# 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: <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:

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: Selma

## 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	n to Lgteam@ncdenr.gov by September	1, 2017.
If you have questions or need assistance of	completing this form, please call 919-	707-8121 or 919-707-8139.
Person Completing This Report: Alex Fuller	Title:	Public Services Director
Mailing Address: 114 N Raiford Street	City: Selma	Zip: 27576
Phone: (919) 965-8726 Fax:		Date: 8/14/2017
Email: afuller@selma-nc.com		
	General Instructions	
Please remember that the time period for the report is JUL		e check "No" if you have nothing to report
<ul><li>for a specific question.</li><li>1. Did your local government have a Recycling Coordin</li></ul>	pater or similar position for EV 16-179	☐ Yes ☐ No
Name Recycling Coordinator (if different from perso	•	l les No
Name:	Title:	
Address:	City:	Zip:
Telephone: Fax:	Email:	
2. Did your local government have a Solid Waste Direct	tor or similar position for FY 16-17?	⊠ Yes □ No
If Yes, Name: Alex Fuller	Title:	Public Services Director
Address: 114 N Raiford Street	City: Selma	Zip: 27576
Telephone: 919-965-8726 Fax:	Email: afuller@s	elma-nc.com
3. Did your local government have <b>dedicated or part-t</b>	ime Solid Waste Enforcement Staff for F	Y 16-17?
If Yes, Name:	Title:	
Address:	City:	Zip:
Telephone: Fax:	Email:	
4. Did your local government have solid waste ordinand all that apply)	ces in place addressing any of the followi	ng during FY 16-17? (if yes, please check
∑ Disposal Bans ☐ Illegal Dumping ☐	Littering Other, Please Describe:	
5. Did your local government manage, provide or contra mulching, composting)?	act for any solid waste services in FY 16-	17 (e.g., collection, disposal, recycling, Yes   No
If you arguer "No" to avestion 5	the report is complete please email to	I ataam@nadann aan

#### 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 Yes No 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)

1/.	Please provide the following information about your community:
	a. Total number of households in your jurisdiction? 2,380
	b. Number of households eligible to participate in the curbside recycling program: 2,380
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary): 1,900
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 ☐ Every other week / biweekly ☐ Other
22	Please describe the collection containers used:
22.	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
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
	se answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any
mate	erials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.
32.	Did your community operate an electronics recycling program in FY 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:
51.	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 i	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 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 each individual material type that was commingled

DD OCD AND	C	urbside		Drop-off	All "C	Other" Programs	<b>Total Tons</b>
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)	$\boxtimes$						
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper	$\boxtimes$						
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling							
Ci1-1							
Commingled tons-check all items collected above		264.4					264.4
TOTAL TONS:		264.4					264.4

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)

7. Special Waste Programs for Collecting		n collect this	# of	Data on quantitie			
7. Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		n the public?	# 01 sites	Please report			
Used Motor Oil	⊠ Yes	☐ No	_1_		20	gallons	
Used Oil Filters	⊠ Yes	☐ No	_1_	barrels,	or	10 lbs	
Used Antifreeze	Yes	⊠ No				gallons	
Batteries, Lead Acid	⊠ Yes	☐ No	_1_	# batte	ries, or	lbs	
Batteries, Dry Cell	Yes	⊠ No				lbs	
Fluorescent Bulbs/Lights Containing Mercury	Yes	⊠ No		lbs,	or	# bulbs	
Propane Tanks	Yes	⊠ No		lbs,	or	# tanks	
Used Cooking Oil / Waste Vegetable Oil	Yes	⊠ No		lbs,	or	gallons	
Other Special Wastes - please provide waste type here:	Yes	⊠ No			'	lbs	
Pesticide Containers (NCDA Program, not pesticides themselves)	Yes	⊠ No		lbs,	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		gals or		lbs	
Iousehold Hazardous Waste (HHW) and Condit	ionally Exem	pt Small Qu	antity G	Generator (CESQG	) Program	or Event	
8. Did your local government operate a household		_			_	Yes No	О
If Yes, please respond to the following question	ıs:						
a. Was HHW collected at a permitted Tempora	•			*	Perma	nent Tei	mp. Ev
b. How many days was your HHW Program of	pen to accept i	materials duri	ng this F	Fiscal Year?			
c. Did you partner or co-sponsor your HHW pr	rogram with a	nother <u>local</u> g	governme	ent? Yes	No		
Please list partner(s)							
d. Provide number of citizens / households that		•					
e. Did your program accept materials from small fyes, please estimate the amount of business			•	pt Small Quantity C		Yes	No
<ul> <li>f. Amounts of individual materials collected by about individual materials is not available, p Note, materials listed here should only be th</li> </ul>	lease simply 1	provide total	quantity	of materials collect	ed by HHW	program in 48	g belo
Used Motor Oil (gal)	Use	d Oil Filters		_ # of Barrels, or _	lb	s.	
Used Antifreeze (gal)	Lea	d Acid Batter	ries (lbs)	Othe	r Batteries (	lbs)	
Fluorescent Bulbs / Lights Containing	ng Mercury (ll	os)					
g. Provide Total Quantity of materials collected	d by HHW Pr	ogram. If ind	lividual r	materials were			pou
reported in 48f, please net the weight of thosh. Please list HHW Collection Contractor	se materials or						pou
							_
i. Estimated cost of HHW / CESQG program	or event(s) S						

Pages 3 through 6 should have only been completed by governments indicating in question # 14 that they DO provide recycling services. 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	, Mul	ching and <b>(</b>	Composting	g Management
ınpe	ermitted sites an	d it is illegal to burn. Composting	and mi	ılching are popi	ılar manageme	sed in sanitary landfills, incinerators, or in nt options. Please answer the questions below on-vegetative materials in this section.
49. 50. 51.	checking all that Did a storm even	ent significantly impact the amount	Collect	ted at convenien waste your gove	ce center R	please indicate how yard waste is managed by eceived at yard waste, compost, or LCID facil d during FY 16-17? Yes No nation in TONS OR CUBIC YARDS of
		ial (yard waste, brush, limbs, leav				
		Destination	Check if used	Tons	Cubic Yards	Please Provide Name and Location of Facility Receiving Vegetative Materials
	End user (to fa	rmer or home-owner)				
	Your local gov	ernment's mulch or compost facility				
	Other public m	ulch or compost facility	$\boxtimes$	568.34		Johnston County Landfill, Smithfield, NC
	Private mulch of	or compost facility	$\boxtimes$	354		Spain Farms, 1975 Yelverton Rd., Smithfield, NC 27577
	Land clearing a	and inert debris landfill (LCID)				
	Energy / Fuel U	Use (e.g. boiler fuel market)				
		Total		922.34		
	estimate yard v		ick used	in your yard wa	ste managemen	ou may use this formula below to help you to program, and then enter the grand total $vk \times 16 \ wks = 480 \ yd^3$
		X		X		$\underline{\hspace{1cm}} = \underline{\hspace{1cm}} yd^3$
	Size of Truc	-				
	·			Vaste Colle		
This 52.		s your local government's provision e the following table about your gov				
) 2.		Who Collects Solid Waste?			otod2	bllects Solid Waste? How is Solid Waste Collected?
	Sector	Insert Letter - see codes at right	Insert #	- see codes at ri	aht Will Co	government employees 1. Once a week at household
	Residential			1 Secondary	b. By Co	ontract 2. Twice a week at household hise haulers 3. Convenience center/greenbox
	Commercial	Primary b Secondary Pri	mary	1 Secondary	d. Local	government not 4. As needed or by request
	Industrial	Primary d Secondary Pri	mary	Secondary	servic	red in provision of 5. Daily 6. Other
53.	If you provide	residential waste collection at single	-family	households in y	our jurisdiction,	please answer the following questions:
	What type of co	ollection method is used?	ully Aut	omated S	Semi-Automated	l Manual Don't know
	* *	<u> </u>	Veekly	_	es per week	Other
		ical service point for single family h	•		Curbside	Back yard / Back door
	• •			ent-provided car		ent-provided container Bags
	* *		₹ Yes	□No		
54.	For municipality	ties - did your government collect w	hite goo	ds at the curb?	☐ Yes ▷	∛No
	•	te goods delivered to the county for	_		□ No	
		Part VI. Solid Was	te and	d Recycling	g Education	nal Activities
55.	Did <b>your local</b> issues / activities		_	inform citizens o Part VII, page		out solid waste management and / or recycling
56.	Please estimate	your annual budget for solid waste	related o	education and or	ıtreach activitie	s: \$ <u>200</u>
57.	Does your com	munity produce recycling education	and out	treach materials	in languages be	sides English? X Yes No
	If YES, please	list other languages used: Spanish				
58.	Please provide	your recycling website address and	public ii	nformation phon	e number if app	olicable.
	Website: http:/	//www.selma-nc.com/waste-collection	on-recyc	eling		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	)
	With regards to funding  Tipping fees	g sources, check all s les / general fund	that apply to your I Volume/we	local government: eight-based fees (e.g	g. PAYT)	Fire tax White Goods tax Disposal Tax	
61.	NC Solid Waste Dispos According to GS 105-1	sal Tax proceeds ar	e distributed to elig		ents on a quarterly ba	asis by the Departn	
	How are disposal tax d	C					
62.	If applicable, please pr						
	a. \$ 25						2
					old		
	c. \$	per includ	led with solid waste	per househo	old	for yard waste	
	d. \$	per includ	led with solid waste	per househo	old	for bulky wast	e
	e. \$	per		per		availability fee	<u>e</u>
	f. \$ 25	per month	1	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.		ments are required	to conduct full cos	at accounting annua	lly 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 cont	ract amount.	
	\$		_ For solid waste s	services per year			
	\$		_ For recycling per	r year			
	<b>4.5.</b> 0. 40.4		OR				
	\$529,686		_	act (solid waste, and	•		
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials col			
		# 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*	2,456	2,229.13			476,876	213
	Recycling Program**	2,331	264.4			52,810	199
	Yard Waste Program	2,331	922.34	70,000		84,095.44	9
		(calculated by form):	3,415.87	70,000		613,781.44	179
66.	*for materials collected and **for materials collected by If your government operacility operations (round proportionately. Land	y public recycling progrerates a landfill, trained to nearest dollar	ams including those servines for station, yard v.). If budgets for dif	vices offered to commerc vaste /compost facil ferent facilities are	cial and industrial generatity or recycling facil	ity, please provide tempt to allocate co	total budget for
		sfer Station Budget					
	Yard	Waste / Compost l	Facility Budget: \$				
		cling Facility Budg					
67.	What was your government	ment's total combin	ed annual budget fo	or all solid waste and	d recycling services	in 16-17? \$	

## **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-ma		1 0	
	Name:		Title:	
	Address:	City:		Zip:
	Telephone: Fax:	Email:		
77.	Please provide the physical address of the primary coun	nty 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 continuous continuous and the plan been review requirements for public assistance reimbursement in a continuous continuo		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:	

Does your plan address the man	agement of household hazardous	s waste and white goods following	a disaster? Yes No
Does your plan address mass an	imal mortality? Yes	No	
NAGEMENT OF ABANI	DONED MANUFACTUR	ED HOMES BY COUNTI	ES
Has your county considered who	ether to implement a program for	r the management of abandoned m	nanufactured homes? Yes N
If yes, has your county develope	ed a written plan for the manager	ment of abandoned manufactured	homes? Yes No
	Part IX.	Comments	
		cessary. We would appreciate you you for your time. You may subm	or comments about this report or other it 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 <a href="https://deq.nc.gov/conservation/recycling/local-government-recycling-assistance">https://deq.nc.gov/conservation/recycling-assistance</a> or e-mail us at Lgteam@ncdenr.gov

