# **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: <u>http://deq.nc.gov/about/divisions/waste-management/solid-waste-section/annual-reporting</u>
- 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: <u>https://get.adobe.com/reader/</u> - 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



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

**State of North Carolina** 

Local Government Report Form

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 thi | s form to   | Lgteam | @ncdenr.gov | bv  | September | 1. 2017. |
|---------|------------|-------------|--------|-------------|-----|-----------|----------|
| 1 10000 | Subline un | 5 101111 10 | Egicum |             | U y | September | 1, 2017  |

If you have questions or need assistance completing this form, please call 919-707-8121 or 919-707-8139.

| Perso | on Completing This Report:                        | Richard D. Dixon                     | Title                        | e: Finance Dire            | ctor                          |
|-------|---|--------------------------------------|------------------------------|----------------------------|-------------------------------|
| Mail  | ing Address: PO Box 249                           |                                      | City: Pineville              |                            | Zip: 28134                    |
| Phon  | e: 704-889-1722                                   | Fax: 704-889-2293                    |                              | Date: 08/31/1              | 7                             |
| Emai  | il: rdixon@pinevillenc.gov                        |                                      |                              |                            |                               |
|       |   | General                              | Instructions                 |                            |                               |
|       | e remember that the time pe<br>specific question. | eriod for the report is JULY 1, 2016 | through JUNE 30, 2017. Ple   | ase check "No"             | if you have nothing to report |
| 1.    | Did your local government                         | have a Recycling Coordinator or sir  | nilar position for FY 16-17? | Yes                        | 🔀 No                          |
|       | Name Recycling Coordinat                          | or (if different from person complet | ing this report.)            |                            |                               |
|       | Name:   |                                      | Title                        | 2:                         |                               |
|       | Address:  |                                      | City:                        |                            | Zip:                          |
|       | Telephone:  | Fax:                                 | Email:                       |                            |                               |
| 2.    | Did your local government                         | have a Solid Waste Director or simi  | lar position for FY 16-17?   | Yes                        | No                            |
|       | If Yes, Name:                                     |                                      | Title                        | 2:                         |                               |
|       | Address:  |                                      | City:                        |                            | Zip:                          |
|       | Telephone:  | Fax:                                 | Email:                       |                            |                               |
| 3.    | Did your local government                         | have dedicated or part-time Solid    | Waste Enforcement Staff for  | FY 16-17? [                | Yes No                        |
|       | If Yes, Name:                                     |                                      | Title                        | 2:                         |                               |
|       | Address:  |                                      | City:                        |                            | Zip:                          |
|       | Telephone:  | Fax:                                 | Email:                       |                            |                               |
|       | Did your local government all that apply)         | have solid waste ordinances in place |                              |                            |                               |
|       | Disposal Bans                                     | 🛛 Illegal Dumping 🛛 🗌 Littering      | Other, Please Describe       | : Construction             | Debris                        |
|       | Did your local government mulching, composting)?  | manage, provide or contract for any  | solid waste services in FY 1 | 6-17 (e.g., colle<br>X Yes | ction, disposal, recycling,   |
|       | If you answ                                       | ver ''No'' to question 5, the report | is complete, please email to | o Lgteam@ncd               | lenr.gov.                     |

|     | Part I. Waste Reduction and Recycling Programs Serving Government Facilities   |  |  |  |  |  |
|-----|--|--|--|--|--|--|
| The | following questions pertain to waste reduction and recycling activities / programs that serve local government facilities.   |  |  |  |  |  |
| 6.  | Did your local government have a recycling program in place for collecting recyclable materials generated at Yes INO public buildings in FY 16-17?   |  |  |  |  |  |
| 7.  | Did your local government have any program or policy encouraging or requiring local agencies to Yes No purchase products with recycled content?  |  |  |  |  |  |
| 8.  | Did your local government have a program in place to collect and recycle spent fluorescent lights<br>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   |  |  |  |  |  |
| SO  | URCE REDUCTION / REUSE   |  |  |  |  |  |
| 9.  | Did your local government have a backyard composting program?  Yes  No   |  |  |  |  |  |
| 10. | If yes, please check all backyard composting activities that apply:  |  |  |  |  |  |
|     | Education Demonstration site(s) Bin distribution/sales Number of Bins distributed?   |  |  |  |  |  |
| 11. | Did your local government operate a program to promote source reduction efforts such as junk mail reduction, 🗌 Yes 🕅 No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives?   |  |  |  |  |  |
| 12. | Did your local government offer a waste exchange or reuse program?  Yes  No  |  |  |  |  |  |
| 13  | If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public:   |  |  |  |  |  |
|     | Swap shop/shed Number of sheds in use? Paint exchange Number of gallons recovered?   |  |  |  |  |  |
|     | Other (e.g. pallet exchange, etc.)   |  |  |  |  |  |
| PU  | BLIC RECYCLING SERVICES  |  |  |  |  |  |
| 14. | Which of the following responses best describes your recyclables recovery activities for the period July 1, 2016 through June 30, 2017?  |  |  |  |  |  |
|     | My local government <b>DID operate or contract</b> for a recyclables recovery program. ( <b>please continue to question 15</b> )   |  |  |  |  |  |
|     | My local government <b>DID NOT operate or contract</b> for recyclables recovery <b>BUT DID participate</b> in a recyclables<br>recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; <b>then go to Part IV on page 7</b> .) |  |  |  |  |  |
|     | With which local government did you participate?   |  |  |  |  |  |
|     | My local government <b>DID NOT operate, contract or participate</b> in a recycling program. ( <b>Go to Part IV on page 7</b> .)  |  |  |  |  |  |
|     | If your local government <b>DID operate or contract</b> for a recyclables recovery program, please indicate in the following sections the type of program in operation and provide specifics about your program(s).  |  |  |  |  |  |
| CU  | RBSIDE RECYCLING PROGRAM   |  |  |  |  |  |
| 15. | Did your government operate a Curbside Recycling Program? Xes No, skip to question # 25  |  |  |  |  |  |
| 16. | Who collected the recyclable materials for your local government's curbside recycling program?   |  |  |  |  |  |
|     | Local government employees   |  |  |  |  |  |
|     | Private contractor (please specify) Signature Waste Systems, Inc   |  |  |  |  |  |
|     | Franchised hauler (please specify)   |  |  |  |  |  |
|     | Other (please specify)   |  |  |  |  |  |

| 17. | Please provide the following information about your community:<br>a. Total number of households in your jurisdiction? 2,194   |
|-----|---|
|     | b. Number of households eligible to participate in the curbside recycling program: 2,194  |
|     | c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 1,228  |
| 18. | If your curbside recycling program is operated through a <u>public franchise granted to a private company</u> then please answer the following:<br>Is public participation in the franchise: Voluntary or Mandatory<br>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?  |
| 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?   |
| 22  | Other   |
| 22. | Please describe the collection containers used:          Bins        Blue bags          Multi-bin system          Roll-out carts  |
| 23. | Please describe the method / style of recyclable materials handling:         □ curb-sort (collector separates material as collected)       □ single stream / commingled         □ dual / two stream       □ don't know / other  |
| 24. | If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used:       Image: Iss than 50 gallon cart    Image: Iss than 50 gallon cart      Image: Iss than 50 gallon cart    Image: Iss than 50 gallon cart      Image: Iss than 50 gallon cart    Image: Iss than 50 gallon cart      Image: Iss than 50 gallon cart    Image: Iss than 50 gallon cart |
| DR  | OP-OFF RECYCLING PROGRAM  |
| 25. | Did your government operate a Drop-off Recycling Program? Yes Xo, 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? All None Some please list # of staffed sites:   |
| EL  | ECTRONICS RECYCLING PROGRAM   |
|     | use answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any<br>erials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.  |
| 32. |   |
|     | 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 c | ollect 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?

#### OTHER PUBLIC RECYCLING PROGRAMS

| Please answer the following questions about local government sponsored recycling efforts. List only progra | ams operated or contracted for <u>by</u> |
|--|--|
| the local government. The tonnage of any materials collected by the following programs should be listed in | the "Other" column in the                |
| Recycling Tonnages Chart on pg 5.  |  |

| 38. | Did your local government operate a multifamily recycling collection program that provides on-property recycling service for residents |
|-----|--|
|     | of multifamily properties in a manner other than through your curbside or dropoff recycling programs? Yes                              |
| 39. | Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner       |
|     | other than through your curbside or dropoff recycling programs? $\Box$ Yes $\boxtimes$ No  |

| 40. | Does your local governmen | t provide recycling services to | o Alcoholic Beverage Commission permit holder | s? Yes | 🖂 No |
|-----|---------------------------|---------------------------------|---|--------|------|
|     |                           |                                 |   |        |      |

| On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served: |  |
|--|--|
|--|--|

| Public drop | o-off rec   | ycling site         | s available f                  | for ABC O                                 | n Premises  | Permit holders to use   | e   |
|-------------|-------------|---------------------|--------------------------------|---|---|---|---|
|             |             |                     |                                |   |   |   |   |
|             | Public drop | Public drop-off rec | Public drop-off recycling site | Public drop-off recycling sites available | Public drop-off recycling sites available for ABC O | Public drop-off recycling sites available for ABC On Premises | 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: |     |      |  |

|     | Chean wood Brick, concrete, etc Sinceroock vinyi siding Similaris                                    |     |      |
|-----|--|-----|------|
| 42. | Does your local government have an ordinance regulating the construction and demolition waste stream | Ves | 🔀 No |
|     | with the intention of encouraging or requiring waste reduction or recycling of these materials?      | 105 |      |

Vinyl siding

Shingles

Motols

Othor

- 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

Clean Wood Rick concrete ate Sheatrock

- 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.

| DDOCDAM   | Curbside  |      |          | Drop-off | All "C   | 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:  |           |      |          |          |          |                  |                                 |
| PET #1  |           |      |          |          |          |                  |                                 |
| HDPE #2   |           |      |          |          |          |                  |                                 |
| All Plastic Bottles                             |           |      |          |          |          |                  |                                 |
| Other Plastic Containers                        | $\square$ |      |          |          |          |                  |                                 |
| Bulky Rigid Plastics                            |           |      |          |          |          |                  |                                 |
| METAL:  |           |      |          |          |          |                  |                                 |
| Aluminum Cans                                   | $\square$ |      |          |          |          |                  |                                 |
| Steel Cans                                      | $\square$ |      |          |          |          |                  |                                 |
| White Goods                                     |           |      |          |          |          |                  |                                 |
| Other Metal                                     |           |      |          |          |          |                  |                                 |
| PAPER:  |           |      |          |          |          |                  |                                 |
| Newsprint (ONP)                                 | $\square$ |      |          |          |          |                  |                                 |
| Cardboard (OCC)                                 |           |      |          |          |          |                  |                                 |
| Magazines (OMG)                                 | $\square$ |      |          |          |          |                  |                                 |
| Office Paper                                    |           |      |          |          |          |                  |                                 |
| Mixed / Other Paper                             |           |      |          |          |          |                  |                                 |
| Cartons / Aseptic Containers                    |           |      |          |          |          |                  |                                 |
| WOOD:   |           |      |          |          |          |                  |                                 |
| Pallets   |           |      |          |          |          |                  |                                 |
| Other Wood - DO NOT                             |           |      |          |          |          |                  |                                 |
| report yard waste tons here                     |           |      |          |          |          |                  |                                 |
| OTHER MATERIALS:                                |           |      |          |          |          |                  |                                 |
| Textiles (clothes etc)                          |           |      |          |          |          |                  |                                 |
| Televisions                                     |           |      |          |          |          |                  |                                 |
| Other Electronics                               |           |      |          |          |          |                  |                                 |
| C&D Materials Recycling                         |           |      |          |          |          |                  |                                 |
|   |           |      |          |          |          |                  |                                 |
|   |           |      |          |          |          |                  |                                 |
| Comminated ( 1, 1, 1)                           |           |      |          |          |          |                  |                                 |
| Commingled tons-check all items collected above | $\square$ | 221  |          |          |          |                  | 221                             |
| TOTAL TONS:                                     |           | 221  |          |          |          |                  | 221                             |

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 <u>only</u> accepted as a part of an HHW Program or HHW event and were not collected by separate recycling efforts then do not record materials in question # 47 but instead report with HHW materials in question # 48.

| a |        | **7 4 | <b>A H U</b> |         | <b>T</b> 1 1 | 36 / 13   | <b><i>A</i> H A H</b> |            |          | <b>A H H</b> | D       |           |
|---|--------|-------|--------------|---------|--------------|-----------|-----------------------|------------|----------|--------------|---------|-----------|
| S | pecial | Waste | Collections  | (Do Noi | t Include    | Materials | Collected             | as part ol | t an HHW | Collection   | Program | or Event) |
| ~ |        |       |              | (       |              |           |                       |            |          |              |         |           |

4

| 47. | Special Waste Programs for Collecting<br>Materials <u>from Citizens</u> by Material Type   |   | m collect this m the public?   | # of<br>sites  | Data on quan<br>Please re  | tities colle<br>port in ind   | d.  |   |
|-----|--|---|--|--|--|---|---|---|
|     | Used Motor Oil   | Yes   | No No  |  |  | _   | gallons   |   |
|     | Used Oil Filters   | Yes   | No No  |  | barr   | els, or   |   | lbs   |
|     | Used Antifreeze  | Yes   | No No  |  |  |   | gal   | lons  |
|     | Batteries, Lead Acid   | Yes   | No No  |  | # b  | atteries, o   | r   | lbs   |
|     | Batteries, Dry Cell  | Yes   | No No  |  | ·  |   |   | lbs   |
|     | Fluorescent Bulbs/Lights Containing Mercury  | Yes   | No No  |  |  | lbs, or   | # bu  | llbs  |
|     | Propane Tanks  | Yes   | No No  |  |  | lbs, or   | # ta  | anks  |
|     | Used Cooking Oil / Waste Vegetable Oil   | Yes   | No No  |  |  | lbs, or   | gal   | lons  |
|     | Other Special Wastes - please provide waste type here:   | Yes   | No No  |  |  |   |   | lbs   |
|     | Pesticide Containers (NCDA Program, not pesticides themselves)   | Yes   | No No  |  |  | lbs, or   |   | con-<br>iners                                   |
|     | NCDA Pesticide Disposal Assistance Program<br>(for management of pesticides, not containers)   | Yes   | No No  |  |  |   |   | lbs   |
|     | Latex Paint (do not include paint collected at<br>HHW event or by a paint exchange program)  | Yes   | No No  |  |  | gals,<br>or   |   | lbs   |
|     | <ul> <li>b. How many days was your HHW Program op</li> <li>c. Did you partner or co-sponsor your HHW pr</li> <li>Please list partner(s)</li> <li>d. Provide number of citizens / households that</li> <li>e. Did your program accept materials from sma</li> <li>If yes, please estimate the amount of business</li> <li>f. Amounts of individual materials collected by</li> <li>about individual materials is not available, p</li> <li>Note, materials listed here should only be the</li> <li>Used Motor Oil (gal)</li> <li>Used Antifreeze (gal)</li> </ul> | ogram with a<br>participated<br>all businesses<br>is material ma<br>y HHW Progi<br>lease simply<br>ose collected<br>Use | another <u>local</u> g<br>in your HHW<br>(Conditionall<br>anaged<br>ram: if totals f<br>provide total c<br>at an HHW P | collectio<br>y Exemp<br>for indivi<br>quantity<br>rogram a | ent? Yes<br>on program this<br>ot Small Quantit<br>dual materials a<br>of materials coll<br>and should not in<br>_ # of Barrels, | ty Generat<br>pounds<br>are known<br>lected by l<br>nclude ma<br>or | tors)? Ye<br>please itemize<br>HHW program<br>terials listed in<br>lbs. | below. If data<br>in 48g below.<br>question 47. |
|     | Fluorescent Bulbs / Lights Containin   |   |  |  |  |   | · /   |   |
|     | <ul> <li>g. Provide Total Quantity of materials collected reported in 48f, please net the weight of thos</li> <li>h. Please list HHW Collection Contractor</li> </ul>  | l by HHW Pr<br>e materials o  | rogram. If ind<br>ut of the total  | ividual r<br>listed he                                     | re.  |   |   | pound   |
|     | i. Estimated cost of HHW / CESQG program of  | or event(s) \$  |  |  |  |   |   |   |

2016-2017 Local Government Annual Report *Report Due Date: September 1, 2017* Submit to: Lgteam@ncdenr.gov

is only to be completed by Counties.

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

This section concerns management of vegetative materials. Yard waste may not be disposed in sanitary landfills, incinerators, or in unpermitted sites and it is illegal to burn. Composting and mulching are popular management options. Please answer the questions below about your management of vegetative materials. Do not include information on food waste or non-vegetative materials in this section.

- Does your local government operate a yard waste program? Xes No If yes please indicate how yard waste is managed by 49. checking all that apply: 🔀 Collected curbside 🗌 Collected at convenience center 🔲 Received at yard waste, compost, or LCID facil.
- Did a storm event significantly impact the amount of yard waste your government managed during FY 16-17? Yes 50. No No
- 51. What quantities of materials were managed by your yard waste program? Provide information in TONS OR CUBIC YARDS of
  - organic material (vard waste, brush, limbs, leaves, etc.) managed. For conversion purposes, use 400 lbs/cubic vd.

|                                 | Des   | tinati        | on           |             | Check<br>used |        | Tons                                  | Cubic     | Yards            |                                | Name and Location<br>g Vegetative Mate                      |             |
|---------------------------------|---|---------------|--------------|-------------|---------------|--------|---------------------------------------|-----------|------------------|--------------------------------|---|-------------|
| End user (to fa                 | End user (to farmer or home-owner)<br>Your local government's mulch or compost facility |               |              |             |               |        |                                       |           |                  |                                |   |             |
| Your local gov                  |   |               |              |             | ity 🗌         |        |                                       |           |                  |                                |   |             |
| Other public m                  | ulch or c   | compo         | st facility  |             | $\square$     |        | 210                                   |           |                  | Mecklenburhg County            |   |             |
| Private mulch                   | or compo  | ost fac       | ility        |             |               |        |                                       |           |                  |                                |   |             |
| Land clearing                   | and inert   | debri         | s landfill ( | LCID)       |               |        |                                       |           |                  |                                |   |             |
| Energy / Fuel                   | Use (e.g.   | boile         | r fuel mark  | ket)        |               |        |                                       |           |                  |                                |   |             |
|                                 | ]   | <b>Fotal</b>  |              |             |               |        | 210                                   |           |                  |                                |   |             |
| Size of True<br>section concern | -   |               | P            | art V. S    | Solid         | Wa     | ek # of weeks ste Colle aste (garbage | ction     | Servi            | ces                            | TOTAL   |             |
|                                 | •   |               |              | -           |               |        |                                       |           |                  |                                |   |             |
| Please comple                   |   |               |              |             |               |        | Waste Collo                           |           | system           |                                |   |             |
| Sector                          |   |               | see codes    |             |               |        | ee codes at ri                        | aht       |                  | llects Solid Waste?            | How is Solid Wa   |             |
| Residential                     | Primary   | В             | Secondary    | 5           | Primary       | 1      | Secondary                             |           | b. By Co         |                                | 2. Twice a week a   | t household |
| Commercial                      | Primary   | D             | Secondary    | I           | Primary       |        | Secondary                             |           |                  | nise haulers<br>government not | <ol> <li>Convenience ce</li> <li>As needed or by</li> </ol> | 0           |
| Industrial                      | Primary   | D             | Secondary    | I           | Primary       |        | Secondary                             |           | involv<br>servic | ed in provision of<br>e        | 5. Daily<br>6. Other  |             |
| If you provide                  | residenti   | <u>al</u> was | ste collecti | ion at sing | gle-fami      | ly ho  | useholds in y                         | our juris | diction,         | please answer the              | e following ques  | tions:      |
| What type of c                  | ollection   | meth          | od is used   | ?           | Fully A       | utom   | nated 🖂 S                             | Semi-Au   | tomated          | l 🗌 Manual                     | Don't kno   | W           |
| What is the sta                 | ndard co  | llectio       | on frequen   | cy?         | Weekly        | 7      | Two tim                               | les per w | eek              | Other                          |   |             |
| What is the typ                 | oical serv  | ice po        | oint for sin | gle family  | y housel      | nold v | waste?                                | Curbs     | ide 🗌            | Back yard / Ba                 | ck door   |             |
| What type of c                  | ollection   | conta         | iner is use  | ed?         | Govern        | ment   | -provided car                         | rts       | Reside           | ent-provided conta             | ainer 🗌 Ba  | gs          |
|                                 | 11  | ta aal        | lection sei  | mi aaal     | X Ye          | a      | □ No                                  |           |                  |                                |   |             |

For municipalities - did your government collect white goods at the curb? X Yes No 54 If so, were white goods delivered to the county for marketing? Yes No No

# Part VI. Solid Waste and Recycling Educational Activities

| 55. | Did your local government have an education program to inform citizens specifically about solid waste management and / or recycling |                                     |  |  |  |  |  |  |
|-----|---|-------------------------------------|--|--|--|--|--|--|
|     | issues / activities? Yes X  | o (If No, skip to Part VII, page 8) |  |  |  |  |  |  |
| 56. | Please estimate your annual budget for solid waste related education and outreach activities: \$                                    |                                     |  |  |  |  |  |  |
| 57. | Does your community produce recycling education and outreach materials in languages besides English? 🗌 Yes 🗌 No                     |                                     |  |  |  |  |  |  |
|     | If YES, please list other languages used:   |                                     |  |  |  |  |  |  |

58. Please provide your recycling website address and public information phone number if applicable. Website: Phone #:

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|           | Part VII  | . Resources f  | or Solid Was  | te Manageme   | ent and Full C                       | ost Accounti  | ng  |
|-----------|---|--|---|---|--------------------------------------|---|---|
|           | ficient resources availab<br>stions deal with funding                 |  |   |   |                                      | f these programs.   | The following                                   |
| 59.       | Did your local governm<br>With regards to funding<br>Tipping fees     | nent operate an Ente<br>g sources, check all<br>s<br>es / general fund | erprise Fund for sol<br>that apply to your<br>Volume/we | lid waste services in<br>local government:<br>eight-based fees (e.g | g. PAYT)                             | Yes 🔀 No<br><sup>7</sup> ire tax<br>White Goods tax<br>Disposal Tax | )   |
| 61.       | NC Solid Waste Dispos<br>According to GS 105-1                        | 87.63 these funds r  | nust be used by a c                                     | U U   | 1 0                                  | * 1   |   |
| <b>60</b> | How are disposal tax d  | •  |   | ¢ 45.00   |                                      |   |   |
| 62.       | If applicable, please pr  |  |   |   |                                      |   |   |
|           |   |  |   |   |                                      |   |   |
|           | b. \$   | per  |   | per   |                                      | for recycling   |   |
|           | c. \$   | per  |   | per   |                                      | for yard waste  |   |
|           | d. \$   | per  |   | per   |                                      | for bulky was   | e   |
|           | e. \$   | per  |   | per   |                                      | availability fee  | e   |
|           | f. \$   | per  |   | per   |                                      | total charge  |   |
| 63.       | Did your local governm<br>are charged a fee by we                     |  |   |   |                                      | 16-17? (a system)   | where residents                                 |
|           | cording to GS 130A-302<br>form users of such costs                    | ~  | nents are required                                      | to conduct full cos   | st accounting annua                  | lly and to develop  | a system to                                     |
| 64.       | If your local governme  | nt contracts for soli  | d waste or recyclin                                     | g services, please re   | port the annual cont                 | ract amount.  |   |
|           | \$  |  | _ For solid waste                                       | services per year   |                                      |   |   |
|           | \$  |  | _ For recycling pe                                      | r year  |                                      |   |   |
|           | ¢.  |  | OR  |   |                                      |   |   |
|           | \$  |  |   | cact (solid waste, an   |                                      |   |   |
| 65.       | Collection Programs: P<br>collection programs for                     | waste, recyclables   | and yard waste inc                                      | luding materials co   |                                      |   |   |
|           | not available, please r   | # of Households<br>served  | Tons Collected  | Collection Cost   | Disposal Cost<br>(tipping fees paid) | Total Cost<br>including<br>overhead                                 | Cost Per Ton<br>Managed<br>(calculated by form) |
| N         | Iunicipal Solid Waste*  | 2,079  | 2,678   |   | 50.65                                | 135,640.7   | 50  |
|           | <b>Recycling Program</b> **   | 2,079  | 221   |   |                                      |   | 0   |
|           | Yard Waste Program  | 2,079  | 210   |   | 21                                   | 4,410   | 21  |
|           | Totals  | (calculated by form):  | 3,109   |   | 71.65                                | 140,050.7   | 45  |
|           | *for materials collected and<br>**for materials collected b           | y public recycling progr   | ams including those ser                                 | vices offered to commerce   | cial and industrial generat          |   |   |
| 00.       | If your government operacility operations (rour proportionately. Land | nd to nearest dollar   |   | fferent facilities are  |                                      | tempt to allocate co  |   |
|           | Tran  | sfer Station Budget  | : \$  |   |                                      |   |   |
|           |   | Waste / Compost I  |   |   |                                      |   |   |
|           | Recy  | cling Facility Budg  | get: \$   |   |                                      |   |   |
| 67.       | What was your governme  | ment's total combin  | ed annual budget fo                                     | or all solid waste an   | d recycling services                 | in 16-17? \$140,05  | 0   |

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# Part VIII. County Mandated Programs

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

| WH  | IITE GOODS   |                              |                               |                         |                     |  |  |
|---|--|------------------------------|-------------------------------|-------------------------|---------------------|--|--|
| 68. Please provide name, address, phone number, and e-mail of person responsible for white goods program. |  |                              |                               |                         |                     |  |  |
|   | Name:  |                              |                               |                         |                     |  |  |
|   | Address:   |                              |                               |                         |                     |  |  |
|   | Telephone: Fax:  |                              | Email:                        |                         |                     |  |  |
| 69.   | Please provide the physical address of the p   | primary county white         | e goods collection site.      |                         |                     |  |  |
|   | Street 1:  |                              |                               |                         |                     |  |  |
|   | Street 2:  |                              |                               |                         |                     |  |  |
|   | City:  |                              | State: North Carolina         | Zip:                    |                     |  |  |
| 70.   | Please provide the name of the business or Name:                                       | -                            |                               | om white goods.         |                     |  |  |
|   | Street:  |                              |                               |                         |                     |  |  |
|   | City:  |                              |                               | Zip:                    |                     |  |  |
|   | Phone: Fax:  |                              |                               |                         |                     |  |  |
| 71.   | Give amounts / types of CFCs removed. At   |                              |                               |                         |                     |  |  |
|   | Type of CFC Remov  | ved                          |                               | Amount                  |                     |  |  |
|   |  |                              |                               |                         |                     |  |  |
|   |  |                              |                               |                         |                     |  |  |
|   |  |                              |                               |                         |                     |  |  |
|   |  |                              |                               |                         |                     |  |  |
|   |  |                              |                               |                         |                     |  |  |
| 72.   | CFCs may be recycled or sent for destruction   | on. Give name of firi        | m, disposal method and amount | t earned / spent for CF | C disposal.         |  |  |
|   | Firm   |                              | Method of Disposal            | Amount Earned           | Amount Spent        |  |  |
|   |  |                              |                               |                         |                     |  |  |
|   |  |                              |                               |                         |                     |  |  |
|   |  |                              |                               |                         |                     |  |  |
| 73.   | Please report the tonnage of white goods co<br>white goods tonnage reported on page 5? | Ilected during FY 20     Yes |                               | ges table on page 5 (qu | estion # 45). Was   |  |  |
| 74.   | List the amount of revenue for the white go  | oods program by sour         | rce:                          |                         |                     |  |  |
|   | Revenue collected from sale of scrap:  | \$                           |                               |                         |                     |  |  |
|   | Revenue collected from White Goods Tax   |                              |                               |                         |                     |  |  |
|   | Revenue from other source (e.g. grants):   | \$                           |                               |                         |                     |  |  |
|   | Total Revenue:   |                              |                               |                         |                     |  |  |
| 75.   | According to the White Goods Law, White expenditures White Good Tax Distributions      |                              |                               |                         | mounts and types of |  |  |
|   | Operational Expenses: \$   | S                            |                               |                         |                     |  |  |
|   | Capital Improvements: \$   |                              |                               |                         |                     |  |  |
|   | Clean-up of Illegal White Goods Dumps: \$  |                              |                               |                         |                     |  |  |
|   | Total Expenditures: \$   |                              |                               |                         |                     |  |  |
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| 6.         |  | d e-mail of person responsible for scrap tires program. |                              |   |                              |  |  |  |  |
|------------|--|---|------------------------------|---|------------------------------|--|--|--|--|
|            |  |   |                              |   |                              |  |  |  |  |
|            | Address:   |   |                              |   |                              |  |  |  |  |
|            | Telephone: Fax:  |   | Ema                          | ail:                                      |                              |  |  |  |  |
| 7.         | Please provide the physical address of the primary   | •   | ap tires collection s        | ite.                                      |                              |  |  |  |  |
|            | Street 1:  |   |                              |   |                              |  |  |  |  |
|            | Street 2:  |   |                              |   |                              |  |  |  |  |
|            | City:  |   |                              |   |                              |  |  |  |  |
| 3.         | Tonnage/Number of scrap tires disposed July 1, 20<br>Tons  | 16-June 30  | 0, 2017 ( <u>excluding</u> t | ires from cleanup of n<br>Number of tires | uisance sites)               |  |  |  |  |
| 9.         | Tonnage/Number of scrap tires disposed from clea   | nup of stat<br>or                                       | e or county designa          | ted nuisance sites<br>Number of tires     |                              |  |  |  |  |
| ).         | Indicate the types of tires collected by the county:<br>Passenger% Heavy                                   | Fruck   | %                            | Large Off-Road                            | %                            |  |  |  |  |
| 1.         | List the amount of revenue for the scrap tire progra   | m by sour   | ce:                          |   |                              |  |  |  |  |
|            | Revenue from Scrap Tire Tax Distributions:   | \$  |                              |   |                              |  |  |  |  |
|            | Revenue from Tire Fees:  | \$  |                              |   |                              |  |  |  |  |
|            | Revenue from Scrap Tire Clean-up Reimbursemen  | nts: \$   |                              |   |                              |  |  |  |  |
|            | Revenue from Scrap Tire Cost-Overrun Grants:   | <i>•</i>  |                              |   |                              |  |  |  |  |
|            | Total Revenue:   | \$  |                              |   |                              |  |  |  |  |
| 2.         | County's total scrap tire program contract expendit<br>excluding costs of nuisance tire cleanups, for FY 1 | ure (contra<br>6-17.                                    | act disposal/hauling         | costs), \$                                |                              |  |  |  |  |
| 3.         | County's additional scrap tire program expenditure<br>Labor \$   |   |                              | r cost), if any.                          |                              |  |  |  |  |
|            | Site Cost \$   |   | _                            |   |                              |  |  |  |  |
|            | Other \$   |   | describe Other:              |   |                              |  |  |  |  |
| 1.         | County's contract cost for scrap tire disposal. \$   |   | / Ton; \$                    | / Tire                                    |                              |  |  |  |  |
| 5.         | Hauling cost or fuel surcharge, if not included in c   | ontract cos   | st above. \$                 | / Ton; \$                                 | / Tire                       |  |  |  |  |
| 5.         | Total tipping fees collected for tires not eligible for  | r free disp   | osal. \$                     |   |                              |  |  |  |  |
|            |  |   |                              |   |                              |  |  |  |  |
| <i>'</i> . | Total number of tires collected not eligible for free  | -   |                              |   |                              |  |  |  |  |
| 3.         | If scrap tires were not hauled off site by contracted  | service pr  | rovider, were they cu        | ut and disposed in a lo                   | cal landfill? Yes No         |  |  |  |  |
| Э.         | Name of tire disposal/recycling firm(s):   |   |                              |   |                              |  |  |  |  |
| E          | MPORARY DISASTER DEBRIS STAG   | ING SIT   | TES                          |   |                              |  |  |  |  |
| ).         | Does your local government have a plan in place f  | or manage   | ment of disaster deb         | ris? 🗌 Yes                                | No                           |  |  |  |  |
|            | If yes, indicate if the plan is a stand-alone plan or i  | n conjunct  | ion with local gover         | rnment agencies:                          | Stand-alone In conjuncti     |  |  |  |  |
| l.         | If you indicated having a plan, has the plan been re<br>requirements for public assistance reimbursement   |   |                              | Ianagement or FEMA                        | to ensure it meets the basic |  |  |  |  |
| 2.         | Please list the name, contact numbers(s), and e-ma<br>your local government:                               |   | of the person(s) in c        | harge of the disaster de                  | ebris management program for |  |  |  |  |
|            |  | me:   |                              |   |                              |  |  |  |  |
|            | Phone: Pho   | one:  |                              | Phone:                                    |                              |  |  |  |  |
|            | E-mail: E-1  | nail:   |                              | E-mail:                                   |                              |  |  |  |  |

93. Please list the temporary disaster debris staging sites in your county or municipality which have been reviewed for conflicts with the Natural Heritage Program (NHP) and the State Historic Preservation Office (SHPO) through coordination with the Solid Waste Section. *Please note that the vetting of a site prior to a disaster is advantageous to local governments because a staging site which is found to have impacted federal or state resources after a disaster may cause difficulty for local governments when attempting to obtain FEMA reimbursement.* Attach extra sheets, if needed.

| Disaster Site # | Site Name |  | Disaster Site # | Site Name |  |  |  |
|-----------------|-----------|--|-----------------|-----------|--|--|--|
|                 |           |  |                 |           |  |  |  |
|                 |           |  |                 |           |  |  |  |
|                 |           |  |                 |           |  |  |  |
|                 |           |  |                 |           |  |  |  |
|                 |           |  |                 |           |  |  |  |
|                 |           |  |                 |           |  |  |  |

| 94. | Does your plan address the management of household hazardous waste and white goods following a disaster?                 |
|-----|--|
| 95. | Does your plan address mass animal mortality?  |
| MA  | NAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES   |
| 96. | Has your county considered whether to implement a program for the management of abandoned manufactured homes? 🗌 Yes 🗌 No |
|     | If yes, has your county developed a written plan for the management of abandoned manufactured homes? Yes No              |

## Part IX. Comments

Use this section to elaborate on any info provided in your report as necessary. We would appreciate your comments about this report or other matters regarding solid waste management in North Carolina. Thank you for your time. You may submit additional sheets if needed.

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 <u>https://deq.nc.gov/conservation/</u>recycling/local-government-recycling-assistance or e-mail us at Lgteam@ncdenr.gov

