

#### State of North Carolina

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

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

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

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

#### **Instructions:**

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

Options for obtaining a blank copy of this form:

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

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

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

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

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

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

Form Year

2018



Local Government Report Form

<b>Required</b> - Enter Your Local Government Name:	
Waco	

## 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	n to Lgteam@ncdenr.gov by <b>Septen</b>	ber 1, 2018.	
	If you have question:	s or need assistance	completing this form, please call	919-707-8136 or	919-707-8133.
Per	son Completing This Report: T	iffany D. Lott	7	Title: Town Clerk	
Ma	iling Address: PO BOX 249		City: Waco		Zip: 28169
Pho	one: 704-435-3923	Fax:		Date: 07-26-2	018
Em	ail: lott3171@bellsouth.net				
			General Instructions		
	ase remember that the time perion a specific question.	od for the report is JUL	Y 1, 2017 through JUNE 30, 2018.	Please check "No"	if you have nothing to report
1.		ve a Recycling Coordi	nator or similar position for FY 17-1	8? Xes	☐ No
	Name Recycling Coordinator	(if different from perso	on completing this report.)		
	Name: John Barrett Jr.		1	Citle: Mayor	
	Address: PO BOX 249		City: Waco		Zip: 28169
	Telephone:	Fax:	Email:		
2.	Did your local government ha	ve a Solid Waste Direc	etor or similar position for FY 17-18	?  Yes	No No
	If Yes, Name:		1	Citle:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
3.	Did your local government ha	ve dedicated or part-	time Solid Waste Enforcement Staff	for FY 17-18? [	Yes No
	If Yes, Name:		Т	Title:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
4.	Did your local government ha all that apply)	ve solid waste ordinan	ces in place addressing any of the fol	llowing during FY	17-18? (if yes, please check
	Disposal Bans	Illegal Dumping	Littering Other, Please Desc	ribe:	
5.	Did your local government ma mulching, composting)?	anage, provide or contr	ract for any solid waste services in F	Y 17-18 (e.g., colle	ection, disposal, recycling,  No
	If you answer	"No" to question 5.	the report is complete, please ema	il to Leteam@ncd	lenr.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 Yes 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? Cleveland County 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)

1/.	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 <b>number of households</b> 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
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
	Other (please specify)
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program:  source-separated (citizens separate materials by type) single stream / commingled dual / two stream (paper separated from cans/bottles) don't know / other
28.	Please estimate the number of households served by your drop-off recycling program.
29.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:
31.	How many of these locations were staffed with attendants?
EL	ECTRONICS RECYCLING PROGRAM
	Is answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any perials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.  Did your community operate an electronics recycling program in FY 17-18? Yes No, skip to question # 38  If you did operate an electronics recycling program, please indicate style of program:  Permanent - Curbside Collection Permanent - Drop-off Scheduled Collection Day or Event Part of HHW Program If you offer curbside collection of electronics is it: by appointment or unscheduled  If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:
	If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:

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

#### RECYCLING TONNAGES FROM PUBLIC PROGRAMS

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

each individual mat		rbside		op-off	All "Othe	r'' 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							
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 here							
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions					$\perp$		
Other Electronics					$\perp$		
C&D Materials Recycling							
					<u> </u>		
			$\bot$				
Commingled tons-check all items collected above							
TOTAL TONS:			_				
DECYCLING TONN	ACEACAI		OLICY OD C				

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

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

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

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

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

47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type	1 0	n collect this m the public?	# of sites	Data on quant Please rep	ities collected ort in indicat		
	Used Motor Oil	Yes	⊠ No				gallons	
	Used Oil Filters	Yes	⊠ No		barre	ls, or	lbs	
	Used Antifreeze	Yes	⊠ No				gallons	
	Batteries, Lead Acid	Yes	⊠ No		# ba	tteries, or	lbs	
	Batteries, Dry Cell	Yes	⊠ No			<b>'</b>	lbs	
	Fluorescent Bulbs/Lights Containing Mercury	Yes	⊠ No		1	bs, or	# bulbs	
	Propane Tanks	Yes	⊠ No		1	bs, or	# tanks	
	Used Cooking Oil / Waste Vegetable Oil	Yes	⊠ No		1	bs, or	gallons	
	Other Special Wastes - please provide waste type here:	Yes	⊠ No			·	lbs	
	Pesticide Containers (NCDA Program, not pesticides themselves)	Yes	⊠ No		1	bs, or	# containers	
	NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)	Yes	⊠ No				lbs	
	Latex Paint (do not include paint collected at HHW event or by a paint exchange program)	Yes	⊠ No		<u></u> g	gals, or	lbs	
	Did your local government operate a household If Yes, please respond to the following question a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program of the collected at a permitted Tempora op collected at a permitted Tempora of the collected at	s: ary Event or a pen to accept i	t a Permanent materials duri	HHW (	Collection Facility Fiscal Year?		Yes No	mp. Event
	Please list partner(s)  d. Provide number of citizens / households that e. Did your program accept materials from sma If yes, please estimate the amount of busines	all businesses	(Conditionall	y Exem	pt Small Quantity		? Yes	No
	f. Amounts of individual materials collected by about individual materials <u>is not</u> available, p Note, materials listed here should only be the	y HHW Progr lease simply	ram: if totals f provide total c	quantity	idual materials ar of materials colle	e known plea	W program in 48	g below.
	Used Motor Oil (gal)	Use	ed Oil Filters		_ # of Barrels, o	r	lbs.	
	Used Antifreeze (gal)	Lea	d Acid Batter	ies (lbs)	0	ther Batteries	s (lbs)	
	Fluorescent Bulbs / Lights Containing	ng Mercury (l	bs)		_			
	<ul><li>g. Provide Total Quantity of materials collected reported in 48f, please net the weight of thos</li><li>h. Please list HHW Collection Contractor</li></ul>	e materials or	ut of the total	listed he	ere.			pound —
	_							
	i. Estimated cost of HHW / CESQG program of es 3 through 6 should have only been complet					at they DO n	rovide recycline	g sprvices
· ug	os o monagni o snoum nuve omy ocen complet	on by govern	month circuit	ving in t	juosiivii # 17 III	u may DO p	i oriuo i etytillis	, burreces

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	s section concerns management of vegetative ma	· ·				
	ermitted sites and it is illegal to burn. Compostin					
	ut your management of vegetative materials. Do no				_	
49.	Does your local government operate a yard waste checking all that apply: Collected curbside				•	ow yard waste is managed by vaste, compost, or LCID facil
50.	Did a storm event significantly impact the amount				•	* · · · · · · · · · · · · · · · · · · ·
51.		•			-	
	organic material (yard waste, brush, limbs, lea	_	managed. For	conversion p	_	
	Destination	Check if used	Tons	Cubic Yard	C .	Name and Location of Facility ng Vegetative Materials
	End user (to farmer or home-owner)					
	Your local government's mulch or compost facility	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: I					
	estimate yard waste volume. Calculate for each tr volume managed by program in the appropriate be					
	X					$vd^3$
	Size of Truck (in yards)  Avg. no. of times truc					TOTAL
	Part V. S	olid V	Vaste Colle	ction Ser	vices	
This	s section concerns your local government's provision					
52.	Please complete the following table about your go	vernmen	t's solid waste c	ollection syste	em.	
	Sector Who Collects Solid Waste? Insert Letter - see codes at right	Insert #	- see codes at r	ight VIII	Collects Solid Waste?	How is Solid Waste Collected? es 1. Once a week at household
	Residential		1 Secondary		Contract nchise haulers	<ul><li>2. Twice a week at household</li><li>3. Convenience center/greenbox</li></ul>
	Commercial	rimary	Secondary		cal government not olved in provision of	<ul><li>4. As needed or by request</li><li>5. Daily</li></ul>
	Industrial Primary d Secondary Pr	rimary	Secondary		vice	6. Other
53.	If you provide <u>residential</u> waste collection at single	e-family	households in y	our jurisdiction	on, please answer th	ne following questions:
	What type of collection method is used?	Fully Aut	omated S	Semi-Automa	ted 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	househol	d waste?	Curbside	Back yard / Ba	ack door
	What type of collection container is used?	Governme	ent-provided ca	rts 🔀 Res	ident-provided cont	tainer Bags
	Do you offer bulky waste collection services?	Yes	No No			
54.	For municipalities - did your government collect v	_		Yes	⊠No	
	If so, were white goods delivered to the county for			☐ No		
	Part VI. Solid Was		• •	_		
55.	Did <b>your local government</b> have an education prissues / activities? Yes No (If I	_	inform citizens o Part VII, page		bout solid waste ma	anagement and / or recycling
56.	Please estimate your annual budget for solid waste	e related o	education and o	utreach activi	ties: \$	
57.	Does your community produce recycling education	n and out	treach materials	in languages	besides English? [	Yes No
	If YES, please list other languages used:					
58.	Please provide your recycling website address and	l public ii	nformation pho	ne number if a	pplicable.	
	Website:				Phone #:	

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

	ficient resources availab stions deal with funding				-	these programs.	The following
-	Did your local governm	• •		_		Yes N	lo
	With regards to funding	-	•				
	Tipping fees			eight-based fees (e.g	g. PAYT) Ti	re tax	
		es / general fund				hite Goods tax	
	Per househo	•	Grants	•		isposal Tax	
61.	NC Solid Waste Dispos According to GS 105-1	sal Tax proceeds ar			ents on a quarterly bas	sis by the Depart	
	How are disposal tax d	istributions being u	sed?				
62	If applicable, please pr	•		(e.g. a. \$45.00 per	vear per household f	or solid waste)	
02.	a. \$						te
	b. \$	per		per		for recycling	
	c. \$	per		per		for yard wast	te
	d. \$	per		per		for bulky wa	ste
	e. \$	per		per		availability fo	<u>ee</u>
	f. \$	per		per		total charge	
63.	Did your local government are charged a fee by we			_	0 0	7-18? (a system No	where residents
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full cos	st accounting annual	ly and to develo	p a system to
			d1:				
04.	If your local government	iii commacts for som	•	-	eport the annual contr	act amount.	
	\$ <u>17,229.2</u>		_ For solid waste	services per year			
	\$4,102.2		_ For recycling pe	r year			
			OR				
	\$		_ Combined Contr	ract (solid waste, an	d recycling)		
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	cluding materials co			
	· •	# of Households			Disposal Cost	Total Cost	Cost Per Ton
		served	Tons Collected	Collection Cost	(tipping fees paid)	including overhead	Managed (calculated by form)
M	Iunicipal Solid Waste*						_
	Recycling Program**						_
	Yard Waste Program						_
	Totals	(calculated by form):					
	*for materials collected and	_	_				
	**for materials collected by						
66.	If your government ope						
	facility operations (roun proportionately. Lan	nd to nearest dollar dfill Budget:	•	Φ	combined, please atte	•	costs
	Trans	sfer Station Budget	: \$				_
	Yard	Waste / Compost I	Facility Budget: \$				
	-	cling Facility Budg					_
67.	What was your government	ment's total combin	ed annual budget fo	or all solid waste an	d recycling services i	n 17-18? \$ <u>21,50</u>	0

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

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

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

SC.	RAP TIRES					
76.	Please provide name, address, phone number, and e-n Name:	•	-			
	Address:				Zip:	
	Telephone: Fax:		Emai	1:		
77.	Please provide the physical address of the primary con Street 1:	-				
	Street 2:					
	City:		State: North	n Carolina	Zip:	
78.	Tonnage/Number of scrap tires disposed July 1, 2017 Tons or	-June 30, 201	8 ( <u>excluding</u> tin	res from cleanup of nu _Number of tires	iisance sites)	
79.	Tonnage/Number of scrap tires disposed from cleanu Tons or		ounty designate	ed nuisance sites Number of tires		
80.	Indicate the types of tires collected by the county: Passenger % Heavy True	ick	%	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 Reimbursements:					
	Revenue from Scrap Tire Cost-Overrun Grants:					
	Total Revenue:	\$				
82.	County's total scrap tire program contract expenditure excluding costs of nuisance tire cleanups, for FY 17-1	e (contract dis	posal/hauling c	costs), \$		
83.	County's additional scrap tire program expenditure (i. 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 cont	tract cost abo	ove. \$	/ Ton; \$	/ Tire	
86.	Total tipping fees collected for tires not eligible for fi	ree disposal. §	S			
87.	Total number of tires collected not eligible for free di					
88.	If scrap tires were not hauled off site by contracted se	rvice provide	r, were they cut	t and disposed in a loc	al landfill? Yes	No
89.	Name of tire disposal/recycling firm(s):					
TE	MPORARY DISASTER DEBRIS STAGIN					
90.	Does your local government have a plan in place for i	nanagement o	of disaster debr	is? Yes	No No	
	If yes, indicate if the plan is a stand-alone plan or in c	onjunction w	ith local govern	nment agencies:	Stand-alone In conju	nction
91.	If you indicated having a plan, has the plan been revier requirements for public assistance reimbursement in a			anagement or FEMA t	to ensure it meets the basic No	
92.	Please list the name, contact numbers(s), and e-mail a	ddress of the	person(s) in ch	arge of the disaster de	bris management program	for
	your local government: Name: Name	:		Name:		
				<del></del>		
	E-mail: E-mai					

	Disaster Site #	Site Name		Disaster Site #		Site Name
4.	Does your plan address	the management of household haz	zardous waste an	d white goods follo	owing a disaster?	Yes No
5.	Does your plan address	s mass animal mortality?	s 🗌 No			
ΙA	NAGEMENT OF	ABANDONED MANUFAC	CTURED HO	MES BY COU	NTIES	
6.	Has your county consid	lered whether to implement a prog	ram for the mana	agement of abando	ned manufacture	d homes? Yes X
	If yes, has your county	developed a written plan for the m	nanagement of ab	andoned manufact	ured homes?	Yes No
		Part	t IX. Comm	ents		
		on any info provided in your repor				
atte	ers regarding solid waste	e management in North Carolina.	Thank you for yo	our time. You may	submit addition	al sheets if needed.
atte S n	ers regarding solid waste otes (post data-downloa	e management in North Carolina. 'd): Waco indicated a curbside recy	Thank you for yo	our time. You may	submit addition	al sheets if needed.
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This form is to be submitted electronically. If you require assistance, please contact one of these NC DEACS staff members:

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

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

