## **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

**Required** - Enter Your Local Government Name: Walnut Creek

**State of North Carolina** 

Local Government Report Form

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

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

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

Please submit thi	s form to I	_gteam@ncdenr.gov	by September	1, 2017.
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If you have questions or need assistance completing this form, please call 919-707-8121 or 919-707-8139.

Person Completing This Report: Sharon Geelen			Title: Administrator		
Mail	ing Address: P.O. Box 10911		City: Goldsboro		Zip: 27534
Phor	le: 919-778-9687	Fax: 919-778-6088		Date: 9/1/2017	,
Ema	il: sharon.geelen@walnutcreeknc.	com			
		General	I Instructions		
	e remember that the time period f specific question.	For the report is JULY 1, 2016	through JUNE 30, 2017. Ple	ase check "No"	if you have nothing to report
1.	Did your local government have	a Recycling Coordinator or sin	nilar position for FY 16-17?	Yes	🔀 No
	Name Recycling Coordinator (if	different from person complet	ing this report.)		
	Name:		Title	2:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
2.	Did your local government have	a Solid Waste Director or simi	lar position for FY 16-17?	Yes	No
	If Yes, Name:		Title	2:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
3.	Did your local government have	dedicated or part-time Solid	Waste Enforcement Staff for	·FY 16-17?	Yes No
	If Yes, Name:		Title	2:	
	Address:		City:		Zip:
	Telephone:	Fax:	Email:		
4.	Did your local government have all that apply)	solid waste ordinances in plac	e addressing any of the follow	wing during FY	16-17? (if yes, please check
	Disposal Bans 🛛 Ill	egal Dumping   Littering	Other, Please Describe	2:	
5.	Did your local government mana mulching, composting)?	ge, provide or contract for any	solid waste services in FY 1	6-17 (e.g., collec X Yes	ction, disposal, recycling,
	If you answer "I	No'' to question 5, the report	is complete, please email to	<u> </u>	enr.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? Xes No					
10.	If yes, please check all backyard composting activities that apply:					
	Education Demonstration site(s) Bin distribution/sales Number of Bins distributed?					
11.	Did your local government operate a program to promote source reduction efforts such as junk mail reduction, Yes No phone book opt-out through www.yellowpagesoptout.com, or by promoting the use of non-toxic alternatives?					
12.	Did your local government offer a waste exchange or reuse program?  Yes  No					
13	If you answered "yes" in question 12, please indicate which waste exchange and/or reuse programs were available to the public:					
	Swap shop/shed Number of sheds in use? Paint exchange Number of gallons recovered?					
	Other (e.g. pallet exchange, etc.)					
PU	BLIC RECYCLING SERVICES					
14.	Which of the following responses best describes your recyclables recovery activities for the period July 1, 2016 through June 30, 2017?					
	My local government <b>DID operate or contract</b> for a recyclables recovery program. ( <b>please continue to question 15</b> )					
	My local government <b>DID NOT operate or contract</b> for recyclables recovery <b>BUT DID participate</b> in a recyclables recovery program sponsored by another local government. (Please identify the public agency/organization responsible for its operation; <b>then go to Part IV on page 7</b> .)					
	With which local government did you participate?					
	My local government <b>DID NOT operate, contract or participate</b> in a recycling program. ( <b>Go to Part IV on page 7</b> .)					
	If your local government <b>DID operate or contract</b> for a recyclables recovery program, please indicate in the following sections the type of program in operation and provide specifics about your program(s).					
CU	RBSIDE RECYCLING PROGRAM					
15.	Did your government operate a Curbside Recycling Program? 🔀 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) Waste Solutions & Recycling					
	Franchised hauler (please specify)					
	Other (please specify)					

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction? 384				
	b. Number of households eligible to participate in the curbside recycling program: 384				
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 384				
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?  Once a week  Every other week / biweekly				
	Other				
22.	Please describe the collection containers used:          Bins           Blue bags          Multi-bin system          Roll-out carts				
23.	Please describe the method / style of recyclable materials handling: Curb-sort (collector separates material as collected) dual / two stream				
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? Yes 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				
	Other (please specify)				
27.	Please describe the method / style of recyclable materials handling for your drop-off recycling program:         source-separated (citizens separate materials by type)       single stream / commingled         dual / two stream (paper separated from cans/bottles)       don't know / other				
28.	Please estimate the number of households served by your drop-off recycling program.				
29.	What sector(s) of your community are served by the drop-off recycling program? Residential Commercial Industrial				
30.	How many drop-off locations did you provide for the citizens in your jurisdiction? Number of Sites:				
31.	How many of these locations were staffed with attendants? All None Some please list # of staffed sites:				
EL	ECTRONICS RECYCLING PROGRAM				
	use answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any 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? Yes Xo, skip to question # 38				
	If you did operate an electronics recycling program, please indicate style of program:				
	Permanent - Curbside Collection    Permanent - Drop-off    Scheduled Collection Day or Event    Part of HHW Program				
	If you offer curbside collection of electronics is it: by appointment or unscheduled				
	If you operate a drop-off electronics program, how many collection sites do you provide? Number of Sites:				

33.	Did your electronics	recycling program c	ollect or accept televisions from	(check all that apply):	Residences	Businesses

- 34. Did your electronics recycling program collect or accept computer equipment from (check all that apply): Residences Businesses
- 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): \$

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

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.

37. If you did operate an electronics recycling program, please provide the following information about your vendor / contractor: Name of electronics recycling vendor(s) during FY 16-17:

Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications? No

#### OTHER PUBLIC RECYCLING PROGRAMS

Please answer the following questions about local government sponsored recycling efforts. List only programs operated or contract	ted for <u>by</u>
the local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the	he
Recycling 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? Yes
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	t provide recycling	services to Alcoholic	Beverage Commission	permit holders?	Yes	No No
-----	----------------------------	---------------------	-----------------------	---------------------	-----------------	-----	-------

On-site collection services provided If on-site collection provided, please estimate # of ABC accounts serve	d:
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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.		overnment have an ordinand of encouraging or requiring	0 0			am 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

- Pedestrian Recycling Program Recycling Service for Special Events / Festivals
- 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.

DROCRAM		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		14.74					14.74	
Brown	$\square$	9.22					9.22	
Green	$\square$	2.47					2.47	
Mixed								
PLASTIC:								
PET #1	$\square$	2.68					2.68	
HDPE #2	$\square$	0.32					0.32	
All Plastic Bottles								
Other Plastic Containers								
Bulky Rigid Plastics								
METAL:					· 			
Aluminum Cans	$\square$	0.9					0.9	
Steel Cans		1.61					1.61	
White Goods								
Other Metal								
PAPER:								
Newsprint (ONP)	$\square$	41					41	
Cardboard (OCC)		37.8					37.8	
Magazines (OMG)								
Office Paper								
Mixed / Other Paper								
Cartons / Aseptic Containers								
WOOD:								
Pallets								
Other Wood - DO NOT								
report yard waste tons here								
OTHER MATERIALS:								
Textiles (clothes etc)								
Televisions								
Other Electronics								
C&D Materials Recycling								
Commingled tons-check all								
items collected above								
TOTAL TONS:		110.74					110.74	

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

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

#### **Part III. Special Waste Collections**

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

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

4

47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		m collect this m the public?	# of sites	1 0					
	Used Motor Oil	Yes	No No		`	_	gallons			
	Used Oil Filters	Yes	No No		barr	els, or		lbs		
	Used Antifreeze	Yes	No No				gal	lons		
	Batteries, Lead Acid	Yes	No No		# b	atteries, or	r	lbs		
	Batteries, Dry Cell	Yes	No No				•	lbs		
	Fluorescent Bulbs/Lights Containing Mercury	Yes	No No			lbs, or	# bu	lbs		
	Propane Tanks	Yes	No No			lbs, or	# ta	anks		
	Used Cooking Oil / Waste Vegetable Oil	Yes	No No			lbs, or	gal	lons		
	Other Special Wastes - please provide waste type here:	Yes	No No					lbs		
	Pesticide Containers (NCDA Program, not pesticides themselves)	Yes	No No			lbs, or		con- iners		
	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>b. How many days was your HHW Program op</li> <li>c. Did you partner or co-sponsor your HHW pr</li> <li>Please list partner(s)</li> <li>d. Provide number of citizens / households that</li> <li>e. Did your program accept materials from smaller from smaller in the second structure of th</li></ul>	ogram with a participated all businesses is material ma y HHW Progi lease simply ose collected Use	in your HHW (Conditionall anaged ram: if totals f provide total c at an HHW P	collectio y Exemp for indivi quantity rogram a	ent? Yes on program this ot Small Quanti dual materials a of materials col und should not in _ # of Barrels,	ty Generat pounds are known lected by I nclude ma or	tors)? Ye please itemize HHW program terials listed in lbs.	below. If data in 48g below. question 47.		
	Fluorescent Bulbs / Lights Containir						· /			
	<ul> <li>g. Provide Total Quantity of materials collected reported in 48f, please net the weight of those</li> <li>h. Please list HHW Collection Contractor</li> </ul>	l by HHW Pr e materials o	rogram. If ind ut of the total	ividual r listed he	re.			pound		
	i. Estimated cost of HHW / CESQG program of	or event(s) \$								

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

is only to be completed by Counties.

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

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

- Does your local government operate a yard waste program? 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
- 51. What quantities of materials were managed by your yard waste program? Provide information in TONS OR CUBIC YARDS of
  - 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 yd<sup>3</sup> truck x 3 days/wk x 16 wks = 480 yd<sup>3</sup>

			Χ	2	X	=		$\y d^3$
	Size of Truc	k (in yards)	Avg. no. of times the	ruck fills each week	# of weeks truck is	used during year	TOTAL	
			Part V.	Solid Wast	e Collection	Services		
This	section concern	s your local g	overnment's provis	ion of solid waste	e (garbage) colled	ction services.		
52.	Please complet	e the followin	g table about your	government's sol	id waste collectio	on system.		
	Sector	Who Colle	cts Solid Waste?	How is Solid W	aste Collected?	Who Collects Solid Was	te? How is Solid	d Waste Collected?
	Sector	Insert Letter	- see codes at right	Insert # - see	codes at right			<u>i i i abre conceteur</u>

 i ieuse compien	e une	101101		uore uoo	at your	501	0111111	ent o bone	, muse	0 001	neeno	n system.	
	**/		11 4	a 11 1 1		TT	•	a 1. 1 TT	4 0	11	4 10		

	Sector	Who Collects Solid Waste?			How is	Solid	Waste Coll	lected?	Who Collects Solid Waste?	How is Solid Waste Collected?		
	Sector	Insert L	etter -	see codes	s at right	Inser	rt # - se	ee codes at 1	right	a. Local government employees	1. Once a week at household	
	Residential	Primary	b	Secondary		Primary	1	Secondary		b. By Contract	<ol> <li>Twice a week at household</li> <li>Convenience center/greenbox</li> </ol>	
	Commercial	Primary	d	Secondary		Primary		Secondary		d. Local government not	<ul><li>4. As needed or by request</li><li>5. Daily</li></ul>	
	Industrial	Primary	d	Secondary		Primary		Secondary		I I	6. Other	
53.	If you provide	residenti	<u>al</u> was	te collecti	ion at sin	gle-fam	ily hou	seholds in	your juri	isdiction, please answer the	following questions:	
	What type of collection method is used? 🗌 Fully Automated 🗌 Semi-Automated 🔀 Manual 🗌 Don't know											
	What is the star	ndard co	llectio	n frequen	cy? 🖂	Weekl	у [	Two tir	nes per	week Other		
	What is the typ	ical serv	vice po	int for sin	gle famil	y house	hold w	vaste?	Curt	oside 🔀 Back yard / Bac	k door	
	What type of co	ollection	contai	iner is use	ed?	Govern	nment-	provided ca	urts 🔀	Resident-provided contai	iner Bags	
	Do you offer be	ulky was	ste coll	ection ser	rvices?	Ye	es	🔀 No				
54.	For municipalit If so, were whi		•	-		-	-			čes ⊠No No		
	,						0			cational Activities		
55.	Did <b>your local</b> issues / activitie	govern		ave an ec	lucation j	program	to info		s specifi	cally about solid waste man		
56.	Please estimate	your an	nual b	udget for	solid wa	ste relate	ed edu	cation and c	outreach	activities: \$375		
57.	7. Does your community produce recycling education and outreach materials in languages besides English? 🗌 Yes 🗌 No											
	If YES, please	list othe	r langu	ages used	1:							
58.	Please provide	your rec	ycling	website a	address a	nd publi	c info	mation pho	ne numl	ber if applicable.		
	Website:									Phone #:		

Part VII	. Resources f	or Solid Was	te Manageme	nt and Full C	ost Accounti	ng
Sufficient resources availab					f these programs. T	The following
<i>questions deal with funding</i>			-		Vac Na	
<ul><li>59. Did your local governm</li><li>60. With regards to funding</li></ul>		*		FI 10-1/?	Yes 🛛 No	)
Tipping fees			eight-based fees (e.g		ire tax	
	es / general fund		-		Vhite Goods tax	
Per househo	•	Grants	yciables		Disposal Tax	
61. NC Solid Waste Dispos According to GS 105-1	sal Tax proceeds are	e distributed to elig		nts on a quarterly ba	asis by the Departm	
How are disposal tax d		-	ity of county solery h	for some waste man	agement programs	and services.
62. <i>If applicable, please pr</i>	•		e.g., a. \$45.00 per	year per household	for solid waste)	
			per			•
b.\$	per		per		for recycling	
			per			
			per			
	-		per		-	
			per			_
63. Did your local governn						where residents
are charged a fee by we	· ·				No	
According to GS 130A-309	9.08, local governr	ments are required	to conduct full cos	t accounting annua	lly and to develop	a system to
inform users of such costs.		*		U		•
64. If your local governme	nt contracts for soli	d wasta or rocyclin	a sorrigos planso ra	port the appual cont	ract amount	
	int contracts for some			port the annual cont	fact annount.	
\$		_ For solid waste s	services per year			
\$		_ For recycling per	r year			
		OR				
\$77,240		Combined Contr	act (solid waste, and	l recycling)		
65. Collection Programs: P	lease complete the	following table to t	he best of your abili	ty to display the ful	l costs of your loca	l government's
collection programs for						
not available, please r						·
_	# of Households	Tons Collected	Collection Cost	Disposal Cost	Total Cost including	Cost Per Ton
	served	Tons Conected	Collection Cost	(tipping fees paid)	overhead	Managed (calculated by form)
Municipal Solid Waste*	384	252	38,120		38,120	151
Recycling Program**	384	118	38,120		38,120	323
Yard Waste Program						
Totals	(calculated by form):	370	76,240		76,240	206
*for materials collected and						
**for materials collected by	y public recycling progra	ams including those serv	vices offered to commerc	ial and industrial generat	tors. Do not include spec	cial waste services.
66. If your government ope						
facility operations (rou		-	ferent facilities are	combined, please at	tempt to allocate co	osts
proportionately. Land	Ifill Budget:	\$				
Tran	sfer Station Budget	: \$				
Yard	Waste / Compost H	Facility Budget: \$				

Recycling Facility Budget:

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

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

\$

### Part VIII. County Mandated Programs

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

WH	IITE GOODS					
68.	Please provide name, address, phone num		-			
	Name:					
	Address:				Zip:	
	Telephone: Fax	.:		Email:		
69.	Please provide the physical address of the	primary coun	ty white goo	ods collection site.		
	Street 1:					
	Street 2:					
	City:			State: North Carolina	a Zip:	
70.	Please provide the name of the business of	t person that re	emoves the	refrigerant gases (CFCs	s) from white goods.	
	Name:					
	Street:					
	City:				ı Zip:	
	Phone: Fax:			Email:		
71.	Give amounts / types of CFCs removed. A		of CFC rem	oval, and copy of certif	fication of person(s) perfo	orming extraction.
	Type of CFC Remo	oved			Amount	
72.	CFCs may be recycled or sent for destruct	ion. Give nam		-		-
	Firm		M	ethod of Disposal	Amount Earned	Amount Spent
73.	Please report the tonnage of white goods c white goods tonnage reported on page 5?		-	17 in the Recycling To	nnages table on page 5 (q	uestion # 45). Was
		Yes	No No			
74.	List the amount of revenue for the white g Revenue collected from sale of scrap:					
	Revenue collected from White Goods Tax	Distributions				
	Revenue from other source (e.g. grants):					
	Total Revenue:		\$			
75.	According to the White Goods Law, White expenditures White Good Tax Distribution					amounts and types of
	Operational Expenses:	\$				
	Capital Improvements:	\$				
	Clean-up of Illegal White Goods Dumps:					
		\$				
201	16-2017 Local Government Annual Report	Report Due	Date: Septe	mber 1, 2017 Submit	t to: Lgteam@ncdenr.gov	Page 9 of 11

6.	Please provide name, address, phone number, and e- Name:	-	-		
				11tte:	
	Address:				
	Telephone: Fax:		Ema	il:	
7.	Please provide the physical address of the primary c	•	p tires collection si	te.	
	Street 1:				
	Street 2:				7.
	City:				
3.	Tonnage/Number of scrap tires disposed July 1, 201 Tons <b>o</b>	6-June 30 r	, 2017 ( <u>excluding</u> ti	res from cleanup of nu Number of tires	uisance sites)
).	Tonnage/Number of scrap tires disposed from clean Tons o	ip of state r	or county designat	ed nuisance sites Number of tires	
).	Indicate the types of tires collected by the county: Passenger % Heavy Tr	uck	%	Large Off-Road	%
l.	List the amount of revenue for the scrap tire program	n by sourc	e:		
	Revenue from Scrap Tire Tax Distributions:	\$			
	Revenue from Tire Fees:	\$			
	Revenue from Scrap Tire Clean-up Reimbursement	s: \$ _			
	Revenue from Scrap Tire Cost-Overrun Grants:	\$			
	Total Revenue:	\$			
2.	County's total scrap tire program contract expenditu excluding costs of nuisance tire cleanups, for FY 16	re (contrac 17.	ct disposal/hauling	costs), \$	
3.	County's additional scrap tire program expenditure ( Labor \$		convenience center	cost), if any.	
	Site Cost \$				
	Other \$		describe Other:		
ŀ.	County's contract cost for scrap tire disposal. \$		/ Ton; \$	/ Tire	
5.	Hauling cost or fuel surcharge, if not included in co	ntract cost	above. \$	/ Ton; \$	/ Tire
).	Total tipping fees collected for tires not eligible for	free dispo	sal. \$		
7.	Total number of tires collected not eligible for free				
		-			
3.	If scrap tires were not hauled off site by contracted s	1		Ĩ	
).					
	MPORARY DISASTER DEBRIS STAGI				
).	Does your local government have a plan in place for	•			No
	If yes, indicate if the plan is a stand-alone plan or in		•		Stand-alone In conjuncti
•	If you indicated having a plan, has the plan been rev requirements for public assistance reimbursement in	a declare	d disaster event?	Yes	No No
2.	Please list the name, contact numbers(s), and e-mail your local government:	address o	t the person(s) in cl	harge of the disaster de	ebris management program for
	Name: Nam	e:		Name:	
	Phone: Phor	e:		Phone:	

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.

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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?
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

