Environmental Quality

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, 2016 -- June 30, 2017

Please submit this form to Lgteam@ncdenr.gov by September 1, 2017.

On the following pages you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2016-2017. 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, 2017.

Options for obtaining a blank copy of this form:

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

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

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

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

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

Joseph Fitzpatrick, phone: 919-707-8121, email: joseph.fitzpatrick@ncdenr.gov Rob Taylor, phone: 919-707-8139, email: rob.taylor@ncdenr.gov

Form Year

2017



Local Government Report Form

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

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, 2016 -- June 30, 2017

COMPLETION AND SUBMISSION OF THIS REPORT WILL FULFILL THE ANNUAL REPORTING MANDATE TO THE STATE AS REQUIRED BY G.S. 130A-309.09A.

	I	Please submit this form to Lg	team@ncdenr.gov by Sep	tember 1, 2017.			
	If you have questions	or need assistance comple	eting this form, please c	all 919-707-8121	or 919-707-8139.		
Per	son Completing This Report: M	ARK BYRD		Title: PUBLIC V	WORKS DIRECTOR		
Ma	iling Address: P.O. BOX 459		City: ERWIN		Zip: 28339		
Pho	one: 910-897-5876	Fax: 910-897-5543		Date: 08/30)/2017		
Em	ail: mbyrd@erwin-nc.org						
		Gen	eral Instructions				
for	ase remember that the time period a specific question.	•	•				
1.	Did your local government have a Recycling Coordinator or similar position for FY 16-17? Yes No						
	Name Recycling Coordinator (if different from person com	pleting this report.)				
	Name:			Title:			
	Address:		City:		Zip:		
	Telephone:	Fax:	Email:				
2.	Did your local government have	ve a Solid Waste Director or	similar position for FY 16	-17?	⊠ No		
	If Yes, Name:			Title:			
	Address:		City:		Zip:		
	Telephone:	Fax:	Email:				
3.	Did your local government have	ve dedicated or part-time So	olid Waste Enforcement S	taff for FY 16-17?	Yes No		
	If Yes, Name:			Title:			
	Address:		City:		Zip:		
	Telephone:	Fax:	Email:				
4.	Did your local government hav all that apply)	ve solid waste ordinances in p	place addressing any of the	e following during F	FY 16-17? (if yes, please check		
	Disposal Bans	Illegal Dumping Litter	ing Other, Please D	escribe:			
5.	Did your local government ma mulching, composting)?	nage, provide or contract for	any solid waste services i	n FY 16-17 (e.g., co	ollection, disposal, recycling, No		
	If you answer	"No" to auestion 5, the rev	ort is complete please e	mail to I oteam@n	acdenr 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 16-17? 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 16-17? 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, 2016 through June 30, 2017? My local government **DID operate or contract** for a recyclables recovery program. (please continue to question 15) My local government DID NOT operate or contract for recyclables recovery BUT DID participate in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; then go to Part IV on page 7.) With which local government did you participate? My local government **DID NOT operate**, contract or participate in a recycling program. (Go to Part IV on page 7.) If your local government **DID** operate or contract for a recyclables recovery program, please indicate in the following sections the type of program in operation and provide specifics about your program(s). CURBSIDE RECYCLING PROGRAM Did your government operate a Curbside Recycling Program? X Yes No, skip to question # 25 Who collected the recyclable materials for your local government's curbside recycling program? 16. Local government employees Private contractor (please specify) Waste Industries Franchised hauler (please specify) Other (please specify)

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction? 2,013
	b. Number of households eligible to participate in the curbside recycling program: 1,923
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 1,923
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 Description Every other week / biweekly
22.	Please describe the collection containers used: ☐ Bins ☐ Blue bags ☐ Multi-bin system ☐ Roll-out carts
23.	Please describe the method / style of recyclable materials handling: curb-sort (collector separates material as collected)
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used: ☐ less than 50 gallon cart ☐ 95 gallon cart ☐ multiple sizes of cart available
DR	OP-OFF RECYCLING PROGRAM
25.	Did your government operate a Drop-off Recycling Program? 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
mate	use answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any erials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5. Did your community operate an electronics recycling program in FY 16-17? Yes No, skip to question # 38
J∠.	If you did operate an electronics recycling program, please indicate style of program:
	Permanent - Curbside Collection Permanent - Drop-off Scheduled Collection Day or Event Part of HHW Program
	If you offer curbside collection of electronics is it: by appointment or unscheduled
	If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:

33.	Did your electronics recycling program collect or accept televisions from (check all that apply): Residences Businesses
34.	Did your electronics recycling program collect or accept computer equipment from (check all that apply): Residences Businesses
35.	DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was eligible to receive proceeds from the State Electronics Management Fund in February of 2017, please provide the following information:
	Electronics Management Fund balance as of July 1, 2016: \$
	Electronics Management Funds received from DEQ during FY 16-17 (Feb 2017 distribution): \$
	Electronics Management Funds spent during FY 16-17: \$
	Electronics Management Fund balance as of June 30, 2017: \$
36.	Briefly explain how Electronics Management Funds were spent during FY 2016-17 (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 16-17:
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?
OT	THER PUBLIC RECYCLING PROGRAMS
the	ase answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ycling Tonnages Chart on pg 5.
38. 39.	Did your local government operate a multifamily recycling collection program that provides on-property recycling service for residents of multifamily properties in a manner other than through your curbside or dropoff recycling programs? $\ \ \ \ \ \ \ \ \ \ \ \ \ $
	other than through your curbside or dropoff recycling programs? Yes No
40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes 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 16-17. (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 16-17. (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, 2016 through JUNE 30, 2017. 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

DD OCD AND	Curbside		Drop-off		All "(Other" Programs	Total Tons
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear							
Brown							
Green							
Mixed							
PLASTIC:	<u> </u>						
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	; L						
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled tons-check al items collected above		173.25					173.25
TOTAL TONS:		173.25					173.25
101112101101							1.3.20

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.

No.

sites

Please report in indicated units.

gallons

Special Waste Collections (Do Not Include Materials Collected as part of an HHW Collection Program or Event) Did program collect this **Special Waste Programs for Collecting** # of Data on quantities collected / managed.

Yes

Materials from Citizens by Material Type

Used Motor Oil

material from the public?

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 _			·	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	I	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 Yes	No _	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 Temporate by How many days was your HHW Program of	ns: ary Event or	at a Permanent HF	IW Collection Facility		Yes Permanent	⊠ No	np. Event
If Yes, please respond to the following question a. Was HHW collected at a permitted Temporab. How many days was your HHW Program oc. Did you partner or co-sponsor your HHW p	ns: ary Event or pen to accep	at a Permanent HF ot materials during t	IW Collection Facility		Permanent		
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If Yes, please respond to the following question a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program of c. Did you partner or co-sponsor your HHW p Please list partner(s) d. Provide number of citizens / households that	ary Event or pen to accept rogram with t participate all businesses material ray HHW Problease simply	at a Permanent HF of materials during to another local gove d in your HHW col es (Conditionally E managed gram: if totals for it y provide total quar	IW Collection Facility his Fiscal Year? rnment? Yes lection program this I xempt Small Quantity findividual materials ar htity of materials collection	Fiscal Y Gener Counds The known of the kno	Permanent Year? ators)?	Ten Yes ize below am in 48	np. Event No W. If data g below.
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 If Yes, please respond to the following question a. Was HHW collected at a permitted Temporab. How many days was your HHW Program of c. Did you partner or co-sponsor your HHW perplease list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sm. If yes, please estimate the amount of busines f. Amounts of individual materials collected be about individual materials is not available, provide, materials listed here should only be the 	ary Event or pen to accept rogram with t participate all businesses material ruy HHW Problease simply tose collecte	at a Permanent HI of materials during to another local gove d in your HHW coles (Conditionally Emanaged gram: if totals for it y provide total quand at an HHW Progressed Oil Filters	IW Collection Facility his Fiscal Year? rnment? Yes lection program this I exempt Small Quantity findividual materials ar ntity of materials colle ram and should not in # of Barrels, o	Fiscal Y Gener Founds Fie know Fiected by Colude m	Permanent Year? ators)? n please item HHW prograterials listed	Yes ize below am in 48	No W. If data g below. tion 47.
If Yes, please respond to the following question a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program of c. Did you partner or co-sponsor your HHW p Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sm If yes, please estimate the amount of busine f. Amounts of individual materials collected b about individual materials is not available, p Note, materials listed here should only be the Used Motor Oil (gal)	ary Event or pen to acceprogram with t participate all businesses material ruy HHW Problease simply tose collecte	at a Permanent HF of materials during to another local gove d in your HHW col es (Conditionally E managed gram: if totals for in y provide total quan d at an HHW Programs ead Acid Batteries (ead Acid Batteries)	IW Collection Facility his Fiscal Year? rnment? Yes lection program this I exempt Small Quantity findividual materials ar ntity of materials colle ram and should not in # of Barrels, o	Fiscal Y Gener Founds Fie know Fiected by Colude m	Permanent o 'ear? ators)? n please item HHW prograterials listed lbs.	Yes ize below am in 48	No W. If data g below. tion 47.
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If Yes, please respond to the following question a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program of c. Did you partner or co-sponsor your HHW p Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sm If yes, please estimate the amount of busine f. Amounts of individual materials collected be about individual materials is not available, p Note, materials listed here should only be the Used Motor Oil (gal) Used Antifreeze (gal) Fluorescent Bulbs / Lights Containing	ary Event or pen to accept rogram with t participate all businesses material ray HHW Problease simply nose collecte ULang Mercury	at a Permanent HF of materials during to another local gove d in your HHW col es (Conditionally E managed gram: if totals for it y provide total quar d at an HHW Progr sed Oil Filters ead Acid Batteries ((lbs)	IW Collection Facility his Fiscal Year? rnment? Yes lection program this I exempt Small Quantity findividual materials are antity of materials collection and should not in the program	Fiscal Y Gener Founds Fie know Fiected by Colude m	Permanent o 'ear? ators)? n please item HHW prograterials listed lbs.	Yes ize below am in 48	No W. If day g belover the state of the stat

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.

		Part IV	/. Yard Waste	e, Mulo	ching and G	Composti	ing Managem	ent
								landfills, incinerators, or in
								e answer the questions below terials in this section.
			operate a yard waste				_	ow yard waste is managed by
+7.								vaste, compost, or LCID facil.
50.			y impact the amount					
51.								OR CUBIC YARDS of
	organic mater	ial (yard wast	e, brush, limbs, leav	ves, etc.)	managed. For	conversion p	_	
		Destination	on	Check if used	Tons	Cubic Yard		Name and Location of Facility ag Vegetative Materials
	End user (to fa	rmer or home-	owner)					
	Your local gov	ernment's mul	ch or compost facility	у				
	Other public m	ulch or compo	st facility					
	Private mulch	or compost fac	ility					
	Land clearing a	and inert debris	s landfill (LCID)	\boxtimes		52	0 Harnett County Landfil	11
	Energy / Fuel U	Jse (e.g. boiler	fuel market)					
		Total				52	0	
	YARD WAST	E MANAGEM	IENT FORMULA: I	f yard wa	ste quantities a	re not tracked	, you may use this fo	ormula below to help you
								en enter the grand total
	volume manage		in the appropriate bo	oxes abov	•	truck x 3 day	$s/wk \times 16 \ wks = 480$	•
	Size of Two		X Avg. no. of times truc	lr filla aaala	XX	tourals is used du	=	TOTAL yd^3
	Size of Truc	ck (iii yarus)	-		Vaste Colle			TOTAL
Thic	saction concern	s vour local ac	overnment's provision					
52.			g table about your go					
			ets Solid Waste?			ootod2	Collects Solid Waste?	How is Solid Waste Collected?
	Sector	Insert Letter -	see codes at right			ight a. Lo	cal government employed	es 1. Once a week at household
	Residential	Primary b			1 Secondary	-	Contract inchise haulers	2. Twice a week at household3. Convenience center/greenbox
	Commercial	Primary		rimary	Secondary		cal government not volved in provision of	4. As needed or by request5. Daily
	Industrial	Primary	Secondary Pr	rimary	Secondary		vice	6. Other
53.	If you provide	residential was	te collection at singl	e-family	households in y	our jurisdicti	on, please answer th	e following questions:
	What type of c	ollection metho	od is used?	Fully Aut	omated S	Semi-Automa	ted Manual	Don't know
	What is the sta	ndard collectio	n frequency? 🔀 V	Weekly	Two tim	nes per week	Other	
	What is the typ	oical service po	int for single family	househol	d waste?	Curbside	Back yard / Ba	ick door
	What type of c	ollection conta	iner is used? \boxtimes (Governme	ent-provided car	rts Res	ident-provided cont	ainer Bags
	Do you offer b	ulky waste coll	lection services?	X Yes	☐ No			
54.		•	government collect vered to the county for	_		Yes No	No	
		Part	VI. Solid Was	ste and			onal Activitie	S
55.	Did vour local				•	-		anagement and / or recycling
	issues / activiti	_		_	o Part VII, page			
56.	Please estimate	your annual b	udget for solid waste	e related o	education and or	utreach activi	ties: \$	
57.	Does your com	munity produc	e recycling educatio	n and out	reach materials	in languages	besides English?	Yes No
	If YES, please							
58.	•	your recycling	website address and	l public ii	nformation phor	ne number if a		
	Website:						Phone #:	

Part VII. Resources for Solid Waste Management and Full Cost Accounting Sufficient resources available to solid waste management programs are essential for continued success of these programs. The following questions deal with funding of your community's solid waste and materials management programs. 59. Did your local government operate an Enterprise Fund for solid waste services in FY 16-17? Yes No 60. With regards to funding sources, check all that apply to your local government: X Tipping fees Volume/weight-based fees (e.g. PAYT) Tire tax Property taxes / general fund Sale of recyclables White Goods tax Per household charges Grants Disposal Tax 61. 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 of county solely for solid waste management programs and services. How are disposal tax distributions being used? 62. If applicable, please provide your FY 16-17 household fees. (e.g., a. \$45.00 per year per household for solid waste) household a. \$ for solid waste 3.27 for recycling for yard waste for bulky waste per e. \$ availability fee per 18.25 household 63. Did your local government operate a Pay-As-You-Throw program for residential garbage during FY 16-17? (a system where residents are charged a fee by weight or volume for the amount of trash they discard) According to GS 130A-309.08, local governments are required to conduct full cost accounting annually and to develop a system to inform users of such costs. 64. If your local government contracts for solid waste or recycling services, please report the annual contract amount. For solid waste services per year 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 collection programs 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*		1,438.2				0
Recycling Program**		173.25				0
Yard Waste Program						
Totals	(calculated by form):	1,611.45				0

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

66.	If your governme	ent operates a landfill, transfer	station, yard waste /compost facility or recycling facility, please pro	vide total budget for
	facility operation	s (round to nearest dollar). If	budgets for different facilities are combined, please attempt to alloc	ate costs
	proportionately.	Landfill Budget:	\$	
		Transfer Station Budget:	\$	
		Yard Waste / Compost Faci	lity Budget: \$	

67. What was your government's total combined annual budget for all solid waste and recycling services in 16-17? \$

Recycling Facility Budget:

^{**}for materials collected by public recycling programs including those services offered to commercial and industrial generators. Do not include special waste services.

Part VIII. County Mandated Programs

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

WH	ITE GOODS					
68.	Please provide name, address, phone number, and	l e-mail of person	responsi	_	program.	
	Name:			Title:		
	Address:	Ci	ty:		Zip:	
	Telephone: Fax:			Email:		
69.	Please provide the physical address of the primary	y county white goo	ods colle	ection site.		
	Street 1:					
	Street 2:					
	City:				Zip:	
70.	Please provide the name of the business or person Name:				m white goods.	
	Street:					
	City:					
	Phone: Fax:		Email:			
71.	Give amounts / types of CFCs removed. Attach re	ecords of CFC rem	oval, ar	nd copy of certificati	on of person(s) perfor	ming extraction.
	Type of CFC Removed				Amount	
72.	CFCs may be recycled or sent for destruction. Give					
	Firm	Mo	ethod of	f Disposal	Amount Earned	Amount Spent
73.	Please report the tonnage of white goods collected white goods tonnage reported on page 5? Yes	•	17 in th	e Recycling Tonnag	es table on page 5 (qu	estion # 45). Was
74.	List the amount of revenue for the white goods pr	ogram by source:				
	Revenue collected from sale of scrap:	\$				
	Revenue collected from White Goods Tax Distrib	outions: \$				
	Revenue from other source (e.g. grants):	\$				
	Total Revenue:	\$				
75.	According to the White Goods Law, White Good expenditures White Good Tax Distributions were					mounts and types of
	Operational Expenses: \$					
	Capital Improvements: \$					
	Clean-up of Illegal White Goods Dumps: \$					
	Total Expenditures: \$					

SC.	RAP TIRES				
76.	Please provide name, address, phone number, and e-Name:	•			
	Address:				
	Telephone: Fax:		Emai	il:	
77.	Please provide the physical address of the primary c	ounty scrap tires	collection sit	te.	
	Street 1:				
	Street 2:				
	City:		State: North	n Carolina	Zip:
78.	Tonnage/Number of scrap tires disposed July 1, 201 Tons o	6-June 30, 2017 r	(excluding ti	res from cleanup of nu _Number of tires	isance sites)
79.	Tonnage/Number of scrap tires disposed from clean Tons o		anty designat	ed nuisance sites _Number of tires	
80.	Indicate the types of tires collected by the county: Passenger % Heavy Tr	ruck	%	Large Off-Road	%
81.	List the amount of revenue for the scrap tire program	•			
	Revenue from Scrap Tire Tax Distributions:				
	Revenue from Tire Fees:				
	Revenue from Scrap Tire Clean-up Reimbursement	s: \$			
	Revenue from Scrap Tire Cost-Overrun Grants:				
	Total Revenue:	\$			
82.	County's total scrap tire program contract expenditu excluding costs of nuisance tire cleanups, for FY 16	re (contract dispo -17.	osal/hauling o	costs), \$	
83.	County's additional scrap tire program expenditure (Labor \$		nience center	cost), if any.	
	Site Cost \$				
	Other \$	desc	cribe Other: _		
84.	County's contract cost for scrap tire disposal. \$	/	Γon; \$	/ Tire	
85.	Hauling cost or fuel surcharge, if not included in co	ntract cost abov	e. \$	/ Ton; \$	/ Tire
86.	Total tipping fees collected for tires not eligible for	free disposal. \$			
87.	Total number of tires collected not eligible for free	disposal:			
88.	If scrap tires were not hauled off site by contracted s	service provider,	were they cu	t and disposed in a loc	al landfill? Yes No
89.	Name of tire disposal/recycling firm(s):				
TE	MPORARY DISASTER DEBRIS STAGI	NG SITES			
90.	Does your local government have a plan in place for	management of	disaster debr	ris? Xes [No
	If yes, indicate if the plan is a stand-alone plan or in	conjunction with	h local govern	nment agencies:	Stand-alone In conjunction
91.	If you indicated having a plan, has the plan been rev requirements for public assistance reimbursement in			anagement or FEMA t Yes	o ensure it meets the basic No
92.	Please list the name, contact numbers(s), and e-mail	address of the p	erson(s) in ch	arge of the disaster de	bris management program for
	your local government: Name: Name	ie:		Name:	
		ne:			
	E-mail: E-m			 E-mail:	
		-			

	Site Name	Disaster Site #	Site Name
Does your plan address the n	nanagement of household hazardous	s waste and white goods following	a disaster? Yes No
Does your plan address mass	s animal mortality?	No	
ANAGEMENT OF ABA	NDONED MANUFACTUR	ED HOMES BY COUNTI	ES
Has your county considered	whether to implement a program for	r the management of abandoned m	anufactured homes? Yes N
If yes, has your county devel	oped a written plan for the manager	ment of abandoned manufactured	homes? Yes No
	Part IX.	Comments	
	y info provided in your report as neagement in North Carolina. Thank		or comments about this report or other additional sheets if needed.

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

Joseph Fitzpatrick, email: joseph.fitzpatrick@ncdenr.gov phone 919-707-8121 Rob Taylor, email: rob.taylor@ncdenr.gov phone: 919-707-8139

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

