## **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



Local Government Report Form

**Required** - Enter Your Local Government Name: Stokes 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 TO THE STATE AS REQUIRED BY G.S. 130A-309.09A.

Please sul	bmit this	s form to	Lgteam@nc	denr.gov b	y <b>Septemb</b>	er 1, 2017.	

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

Person Completing This Report: Sherry East	Title: Administrative Assistant -Public Works
Mailing Address: PO Box 20	City: Danbury Zip: 27016
Phone: 336-593-2811x1626 Fax: 336-593-402	Date: 7/26/17
Email: seast@co.stokes.nc.us	
Ge	eneral Instructions
Please remember that the time period for the report is JULY 1, 2 for a specific question.	2016 through JUNE 30, 2017. Please check "No" if you have nothing to report
1. Did your local government have a Recycling Coordinator	or similar position for FY 16-17? Xes No
Name Recycling Coordinator (if different from person cor	mpleting this report.)
Name: Mark Delehant	Title: Public Works Director
Address: PO Box 20	City: Danbury Zip: 27016
Telephone: 336-593-2415 Fax: 336-593-4027	Email: mdelehant@co.stokes.nc.us
2. Did your local government have a Solid Waste Director of	r similar position for FY 16-17? Xes No
If Yes, Name: Mark Delehant	Title: Public Works Director
Address: PO Box 20	City: Danbury Zip: 27016
Telephone: 336-593-2415 Fax: 336-593-4027	7 Email: mdelehant@co.stokes.nc.us
3. Did your local government have <b>dedicated or part-time</b>	Solid Waste Enforcement Staff for FY 16-17? Xes No
If Yes, Name: Gary Williams	Title: Code Enforcement/Zoning Officer
Address: PO Box 20	City: Danbury Zip: 27016
Telephone: <u>336-593-2446</u> Fax: <u>336-593-4027</u>	7 Email: gwilliams@co.stokes.nc.us
4. Did your local government have solid waste ordinances in all that apply)	n place addressing any of the following during FY 16-17? (if yes, please check
🔀 Disposal Bans 🛛 🛛 Illegal Dumping 🔗 Litte	tering Other, Please Describe:
5. Did your local government manage, provide or contract for mulching, composting)?	or any solid waste services in FY 16-17 (e.g., collection, disposal, recycling, Yes No
If you answer "No" to question 5, the re	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 <b>DID operate or contract</b> for a recyclables recovery program. (please continue to question 15)								
	My local government <b>DID NOT operate or contract</b> for recyclables recovery <b>BUT DID participate</b> in a recyclables 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. (Go to Part IV on page 7.)								
	our local government <b>DID operate or contract</b> for a recyclables recovery program, please indicate in the owing 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 Xo, 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)								

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 <b>number of households</b> 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?
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   Please describe the collection containers used:   Bins   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:          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 Management
	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. 19,500
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: 8
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: 1

33.	Did your electronics	recycling program col	lect or accept televisions fi	rom (check all that apply):	Residences	Businesses

- 34. Did your electronics recycling program collect or accept computer equipment from (check all that apply): 🔀 Residences Businesses
- DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was 35. 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): \$ 3,520.04

Electronics Management Funds spent during FY 16-17: \$3,520.04

Electronics Management Fund balance as of June 30, 2017: \$

Briefly explain how Electronics Management Funds were spent during FY 2016-17 (please list items purchased if applicable): 36.

Applied to Synergy Recycling expenses for electronics pickup

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: Synergy Recycling

No 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 <u>b</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? $\Box$ Yes $\boxtimes$ 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? Yes 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 Vinvl siding Shingles Metals Other									

							•	-		-		
42.	Does your local go with the intention	overnment	t have an o aging or r	ordinanc equiring	e regulating the c waste reduction of	onstructor recyc	tion and ling of t	l demo these n	lition wa naterials?	ste streai	<sup>m</sup> Yes	No

Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 16-17. 43. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)

Public Parks Recycling Program	Athletic Field /Venue Recycling Program

- Recycling Service for Special Events / Festivals Pedestrian Recycling Program
- Please identify all "Other" programs or services operated by your government during FY 16-17. (check all that apply and if possible 44 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.

$\Box$ if yesTons $\Box$ if yesIf yesGLASS: $\Box$	DDOCDAM	Curbside			Drop-off	All "O	ther" Programs	Total Tons	
ClearIIIIIIBrownIIIIIIBrownIIIIIIMixedIIIIIIMixedIIIIIIPI 41IIIIIIHDPE 42IIIIIIAll Plastic BottlesIIIIIIOther Plastic ContainersIIIIIIBulky Rigid PlasticsIIIIIIIIIBulky Rigid PlasticsIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	PROGRAM	⊠ if Yes	Tons	⊠ if Yes	Tons	🛛 if Yes	Tons	(totals are calculated by form)	
Brown	GLASS:								
Green            74.53	Clear								
Mixed       Image: Construct of the second of	Brown								
PLASTIC:	Green								
PET #1 </td <td>Mixed</td> <td></td> <td></td> <td><math>\square</math></td> <td>74.53</td> <td></td> <td></td> <td>74.53</td>	Mixed			$\square$	74.53			74.53	
HDPE #2	PLASTIC:								
All Plastic Bottles         131.9        131.9       131.9         Other Plastic Containers           131.9        131.9         Bulk Rigid Plastics             131.9         Bulk Rigid Plastics                 Bulk Rigid Plastics   <	PET #1								
Other Plastic Containers	HDPE #2								
Bulky Rigid Plastics       Image: Constraint of the second s	All Plastic Bottles			$\square$	131.9			131.9	
METAL:       Iminum Cans	Other Plastic Containers								
Aluminum Cans	Bulky Rigid Plastics								
Steel Cans       Auge	METAL:								
White Goods	Aluminum Cans			$\square$	17.28			17.28	
Other Metal	Steel Cans			$\square$	40.54			40.54	
PAPER:       Its.23       Its.23       Its.23         Newsprint (ONP)       Its.23       Its.23       Its.23         Cardboard (OCC)       Its.23       Its.23       Its.23         Cardboard (OCC)       Its.23       Its.23       Its.23         Magazines (OMG)       Its.23       Its.23       Its.23         Magazines (OMG)       Its.23       Its.23       Its.23         Office Paper       Its.23       Its.23       Its.23         Office Paper       Its.23       Its.23       Its.23         Mixed / Other Paper       Its.23       Its.23       Its.23         Cartons / Aseptic Containers       Its.23       Its.23       Its.23         WOD:       Its.23       Its.23       Its.23       Its.23         Volter Wood - DO NOT       Its.23       Its.23       Its.23         Other Wood - DO NOT       Its.23       Its.23       Its.23         Testiles (clothes etc)       Its.23       Its.23       Its.23 <td< td=""><td>White Goods</td><td></td><td></td><td></td><td></td><td><math>\square</math></td><td>131.35</td><td>131.35</td></td<>	White Goods					$\square$	131.35	131.35	
Newsprint (ONP)	Other Metal								
Cardboard (OCC)       Image: Containers (OMG)	PAPER:								
Magazines (OMG)	Newsprint (ONP)			$\square$	145.23			145.23	
Office Paper	Cardboard (OCC)			$\square$	133.98			133.98	
Mixed / Other Paper	Magazines (OMG)								
Cartons / Aseptic Containers	Office Paper								
WOOD:         Pallets	Mixed / Other Paper								
PalletsIIIIIOther Wood - DO NOT report yard waste tons hereIIIIIOTHER MATERIALS:Textiles (clothes etc)IIIIIITelevisionsIIIIIIIOther ElectronicsIIIIIIIOther ElectronicsIIIIIIIC&D Materials RecyclingII	Cartons / Aseptic Containers								
Other Wood - DO NOT report yard waste tons here Image: Constraint of the set of the se	WOOD:								
report yard waste tons hereIIIIIOTHER MATERIALS:Textiles (clothes etc)IIIIITelevisionsIIIIIITelevisionsIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII									
OTHER MATERIALS:Textiles (clothes etc)<									
Textiles (clothes etc) </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>									
Televisions       Image: Constraint of the second sec									
Other ElectronicsImage: Comparing Compari									
C&D Materials Recycling     Image: Comparison of the compa									
Image: Commingled tons-check all items collected above     Image: Commingle tons-check all items collected above <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>32.25</td> <td>32.25</td>							32.25	32.25	
items collected above	C&D Materials Recycling								
items collected above									
items collected above									
items collected above									
	items collected above								
	TOTAL TONS:				543.46		229.23	772.69	

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.

C		<b>T</b> 7 4			(T 1 1	3.5 4 1 1			e <b>TTTTXX</b> 7	<b>A H A</b>	D	
S	decial v	<i>w</i> aste	Collections	(D0 N0	t Include	Materials	Collected	as part of	t an HHW	Collection	<b>Program</b>	or Event)

47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		n collect this n the public?	# of sites	Data on qu Please			
	Used Motor Oil	ed Motor Oil Yes No 9				1	3,042 gallons	
	Used Oil Filters	Yes	🗌 No	_9	24 ba	rrels, or	lbs	
	Used Antifreeze	Yes	🗌 No	9		•	424 gallons	
	Batteries, Lead Acid	Yes	🗌 No	_1	218 #	batteries, or	lbs	
	Batteries, Dry Cell	Yes	No No		· · ·		lbs	
	Fluorescent Bulbs/Lights Containing Mercury	Yes	No No			lbs, or	# bulbs	
	Propane Tanks	Yes	No No			lbs, or	# tanks	
	Used Cooking Oil / Waste Vegetable Oil	Yes	No No			lbs, or	gallons	
	Other Special Wastes - please provide waste type here:	Yes	No No				lbs	
	Pesticide Containers (NCDA Program, not pesticides themselves)	Xes	🗌 No	9		_lbs, or	# con- tainers	
	NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)	Yes	No No				lbs	
	Latex Paint (do not include paint collected at HHW event or by a paint exchange program)	Yes	No No			gals, or	lbs	
	<ul> <li>If Yes, please respond to the following questions:</li> <li>a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility? Permanent Temp. Event</li> <li>b. How many days was your HHW Program open to accept materials during this Fiscal Year?</li> <li>c. Did you partner or co-sponsor your HHW program with another local government? Yes No</li> <li>Please list partner(s)</li> <li>d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year?</li> <li>e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? Yes No</li> <li>If yes, please estimate the amount of business material managed pounds</li> <li>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.</li> </ul>						No	
	Used Motor Oil (gal)	Use	d Oil Filters	-	# of Barrels	s, or	lbs.	
	Used Antifreeze (gal)	Lea	d Acid Batter	ies (lbs)		Other Batte	ries (lbs)	
	Fluorescent Bulbs / Lights Containin	ng Mercury (ll	bs)		_			
	<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>	se materials or	ut of the total	listed he	ere.			pounds
Pag	i. Estimated cost of HHW / CESQG program of es 3 through 6 should have only been complet	or event(s) \$						g services.

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

is only to be completed by Counties.

All governments answering "Yes" to question # 5 on page 1 should complete the rest of the report with the exception of PART VIII which

### 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
- 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	$\boxtimes$	11.26		
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		11.26		

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 yd<sup>3</sup> truck x 3 days/wk x 16 wks = 480 yd<sup>3</sup>

		X			X	=		$yd^3$	
	Size of Truck	k (in yards)	Avg. no. of times tr	uck fills each week	# of weeks truck is	used during year	TOTAL		
	Part V. Solid Waste Collection Services								
This .	section concerns	s your local gove	rnment's provisi	on of solid wast	e (garbage) colled	ction services.			
52.	Please complete	e the following ta	able about your g	government's sol	lid waste collectio	n system.			
	Sector	Who Collects	Solid Waste?	How is Solid W	Vaste Collected?	Who Collects Solid Waste	e? How is Solid Wa	aste Collected?	
	Sector	Incont Latton	a and an at might	Incort # coo	and an at might	THE Concessional Traste		iste concettur	

52.	Please complete	e the following table about you	government's solid	waste collection system.
		(		

	Sector				How is Solid Waste Collected?				Who Collects Solid Waste?	How is Solid Waste Collected?		
	Beeton		Letter -	see codes	s at right	Inse	rt # - s	ee codes at	right	a. Local government employee	s 1. Once a week at household	
	Residential	Primary	a	Secondary	b	Primary	3	Secondary	3	<ul> <li>b. By Contract</li> <li>c. Franchise haulers</li> </ul>	<ol> <li>Twice a week at household</li> <li>Convenience center/greenbox</li> </ol>	
	Commercial	Primary	а	Secondary	b	Primary	3	Secondary	3	d. Local government not involved in provision of	<ul><li>4. As needed or by request</li><li>5. Daily</li></ul>	
	Industrial	Primary	d	Secondary		Primary		Secondary		service	6. Other	
53.	If you provide	residenti	<u>ial</u> was	te collect	ion at sin	gle-fam	ily hou	useholds in	your jur	isdiction, please answer the	following questions:	
	What type of co	ollection	n metho	od is used	?	Fully A	Autom	ated	Semi-A	utomated 🗌 Manual	Don't know	
	What is the star	ndard co	ollectio	n frequen	cy?	Weekl	у	Two ti	mes per	week Other		
	What is the typ	ical serv	vice po	int for sin	gle fami	ly house	hold w	vaste?	Curt	oside 🗌 Back yard / Bac	ck door	
	What type of co	ollection	n conta	iner is use	ed?	Gover	nment	-provided ca	arts	Resident-provided conta	ainer Bags	
	Do you offer bulky waste collection services?											
54.	. For municipalities - did your government collect white goods at the curb? Yes No If so, were white goods delivered to the county for marketing? Yes No											
	····	-					-			icational Activities	R	
55.	Did your local							U	0		nagement and / or recycling	
	issues / activitie	0	Y					art VII, pag		carry about sond waste man	agement and 7 of recycling	
56.	Please estimate	your an	nnual b	udget for	solid wa	ste relat	ed edu	cation and o	outreach	activities: \$500		
57.	Does your com	munity	produc	e recyclir	ng educat	tion and	outrea	ch material	s in lang	uages besides English?	Yes 🛛 No	
	If YES, please	list othe	r langu	ages used	1:							
58.	Please provide	your rec	cycling	website a	address a	nd publi	ic info	rmation pho	one num	ber if applicable.		
	Website: www	.co.stok	es.nc.u	IS						Phone #: 336-99	94-2357	

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	Part VII. Resources for Solid Waste Management and Full Cost Accounting							
	ĩcient resources availab					f these programs.	The following	
<u>^</u>	stions deal with funding	• • •						
	<ul> <li>59. Did your local government operate an Enterprise Fund for solid waste services in FY 16-17?</li> <li>60. With regards to funding sources, check all that apply to your local government:</li> </ul>							
60.	$\boxtimes$ Tipping fees			eight-based fees (e.g		Tire tax		
		es / general fund				White Goods tax		
		ld charges	$\boxtimes$ Grants	chuolos		Disposal Tax		
61.	NC Solid Waste Dispos	-		ible local governme		-	ment of Revenue.	
	According to GS 105-1	87.63 these funds n	nust be used by a ci	ty of county solely	for solid waste man	agement programs	and services.	
	How are disposal tax d	istributions being u	sed?recycling					
62.	If applicable, please pro	ovide your FY 16-1	7 household fees.(	e.g., a. <u>\$45.00</u> per	<u>year</u> per <u>household</u>	for solid waste)		
	a. \$	per		per		for solid wast	te	
	b.\$	per		per		for recycling		
	c. \$	per		per		for yard wast	e	
	d. \$	per		per		for bulky was	ste	
	e. \$	per		per		availability fe	ee	
	f. \$	per		per		total charge		
63.	Did your local governm	· ·			garbage during FY	16-17? (a system	where residents	
	are charged a fee by we	eight or volume for	the amount of trash	they discard)	Yes 🛛	No		
	cording to GS 130A-309 orm users of such costs.		nents are required	to conduct full cos	t accounting annua	and to develo	p a system to	
64.	54. If your local government contracts for solid waste or recycling services, please report the annual contract amount.							
	\$70,107.35 For solid waste services per year							
	\$58,463.07		For recycling per	r year				
			OR					
	\$		Combined Contr	act (solid waste, and	l recycling)			
65.	Collection Programs: P							
	collection programs for not available, please r				lected from conven	ience centers. If f	ull cost analysis is	
	not uvunusite, pieuse i	# of Households		column	Disposal Cost	Total Cost	Cost Per Ton	
		served	Tons Collected	Collection Cost	(tipping fees paid)	including	Managed	
M	unicipal Solid Waste*	19,500	10,296.18	30,868.04	309,641.74	overhead	(calculated by form)	
	Recycling Program**	19,500	772.69	58,463			0	
	Yard Waste Program					·		
	-	(calculated by form):	11,068.87	89,331.04	309,641.74	·	0	
	*for materials collected and	-	·		·			
	** for materials collected by	-	-			tors. Do not include sp	ecial waste services.	
66.	If your government ope							
facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate cos						costs		
	proportionately. Land	-	\$	1 295 294			-	
		sfer Station Budget		1,285,384			-	
		Waste / Compost H					-	
	Recy	cling Facility Budg	et: \$				-	

67. What was your government's total combined annual budget for all solid waste and recycling services in 16-17? \$1,285,384

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	4 M J4 J. D					
following questions pertain to programs mandated by N.C. sta	utute to be provided by each county. <u>C</u>					
ITE GOODS						
Please provide name, address, phone number, and e-mail of p Name: Mark Delehant		ogram. lic Works Director				
Address: PO Box 20	City: Danbury	Zip: 27016				
Telephone: 336-593-2415 Fax: 336-593-4027	Email: mdelehant@co	p.stokes.nc.us				
Please provide the physical address of the primary county where the street 1:       2015 Sizemore Road         Street 2:	State: North Carolina	Zip: 27019				
Please provide the name of the business or person that remov Name: Carolina Refrigerant Recovery Street: 228 Logan Court	ves the refrigerant gases (CFCs) from	white goods.				
City: King	State: North Carolina	Zip: 27021				
Phone: (336) 817-4122 Fax: (336) 983-2438	B Email: ncdiver101@yahoo.co	 Dm				
Give amounts / types of CFCs removed. Attach records of C	FC removal, and copy of certification	of person(s) performing extraction.				
Type of CFC Removed		Amount				
R12	6 lbs	6 lbs				
R22	4 lbs	4 lbs 10 lbs				
134A	10 lbs					
Medical Gas	0	0				
Misc Gas	3 lbs					
	billowing questions pertain to programs mandated by N.C. state         lete this section (questions 68 through 96). Municipalities is result in non-eligibility for grant requests.         TE GOODS         Please provide name, address, phone number, and e-mail of point Name:         Mark Delehant         Address: PO Box 20         Telephone:       336-593-2415         Fax:       336-593-4027         Please provide the physical address of the primary county wellstreet 1:         2015 Sizemore Road         Street 2:         City:       Germanton         Please provide the name of the business or person that remove Name:         Carolina Refrigerant Recovery         Street:       228 Logan Court         City:       King         Phone:       (336) 817-4122         Fax:       (336) 983-2438         Give amounts / types of CFCs removed. Attach records of C         Type of CFC Removed         R12         R22         134A         Medical Gas	TE GOODS         Please provide name, address, phone number, and e-mail of person responsible for white goods provide name, address, phone number, and e-mail of person responsible for white goods provide the phane         Address: PO Box 20       City: Danbury         Telephone: 336-593-2415       Fax: 336-593-4027       Email: mdelehant@co         Please provide the physical address of the primary county white goods collection site.       Street 1:       2015 Sizemore Road         Street 1:       2015 Sizemore Road       State:       North Carolina         Please provide the name of the business or person that removes the refrigerant gases (CFCs) from *       Name:       Carolina Refrigerant Recovery         Street:       228 Logan Court       State:       North Carolina         Phone:       (336) 817-4122       Fax:       (336) 983-2438       Email: ncdiver101@yahoo.cd         Give amounts / types of CFCs removed. Attach records of CFC removal, and copy of certification       Type of CFC Removed       Image: 10 lbs         R12       6 lbs       6 lbs       10 lbs       Image: 10 lbs       Image: 10 lbs         Medical Gas       0       Image: 10 lbs       Image: 10 lbs       Image: 10 lbs       Image: 10 lbs				

72. CFCs may be recycled or sent for destruction. Give name of firm, disposal method and amount earned / spent for CFC disposal.

Firm	Method of Disposal	<b>Amount Earned</b>	Amount Spent
Carolina Refrigerant			2830.00

Please report the tonnage of white goods collected during FY 2016-17 in the Recycling Tonnages table on page 5 (question # 45). Was white goods tonnage reported on page 5? Xes No

 74. List the amount of revenue for the white goods program by source:

 Revenue collected from sale of scrap:
 \$ 2,298.35

 Revenue collected from White Goods Tax Distributions:
 \$ 17,712.54

 Revenue from other source (e.g. grants):
 \$ 20,010.89

75. According to the White Goods Law, White Good Tax Distributions must be spent on white goods activities. Give amounts and types of expenditures White Good Tax Distributions were used for (do not include funds received from grants).

Total Expenditures:	\$ 29,960.07
Clean-up of Illegal White Goods Dumps	\$
Capital Improvements:	\$
Operational Expenses:	\$ 29,960.07

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76.	Please provide name, address, phone number, and e-ma	il of person responsible						
	Name: Mark Delehant	Title: Public Works Director						
	Address: PO Box 20	City: Danbury		Zip: 27016				
	Telephone: <u>336-593-2415</u> Fax: <u>336-593-402</u>	274 En	nail: mdelehant@co.sto	kes.nc.us				
7.	Please provide the physical address of the primary coun	ty scrap tires collection	site.					
	Street 1: 2015 Sizemore Road							
	Street 2:							
	City: Germanton	State: No	orth Carolina	Zip: 27019				
78.	Tonnage/Number of scrap tires disposed July 1, 2016-July	une 30, 2017 ( <u>excluding</u>	tires from cleanup of n Number of tires	uisance sites)				
79.	Tonnage/Number of scrap tires disposed from cleanup of Tons or	of state or county design	ated nuisance sites Number of tires					
30.	Indicate the types of tires collected by the county: Passenger 95 % Heavy Truck	c <u>4                                    </u>	% Large Off-Road	1%				
31.	List the amount of revenue for the scrap tire program by							
	Revenue from Scrap Tire Tax Distributions:	\$ 61,974.62						
	Revenue from Tire Fees:	\$						
	Revenue from Scrap Tire Clean-up Reimbursements:	\$						
	Revenue from Scrap Tire Cost-Overrun Grants:	\$						
	Total Revenue:	\$ 61,974.62						
32.	County's total scrap tire program contract expenditure (excluding costs of nuisance tire cleanups, for FY 16-17)	contract disposal/haulin	g costs), \$ <u>34714.00</u>					
83.	County's additional scrap tire program expenditure (i.e. Labor \$		er cost), if any.					
	Site Cost \$							
	Other \$	describe Other						
34.	County's contract cost for scrap tire disposal. \$ 85.00	/ Ton; \$	/ Tire					
35.	Hauling cost or fuel surcharge, if not included in contra	act cost above. \$	/ Ton; \$	/ Tire				
86.	Total tipping fees collected for tires not eligible for free	e disposal. \$						
37.	Total number of tires collected not eligible for free disp							
38.	If scrap tires were not hauled off site by contracted serv	ice provider, were they	cut and disposed in a lo	cal landfill? Yes No				
39.	Name of tire disposal/recycling firm(s): New River Tir	e Recycling LLC						
<b>CE</b>	MPORARY DISASTER DEBRIS STAGING	SITES						
90.	Does your local government have a plan in place for ma		bris? Yes	No No				
	If yes, indicate if the plan is a stand-alone plan or in cor	njunction with local gov	ernment agencies:	Stand-alone In conjunction				
91.	If you indicated having a plan, has the plan been review requirements for public assistance reimbursement in a d		Management or FEMA	to ensure it meets the basic				
92.	Please list the name, contact numbers(s), and e-mail add your local government:	dress of the person(s) in	charge of the disaster de	ebris management program for				
	Name: Name:		Name:					
	Phone: Phone:		Phone:					
	E-mail: E-mail:		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? Yes No						
MA	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 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

