

# **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, 2018 - June 30, 2019

## Submit this form to Lgteam@ncdenr.gov by September 1, 2019.

On the following pages, you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2018-2019. 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

You can download a blank copy of this form from this web site: <u>http://deq.nc.gov/about/divisions/waste-management/</u>solidwaste-section/annual-reporting

This form must be completed electronically using Adobe Reader. It is suggested that you complete the form using the latest version of Adobe Reader which can be downloaded for free at: <u>https://get.adobe.com/reader/</u>. Please <u>DO NOT</u> 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. Name the file Community Name LGAR 2018-19. For example, Aberdeen LGAR 2018-19.

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:

Sandy Skolochenko, phone: 919-707-8147, email: sandy.skolochenko@ncdenr.gov Matt James, phone: 919-707-8133, email: matt.james@ncdenr.gov

Form Year



**Required:** Select your Local Government Name SURF CITY

# State of North Carolina

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

## 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 Lgteam@ncdenr.gov by September 1, 2019.

If you have questions or need assistance completing this form, please call 919-707-8147 or 919-707-8133.

Per	son Completing This Report: Lydia King	т	Title: Utility Fin	ance Manager			
Ma	iling Address: PO Box 2475	City: Surf City		Zip: 28445			
Pho	one: 910-328-4131		Date: 9/4/2	019			
Em	ail: lking@townofsurfcity.com						
		General Instructions					
	ase remember that the time period for the re-	port is JULY 1, 2018 through JUNE 30, 2019.	Please check "N	to" if you have nothing to report			
1.	Did your local government have a Recycl	ing Coordinator or similar position for FY 18-1	9? Yes	🔀 No			
	Name Recycling Coordinator (if different	from person completing this report.)					
	Name:	Т	Title:				
	Address:	City:		Zip:			
	Telephone:	Email:					
2.	Did your local government have a Solid V	Waste Director or similar position for FY 18-195	? Yes	No			
	If Yes, Name:	Т	Fitle:				
	Address:	City:		Zip:			
	Telephone:	Email:					
3.	Did your local government have <b>dedicate</b>	ed or part-time Solid Waste Enforcement Staff	for FY 18-19?	Yes No			
	If Yes, Name:	Т	Title:				
	Address:	City:		Zip:			
	Telephone:	Email:					
4.	Did your local government have solid was all that apply)	ste ordinances in place addressing any of the fol	llowing during I	FY 18-19? (if yes, please check			
	Disposal Bans Illegal Dumping	Littering Construction & Demoli	ition Othe	er:			
5.	Did your local government manage, provi mulching, composting)? Xes	ide or contract for any solid waste services in FY	Y 18-19 (e.g., co	ollection, disposal, recycling,			

If you answer "No" to question 5, the report is complete, please email to Lgteam@ncdenr.gov.

	Part I. Waste Reduction and Recycling Programs Serving Government Facilities
6.	Did your local government have a recycling program in place for collecting recyclable materials generated at public buildings in FY 18-19? Yes No
7.	Did your local government have any program or policy encouraging or requiring local agencies to purchase products with recycled content? $\Box$ Yes $\bigotimes$ No
8.	Did your local government have a program in place to collect and recycle spent fluorescent lights generated from <u>the public buildings</u> and facilities that were operated by your government in FY 18-19? $\Box$ Yes $\boxtimes$ No
	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, reduction of single use plastics, food waste reduction, or promoting reuse and donation? $\Box$ Yes $\boxtimes$ No
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, 2018 through June 30, 2019? Choose <b>ONE</b> option that best applies.
	My local government <b>DID operate or contract</b> for a recyclables recovery program. (please continue to question 15)
	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. (Go to Part IV on page 7.)
CU	RBSIDE RECYCLING PROGRAM
15.	Did your government operate a Curbside Recycling Program? X Yes No, skip to question # 25
16.	Who collected the recyclable materials for your local government's curbside recycling program?
	Local government employees
	Private contractor (please specify)
	Franchised hauler (please specify) Waste Management ending Feb 2019 and Waste Industries beginning March 2019
	Other (please specify)

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction? 3,696
	b. Number of households eligible to participate in the curbside recycling program: 3,696
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 3,696
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       Mandatory         Does your franchise consist of:       One service district       Multiple service districts
19.	What sector(s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served by the curbside recycling program?         Image: Sector (s) of your community was served
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served: <u>96</u>
21.	How frequently were the curbside recyclables collected?  Once a week  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)         □ dual / two stream         □ dual / two stream         □ don't know / other         □ don't know /
DR	OP-OFF RECYCLING PROGRAM
24.	Did your government operate a Drop-off Recycling Program? 🗌 Yes 🛛 No, skip to question # 31
25.	Who collected the recyclable materials for your local government's drop-off recycling program?  Local government employees  Private contractor
	Other (please specify)
26.	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
27.	Please estimate the number of households served by your drop-off recycling program.
28.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial
29.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:
30.	How many of these locations were staffed with attendants? All None Some please list # of staffed sites:
EL	ECTRONICS RECYCLING PROGRAM
31.	Did your community operate an electronics recycling program in FY 18-19? Yes Xo, skip to question # 37
	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: Dy appointment or unscheduled
	If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:

32.	Did your electronics	s recycling program co	ollect or accept television	s from (check all t	hat apply): Residences	Businesses
	2	5 01 0	1			

- 33. Did your electronics recycling program collect or accept computer equipment from (check all that apply): Residences Businesses
- 34. 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, 2018: \$

Electronics Management Funds received from DEQ during FY 18-19 (Feb 2019 distribution): \$

Electronics Management Funds spent during FY 18-19: \$

Electronics Management Fund balance as of June 30, 2019: \$

35. Briefly explain how Electronics Management Funds were spent during FY 2018-19 (please list items purchased if applicable):

36. 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 18-19:

Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?

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

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

37.	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?									
38.	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									
39.	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									
40.	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									
41.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 18-19. (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									
42.	Please identify all "Other" programs or services operated by your government during FY 18-19. (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**

- 43. 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, 2018 through JUNE 30, 2019. 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 on page 6 in the SPECIAL WASTE section of this report.
  - c. 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.

BROCDAM		Curbside		Drop-off	All "O	Other" Programs	Total Tons
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear	$\square$						
Brown	$\square$						
Green	$\square$						
Mixed	$\square$						
PLASTIC:							
PET #1	$\square$						
HDPE #2	$\square$						
All Plastic Bottles	$\square$						
Other Plastic Containers	$\square$						
Bulky Rigid Plastics							
METAL:							
Aluminum Cans	$\square$						
Steel Cans							
PAPER:							
Newsprint (ONP)	$\square$						
Cardboard (OCC)	$\square$						
Magazines (OMG)	$\square$						
Office Paper	$\square$						
Mixed / Other Paper	$\square$						
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT		Report all tons	in Other c	olumn			
report yard waste tons here							
OTHER MATERIALS:						[	
Textiles (clothes etc) Televisions							
Other Electronics	-						
C&D Materials Recycling	-						
White Goods		Report all tons	in Other c	olumn			
Other Metal	-						
					- - -		
					- - -		
Commingled tons-check all							
items collected above*		192.68					192.68
TOTAL TONS:		192.68					192.68

44. \*If you checked commingled, which material recovery facility does your community use: sonoco -onslow

45. **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 cardboard disposal ban results in private cardboard recycling (and you have a way to track the tons collected)

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

## Part III. Special Waste Collections

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 46 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 # 46 but instead report with HHW materials in question # 47.

46.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type	Did program collect this material from the public?	# of sites	Data on quar	ntities col	llected / manag ndicated units.	ed.
	Used Motor Oil	🗌 Yes				gallon	s
	Used Oil Filters	Yes		barı	rels, or		lbs
	Used Antifreeze	Yes				ga	llons
	Batteries, Lead Acid	Yes		# ł	patteries,	or	lbs
	Batteries, Dry Cell	Yes					lbs
	Fluorescent Bulbs/Lights Containing Mercury	Yes			lbs, or	# b	ulbs
	Propane Tanks	Yes			lbs, or	#	tanks
	Used Cooking Oil / Waste Vegetable Oil	Yes			lbs, or	ga	llons
	Other Special Wastes - please provide waste type here:	Yes					lbs
	Pesticide Containers (NCDA Program, not pesticides themselves)	Yes			lbs, or		con- ainers
	NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)	Yes					lbs
	Latex Paint (do not include paint collected at HHW event or by a paint exchange program)	Yes			gals, or		lbs
	<ul> <li>a. Was HHW collected at a permitted Tempora</li> <li>b. How many days was your HHW Program of</li> <li>c. Did you partner or co-sponsor your HHW program of</li> </ul>	pen to accept materials duri	ng this F	Fiscal Year?	ity?	Permanent [	Temp. Ever
	<ul> <li>Please list partner(s)</li> <li>d. Provide number of citizens / households that</li> <li>e. Did your program accept materials from smallent fyes, please estimate the amount of busines</li> <li>f. Amounts of individual materials collected by about individual materials is not available, p</li> <li>Note, materials listed here should only be th</li> </ul>	all businesses (Very Exemp ss material managed y HHW Program: if totals f lease simply provide total c	ot Small for indivi	Quantity Gener	ators)? pounds are know llected by	yn please itemiz y HHW program	e below. If dat n in 47g below
	Used Motor Oil (gal)	Used Oil Filters		# of Barrels,	or	lbs.	
	Used Antifreeze (gal)	Lead Acid Batter	ies (lbs)		Other Bat	tteries (lbs)	
	Fluorescent Bulbs / Lights Containir						
	g. Provide Total Quantity of materials collected reported in 47f, please net the weight of those section of the	d by HHW Program. If ind	ividual 1	materials were			poun
	h. Please list HHW Collection Contractor						
	i. Estimated cost of HHW / VSQG program or	event(s) \$					
All	es 3 through 6 should have only been complet governments answering "Yes" to question #5 o ch are for Counties only.						

#### Special Waste Collections (Do Not Include Materials Collected as part of an HHW Collection Program or Event)

2018-2019 Local Government Annual Report *Report Due Date: September 1, 2019* Submit to: Lgteam@ncdenr.gov

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

Yard waste may not be disposed in sanitary landfills, incinerators, or in unpermitted sites and it is illegal to burn. Do not include information on food waste or non-vegetative materials in this section.

- 48. 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.
- 49. Did a storm event significantly impact the amount of yard waste your government managed during FY 18-19? 🛛 Yes 🗌 No
- 50. What quantities of materials were managed by your yard waste program? **Provide information in TONS** <u>OR</u> **CUBIC YARDS of organic material (yard waste, brush, limbs, leaves, etc.) managed**. For conversion purposes, use 400 lbs./cubic yd.

Destination	Check if used	Tons		Cubic Yards	Facility Name and Location
End user (to farmer or home-owner)			or		
Your local government's mulch or compost facility			or		
Other public mulch or compost facility	$\boxtimes$	95	or		Kings Materials
Private mulch or compost facility			or		
Land clearing and inert debris landfill (LCID)			or		
Energy / Fuel Use (e.g. boiler fuel market)			or		
Total		95	or		

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 cubic yard truck x 3 days/wk x 16 wks = 480* cubic yards

	Х	Σ	Κ	=		cubic yards
Size of Truck (in yards)	Avg. no. of times	truck fills each week	# of weeks truck is used during year		TOTAL	
	Part V					

51. Please complete the following table about your government's solid waste (garbage) collection system.

	Sector			ts Solid V see codes				Waste Coll ee codes at 1		Who Collects Solid Waste? a. Local government employees	How is Solid Waste Collected?
	Residential	Primary	с	Secondary		Primary	1	Secondary		b. By Contract	<ol> <li>2. Twice a week at household</li> <li>3. Convenience center/greenbox</li> </ol>
	Commercial	Primary	с	Secondary		Primary 4 Secondary d. Local government not 4. As nee				<ul><li>4. As needed or by request</li><li>5. Daily</li></ul>	
	Industrial	Primary	с	Secondary		Primary		Secondary		1	6. Other
52.	If you provide what type of co					gle-fam Fully A	2		5	isdiction, please answer the utomated 🗌 Manual	following questions:
	What is the star					Weekl		Two tin			
	What is the typical service point for single family household waste?										
	What type of collection container is used?										
	Do you offer b	ulky was	ste coll	ection set	vices?	X Ye	es	🗌 No			
53.	For municipalit If so, were whi									∕es ⊠No No	
		]	Part	VI. So	lid W	aste a	nd F	Recycling	g Edu	icational Activities	
54.	Did <b>your local</b> issues / activitie	-			-	-		orm citizens art VII, page	-	cally about solid waste man	agement and / or recycling
55.	Please estimate	your ar	inual b	udget for	solid wa	ste relate	ed edu	cation and o	outreach	activities: \$	
56.	Does your com	munity	produc	e recyclir	ig educat	ion and	outrea	ch materials	s in lang	uages besides English?	]Yes 🗌 No
	If YES, please	list othe	r langu	ages used	l:						

	Part VII	. Resources f	or Solid Was	te Manageme	nt and Full C	Cost Accounti	ng			
	<ol> <li>Did your local government operate an Enterprise Fund for solid waste services in FY 18-19? Yes No</li> <li>NC Solid Waste Disposal Tax proceeds are distributed to eligible local governments on a quarterly basis by the Department of Revenue. According to GS 105-187.63 these funds must be used by a city or county solely for solid waste management programs and services.</li> </ol>									
	Did your local governn		-		200	Yes No	)			
	If yes, how are disposa		·	aste Hauling Offset	for costs					
	<ul> <li>What other funding sources does your local government use?</li> <li>Tipping fees</li> <li>Volume/weight-based fees (e.g. PAYT)</li> <li>Tire tax</li> <li>Property taxes / general fund</li> <li>Sale of recyclables</li> <li>White Goods tax</li> <li>Grants</li> </ul>									
6	0. If applicable, please pr	ovide your FY 18-1		ollow example form		for a lid an act	_			
	ex: \$ \$75.00	per		per	household	for solid waste	2			
	a. \$	per		per95 gallo	n cart	for solid waste	2			
	b. \$ <u>10</u>	per		per 95 gallo	n cart	for recycling				
	c. \$	per <u>3 time</u>	s per year	per Place in	ROW	for yard waste				
	d. \$	per 1 time	per year	per Place in	ROW	for bulky wast	te			
	e. \$	per		per		availability fee	e			
	f. \$ <u>25</u>	per month		per		total charge				
6	<ol> <li>Did your local governm are charged a fee by we</li> </ol>					18-19? (a system v	where residents			
	according to GS 130A-30.		nents are required	to conduct full cos	t accounting annua	lly and to develop	a system to			
6	2. If your local governme	nt contracts for soli	d waste or recycling	g services, please re	port the annual cont	tract amount.				
	\$		For solid waste s	services per year						
	\$		For recycling pe	r year						
			OR							
	\$701,647.86		_ Combined Contr	ract (solid waste, and	l recycling)					
6	<ol> <li>Collection Programs: P collection programs for not available, please r</li> </ol>	waste, recyclables	and yard waste inc	luding materials col						
	not available, picase i		uget in Total Cost			Total Cost	Cost Per Ton			
		# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	including overhead	Managed (calculated by form)			
ſ	Municipal Solid Waste*	3,996	1,694.92	420,988.42	106,676.81	808,324.67	476			
ŀ	<b>Recycling Program**</b>	3,996	192.68	280,659.44	24,295.97	24,295.95	126			
	Yard Waste Program	3,996	95	117,400		117,400	1,235			

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

1,982.6

\*\*for materials collected by public recycling programs including those services offered to commercial and industrial generators. Do not include special waste services.
64. 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:

819,047.86

130,972.78

950,020.62

Transfer Station Budget:

Totals (calculated by form):

Yard Waste / Compost Facility Budget: \$

Recycling Facility Budget:

65. What was your government's total combined annual budget for all solid waste and recycling services in 18-19? \$950,020.62

\$

\$

2018-2019 Local Government Annual Report *Report Due Date: September 1, 2019* Submit to: Lgteam@ncdenr.gov

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# Part VIII. Mandated Programs

The following questions pertain to programs mandated by NC statute. **Only Counties** need to complete questions 66 through 88. Failure to complete Part VIII may result in non-eligibility for grant funding. **Municipalities** should skip to question 89 on page 10.

L	IITE GOODS						
66.	Please provide name, address, phone number, and e-mail of person responsible for white goods program. Name:						
	Name:						
	Address:		City:				
	Telephone: Fax:		Email:				
67.	Please provide the physical address of the primary county white goods collection site.						
	Street 1:						
	Street 2:						
	City:			Zip:			
68.	Please provide the name of the business or person that removes the refrigerant gases (CFCs) from white goods.						
	Name:						
	Street:						
	City:			Zip:			
	Phone: Fax:						
69.							
09.	Type of CFC removed. Attach records of CFC rem		emoval, and copy of certification of person(s) performing extraction. Amount				
	v 1						
70							
70.	CFCs may be recycled or sent for destruction. Giv		ethod of Disposal	Amount Earned	Amount Spent		
			iction of Disposal				
				. 11			
71.	Please report the tonnage of white goods collected white goods tonnage reported on page 5? $\Box$ Ye		-19 in the Recycling Tonna	iges table on page 5 (qu	testion # 43). Was		
72.	List the amount of revenue for the white goods pr						
12.	Revenue collected from sale of scrap:						
	Revenue collected from White Goods Tax Distrib	·					
	Revenue from other source (e.g. grants):						
	Total Revenue:	\$					
73.	According to the White Goods Law, White Good Tax Distributions must be spent on white goods activities. Give amounts and types of expenditures White Good Tax Distributions were used for (do not include funds received from grants).						
	Operational Expenses: \$						
	Capital Improvements: \$						
	Clean-up of Illegal White Goods Dumps: \$						
	Total Expenditures: \$						
201	18-2019 Local Government Annual Report <b>Repor</b>	rt Due Date: Sept	ember 1, 2019 Submit to	: Lgteam@ncdenr.gov	Page 9 of 11		

	<b>RAP TIRES</b> Please provide name, address, phone number, and e-ma	ail of per	son responsi	ble for so	ran tires progr	am	
/4.	Name:		1				
	Address:		~!			Zip:	
	Telephone: Fax:						
75.	Please provide the physical address of the primary cour Street 1:	nty scrap	tires collect	ion site.			
	Street 2:						
	City:			North C	arolina	Zip:	
76	Tonnage/Number of scrap tires disposed July 1, 2018-J	June 30, 2	2019 ( <u>exclud</u>	<u>ling</u> tires		of nuisance sites)	
77.	Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites         Tons or       Number of tires						
78.	Indicate the types of tires collected by the county: Passenger% Heavy Truck	%	Large Of	f-Road	%	Agricultural	%
79.	List the amount of revenue for the scrap tire program b	y source:	:				
	Revenue from Scrap Tire Tax Distributions:						
	Revenue from Scrap Tire Fees:						
	Revenue from Scrap Tire Clean-up Reimbursements:						
	Revenue from Scrap Tire Cost-Overrun Grants:						
	Total Revenue:	\$					
80.	County's total scrap tire program contract expenditure ( excluding costs of nuisance tire cleanups, for FY 18-19	(contract).	disposal/hau	aling cost	<sup>ts),</sup> \$		
81.	County's additional scrap tire program expenditure (i.e. Labor \$		onvenience o	center cos	st), if any.		
	Site Cost \$						
	Other \$		describe Ot	her:			
82.	County's contract cost for scrap tire disposal. \$		/ Ton; \$		/ Tire		
83.	Hauling cost or fuel surcharge, if not included in contra	act cost a	above. \$		/ Ton; \$	/ Tire	
84.	Total tipping fees collected for tires not eligible for free disposal. \$						
85.	Total number of tires collected not eligible for free disposal:						
86.	If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill? Yes No						
87.	Name of tire disposal/recycling firm(s):						
MA	NAGEMENT OF ABANDONED MANUFA	ACTUF	RED HON	IES BY		<b>S</b>	
88.	Has your county considered whether to implement a pr						? Yes No
	If yes, has your county developed a written plan for the	e manage	ment of abai	ndoned n	nanufactured h	omes? Yes	No No
TE	MPORARY DISASTER DEBRIS STAGING	<b>G SITE</b>	S - Count	ies and	Municipali	ties	
89.	Does your local government have a plan in place for m				1	No	
	If yes, indicate if the plan is a stand-alone plan or in co	njunctior	n with local g	governme	ent agencies:	Stand-alone	In conjunction
90.	If you indicated having a plan, has the plan been review requirements for public assistance reimbursement in a c				igement or FEN	A to ensure it me	ets the basic

2018-2019 Local Government Annual Report *Report Due Date: September 1, 2019* Submit to: Lgteam@ncdenr.gov P

91. 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: DRC	Name:	Name:
Phone: 504-482-2848	Phone:	Phone:
E-mail:	E-mail:	E-mail:

92. 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
Does your plan address	the management of: Household hazardo	ıs waste Mass ani	mal mortality

White goods

94. Does your plan include coordination with NC DOT on clearing roads and waste in the right of way? Xes No

Abandoned vessels

### **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.

Question # 41: Recycling Events: None this year. (email from staff Oct 23, 2019 -DH)

93.

Question 41: Parks Recycling: Waste Industries has these on its routes and there are no separate tons (email from staff Oct 23, 2019 -DH)

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

Sandy Skolochenko, email: sandy.skolochenko@ncdenr.gov phone: 919-707-8147 Matt James, email: matt.james@ncdenr.gov phone 919-707-8133

### THIS FORM IS DUE SEPTEMBER 1, 2019

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

