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

Environmental Quality

Local Government Report Form

Required - Enter Your Local Government Name: Sampson County

State of North Carolina

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

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

COMPLETION AND SUBMISSION OF THIS REPORT WILL FULFILL THE ANNUAL REPORTING

MANDATE	E TO THE STATI	E AS REQUIRED BY	G.S. 130A-309.	09A.					
Please	e submit this form to L	.gteam@ncdenr.gov by Sep	tember 1, 2017.						
If you have questions or n	eed assistance comp	pleting this form, please c	all 919-707-8121	or 919-707-8139.					
Person Completing This Report: Perry S	Solice		Title: Environme	ental Health Supervisor					
Mailing Address: 405 County Complex R	۲d.	City: Clinton		Zip: 28328					
Phone: 910-592-4675	Fax: 910-592-2874	4	Date: 8-29-	17					
Email: psolice@sampsonnc.com									
	Ge	eneral Instructions							
Please remember that the time period for	the report is JULY 1, 2	2016 through JUNE 30, 201	7. Please check "N	o" if you have nothing to report					
 for a specific question. Did your local government have a F 	Pogualing Coordinator	or similar position for EV 1	6-17? 🔀 Yes	No					
		-							
Name Recycling Coordinator (ii dii	Name Recycling Coordinator (if different from person completing this report.)								
Name:			Title:						
Address:		City:		Zip:					
Telephone:	Fax:	Email:							
2. Did your local government have a S	Solid Waste Director of	r similar position for FY 16	-17? Yes	No					
If Yes, Name:		Title:							
Address:		City:		Zip:					
Telephone:	Fax:	Email:							
3. Did your local government have de	dicated or part-time	Solid Waste Enforcement S	taff for FY 16-17?	Yes No					
If Yes, Name: Sampson County	Sheriff Dept.		Title:						
Address: Fontana Street		City: Clinton		Zip: 28328					
Telephone: 910-592-4141	Fax:	Email:							
4. Did your local government have sol all that apply)	id waste ordinances in	place addressing any of the	e following during F	Y 16-17? (if yes, please check					
Disposal Bans Illega	al Dumping 🗌 Litte	ering Other, Please D	escribe:						
5. Did your local government manage, mulching, composting)?	, provide or contract fo	or any solid waste services i	n FY 16-17 (e.g., co Xes	llection, disposal, recycling,					

If you answer "No" to question 5, the report is complete, please email to Lgteam@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.						
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 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 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).						
CU	RBSIDE RECYCLING PROGRAM						
15.	Did your government operate a Curbside Recycling Program? 🗌 Yes 🛛 🔀 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)						
	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 Every other week / biweekly Other							
22.	Other							
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: Iss than 50 gallon cart 65 gallon cart 95 gallon cart multiple sizes of cart available							
DR	OP-OFF RECYCLING PROGRAM							
25.	Did your government operate a Drop-off Recycling Program? Xes No, skip to question # 32							
26.	Who collected the recyclable materials for your local government's drop-off recycling program? Local government employees Private contractor Waste Industries							
	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. 27,500							
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: 12							
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 erials collected by the electronics recycling programs should be listed in the "Other" column in the Recycling Tonnages Chart on pg 5.							
32.	Did your community operate an electronics recycling program in FY 16-17? Xes 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: 2							

33.	Did your electronics	recycling program colle	ct or accept televisions from	om (check all that apply):	Residences	Businesses
			The second se			

- 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): \$ 4,748.93

Electronics Management Funds spent during FY 16-17: \$ 54,294.6

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):

For the management/handling of electronic recycling program, such as signs and maintenance

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: Electronic Recycling International (ERI)

Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? Xes

OTHER PUBLIC RECYCLING PROGRAMS

Please answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by
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? \bigvee Yes \bigcap No
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 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 \Box Yes with the intention of encouraging or requiring waste reduction or recycling of these materials?
43.	Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 16-17. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	Public Parks Recycling Program Athletic Field /Venue Recycling Program
	Pedestrian Recycling Program Recycling Service for Special Events / Festivals
44.	Please identify all "Other" programs or services operated by your government during FY 16-17. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
	Public School Recycling Program
	Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)
	Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events
	Organics / Food Waste Recycling other than yard waste program

Oyster Shell Recycling Program

Other Programs (please specify) _

Programs to manage Special Wastes are addressed in Part III on page 6, please do not include Special Waste programs above.

RECYCLING TONNAGES FROM PUBLIC PROGRAMS

- 45. a. Enter data in the table below for ALL recycling programs operated or contracted for by your local government. Provide TONNAGES (or estimates) for each material collected for the period JULY 1, 2016 through JUNE 30, 2017. DO NOT include materials that were not collected or managed by your local government either directly or under contract to a private service provider.
 - b. Do NOT report YARD WASTE, TIRES, HHW, USED OIL, OIL FILTERS, ANTI-FREEZE, BATTERIES or other SPECIAL WASTE tonnages on this page - these items should be reported in other sections of report form. See page 6 for SPECIAL WASTES.
 - c. Please report materials collected in tons only. Please only extend numbers to two decimal places (x.xx).
 - d. If you collected single stream or other commingled materials, record Tons in the "Commingled tons" row and then check the box for each individual material type that was commingled.

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							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans							
Steel Cans							
White Goods					\square	201.09	201.09
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						50.00	50.00
Other Electronics					\boxtimes	58.98	58.98
						27.04	27.04
C&D Materials Recycling							
Commingled tons-check all							
items collected above			\boxtimes	342.46			342.46
TOTAL TONS:				342.46		287.11	629.57

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.

a		**7 4	A H U			36 / 13	A H A H			A H H	D	
S	pecial	Waste	Collections	(Do No	t Include	Materials	Collected	as part of	t an HHW	Collection	Program	or Event)

47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type	Did program collect this material from the public?		# of sites		ta on quantities collected / managed. Please report in indicated units.				
	Used Motor Oil	Yes	🗌 No	1						
	Used Oil Filters	Yes	🗌 No		barro	els, or	lbs			
	Used Antifreeze	Yes	🗌 No		I	ľ	gallons			
	Batteries, Lead Acid	Yes	🗌 No		# b	atteries, or	lbs			
	Batteries, Dry Cell	Yes	🗌 No				lbs	1		
	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	D No				lbs			
	Pesticide Containers (NCDA Program, not pesticides themselves)	Yes	🗌 No			lbs, or	# con- tainers			
	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			
	 b. How many days was your HHW Program open to accept materials during this Fiscal Year? c. Did you partner or co-sponsor your HHW program with another local government? Yes No Please list partner(s) d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year? e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? Yes No If yes, please estimate the amount of business material managed pounds f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize below. If data about individual materials is not available, please simply provide total quantity of materials collected by HHW program in 48g below. Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in question 47. Used Motor Oil (gal) Used Oil Filters # of Barrels, or lbs Lead Acid Batteries (lbs) floorescent Bulbs / Lights Containing Mercury (lbs) 									
	g. Provide Total Quantity of materials collected reported in 48f, please net the weight of thoseh. Please list HHW Collection Contractor		ut of the total	listed he				pounds		
	i. Estimated cost of HHW / CESQG program	or event(s) \$								
	es 3 through 6 should have only been complet governments answering ''Yes'' to question # 5	ed by govern	ments indicat	ting in q	uestion # 14 th					

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? Yes 🕅 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
- What quantities of materials were managed by your yard waste program? Provide information in TONS OR CUBIC YARDS of 51.
 - organic material (yard waste, brush, limbs, leaves, etc.) managed. For conversion purposes, use 400 lbs./cubic yd.

Destination	Check if used	Tons	Cubic Yards	Please Provide Name and Location of Facility Receiving Vegetative Materials
End user (to farmer or home-owner)				
Your local government's mulch or compost facility				
Other public mulch or compost facility				
Private mulch or compost facility				
Land clearing and inert debris landfill (LCID)				
Energy / Fuel Use (e.g. boiler fuel market)				
Total				

YARD WASTE MANAGEMENT FORMULA: If yard waste quantities are not tracked, you may use this formula below to help you estimate yard waste volume. Calculate for each truck used in your yard waste management program, and then enter the grand total volume managed by program in the appropriate boxes above. Ex. 10 yd³ truck x 3 days/wk x 16 wks = 480 yd³

		_X	X		_ =		yd^3
	Size of Truck (in yards)	Avg. no. of times truck fills eac	ch week # of weeks tr	uck is used during ye	ar	TOTAL	
		Part V. Solid	Waste Collect	tion Service	S		
This .	section concerns your local g	overnment's provision of sola	id waste (garbage) (collection service	?s.		
52.	Please complete the followin	ig table about your governme	nt's solid waste coll	lection system.			
	Who Collo	ata Salid Waata? Harria	Solid Wests Colles	toda			

	Sector	Insert Letter - see codes at right Insert # - see codes at right						<u>Who Collects Solid Waste?</u> <u>How is Solid Waste Collected</u>					
		Insert L	.etter -		s at right	Insei	rt # - se	ee codes at 1	right	a. Local government employees	1. Once a week at household		
	Residential	Primary	b	Secondary		Primary	3	Secondary		b. By Contract c. Franchise haulers	 Twice a week at household Convenience center/greenbox 		
	Commercial	Primary	d	Secondary		Primary		Secondary		 d. Local government not involved in provision of 	4. As needed or by request5. Daily		
	Industrial	Primary	d	Secondary		Primary		Secondary		service	6. Other		
53.	If you provide <u>residential</u> waste collection at single-family households in your jurisdiction, please answer the following questions:								following questions:				
What type of collection method is used? 🗌 Fully Automated 🗌 Semi-Automated 🗌 Manual 🗌 Don't know											Don't know		
	What is the standard collection frequency? Weekly Two times per week Other What is the typical service point for single family household waste? Curbside Back yard / Back door												
	What type of collection container is used? 🗌 Government-provided carts 🗌 Resident-provided container 🗌 Bags												
	Do you offer bulky waste collection services?												
54.	For municipalities - did your government collect white goods at the curb? \Box Yes \Box No If so, were white goods delivered to the county for marketing? \Box Yes \Box No												
	Part VI. Solid Waste and Recycling Educational Activities												
55.	Did your local								0		nagement and / or recycling		
	issues / activiti	es?	×Υ	es	No (I	f No, sk	ip to P	art VII, pag	e 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										Yes No		
	If YES, please list other languages used: Spanish												
58.	Please provide	your rec	ycling	website a	address a	nd publi	c info	rmation pho	ne num	ber if applicable.			
	Website: www	.sampso	nnc.co	m						Phone #:			

	Part VII	. Resources f	or Solid <u>Was</u>	te Manageme	ent and Full C	ost Accounti	ng		
	ficient resources availab stions deal with funding					these programs.	The following		
<u>^</u>	Did your local governn	• •				Yes No			
	With regards to funding	-	-				, ,		
	Tipping fees	S	Volume/we	eight-based fees (e.g	g. PAYT) 🛛 🕅 T	ire tax			
	Property tax	tes / general fund	Sale of rec	yclables	X W	/hite Goods tax			
	Per househo	U	Grants			isposal Tax			
61.	51. 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 d	istributions being u	sed?Solid Waste N	Ianagement Program	n				
62.	If applicable, please pr	ovide your FY 16-1	7 household fees. ((e.g., a. <u>\$45.00</u> per	<u>year</u> per <u>household</u> j	for solid waste)			
	a. \$	per		per		for solid waste	2		
	b. \$	per		per		for recycling			
	c. \$	per		per		for yard waste			
	d. \$	per		per		for bulky wast	e		
	e. \$	per		per		availability fee	2		
	f. \$	per		per		total charge			
63.	Did your local governm are charged a fee by we					16-17? (a system v] No	where residents		
	cording to GS 130A-30	~	nents are required	to conduct full cos	st accounting annual	lly and to develop	a system to		
info	orm users of such costs								
64.	If your local governme	nt contracts for soli	d waste or recycling	g services, please re	port the annual contr	ract amount.			
	\$		For solid waste s	services per year					
	\$		For recycling pe	r year					
			OR	5					
	\$675,660.51 Combined Contract (solid waste, and recycling)								
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials col		ence centers. If fu	ll cost analysis is		
		# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	<u>Total Cost</u> including	Cost Per Ton Managed		
			0.000.01		(upping rees paid)	overhead	(calculated by form)		
N	Iunicipal Solid Waste*	28,500	8,233.31			675,660.51	82		
	Recycling Program**		342.46				0		
	Yard Waste Program				·				
		(calculated by form):	8,575.77			675,660.51	78		
	*for materials collected and sent for eventual disposal in a Municipal Solid Waste or Construction and Demolition Landfill.								
66.	**for materials collected by public recycling programs including those services offered to commercial and industrial generators. Do not include special of your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide to facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate cost proportionately. Landfill Budget:								
	Transfer Station Budget: \$								
		Yard Waste / Compost Facility Budget: \$							
	Recy	cling Facility Budg	set: \$						
67.	What was your governme	ment's total combin	ed annual budget fo	or all solid waste and	d recycling services	in 16-17? \$675,66	0.51		
20	16-2017 Local Governm	ent Annual Report	Report Due Date	e: September 1, 201	7 Submit to: Lgtea	m@ncdenr.gov	Page 8 of 11		

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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	ITE GOODS								
68.	Please provide name, address, phone number, and e	e-mail of person	· · ·						
	Name: Perry E. Solice		Title: E	EH Supervisor					
	Address:		ty:	Zip:					
	Telephone: Fax:		Email:						
69.	Please provide the physical address of the primary of	county white goo	ods collection site.						
	Street 1: Ingold Convenient Site, Ezzell Rd., Clir	nton, NC 28328	8						
	Street 2: Spivey's Corner Convenient Site, US Hy	wy 421-North, D	ounn, NC 28334						
	City:		State: North Carolina	Zip:					
70.	Please provide the name of the business or person the			om white goods.					
	Name: Sampson Salvage								
	Street: 718 E Railroad St 28328								
	City: Clinton,		State: North Carolina	Zip: 2832	.8				
	Phone: (910) 592-6303 Fax:		Email:						
71.	Give amounts / types of CFCs removed. Attach reco			ion of person(s) perfor	ming extraction.				
	Type of CFC Removed			Amount					
	Unknown		Unknown						
72.	CFCs may be recycled or sent for destruction. Give name of firm, disposal method and amount earned / spent for CFC disposal.								
	Firm	Me	ethod of Disposal	Amount Earned	Amount Spent				
	Sampson Salvage	Unknown							
73.	Please report the tonnage of white goods collected of		17 in the Recycling Tonnag	ges table on page 5 (que	estion # 45). Was				
	white goods tonnage reported on page 5? $\qquad \qquad \qquad$	S No							
74.	List the amount of revenue for the white goods prog								
	Revenue collected from sale of scrap:	\$							
	Revenue collected from White Goods Tax Distribu	-							
	Revenue from other source (e.g. grants):	\$							
	Total Revenue:	\$ 18,997.							
75.	According to the White Goods Law, White Good T expenditures White Good Tax Distributions were us		· · ·		mounts and types of				
	Operational Expenses: \$								
	Capital Improvements: \$								
	Total Expenditures: \$								
201	6-2017 Local Government Annual Report Report	Due Date: Septe	<i>mber 1, 2017</i> Submit to:	Lgteam@ncdenr.gov	Page 9 of 11				

1269.1 Tons or	SC:	RAP TIRES									
Address: City: Zip: Telephone: Fax: Fmail: 77. Please provide the physical address of the primary county scrap fires collection site. Street 1: Sampson County Disposal, 7434 Roseboro, NC 28382 Street 1: Sampson County Disposal, 7434 Roseboro, NC 28382 City:	76.	· ·									
Telephone: Fax: Fmail: 77. Please provide the physical address of the primary county scrap tires collection site. Street 1: Sampson County Disposal, 7434 Roseboro, NC 28382 Street 2:											
77. Please provide the physical address of the primary county scrap tires collection site. Street 1: Sampson County Disposal, 7434 Roseboro, NC 28382 Street 2:		Address:									
Street 1: Sampson County Disposal, 7434 Roseboro, NC 28382 Street 1: Street 2: City:											
Street 2:	77.										
City:											
78. Tonsor				Zin							
79. Tonnage/Number of scrap tires disposed from cleanup of state or county designated nuisance sites	78.	Tonnage/Number of scrap tires disposed July 1, 2016-J	une 30, 2017 (excluding tires from cleanup of								
Passenger 97 % Heavy Truck 2 % Large Off-Road 1 % 81. List the amount of revenue for the scrap tire program by source: Revenue from Scrap Tire Tax Distributions: \$ 85,677.95 Revenue from Scrap Tire Clean-up Reimbursements: \$ 25,012.95	79.	Tonnage/Number of scrap tires disposed from cleanup of	of state or county designated nuisance sites								
Revenue from Scrap Tire Tax Distributions: \$ 85,677.95 Revenue from Tire Fees: \$ 25,012.95 Revenue from Scrap Tire Clean-up Reimbursements: \$ Revenue from Scrap Tire Cost-Overrun Grants: \$ Revenue from Scrap Tire Cost-Overrun Grants: \$ Total Revenue: \$ 110,690.9 82. County's total scrap tire program contract expenditure (contract disposal/hauling costs), s 114159.72 excluding costs of nuisance tire cleanups, for FY 16-17. 83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any. Labor \$ Stite Cost \$ Other \$ Meaning cost of fuel surcharge, if not included in contract cost above. \$ Y Total tipping fees collected for tires not eligible for free disposal. \$ 25012.95 87. Total number of tires collected not eligible for free disposal. \$ 25012.95 88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill? Yes No 89. Name of tire disposal/recycling firm(s): Central Carolina Holdings TEMPORARY DISASTER DEBERIS STAGING SITES 90. Does your local government have a plan in place for management of disaster debris? Yes No 91. If yes, indicate if the plan is a stand-alone plan or in conjunct	80.		k 2% Large Off-Road	l <u>1 </u>							
Revenue from Scrap Tire Clean-up Reimbursements: \$ Revenue from Scrap Tire Cost-Overrun Grants: \$ Total Revenue: \$ 110,690.9 82. County's total scrap tire program contract expenditure (contract disposal/hauling costs). \$ 114159.72 83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any. Labor Labor \$	81.		•	_							
Revenue from Scrap Tire Cost-Overrun Grants: \$		Revenue from Tire Fees:	\$ 25,012.95	_							
Total Revenue: \$ 110,690.9 82. County's total scrap tire program contract expenditure (contract disposal/hauling costs), s 114159.72 83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any. Labor \$		Revenue from Scrap Tire Clean-up Reimbursements:	\$	_							
 82. County's total scrap tire program contract expenditure (contract disposal/hauling costs), \$ <u>114159.72</u> 83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any. Labor \$		Revenue from Scrap Tire Cost-Overrun Grants:	\$	_							
excluding costs of nuisance the cleanups, for FY 16-17. 83. County's additional scrap tire program expenditure (i.e. labor, convenience center cost), if any. Labor \$		Total Revenue:	\$ 110,690.9	_							
Labor \$	82.	County's total scrap tire program contract expenditure (excluding costs of nuisance tire cleanups, for FY 16-17	contract disposal/hauling costs), \$ 114159.72	2							
Other \$	83.										
 84. County's contract cost for scrap tire disposal. \$ 87.22 / Ton; \$/ Tire 85. Hauling cost or fuel surcharge, if not included in contract cost above. \$/ Ton; \$/ Tire 86. Total tipping fees collected for tires not eligible for free disposal. \$ 25012.95 87. Total number of tires collected not eligible for free disposal: 36783 88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill? Yes No 89. Name of tire disposal/recycling firm(s): Central Carolina Holdings 7EMPORARY DISASTER DEBRIS STAGING SITES 90. Does your local government have a plan in place for management of disaster debris? Yes No 91. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Yes No 92. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government: Name: Name: Name: Name: Name: Phone: Phone: Phone: Phone: Phone: Phone: Phone: 		Site Cost \$									
 85. Hauling cost or fuel surcharge, if not included in contract cost above. \$/ Tor; \$/ Tire 86. Total tipping fees collected for tires not eligible for free disposal. \$ 25012.95 87. Total number of tires collected not eligible for free disposal: 36783 88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill? ☐ Yes ☑ No 89. Name of tire disposal/recycling firm(s): Central Carolina Holdings 7EMPORARY DISASTER DEBRIS STAGING SITES 90. Does your local government have a plan in place for management of disaster debris? ☐ Yes ☐ No If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies: ☐ Stand-alone ☐ In conjunction 91. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? ☐ Yes ☐ No 92. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government: Name: Name: Name: Name: Name:		Other \$	describe Other:								
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88. If scrap tires were not hauled off site by contracted service provider, were they cut and disposed in a local landfill? Yes No 89. Name of tire disposal/recycling firm(s): Central Carolina Holdings TEMPORARY DISASTER DEBRIS STAGING SITES 90. Does your local government have a plan in place for management of disaster debris? Yes No If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies: Stand-alone In conjunction 91. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Yes No 92. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government: Name: Name: Name: Name: Name: Phone: Phone: Phone: Phone:	86.	Total tipping fees collected for tires not eligible for free	e disposal. \$ 25012.95								
 89. Name of tire disposal/recycling firm(s): Central Carolina Holdings TEMPORARY DISASTER DEBRIS STAGING SITES 90. Does your local government have a plan in place for management of disaster debris? Yes No If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies: Stand-alone In conjunction 91. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Yes No 92. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government: Name: Name: Name: Name: Phone: Phone: Phone: Phone: Phone: Phone 	87.	Total number of tires collected not eligible for free disp	posal: <u>36783</u>								
TEMPORARY DISASTER DEBRIS STAGING SITES 90. Does your local government have a plan in place for management of disaster debris? Yes No If yes, indicate if the plan is a stand-alone plan or in conjunction with local government agencies: Stand-alone In conjunction 91. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Yes No 92. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government: Name: Name: Name: Phone: Phone: Phone: Phone: Phone: Phone: Phone:	88.	If scrap tires were not hauled off site by contracted serv	vice provider, were they cut and disposed in a l	ocal landfill? 🗌 Yes 🛛 No							
90. Does your local government have a plan in place for management of disaster debris? Yes No 91. If you indicated having a plan, has the plan been reviewed by N.C. Emergency Management or FEMA to ensure it meets the basic requirements for public assistance reimbursement in a declared disaster event? Yes No 92. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government: Name: Name: Phone: Phone: Phone: Phone: Phone:	89.	Name of tire disposal/recycling firm(s): Central Carolin	na Holdings								
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requirements for public assistance reimbursement in a declared disaster event? Yes No 92. Please list the name, contact numbers(s), and e-mail address of the person(s) in charge of the disaster debris management program for your local government: Name: Name: Name: Phone: Phone: Phone: Phone:		If yes, indicate if the plan is a stand-alone plan or in cor	njunction with local government agencies:	Stand-alone In conjunction							
your local government: Name: Name: Name: Phone: Phone:	91.	requirements for public assistance reimbursement in a d	declared disaster event? Yes	No							
Phone: Phone:	92.	your local government:		debris management program for							
		E-mail: E-mail:									

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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?	Xes Yes	No No	

95. Does your plan address mass animal mortality? Xes I No

MANAGEMENT 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

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.

Comment on Question # 45 - White Goods Tons: White Goods volume leveled out over the previous year. It was elevated at 60 tons. (DH Note)

Question # 47 -Waste Oil: Staff at Sampson County informed me that the landfill no longer accepts oil. Noble Oil staff (M. Puryear) informed me that her company collected 500 gallons this year and yearly volumes have been in decline over the last three years. She attributes this to competition from other entities in the area. (10-2-2017 - DH)

Question # 78 through Question # 80-Tires: The City of Clinton says that they sent 123 tires to Sampson County Landfill during the period. The county's collection shows 1,269.1 tons and whole tire numbers are shown in Question 80 of this report (10-2-2017-DH)

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



No