

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



Local Government Report Form

Required - Enter Your Local Government Name: Swain 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.

Person Completing This Report:	ons or need assistance completing Scott Turnin	•	e: Director of Solid V	
	Scott Turpin			
Mailing Address: PO Box 2321	F (020) 400 0701	City: Bryson City		D: 28713
Phone: (828) 488-4999	Fax: (828) 488-9601		Date:	
Email: sturpin@swaincountync.g	·			
Please remember that the time pe for a specific question.	General I. riod for the report is JULY 1, 2016 th	Instructions rough JUNE 30, 2017. Ple	ase check "No" if you	ı have nothing to report
	have a Recycling Coordinator or simi	lar position for FY 16-17?	Yes I	No
Name Recycling Coordinate	or (if different from person completing	g this report.)		
Name:		Title	e:	
Address:		City:	Zip:	
Telephone:	Fax:	Email:		
2. Did your local government	have a Solid Waste Director or simila	r position for FY 16-17?	∑ Yes ☐ I	No
If Yes, Name:		Title	2 :	
Address:		City:	Zip:	
Telephone:	Fax:	Email:		
3. Did your local government	have dedicated or part-time Solid W	Vaste Enforcement Staff for	FY 16-17? Ye	s 🔀 No
If Yes, Name:		Title	e:	
Address:		City:	Zip:	
Telephone:	Fax:	Email:		
4. Did your local government all that apply)	have solid waste ordinances in place a	addressing any of the follow	wing during FY 16-17	? (if yes, please check
Disposal Bans	Illegal Dumping Littering	Other, Please Describe	e:	
5. Did your local government mulching, composting)?	manage, provide or contract for any se	olid waste services in FY 1		disposal, recycling,

Part I. Waste Reduction and Recycling Programs Serving Government Facilities The following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. Did your local government have a recycling program in place for collecting recyclable materials generated at X No public buildings in FY 16-17? 7. Did your local government have any program or policy encouraging or requiring local agencies to No purchase products with recycled content? Did your local government have a program in place to collect and recycle spent fluorescent lights X Yes No generated from the public buildings and facilities that were operated by your government in FY 16-17? Part II. Waste Reduction and Recycling Programs Serving the Public SOURCE REDUCTION / REUSE Did your local government have a backyard composting program? Yes X No If yes, please check all backyard composting activities that apply: Education Demonstration site(s) Bin distribution/sales Number of Bins distributed? Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes X No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives? Did your local government offer a waste exchange or reuse program? Yes X No 13 If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public: Paint exchange Number of gallons recovered? Swap shop/shed Number of sheds in use? Other (e.g. pallet exchange, etc.) PUBLIC RECYCLING SERVICES Which of the following responses best describes your recyclables recovery activities for the period July 1, 2016 through June 30, 2017? My local government **DID operate or contract** for a recyclables recovery program. (please continue to question 15) My local government DID NOT operate or contract for recyclables recovery BUT DID participate in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; then go to Part IV on page 7.) With which local government did you participate? My local government **DID NOT operate**, contract or participate in a recycling program. (Go to Part IV on page 7.) If your local government **DID** operate or contract for a recyclables recovery program, please indicate in the following sections the type of program in operation and provide specifics about your program(s). CURBSIDE RECYCLING PROGRAM Did your government operate a Curbside Recycling Program? 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 Other
22.	Please describe the collection containers used: Bins 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? Yes No, skip to question # 32
26.	Who collected the recyclable materials for your local government's drop-off recycling program? \[\sum \] Local government employees \[\sum \] 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) 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. 1,420
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: 1
31.	How many of these locations were staffed with attendants? All None Some please list # of staffed sites: 1
EL	ECTRONICS RECYCLING PROGRAM
mat	Is 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. 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: 1

33.	Did your electronics recycling program collect or accept televisions from (check all that apply): Residences
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: \$0
	Electronics Management Funds received from DEQ during FY 16-17 (Feb 2017 distribution): \$ 1,109.23
	Electronics Management Funds spent during FY 16-17: \$ 1,109.23
	Electronics Management Fund balance as of June 30, 2017: \$0
36.	Briefly explain how Electronics Management Funds were spent during FY 2016-17 (please list items purchased if applicable):
	Supplies and Maintenance equipment
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
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? Yes No
OT	HER PUBLIC RECYCLING PROGRAMS
the l	se answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for <u>by</u> ocal government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ocling Tonnages Chart on pg 5.
	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? $\ \ \ \ \ \ \ \ \ \ \ \ \ $
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 ☐ 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? \square Yes
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.
	g - g - g - g - g - g - g - g - g - g -

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

PD CCD 114	Curbside ⊠ if Yes Tons		D	Prop-off	All "C	Other" Programs	Total Tons
PROGRAM			⊠ if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear				90.01			90.01
Brown							
Green							
Mixed				139.69			139.69
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles				133.67			133.67
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans				15.9			15.9
Steel Cans				10.6			10.6
White Goods							
Other Metal						245.65	245.65
PAPER:							
Newsprint (ONP)				24.7			24.7
Cardboard (OCC)				407.33			407.33
Magazines (OMG)							
Office Paper							
Mixed / Other Paper				24.29			24.29
Cartons / Aseptic Containers							
WOOD:							
Pallets						186	186
Other Wood - DO NOT							
report yard waste tons her	e						
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions						35.17	35.17
Other Electronics						23.09	23.09
C&D Materials Recycling							
Commingled tons-check a items collected above							
TOTAL TONS:			 	846.19		489.91	1,336.1
TOTAL TONS:				0+0.17		+02.71	1,330.1

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

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

Part III. Special Waste Collections

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

Special Waste Collections (Do Not Include Materials Collected as part of an HHW Collection Program or Event)

	Programs for Collecting Sitizens by Material Type		n collect this n the public?	# of sites	*	es collected / man	_	
Used Motor Oil		∑ Yes	☐ No	_ 2		3,000 gall	ons	
Used Oil Filters		⊠ Yes	☐ No	_ 2	8 barrels,	or	lbs	
Used Antifreeze		⊠ Yes	☐ No	_ 2		250	gallons	
Batteries, Lead Acid	1	∑ Yes	☐ No	2	# batte	eries, or 1,8	360 lbs	
Batteries, Dry Cell		Yes	⊠ No			•	lbs	
Fluorescent Bulbs/L	ights Containing Mercury	∑ Yes	☐ No	_1_	lbs,	, or 2,160	# bulbs	
Propane Tanks		∑ Yes	☐ No		lbs,	, or 98	# tanks	
Used Cooking Oil /	Waste Vegetable Oil	Yes	⊠ No		lbs,	, or	gallons	
Other Special Waste type here:	es - please provide waste	Yes	⊠ No				lbs	
Pesticide Containers pesticides themselve	s (NCDA Program, not	Yes	⊠ No		lbs,	, or	# con- tainers	
	sposal Assistance Program pesticides, not containers)	☐ Yes	⊠ No				lbs	
	include paint collected at paint exchange program)	Yes	⊠ No		gal: or		lbs	
If Yes, please responsa. Was HHW colle b. How many days c. Did you partner Please list partner d. Provide number e. Did your program If yes, please est f. Amounts of individual Note, materials l. Used Mo	of citizens / households that m accept materials from small imate the amount of business vidual materials collected by materials is not available, p isted here should only be the otor Oil (gal)	ary Event or a pen to accept or acce	t a Permanent materials durinother local grant in your HHW (Conditionall maged am: if totals forovide total cat an HHW Prod Oil Filters	HHW Cong this Fovernment of the collection of th	Collection Facility? Fiscal Year? ent? Yes on program this Fis pt Small Quantity C portidual materials are lead of materials collect and should not included. # of Barrels, or	Permanent No Scal Year? Generators)? unds known please iten ted by HHW prog ude materials liste lbs.	Yes [nize belower am in 48 d in ques	np. Even No W. If data g below. stion 47.
Used An	tifreeze (gal)	Lea	d Acid Batter	ies (lbs)	Othe	er Batteries (lbs)		
Fluoresc	ent Bulbs / Lights Containir	ng Mercury (ll	os)		_			
reported in 48f, 1	nantity of materials collected please net the weight of those Collection Contractor	•	at of the total	listed he				pound
i. Estimated cost o	f HHW / CESQG program o	or event(s) \$						
	111					4 DO 11	1.	

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	te, Mul	ching and (Composting	g Managen	nent	
	section concerns management of vegetative						
	ermitted sites and it is illegal to burn. Composi						beloi
	ut your management of vegetative materials. Do						1 1
49.	Does your local government operate a yard was checking all that apply: Collected curbside			•	•	ow yard waste is manage	-
50.	Did a storm event significantly impact the amou	_			•	•	racii
51.	What quantities of materials were managed by	your yard w	aste program?	Provide inform	ation in TONS	OR CUBIC YARDS of	
	organic material (yard waste, brush, limbs, l		managed. For	conversion purp		<u> </u>	
	Destination	Check if used	Tons	Cubic Yards		Name and Location of Facing Vegetative Materials	lity
	End user (to farmer or home-owner)						
	Your local government's mulch or compost faci	lity 🗌					
	Other public mulch or compost facility						
	Private mulch or compost facility						
	Land clearing and inert debris landfill (LCID)	\boxtimes	65				
	Energy / Fuel Use (e.g. boiler fuel market)						
	Total		65				
	YARD WASTE MANAGEMENT FORMULA						u
	estimate yard waste volume. Calculate for each volume managed by program in the appropriate						
	X	boxes abov	X X	Truck x 5 days/n	-	o ya- vd [:]	}
		ruck fills each		truck is used during	vear	TOTAL	
				ction Servi	-		
This	section concerns your local government's provis						
	Please complete the following table about your						
	Sector Who Collects Solid Waste?	II.		WIIO CO	llects Solid Waste?	How is Solid Waste Colle	cted?
	Insert Letter - see codes at right	1	- see codes at r	a. Local		ees 1. Once a week at househol	
	Residential Primary a Secondary		3 Secondary	b. By Co c. Franch	ntract iise haulers	 Twice a week at househo Convenience center/greet 	
	Commercial Primary d Secondary	Primary	Secondary		government not ed 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 sir	ngle-family	households in y	our jurisdiction,	please answer tl	he following questions:	
	What type of collection method is used?	Fully Aut	comated S	Semi-Automated	l Manual	Don't know	
	What is the standard collection frequency?	Weekly	Two tim	ies per week	Other		
	What is the typical service point for single fami	ly househol	ld waste?	Curbside	Back yard / B	ack door	
	What type of collection container is used?	Governme	ent-provided car	rts Reside	ent-provided con	tainer Bags	
	Do you offer bulky waste collection services?	Yes	☐ No				
54.	For municipalities - did your government collection	t white goo	ds at the curb?	Yes	No		
	If so, were white goods delivered to the county			☐ No			
	Part VI. Solid W		•				
55.	Did your local government have an education issues / activities? Yes No (1		inform citizens to Part VII, page	•	ut solid waste m	anagement and / or recyc	ling
56.	Please estimate your annual budget for solid wa	ste related	education and o	utreach activities	s: \$20,000		
57.	Does your community produce recycling educa	tion and out	treach materials	in languages be	sides English?	☐ Yes ⊠ No	
	If YES, please list other languages used:						
58.	Please provide your recycling website address a	ınd public iı	nformation phor	ne number if app	licable.		
	Website: www.swaincountync.gov/wastemanag	gement			Phone #: 828-4	188-9719, 828-488-4999	

Part VII. Resources for Solid Waste Management and Full Cost Accounting

	ficient resources availab estions deal with funding					these programs.	The following
_	Did your local governm	•		_		Yes No)
	With regards to funding	_	_				
	∑ Tipping fees			eight-based fees (e.g	g. PAYT) X	ire tax	
		_	Sale of recy	yclables		White Goods tax	
<i>C</i> 1	✓ Per househoNC Solid Waste Dispos	•	Grants	:1-1- 11		Disposal Tax	tf D
01.	According to GS 105-1	87.63 these funds r	nust be used by a ci				
	How are disposal tax d	•					
62.	If applicable, please pr	•					
	a. \$ 75	per year		per llouselle	olu ————————————————————————————————————	for solid waste	
	b. \$	per		per		for recycling	
	c. \$	per		per		for yard waste	
	d. \$	per		per		for bulky wast	e
	e. \$	per		per		availability fee	<u>e</u>
	f. \$	per		per		total charge	
63.	Did your local governmare charged a fee by we					16-17? (a system v] No	where residents
	cording to GS 130A-309 orm users of such costs.		ments are required	to conduct full cos	t accounting annua	lly and to develop	a system to
64.	If your local government	nt contracts for soli	d waste or recycling	g services, please re	port the annual cont	ract amount.	
	\$		For solid waste s	ervices per year	-		
	\$		For recycling per	r vear			
	·		OR	<i>y</i> 23.2			
	\$			act (solid waste, and	d recycling)		
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials col			
		# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
N	Iunicipal Solid Waste*	6,725	8,049.72	422,195	421,465	843,660	10
	Recycling Program**	6,725	1,558.15	164,842		164,842	10
	Yard Waste Program	6,725	65	15,357.91		15,358	23
	Totals	(calculated by form):	9,672.87	602,394.91	421,465	1,023,860	10
	*for materials collected and	=	_				
66	**for materials collected by If your government ope		-		_	_	
00.	facility operations (rou						
	proportionately. Land		\$. 1		
	Trans	sfer Station Budget	: \$	800,000			
	Yard	Waste / Compost I	Facility Budget: \$				
	Recy	cling Facility Budg	get: \$	200,000			
67.	What was your government	ment's total combin	ed annual budget fo	or all solid waste and	d recycling services	in 16-17? \$1,000,0	000

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 e-	-mail of person					
	Name: Scott Turpin		Title: Solid Waste Director				
	Address: PO Box 2321		ity: Bryson City	Zip: <u>28</u>	713		
	Telephone: 828-488-9719 Fax: 828-488	-9601	Email: sturpin@s	waincountync.gov			
69.	Please provide the physical address of the primary c	ounty white go	ods collection site.				
	Street 1: 1422 Hwy 19 South						
	Street 2:						
	City: Bryson City		State: North Carolina	Zip: 287	13		
70.	Please provide the name of the business or person the	nat removes the	refrigerant gases (CFCs) fr	om white goods.			
	Name: Swain County Recycling						
	Street: 1422 Hwy 19 South						
	City: Bryson City		State: North Carolina	Zip: <u>2871</u>	13		
	Phone: (828) 488-9719 Fax: (828)	488-9601	Email: sturpin@swaincou	ıntync.gov			
71.	Give amounts / types of CFCs removed. Attach reco	ords of CFC ren	noval, and copy of certificat		rming extraction.		
	Type of CFC Removed		2.20 // 1	Amount			
	R134A		2-20 # tanks				
72.	CFCs may be recycled or sent for destruction. Give Firm		lisposal method and amount ethod of Disposal	t earned / spent for CFO Amount Earned	C disposal. Amount Spent		
	Johnstone Supply	Filter an Reu	-	Amount Earneu	Amount Spent		
	Supply	Titter all ited					
	Please report the tonnage of white goods collected d	luring EV 2016	17 in the Deciveling Tenne	gas table on page 5 (gu	lestion # 45) Was		
73.	white goods tonnage reported on page 5? Yes		-17 in the Recycling Tollia;	ges table on page 3 (qu	testion # 43). was		
74.	List the amount of revenue for the white goods prog	gram by source:					
	Revenue collected from sale of scrap:	\$ 20,698.	.7				
	Revenue collected from White Goods Tax Distribut	tions: \$					
	Revenue from other source (e.g. grants):						
	Total Revenue:	\$ 20,698.					
75.	According to the White Goods Law, White Good T expenditures White Good Tax Distributions were us				mounts and types of		
	Operational Expenses: \$						
	Clean-up of Illegal White Goods Dumps: \$						
	Total Expenditures: \$						

SC.	KAP TIKES						
76.	Please provide name, address, phone number, and Name: Scott Turpin	e-mail of per	of person responsible for scrap tires program. Title: Solid Waste Director				
	Address: PO Box 2321		_ City: Bryson Ci	ty	Zip: 28713		
	Telephone: 828-488-9719 Fax: 828-48	38-9601	Ema	il: sturpin@swaincou	ntync.gov		
77.	Please provide the physical address of the primary Street 1:						
	Street 2:						
	City: Bryson City		State: Norti	h Carolina	Zip: 28713		
78.	Tonnage/Number of scrap tires disposed July 1, 2 213.05 Tons		2017 (<u>excluding</u> ti	res from cleanup of n Number of tires	uisance sites)		
79.	Tonnage/Number of scrap tires disposed from clea		or county designat	ed nuisance sites Number of tires			
80.	Indicate the types of tires collected by the county: Passenger 98	Truck 1	%	Large Off-Road	1	%	
81.	List the amount of revenue for the scrap tire progr	•					
	Revenue from Scrap Tire Tax Distributions:						
	Revenue from Tire Fees:						
	Revenue from Scrap Tire Clean-up Reimburseme	nts: \$					
	Revenue from Scrap Tire Cost-Overrun Grants:	\$					
	Total Revenue:		964.8				
82.	County's total scrap tire program contract expendi excluding costs of nuisance tire cleanups, for FY	ture (contract 16-17.	t disposal/hauling o	costs), \$			
83.	County's additional scrap tire program expenditure Labor \$ 2550.00	e (i.e. labor, c	convenience center	cost), if any.			
	Site Cost \$						
	Other \$		describe Other:				
84.	County's contract cost for scrap tire disposal. \$ _		/ Ton; \$ <u>213.0</u>	5 / Tire			
85.	Hauling cost or fuel surcharge, if not included in	contract cost	above. \$ 17964.8	0 / Ton; \$	/ Tire		
86.	Total tipping fees collected for tires not eligible fe	or free dispos	al. \$ <u>0</u>				
87.	Total number of tires collected not eligible for fre	e disposal:	0				
88.	If scrap tires were not hauled off site by contracted	d service prov	vider, were they cu	t and disposed in a lo	cal landfill? Y	es No	
89.	Name of tire disposal/recycling firm(s): US Tire	Concord, NC					
TE	MPORARY DISASTER DEBRIS STAG	ING SITE	ES				
90.	Does your local government have a plan in place to	or manageme	ent of disaster debi	ris? Xes	☐ No		
	If yes, indicate if the plan is a stand-alone plan or	in conjunctio	n with local govern	nment agencies:	Stand-alone	In conjunction	
91.	If you indicated having a plan, has the plan been r requirements for public assistance reimbursement			anagement or FEMA Yes	to ensure it meets No	the basic	
92.	Please list the name, contact numbers(s), and e-ma	ail address of	the person(s) in ch	narge of the disaster de	ebris management	program for	
	your local government: Name: David BredLove Name: Na	ıme:		Name:			
		mail:		E-mail:			

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
1	Industrial Park		
2	Rec Park		
3	Lcid Landfill		

94.	Does your plan address the management of household hazardous waste and white goods following a disaster? Xes No
95.	Does your plan address mass animal mortality?
MA]	NAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES
96.	Has your county considered whether to implement a program for the management of abandoned manufactured homes? Yes No
	If yes, has your county developed a written plan for the management of abandoned manufactured homes? Yes No
	Part IV 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 https://deq.nc.gov/conservation/recycling-local-government-recycling-assistance or e-mail us at Lgteam@ncdenr.gov

