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: Winton

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.

		Please submit this form to Lgt	team@ncdenr.gov by Se j	ptember 1, 2017.				
	If you have questic	ons or need assistance comple	eting this form, please o	call 919-707-812	1 or 919-707-8139.			
Per	son Completing This Report:	Carl Pierce		Title: Public Works Superintendent				
Ma	iling Address: P.O. Box 134		City: Winton		Zip: 27986			
Pho	one: 252-358-3041	Fax: 252-358-3273		Date: Aug	gust 31, 2017			
Em	ail: townofwinton@gmail.cor	n						
		Gene	eral Instructions					
	ase remember that the time pe a specific question.	riod for the report is JULY 1, 20	16 through JUNE 30, 20	17. Please check "	No" if you have nothing to report			
1.	•	have a Recycling Coordinator or	similar position for FY	16-17? Yes	No No			
	Name Recycling Coordinator (if different from person completing this report.)							
	Name:		Title:					
	Address:		City:		Zip:			
	Telephone:	Fax:	Email:					
2.	Did your local government	have a Solid Waste Director or s	imilar position for FY 16	5-17? Yes	No No			
	If Yes, Name:			Title:				
	Address:		City:		Zip:			
	Telephone:	Fax:	Email:					
3.	Did your local government	have dedicated or part-time So	olid Waste Enforcement S	Staff for FY 16-17?	Yes No			
	If Yes, Name:		Title:					
	Address:		City:		Zip:			
	Telephone:	Fax:	Email:					
4.	Did your local government all that apply)	have solid waste ordinances in p	lace addressing any of th	ne following during	FY 16-17? (if yes, please check			
	□ Disposal Bans □	Illegal Dumping Litter	ing Other, Please I	Describe:				
5.	Did your local government mulching, composting)?	manage, provide or contract for	any solid waste services	in FY 16-17 (e.g., o	collection, disposal, recycling,			
	If you answ	er ''No'' to question 5, the rep	ort is complete, please	email to Loteam@	ncdenr.gov.			

Part I. Waste Reduction and Recycling Programs Serving Government Facilities The following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. Did your local government have a recycling program in place for collecting recyclable materials generated at X No public buildings in FY 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 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) Franchised hauler (please specify) Other (please specify)

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction? 289
	b. Number of households eligible to participate in the curbside recycling program: 300
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 139
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 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: 18
21.	How frequently were the curbside recyclables collected? Once a week Other Twice a week Twice a week
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
mate	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 16-17? 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:

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 <u>by</u> <u>local government</u> . The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ycling Tonnages Chart on pg 5.								
38. 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 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 434	Cu	ırbside	D	rop-off	All "Oth	er'' Programs	Total Tons	
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)	
GLASS:							IOIM)	
Clear								
Brown								
Green								
Mixed								
PLASTIC:								
PET #1								
HDPE #2								
All Plastic Bottles		1.6					1.6	
Other Plastic Containers								
Bulky Rigid Plastics								
METAL:								
Aluminum Cans								
Steel Cans								
White Goods								
Other Metal								
PAPER:								
Newsprint (ONP)		0.5					0.5	
Cardboard (OCC)								
Magazines (OMG)								
Office Paper								
Mixed / Other Paper								
Cartons / Aseptic Containers	s							
WOOD:								
Pallets								
Other Wood - DO NOT								
report yard waste tons he								
OTHER MATERIALS:								
Textiles (clothes etc)								
Televisions								
Other Electronics								
C&D Materials Recyclin	g							
Commingled tons-check	all _							
items collected above								
TOTAL TONS:		2.1					2.1	

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?

Yes Yes Yes Yes Yes Yes Yes Yes Yes	No No No No No No No No No			batteries	, or	lbs gallons lbs	-
Yes Yes Yes Yes	No No No		#		, or	lbs	-
Yes Yes Yes	⊠ No ⊠ No		#		, or]
Yes Yes	No No			1 1		lbs	
Yes							1
	⊠ No			lbs, or		# bulbs	1
Yes		II-		lbs, or		# tanks	5
	⊠ No			lbs, or		gallons	5
Yes	⊠ No					lbs	
Yes	⊠ No			lbs, or		# con- tainers	
Yes	⊠ No					lbs	
Yes	⊠ No			gals, or		lbs	
gram with a	nother <u>local</u>	governmen	t? Yes				
businesses	(Conditional			tity Gene	rators)?	Yes	☐ No
HHW Prograse simply	am: if totals provide total	quantity of	materials co	are know ollected b	wn please iter y HHW prog	ram in 4	48g below.
Use	d Oil Filters		# of Barrels	s, or	lbs.		
Lea	d Acid Batte	ries (lbs)		Other B	atteries (lbs)		
Mercury (l	os)						
materials o	it of the total	listed here					pounds
	Yes Yes Yes Yes Yes Azardous was a Event or a an to accept in gram with a articipated a businesses material management of the collected of the	Yes No Yes No Yes No No Yes No N	Yes No Yes No No Yes No No The properties of the total for individuals as simply provide total quantity of exactly collected at an HHW Program and the collected at an HH	Yes No Yes No Yes No No Tally Exempt Small Quantity Generator (CF azardous waste collection program or event in Formation to accept materials during this Fiscal Year? Gram with another local government? Yes articipated in your HHW collection program the businesses (Conditionally Exempt Small Quantity and Exempt Small Quantity Program: if totals for individual materials are simply provide total quantity of materials case collected at an HHW Program and should not to Used Oil Filters # of Barrels Lead Acid Batteries (lbs) Mercury (lbs) Wercury (lbs)	Yes No	Yes No	Yes No

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		C	_		
							landfills, incinerators, or in e answer the questions below
		nent of vegetative material					
9.	Does your loca	l government operate a ya	rd waste program	? Yes 🔀] No If ye	s please indicate he	ow yard waste is managed by
		——————————————————————————————————————				-	vaste, compost, or LCID facil
		ent significantly impact th	•		-		
51.		s of materials were manag ial (yard waste, brush, li					
		Destination	Check if used	Tons	Cubic Yards	Please Provide	Name and Location of Facility ng Vegetative Materials
	End user (to fa	rmer or home-owner)					
	Your local gov	ernment's mulch or compo	ost facility				
	Other public m	ulch or compost facility					
	Private mulch	or compost facility					
	Land clearing a	and inert debris landfill (L	CID)				
	Energy / Fuel U	Jse (e.g. boiler fuel marke	t)				
		Total					
		E MANAGEMENT FOR					
		vaste volume. Calculate fo					
	volume manag	ed by program in the appro	•	•	truck x 3 days	$/wk \ x \ 16 \ wks = 480$	•
			6 1.611		. 11	=	TOTAL yd^3
	Size of Truc		f times truck fills each				TOTAL
rı ·	· ·		rt V. Solid V				
nis 52.		s your local government's e the following table abou					
12.		Who Collects Solid W	<u> </u>		ootod?		**
	Sector	Insert Letter - see codes a	ll l	- see codes at r	icht (VIII)	Collects Solid Waste? al government employe	How is Solid Waste Collected? es 1. Once a week at household
	Residential	Primary a Secondary	Primary	2 Secondary	b. By	Contract nchise haulers	2. Twice a week at household3. Convenience center/greenbox
	Commercial	Primary a Secondary	Primary 2	2 Secondary	d. Loc	al government not olved in provision of	As needed or by request Daily
	Industrial	Primary d Secondary	Primary	Secondary	serv		6. Other
3.	If you provide	residential waste collection	n at single-family	households in y	our jurisdictio	n, please answer th	e following questions:
	What type of c	ollection method is used?	Fully Aut	omated S	Semi-Automat	ed Manual	Don't know
	What is the star	ndard collection frequency	? Weekly	Two tim	nes per week	Other	
	What is the typ	ical service point for singl	e family househol	d waste?	Curbside	Back yard / Ba	ack door
	What type of c	ollection container is used	? Governme	ent-provided car	rts 🔀 Resi	dent-provided cont	tainer Bags
	Do you offer b	ulky waste collection serv	ices? Yes	No No			
54.	-	ties - did your government te goods delivered to the c	_		Yes No	No	
			•	<u> </u>		onal Activitie	S
55.	Did vour local			•	_		anagement and / or recycling
٠.	issues / activiti	_		o Part VII, page		sout sond waste me	inagement and / of recycling
66.	Please estimate	your annual budget for so	olid waste related o	education and o	utreach activit	ies: \$	
7.	Does your com	munity produce recycling	education and out	reach materials	in languages l	pesides English? [Yes No
	_	list other languages used:					
8.	•	your recycling website ad	dress and public in	nformation phor	ne number if a		
	Website:					Phone #:	

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

	ficient resources availab estions deal with funding				-	these programs.	The following		
_	Did your local governm					Yes No)		
60.	With regards to funding Tipping fees			local government: eight-based fees (e.g	g. PAYT) T	ire tax			
		es / general fund		yclables		hite Goods tax			
61.	✓ Per househoNC Solid Waste Dispos	_	Grants e distributed to elig	ible local governme		isposal Tax sis by the Departn	nent of Revenue.		
	According to GS 105-1								
	How are disposal tax d	istributions being u	sed? Solid Waste se	ervices					
62.	If applicable, please pr	•							
	a. \$ \(\frac{204}{}\)	per year		per	old	for solid waste	e		
	b. \$	per		per		for recycling			
	c. \$	per		per		for yard waste	;		
	d. \$	per		per		for bulky was	te		
	e. \$	per		per		availability fee	<u>e</u>		
	f. \$ 204	per <u>year</u>		per househo	old	total charge			
63.	Did your local governmare charged a fee by we	nent operate a Pay-	As-You-Throw pro	gram for residential	garbage during FY		where residents		
	cording to GS 130A-309 orm users of such costs.	~	nents are required	to conduct full cos	et accounting annual	ly and to develop	a system to		
64.	If your local government	nt contracts for soli	d waste or recycling	g services, please re	port the annual conti	act amount.			
	\$		_ For solid waste s	services per year					
	\$		_ For recycling per	r year					
			OR						
	\$		_ Combined Contr	act (solid waste, an	d recycling)				
65.	Collection Programs: Please complete the following table to the best of your ability to display the full costs of your local government's <u>collection programs</u> for waste, recyclables and yard waste including materials collected from convenience centers. If full cost analysis is not available, please report program budget in Total Cost column.								
	,,	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)		
N	Iunicipal Solid Waste*	289	283	18,070	18,745	36,815	130		
	Recycling Program**	139	2.1				(
	Yard Waste Program								
	Totals	(calculated by form):	285.1	18,070	18,745	36,815	129		
	*for materials collected and sent for eventual disposal in a Municipal Solid Waste or Construction and Demolition Landfill. **for materials collected by public recycling programs including those services offered to commercial and industrial generators. Do not include special waste services.								
66.	If your government ope								
	facility operations (roun	nd to nearest dollar). If budgets for dif	fferent facilities are	combined, please att	empt to allocate co			
	proportionately. Land		\$						
		sfer Station Budget							
67	What was your governing	cling Facility Budg			d racycling comics:	n 16 179 \$26 076			
0/.	what was your governi	ment s total combil	cu amman buuget 10	n an sond waste all	a recycling services	ш 10-1/; ф30,970			

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.	Title							
	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-mail of person responsible for scrap tires program. Name:									
	Name:		Title:						
	Address:	City:		Zip:					
	Telephone: Fax:	Email:							
77.	Please provide the physical address of the primary coun	Please provide the physical address of the primary county scrap tires collection site.							
	Street 1:								
	Street 2:								
	City:	State: North Caro	olina	_ Zip:					
78.	Tonnage/Number of scrap tires disposed July 1, 2016-J Tons or		om cleanup of nuisanber of tires	ance sites)					
79.	Tonnage/Number of scrap tires disposed from cleanup Tons or	, ,	sance sites aber of tires						
80.	Indicate the types of tires collected by the county: Passenger % Heavy Truc	k % Lε	arge Off-Road	%					
81.	List the amount of revenue for the scrap tire program b	y source:							
	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 16-17	(contract disposal/hauling costs),	\$						
83.	County's additional scrap tire program expenditure (i.e. Labor \$		if any.						
	Site Cost \$								
	Other \$	describe Other:							
84.	County's contract cost for scrap tire disposal. \$	/ Ton; \$	/ Tire						
85.	Hauling cost or fuel surcharge, if not included in contra	act cost above. \$/	Ton; \$	/ Tire					
86.	Total tipping fees collected for tires not eligible for fre	e disposal. \$							
87.	Total number of tires collected not eligible for free dis	posal:							
88.	If scrap tires were not hauled off site by contracted serv	vice provider, were they cut and o	disposed in a local	landfill? Yes No					
89.	Name of tire disposal/recycling firm(s):								
TE	MPORARY DISASTER DEBRIS STAGING	G SITES							
90.	Does your local government have a plan in place for m	anagement of disaster debris?	Yes	No					
	If yes, indicate if the plan is a stand-alone plan or in co	njunction with local government	agencies: Sta	and-alone					
91.	If you indicated having a plan, has the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for public assistance reimbursement in a contract of the plan been review requirements for the plan been review requirements for the plan been review requirements for the plan been requirements for the plan been represented by the plan		ment or FEMA to e	ensure it meets the basic No					
92.	Please list the name, contact numbers(s), and e-mail ad your local government:								
	E-mail: E-mail:		E-mail:						

	Disaster Site #	use difficulty for local governments when atte Site Name	Disaster Site #	Site Name
0.4				To discourage Vos No
94. 95.	Does your plan address ma	management of household hazardon ss animal mortality?	No	g a disaster?
		ANDONED MANUFACTU	RED HOMES BY COUNT	IES
		d whether to implement a program f		
	If yes, has your county dev	eloped a written plan for the manage	ement of abandoned manufactured	homes? Yes No
		Part IX	. Comments	
		uny info provided in your report as n	ecessary. We would appreciate yo	our comments about this report or other
	0 0	inagement in North Carolina. Thank		
_	_	-		eighed separately. When encountered a did not ship any this year. The town
	not report any scavenging iss			y y y
	This form is to be submit	tted 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

