

State of North Carolina

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

Solid Waste and Materials Management Annual Report July 1, 2016 -- June 30, 2017

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

On the following pages you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2016-2017. Each North Carolina County and Municipality is required to complete this report annually. Completion and submission of this report will fulfill the annual reporting mandate to the state as required by G.S. 130A-309.09A. Failure to complete and submit this report could result in the local government being excluded from distributions of Solid Waste Disposal Tax Proceeds and other Department of Environmental Quality grants.

Instructions:

Each local government should determine which staff member is responsible for preparing and submitting the annual report and ensure that the report is completed and submitted before the reporting deadline on September 1, 2017.

Options for obtaining a blank copy of this form:

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

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

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

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

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

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

Form Year

2017



Required - Enter Your Local Government Name: Franklinville

State of North Carolina

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

Local Government Report Form

Solid Waste and Materials Management Annual Report July 1, 2016 -- June 30, 2017

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

		Please submit this form to Lgt	eam@ncdenr.gov by Septe	ember 1, 2017.	
	If you have question	ons or need assistance comple	ting this form, please cal	ll 919-707-8121	or 919-707-8139.
Per	son Completing This Report:	Arnold Allred		Title: Public wor	rks director
Ma	iling Address: P.O. Box 277		City: Franklinville		Zip: 27248
Pho	one: 336-824-6440	Fax: 336-824-4472		Date: 8-8-1	7
Em	ail:				
		Gene	eral Instructions		
	ase remember that the time pea specific question.	eriod for the report is JULY 1, 20	16 through JUNE 30, 2017	. Please check "N	o" if you have nothing to report
1.	•	have a Recycling Coordinator or	similar position for FY 16	-17? Yes	⊠ No
	Name Recycling Coordinat	or (if different from person comp	leting this report.)		
	Name:			Title:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
2.	Did your local government	have a Solid Waste Director or s	imilar position for FY 16-1	7?	No No
	If Yes, Name:			Title:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
3.	Did your local government	have dedicated or part-time So	lid Waste Enforcement Sta	ff for FY 16-17?	Yes No
	If Yes, Name:			Title:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
4.	Did your local government all that apply)	have solid waste ordinances in p	lace addressing any of the f	following during F	FY 16-17? (if yes, please check
	Disposal Bans	Illegal Dumping Litteri	ng Other, Please Des	scribe:	
5.	Did your local government mulching, composting)?	manage, provide or contract for a	any solid waste services in	FY 16-17 (e.g., co	ollection, disposal, recycling, No
	If you answ	ver ''No'' to question 5, the rep	ort is complete, please em	nail to Lgteam@n	ncdenr.gov.

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

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction?
	b. Number of households eligible to participate in the curbside recycling program:
	c. Provide the number of households that participate in the curbside recycling program (estimate if necessary):
18.	If your curbside recycling program is operated through a <u>public franchise granted to a private company</u> then please answer the following: Is public participation in the franchise: Voluntary or Mandatory Does your franchise consist of: One service district or Multiple service districts
19.	What sector(s) of your community was served by the curbside recycling program? Residential Commercial Industrial
20.	If you checked commercial or industrial in question 19, please indicate the number of accounts served:
21.	How frequently were the curbside recyclables collected? Once a week Other
22.	Please describe the collection containers used: Bins Blue bags Multi-bin system Roll-out carts
23.	Please describe the method / style of recyclable materials handling: curb-sort (collector separates material as collected) single stream / commingled dual / two stream don't know / other
24.	If you checked "Roll-out carts" in question 22, please indicate the approximate size (volume) of the carts used: less than 50 gallon cart
DR	OP-OFF RECYCLING PROGRAM
25.	Did your government operate a Drop-off Recycling Program?
26.	Who collected the recyclable materials for your local government's drop-off recycling program? Local government employees Private contractor
	Other (please specify)
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program: source-separated (citizens separate materials by type) single stream / commingled dual / two stream (paper separated from cans/bottles) don't know / other
28.	Please estimate the number of households served by your drop-off recycling program.
29.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:
31.	How many of these locations were staffed with attendants?
EL	ECTRONICS RECYCLING PROGRAM
mate	Is answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any perials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5. Did your community operate an electronics recycling program in FY 16-17? Yes No, skip to question # 38 If you did operate an electronics recycling program, please indicate style of program: Permanent - Curbside Collection Permanent - Drop-off Scheduled Collection Day or Event Part of HHW Program If you offer curbside collection of electronics is it: by appointment or unscheduled If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:

33.	Did your electronics recycling program collect or accept televisions from (check all that apply): Residences Businesses
34.	Did your electronics recycling program collect or accept computer equipment from (check all that apply): Residences Businesses
35.	DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was eligible to receive proceeds from the State Electronics Management Fund in February of 2017, please provide the following information:
	Electronics Management Fund balance as of July 1, 2016: \$
	Electronics Management Funds received from DEQ during FY 16-17 (Feb 2017 distribution): \$
	Electronics Management Funds spent during FY 16-17: \$
	Electronics Management Fund balance as of June 30, 2017: \$
36.	Briefly explain how Electronics Management Funds were spent during FY 2016-17 (please list items purchased if applicable):
37.	If you did operate an electronics recycling program, please provide the following information about your vendor / contractor: Name of electronics recycling vendor(s) during FY 16-17:
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?
OT	THER PUBLIC RECYCLING PROGRAMS
the	ase answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by <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? Yes No Did your local government operate a recycling program to serve commercial or institutional members of your community in a manner
37.	other than through your curbside or dropoff recycling programs? \square Yes \square No
40.	Does your local government provide recycling services to Alcoholic Beverage Commission permit holders? Yes No
	On-site collection services provided If on-site collection provided, please estimate # of ABC accounts served:
	Public drop-off recycling sites available for ABC On Premises Permit holders to use
41.	Does your local government operate a program to recycle Construction and Demolition materials? Yes No If yes, please check all materials that were recycled and report tonnages in tonnage table on page 5:
	☐ Clean Wood ☐ Brick, concrete, etc. ☐ Sheetrock ☐ Vinyl siding ☐ Shingles ☐ Metals ☐ Other
42.	Does your local government have an ordinance regulating the construction and demolition waste stream with the intention of encouraging or requiring waste reduction or recycling of these materials?
43.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 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

DDOCD 434	Cu	ırbside	Dr	op-off	All "Oth	er'' Programs	Total Tons
PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear							
Brown							
Green							
Mixed							
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans							
Steel Cans							
White Goods							
Other Metal							
PAPER:							
Newsprint (ONP)							
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper							
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here							
OTHER MATERIALS:							
Textiles (clothes etc) Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled tons-check all	1						
items collected above							
TOTAL TONS:					1		
OFFICE INC TONS	IACIE AC A I		DOLICY OD C				

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

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

Part III. Special Waste Collections

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

Materials <u>from Citizens</u> by Material Type		m collect this om the public?	# of sites	Data on quantities co Please report in	
Used Motor Oil	Yes Yes	☐ No	1		200 gallons
Used Oil Filters	⊠ Yes	☐ No	_ 1	barrels, or	lbs
Used Antifreeze	⊠ Yes	☐ No	_1_		30 gallons
Batteries, Lead Acid	Yes	⊠ No		# batteries	, 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
sehold Hazardous Waste (HHW) and Condition Did your local government operate a household If Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora	hazardous w	aste collection	prograi	m or event in FY 16-17	? Yes No
Did your local government operate a household	hazardous was: ary Event or a gen to accept rogram with a participated all businesses as material may HHW Prog	rate collection at a Permanent materials duri another local g in your HHW s (Conditionall anaged ram: if totals f	HHW Cong this Fovernment collections Exemptor individual conditions or individual conditions are considered to the conditions of the conditions are conditions or individual conditions are conditions are conditions or individual conditions are conditions or individual conditions are conditions are conditions or individual conditions are conditional conditions are conditions are conditional conditions.	collection Facility? Collection Facility? Collection Facility? Constant Year? On program this Fiscal on program this Fiscal year. Don program this Fiscal on pounds year.	? Yes No Permanent Tem No Year? Perators)? Yes win please itemize below
Did your local government operate a household If Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program elist partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma If yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, pl Note, materials listed here should only be the	hazardous ws: ry Event or a pen to accept rogram with a participated all businesses as material my HHW Proglease simply ose collected	in your HHW s (Conditionall anaged ram: if totals f provide total of	HHW Cong this Fovernment collection individuantity rogram a	collection Facility? Collection Facility. Collectio	? Yes No Permanent Tem No Year? Prators)? Yes wun please itemize below by HHW program in 48g materials listed in questi
Did your local government operate a household If Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program elist partner(s) d. Provide number of citizens / households that e. Did your program accept materials from smalf yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, pl	hazardous ws: ary Event or aben to accept rogram with a participated all businesses as material my HHW Proglease simply ose collected Use	in your HHW (Conditional) anaged ram: if totals for provide total of at an HHW Pred Oil Filters	HHW Cong this Fovernment of the collection of th	collection Facility? Collection Facility. Collectio	Permanent Tem No Year? Parators)? Yes with please itemize below by HHW program in 48g materials listed in questing lbs.
Did your local government operate a household If Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program elist partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma If yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, pl Note, materials listed here should only be the Used Motor Oil (gal)	hazardous ws: Ty Event or aben to accept rogram with a participated all businesses as material my HHW Proglease simply ose collected Lea	in your HHW is (Conditionall anaged aram: if totals f provide total of at an HHW Pred Oil Filters and Acid Batter	HHW Cong this Fovernment collection individuantity rogram and its (lbs)	collection Facility? Collection Facility. Collectio	Permanent Tem No Year? Parators)? Yes with please itemize below by HHW program in 48g materials listed in questing lbs.
Did your local government operate a household If Yes, please respond to the following questions a. Was HHW collected at a permitted Tempora b. How many days was your HHW Program op c. Did you partner or co-sponsor your HHW program op Please list partner(s) d. Provide number of citizens / households that e. Did your program accept materials from sma If yes, please estimate the amount of busines f. Amounts of individual materials collected by about individual materials is not available, pl Note, materials listed here should only be the Used Motor Oil (gal) Used Antifreeze (gal)	hazardous ws: ry Event or a ben to accept or a ben	in your HHW s (Conditionall anaged at an HHW Pred Oil Filters ad Acid Batter lbs) rogram. If indout of the total out of the total	HHW (ong this Fovernment of the collection of th	collection Facility? Collected Yes Collected by Dounds and Materials are known of materials collected by Should not include the following of Materials were Collected Facility Should not include the following Should not include the follow	?

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 Was	ste, Mulo	ching and (Composting	g Managem	ent	
		rns management of vegetative ad it is illegal to burn. Compos						
aboi	it your managen	nent of vegetative materials. Do	not include	information on	food waste or no	on-vegetative mat	terials in this section.	
49.	•	al government operate a yard was				•	ow yard waste is managed b	•
50	_	at apply: Collected curbside				•	-	il.
50. 51.		ent significantly impact the amo s of materials were managed by	•		_	_		
<i>J</i> 1.		rial (yard waste, brush, limbs, l						
		Destination	Check if used	Tons	Cubic Yards		Name and Location of Facility g Vegetative Materials	
	End user (to fa	rmer or home-owner)			500			
	Your local gov	rernment's mulch or compost fac	ility 🔲					
	Other public m	ulch or compost facility						
	Private mulch	or compost facility						
	Land clearing a	and inert debris landfill (LCID)						
	Energy / Fuel U	Use (e.g. boiler fuel market)						
		Total			500			
		E MANAGEMENT FORMULA						
	•	waste volume. Calculate for each ed by program in the appropriate			_	1 0	<u>e</u>	
	10	\mathbf{x} 1	c boxes abov	x 50	Truck x 5 days/w	= 500	vd ³	
	Size of Truc		truck fills each	week # of weeks	truck is used during	g year	TOTAL	
					ction Servi			
This	section concern	s your local government's provi						
52.	Please complet	te the following table about your	-	t's solid waste co	ollection system			
	Sector	Who Collects Solid Waste?		lid Waste Colle	VVIIO CO	llects Solid Waste?	How is Solid Waste Collected	?
	Danislandial	Insert Letter - see codes at right Primary b Secondary b	Primary	- see codes at ri	a. Local ; b. By Co		es 1. Once a week at household 2. Twice a week at household	
	Residential	0 0	Primary	Secondary	c. Franch	nise haulers	3. Convenience center/greenbox	
	Commercial	Driver Coondow	Primary	,	involv	government not ed in provision of	4. As needed or by request5. Daily	
	Industrial	, a		Secondary	service		6. Other	
53.	If you provide	residential waste collection at si	ngle-family	households in y	our jurisdiction,	please answer the	e following questions:	
	What type of c	ollection method is used?	Fully Aut	omated S	Semi-Automated	l Manual	Don't know	
	What is the sta	ndard collection frequency?	Weekly	Two tim	ies per week	Other		
	What is the typ	pical service point for single fam	ily househol	d waste?	Curbside	Back yard / Ba	ck door	
	What type of c	ollection container is used?	Governme	ent-provided car	rts Reside	ent-provided conta	ainer Bags	
	Do you offer b	ulky waste collection services?	Yes	No No				
54.	-	ties - did your government collecte goods delivered to the county	_		☐ Yes ☑ No	No		
		Part VI. Solid W	aste and	l Recycling	g Education	nal Activitie	S	
55.	Did your local issues / activiti	government have an education es? Yes No (inform citizens o Part VII, page		ut solid waste ma	nagement and / or recycling	3
56.	Please estimate	e your annual budget for solid wa	aste related e	education and or	utreach activities	s: \$		
57.	Does your com	nmunity produce recycling educa	ntion and out	reach materials	in languages be	sides English?	Yes No	
	If YES, please	list other languages used:						
58.	Please provide	your recycling website address	and public in	nformation phor	ne number if app	licable.		_
	Website:					Phone #:		

Part VII. Resources for Solid Waste Management and Full Cost Accounting Sufficient resources available to solid waste management programs are essential for continued success of these programs. The following questions deal with funding of your community's solid waste and materials management programs. 59. Did your local government operate an Enterprise Fund for solid waste services in FY 16-17? Yes No. 60. With regards to funding sources, check all that apply to your local government: Tipping fees Volume/weight-based fees (e.g. PAYT) Tire tax Property taxes / general fund Sale of recyclables White Goods tax Per household charges Grants Disposal Tax 61. NC Solid Waste Disposal Tax proceeds are distributed to eligible local governments on a quarterly basis by the Department of Revenue. According to GS 105-187.63 these funds must be used by a city of county solely for solid waste management programs and services. How are disposal tax distributions being used? 62. If applicable, please provide your FY 16-17 household fees. (e.g., a. \$45.00 per year per household for solid waste) _____ per _____ per ____ _____ per _____ per ____ for yard waste _____ per _____ for bulky waste _____ per _____ per _____ availability fee per _____ per ____ total charge 63. Did your local government operate a Pay-As-You-Throw program for residential garbage during FY 16-17? (a system where residents are charged a fee by weight or volume for the amount of trash they discard) Yes According to GS 130A-309.08, local governments are required to conduct full cost accounting annually and to develop a system to inform users of such costs. 64. If your local government contracts for solid waste or recycling services, please report the annual contract amount. For solid waste services per year For recycling per year OR Combined Contract (solid waste, and recycling) 65. Collection Programs: Please complete the following table to the best of your ability to display the full costs of your local government's collection programs for waste, recyclables and yard waste including materials collected from convenience centers. If full cost analysis is not available, please report program budget in Total Cost column.

	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	including overhead	Managed (calculated by form)
Municipal Solid Waste*	476	362			74,197.84	204
Recycling Program**						
Yard Waste Program						
Totals	(calculated by form):	362			74,197.84	204
***				15 111 7 1011		

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

66. If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide total budget for facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate costs proportionately. Landfill Budget:

Transfer Station Budget:	\$
Yard Waste / Compost Facility Budget:	\$

Recycling Facility Budget:

67. What was your government's total combined annual budget for all solid waste and recycling services in 16-17? \$74,194

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

Part VIII. County Mandated Programs

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

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

5 C.	RAP TIRES					
76.	Please provide name, address, phone number, and e-n Name:	•	-			
	Address:				Zip:	
	Telephone: Fax:		Emai	1:		
77.	Please provide the physical address of the primary constreet 1:	-				
	Street 2:					
	City:		State: North	n Carolina	Zip:	
78.	Tonnage/Number of scrap tires disposed July 1, 2016 Tons or	-June 30, 201	7 (<u>excluding</u> tin	res from cleanup of nu Number of tires	iisance sites)	
79.	Tonnage/Number of scrap tires disposed from cleanu Tons or		ounty designate	ed nuisance sites Number of tires		
80.	Indicate the types of tires collected by the county: Passenger % Heavy True	ick	%	Large Off-Road	%	
81.	List the amount of revenue for the scrap tire program	-				
	Revenue from Scrap Tire Tax Distributions:					
	Revenue from Tire Fees:					
	Revenue from Scrap Tire Clean-up Reimbursements:					
	Revenue from Scrap Tire Cost-Overrun Grants:					
	Total Revenue:	\$				
82.	County's total scrap tire program contract expenditure excluding costs of nuisance tire cleanups, for FY 16-1	e (contract dis	posal/hauling c	osts), \$		
83.	County's additional scrap tire program expenditure (i. Labor \$		renience center	cost), if any.		
	Site Cost \$					
	Other \$	de	scribe Other: _			
84.	County's contract cost for scrap tire disposal. \$		/ Ton; \$	/ Tire		
85.	Hauling cost or fuel surcharge, if not included in cont	tract cost abo	ove. \$	/ Ton; \$	/ Tire	
86.	Total tipping fees collected for tires not eligible for fi	ree disposal. §	S			_
87.	Total number of tires collected not eligible for free di					-
88.	If scrap tires were not hauled off site by contracted se	rvice provide	r, were they cu	t and disposed in a loc	al landfill? Yes	No
89.	Name of tire disposal/recycling firm(s):					-
TE	MPORARY DISASTER DEBRIS STAGIN					
90.	Does your local government have a plan in place for i	nanagement o	of disaster debr	is? Yes	No No	
	If yes, indicate if the plan is a stand-alone plan or in c	onjunction w	ith local govern	nment agencies:	Stand-alone In conju	unction
91.	If you indicated having a plan, has the plan been revier requirements for public assistance reimbursement in a			anagement or FEMA t	to ensure it meets the basic	С
92.	Please list the name, contact numbers(s), and e-mail a	ddress of the	person(s) in ch	arge of the disaster de	bris management program	n for
	your local government: Name: Name	:		Name:		
						
	E-mail: E-mai					

Disaster Site #	cause difficulty for local governments when at Site Name	Disaster Site #	Site Name
Does your plan address	the management of household hazard	ous waste and white goods follow	ing a disaster? Yes No
Does your plan address	mass animal mortality? Yes	☐ No	
	ABANDONED MANUFACTU	IDED HOMES BY COUNT	TIEC
	arad whathar to implement a program	tor the management of abandone	
•	ered whether to implement a program	e e	
	ered whether to implement a program developed a written plan for the mana	e e	
•	leveloped a written plan for the mana	gement of abandoned manufacture	
If yes, has your county of	leveloped a written plan for the mana	gement of abandoned manufacture K. Comments	ed homes? Yes No
If yes, has your county of this section to elaborate of	developed a written plan for the mana $\operatorname{\bf Part} {f \Omega}$	gement of abandoned manufacture K. Comments necessary. We would appreciate y	ed homes? Yes No
If yes, has your county of this section to elaborate of	leveloped a written plan for the mana Part ID on any info provided in your report as	gement of abandoned manufacture K. Comments necessary. We would appreciate y	ed homes? Yes No
If yes, has your county of this section to elaborate of	leveloped a written plan for the mana Part ID on any info provided in your report as	gement of abandoned manufacture K. Comments necessary. We would appreciate y	ed homes? Yes No
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If yes, has your county of this section to elaborate of	leveloped a written plan for the mana Part ID on any info provided in your report as	gement of abandoned manufacture K. Comments necessary. We would appreciate y	ed homes? Yes No

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

Joseph Fitzpatrick, email: joseph.fitzpatrick@ncdenr.gov phone 919-707-8121

Rob Taylor, email: rob.taylor@ncdenr.gov phone: 919-707-8139

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

