity of materials collected by HHW Program. If individual materials were reported in 48f, please net the weight of those materials out of the total listed here.</li> <li>h. Please list HHW Collection Contractor</li> <li>i. Estimated cost of HHW / CESQG program or event(s) \$</li> </ul></li></ul>		· · · · · ·	Yes	No No					lbs	
Fluorescent Bulbs / Lights Containing Mercury (lbs)		<ul> <li>c. Did you partner or co-sponsor your HHW program with another local government? Yes No Please list partner(s)</li> <li>d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year?</li> <li>e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? Yes No If yes, please estimate the amount of business material managed pounds</li> <li>f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize below. If data about individual materials <u>is not</u> available, please simply provide total quantity of materials collected by HHW program in 48g below. Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in question 47.</li> </ul>								
<ul> <li>g. Provide Total Quantity of materials collected by HHW Program. If individual materials were reported in 48f, please net the weight of those materials out of the total listed here.</li> <li>h. Please list HHW Collection Contractor</li> <li>i. Estimated cost of HHW / CESQG program or event(s) \$</li> </ul>							Other Batte	eries (lbs)		
<ul> <li>h. Please list HHW Collection Contractor</li> <li>i. Estimated cost of HHW / CESQG program or event(s) \$</li> </ul>		g. Provide Total Quantity of materials collected	d by HHW Pr	ogram. If ind	ividual 1				pound	
i. Estimated cost of HHW / CESQG program or event(s) \$										
		i. Estimated cost of HHW / CESQG program	or event(s) \$							
rages 5 intough 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling servic	Pag						hat they D	O provide red	cycling services	

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

is only to be completed by Counties.

#### Part IV. Yard Waste, Mulching and Composting Management

This section concerns management of vegetative materials. Yard waste may not be disposed in sanitary landfills, incinerators, or in unpermitted sites and it is illegal to burn. Composting and mulching are popular management options. Please answer the questions below about your management of vegetative materials. Do not include information on food waste or non-vegetative materials in this section.

- 49. Does your local government operate a yard waste program? ⊠ Yes □ No If yes please indicate how yard waste is managed by checking all that apply: ⊠ Collected curbside □ Collected at convenience center □ Received at yard waste, compost, or LCID facil.
- 50. Did a storm event significantly impact the amount of yard waste your government managed during FY 17-18? 🗌 Yes 🛛 No
- 51. What quantities of materials were managed by your yard waste program? Provide information in TONS OR CUBIC YARDS of
  - organic material (yard waste, brush, limbs, leaves, etc.) managed. For conversion purposes, use 400 lbs./cubic yd.

Destination		Tons	Cubic Yards	Please Provide Name and Location of Facility Receiving Vegetative Materials
End user (to farmer or home-owner)				
Your local government's mulch or compost facility	$\boxtimes$	275		Stantonsburg Yard Waste Facility
Other public mulch or compost facility				
Private mulch or compost facility				
Land clearing and inert debris landfill (LCID)	$\boxtimes$	50		Stantonsburg Yard Waste Facility
Energy / Fuel Use (e.g. boiler fuel market)				
Total		325		

YARD WASTE MANAGEMENT FORMULA: If yard waste quantities are not tracked, you may use this formula below to help you estimate yard waste volume. Calculate for each truck used in your yard waste management program, and then enter the grand total volume managed by program in the appropriate boxes above. *Ex.* 10 yd<sup>3</sup> truck x 3 days/wk x 16 wks = 480 yd<sup>3</sup>

	_ X	X	=	$yd^3$
Size of Truck (in yards)	Avg. no. of times truck fills each week	# of weeks truck is used during year	TOTAL	
	Part V. Solid Was	te Collection Services		

This section concerns your local government's provision of solid waste (garbage) collection services.

52. Please complete the following table about your government's solid waste collection system.

	Sector	SectorWho Collects Solid Waste?How is Solid Waste Collected?Insert Letter - see codes at rightInsert # - see codes at right		Who Collects Solid Waste?         How is Solid Waste Collected?           a. Local government employees 1. Once a week at household								
	Residential	Primary	a	Secondary	U	Primary		Secondary	-8	<ul> <li>a. Local government employee</li> <li>b. By Contract</li> <li>c. Franchise haulers</li> </ul>	<ol> <li>Twice a week at household</li> <li>Twice a week at household</li> <li>Convenience center/greenbox</li> <li>As needed or by request</li> <li>Daily</li> </ol>	
	Commercial	Primary	а	Secondary		Primary	2	Secondary		d. Local government not involved in provision of		
	Industrial	Primary	d	Secondary		Primary		Secondary		service	6. Other	
53.	If you provide	residenti	i <u>al</u> was	te collect	ion at sin	gle-fam	ily hou	seholds in	your jur	isdiction, please answer the	e following questions:	
	What type of co	ollection	metho	od is used	?	Fully A	Autom	ated 🔀	Semi-A	utomated Manual	Don't know	
	What is the star	ndard co	ollectio	n frequen	cy?	Weekl	у	🔀 Two tir	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											
54.	For municipalit If so, were whi			-			-					
		l	Part	VI. So	lid Wa	aste a	nd F	Recyclin	g Edu	icational Activities	5	
55.	Did <b>your local</b> issues / activitie	-	ment h X		-			orm citizens art VII, pag	-	cally about solid waste man	nagement and / or recycling	
56.	Please estimate	your an	inual b	udget for	solid was	ste relat	ed edu	cation and o	outreach	activities: \$500		
57.	Does your com	munity <sub>l</sub>	produc	e recyclir	ng educat	ion and	outrea	ch materials	s in lang	guages besides English?	Yes 🛛 No	
	If YES, please	list other	r langu	ages used	1:							
58.	Please provide	your rec	ycling	website a	address a	nd publi	c info	mation pho	ne num	ber if applicable.		
	Website:									Phone #:		

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

Part VII. Resources fo	r Solid Waste Management and Full Cost Accounting								
	agement programs are essential for continued success of these programs. The following solid waste and materials management programs.								
59. Did your local government operate an Enterprise Fund for solid waste services in FY 17-18? Yes Xo									
60. With regards to funding sources, check all the	50. With regards to funding sources, check all that apply to your local government:								
Tipping fees	Tipping fees Volume/weight-based fees (e.g. PAYT) Tire tax								
Property taxes / general fund									
Per household charges	Grants Disposal Tax								
	distributed to eligible local governments on a quarterly basis by the Department of Revenue. Is be used by a city of county solely for solid waste management programs and services.								
How are disposal tax distributions being use	d?								
	household fees. (e.g., a. <u>\$45.00</u> per <u>year</u> per <u>household</u> for solid waste)								
a. \$ 200.4 per year	per household for solid waste								
b. \$ <u>39.6</u> per <u>year</u>	per household for recycling								
c. \$ per	per for yard waste								
d. \$ per	per for bulky waste								
e. \$ per	per availability fee								
	per household total charge								
63. Did your local government operate a Pay-As are charged a fee by weight or volume for the	s-You-Throw program for residential garbage during FY 17-18? (a system where residents e amount of trash they discard) $\Box$ Yes $\bigotimes$ No								
According to GS 130A-309.08, local government inform users of such costs.	ents are required to conduct full cost accounting annually and to develop a system to								
64. If your local government contracts for solid	waste or recycling services, please report the annual contract amount.								
\$	For solid waste services per year								
\$15,650.83	For recycling per year								
	OR								
\$	Combined Contract (solid waste, and recycling)								

65. Collection Programs: Please complete the following table to the best of your ability to display the full costs of your local government's <u>collection programs</u> for waste, recyclables and yard waste including materials collected from convenience centers. **If full cost analysis is not available, please report program budget in Total Cost column.** 

	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
Municipal Solid Waste*	410	540.21	53,280.75	17,655.36	70,936.11	131
Recycling Program**	376	135.24	15,650.83		15,650.83	115
Yard Waste Program	385	325	42,337.27		42,337.27	130
Totals (calculated by form):		1,000.45	111,268.85	17,655.36	128,924.21	128

\*for materials collected and sent for eventual disposal in a Municipal Solid Waste or Construction and Demolition Landfill.

\*\*for materials collected by public recycling programs including those services offered to commercial and industrial generators. Do not include special waste services.
 66. If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide total budget for facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate costs proportionately. Landfill Budget:

\$\_\_\_\_\_\$\_\_\_\_\_

Transfer Station Budget:

Yard Waste / Compost Facility Budget: \$

Recycling Facility Budget:

67. What was your government's total combined annual budget for all solid waste and recycling services in 17-18? \$162,950

\$

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

### Part VIII. County Mandated Programs

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

WH	IITE GOODS							
68. Please provide name, address, phone number, and e-mail of person responsible for white goods program. Name:								
	Name:			<u> </u>				
	Address:			City:				
	Telephone: Fa	ıx:		Email:				
69.	Please provide the physical address of th	e primary co	ounty white go	oods collection site.				
	Street 1:							
	Street 2:							
	City:			_ State: North Carol	lina	Zip:		
70.	Please provide the name of the business Name:	-			Cs) from whit	e goods.		
	Street:							
	City:				ina	Zip:		
	Phone: Fax:							
71.	Give amounts / types of CFCs removed.							
	Type of CFC Ren					ount		
72.	CFCs may be recycled or sent for destru-	ction Give r	name of firm	disposal method and a	mount earned	/ spent for CE(	7 disposal	
12.	Firm			Iethod of Disposal		ount Earned	Amount Spent	
73.	Please report the tonnage of white goods white goods tonnage reported on page 5		uring FY 2017		Fonnages table	e on page 5 (qu	estion # 45). Was	
74.	List the amount of revenue for the white	goods progr	am by source	:				
	Revenue collected from sale of scrap:		\$					
	Revenue collected from White Goods Ta	ax Distributi						
	Revenue from other source (e.g. grants):							
	Total Revenue:							
75.	According to the White Goods Law, Whee expenditures White Good Tax Distribute						mounts and types of	
	Operational Expenses:	\$			_			
	Capital Improvements:							
	Clean-up of Illegal White Goods Dumps							
	Total Expenditures:	\$			-			
201	17-2018 Local Government Annual Report	Report D	ue Date: Sep	tember 1, 2018 Subr	- mit to: Lgteam	@ncdenr.gov	Page 9 of 11	

6.	Please provide name, address, phone number, and e- Name:	1		1 1 0	
				1 ttle:	
	Address:				
	Telephone: Fax:		Ema	il:	
7.	Please provide the physical address of the primary c	•	p tires collection si	te.	
	Street 1:				
	Street 2:				
	City:				
3.	Tonnage/Number of scrap tires disposed July 1, 201 Tons <b>o</b>	7-June 30, <b>r</b>	2018 (excluding ti	ires from cleanup of nu Number of tires	iisance sites)
).	Tonnage/Number of scrap tires disposed from clean Tons o	up of state	or county designat	ed nuisance sites Number of tires	
).	Indicate the types of tires collected by the county: Passenger % Heavy Tr	uck	%	Large Off-Road	%
	List the amount of revenue for the scrap tire program	n by sourc	e:		
	Revenue from Scrap Tire Tax Distributions:	\$			
	Revenue from Tire Fees:	\$			
	Revenue from Scrap Tire Clean-up Reimbursements	s: \$			
	Revenue from Scrap Tire Cost-Overrun Grants:	\$			
	Total Revenue:	\$			
2.	County's total scrap tire program contract expenditure excluding costs of nuisance tire cleanups, for FY 17-	re (contrac -18.	t disposal/hauling	costs), \$	
3.	County's additional scrap tire program expenditure ( Labor \$		convenience center	cost), if any.	
	Site Cost \$				
	Other \$		describe Other:		
ŀ.	County's contract cost for scrap tire disposal. \$		/ Ton; \$	/ Tire	
5.	Hauling cost or fuel surcharge, if not included in con-	ntract cost	above. \$	/ Ton; \$	/ Tire
5.	Total tipping fees collected for tires not eligible for	free dispo	sal. \$		
<i>.</i>	Total number of tires collected not eligible for free of	_			
8.	If scrap tires were not hauled off site by contracted s	-			
).	•	1	•		
E	MPORARY DISASTER DEBRIS STAGI				
).	Does your local government have a plan in place for			ris? Yes	No
	If yes, indicate if the plan is a stand-alone plan or in	conjunctio	on with local gover	nment agencies:	Stand-alone In conjuncti
•	If you indicated having a plan, has the plan been rev requirements for public assistance reimbursement in			anagement or FEMA t	to ensure it meets the basic
	Please list the name, contact numbers(s), and e-mail your local government:			narge of the disaster de	bris management program for
	Name: Nam	e:		Name:	
	Phone: Phor	ie:		Phone:	
	E-mail: E-ma	••		E-mail:	

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

Disaster Site #	Site Name		Disaster Site #	Site Name					

94.	Does your plan address the management of household hazardous waste and white goods following a disaster?
95.	Does your plan address mass animal mortality?
MANAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES	
96.	Has your county considered whether to implement a program for the management of abandoned manufactured homes? 🗌 Yes 📄 No
	If yes, has your county developed a written plan for the management of abandoned manufactured homes? Yes No

#### Part IX. Comments

Use this section to elaborate on any info provided in your report as necessary. We would appreciate your comments about this report or other matters regarding solid waste management in North Carolina. Thank you for your time. You may submit additional sheets if needed.

This form is to be submitted electronically. If you require assistance, please contact one of these NC DEACS staff members: Matt James, email: matt.james@ncdenr.gov\_phone 919-707-8133

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

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

