# **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, 2017 -- June 30, 2018

Please submit this form to Lgteam@ncdenr.gov by September 1, 2018.

On the following pages you will find the Local Government Solid Waste and Materials Management Annual Report Form for Fiscal Year 2017-2018. 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, 2018.

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:

Wendy Worley, phone: 919-707-8136, email: wendy.worley@ncdenr.gov Matt James, phone: 919-707-8133, email: matt.james@ncdenr.gov

Form Year



**Required** - Enter Your Local Government Name: Wilmington

**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, 2017 -- June 30, 2018

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

Please submit this	form to I	_gteam@ncde	enr.gov by	September	1, 2018.
		-8			

If you have questions or need assistance completing this form, please call 919-707-8136 or 919-707-8133.

Person Completing This Repor	t: Richard Porter	Title	: Superintenden	nt of Solid Waste	
Mailing Address: PO Box 1810	)	City: Wilmington		Zip: <u>28402-1810</u>	
Phone: 910-341-0081	Fax: 910-790-2391		Date: 7/20/18		
Email: rick.porter@wilmingtor	nnc.gov				
	General	Instructions			
Please remember that the time p for a specific question.	period for the report is JULY 1, 2017 the	hrough JUNE 30, 2018. Plea	ase check "No" i	if you have nothing to report	
1. Did your local governmen	nt have a Recycling Coordinator or sim	ilar position for FY 17-18?	Xes Yes	No	
Name Recycling Coordin	ator (if different from person completing	ng this report.)			
Name: David Ingram		Title	: Sustainibility I	Manager	
Address: PO Box 1810		City: Wilmington		Zip: 28402-1810	
Telephone: 910-341-1602	E Fax: 910-790-2391	Email: david.ing	gram@wilmingt	tonnc.gov	
2. Did your local governmen	nt have a Solid Waste Director or simil	ar position for FY 17-18?	Xes Yes	No	
If Yes, Name: Richard	l Porter	Title	: Superintendent	t of Solid Waste	
Address: PO Box 1810		City: Wilmington		Zip: 28402-1810	
Telephone: 910-341-008	Fax: 910-790-2391	Email: rick.port	er@wilmington	nc.gov	
3. Did your local governmen	nt have <b>dedicated or part-time</b> Solid V	Waste Enforcement Staff for	FY 17-18?	Yes No	
If Yes, Name: Corey I	Boyett	Title	: Public services	Code Enforcement Officer	
Address: PO Box 1810		City: Wilmington		Zip: 28402-1810	
Telephone: 910-341-0092	2 Fax: 910-790-2391	Email: corey.boyett@wilmingtonnc.gov			
4. Did your local governmen all that apply)	nt have solid waste ordinances in place				
🔀 Disposal Bans	Illegal Dumping Littering	Other, Please Describe	: all aspects of a	solid waste management	
5. Did your local governmen mulching, composting)?	nt manage, provide or contract for any	solid waste services in FY 17	7-18 (e.g., collec Xes	ction, disposal, recycling,	
If you ans	swer "No" to question 5, the report	is complete, please email to	Lgteam@ncde	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 17-18?
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 17-18?
	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, 2017 through June 30, 2018?
	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> .)
	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 🗌 No, skip to question # 25
16.	Who collected the recyclable materials for your local government's curbside recycling program?
	Local government employees
	Private contractor (please specify)
	Franchised hauler (please specify)
	Other (please specify)

17.	Please provide the following information about your community: a. Total number of households in your jurisdiction? 31,129
	b. Number of households eligible to participate in the curbside recycling program: 31,129
	c. Provide the <b>number of households</b> that participate in the curbside recycling program (estimate if necessary): 26,145
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: 819
21.	How frequently were the curbside recyclables collected? Once a week Every other week / biweekly
	Other Commercial / ABC collection available up to daily
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:
DR	OP-OFF RECYCLING PROGRAM
25.	Did your government operate a Drop-off Recycling Program? Yes Xo, 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 17-18? 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:

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

- 34. Did your electronics recycling program collect or accept computer equipment from (check all that apply): 🕅 Residences 🗍 Businesses
- 35. DEQ distributes Electronics Management Funds each February to eligible governments (G.S. 130A-309.137). If your government was eligible to receive proceeds from the State Electronics Management Fund in February of 2018, please provide the following information:

Electronics Management Fund balance as of July 1, 2017: \$

Electronics Management Funds received from DEQ during FY 17-18 (Feb 2018 distribution): \$

Electronics Management Funds spent during FY 17-18: \$

Electronics Management Fund balance as of June 30, 2018: \$

36. Briefly explain how Electronics Management Funds were spent during FY 2017-18 (please list items purchased if applicable):

37. If you did operate an electronics recycling program, please provide the following information about your vendor / contractor: Name of electronics recycling vendor(s) during FY 17-18:New Hanover County / Partnership

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

#### **OTHER PUBLIC RECYCLING PROGRAMS**

Plea	se answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by
<u>the l</u>	ocal government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the
Recy	cling 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? Yes
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: 126
	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?
	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
2.	Does your local gov	vernment have an ordinance f encouraging or requiring	ce regulating the c	construction and dem	olition waste stre	am 🗌 Yes	🔀 No

- 43. Please identify all Away From Home / Recycling On The Go programs or services operated by your government during FY 17-18. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
  - Dublic 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 17-18. (check all that apply and if possible indicate tonnages on page 5 in "Other" column)
  - Public School Recycling Program
  - Scheduled Collection Drives (e.g. confidential document shredding event held quarterly, once a year, etc.)
  - Lend-a-Bin Program where local government provides recycling containers to community organizations for use at events
  - Organics / Food Waste Recycling other than yard waste program
  - Oyster Shell Recycling Program
  - Other Programs (please specify)

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

## **RECYCLING TONNAGES FROM PUBLIC PROGRAMS**

- 45. a. Enter data in the table below for ALL recycling programs operated or contracted for by your local government. Provide TONNAGES (or estimates) for each material collected for the period JULY 1, 2017 through JUNE 30, 2018. DO NOT include materials that were not collected or managed by your local government either directly or under contract to a private service provider.
  - b. Do NOT report YARD WASTE, TIRES, HHW, USED OIL, OIL FILTERS, ANTI-FREEZE, BATTERIES or other SPECIAL WASTE tonnages on this page - these items should be reported in other sections of report form. See page 6 for SPECIAL WASTES.
  - c. Please report materials collected in tons only. Please only extend numbers to two decimal places (x.xx).
  - d. If you collected single stream or other commingled materials, record Tons in the "Commingled tons" row and then check the box for each individual material type that was commingled.

DDOCDAM	Curbside		Drop-off		All "O	Other" Programs	<b>Total Tons</b>
PROGRAM	⊠ if Yes	Tons	🛛 if Yes	Tons	⊠ if Yes	Tons	(totals are calculated by form)
GLASS:							
Clear							
Brown							
Green							
Mixed	$\square$						
PLASTIC:							
PET #1	$\square$						
HDPE #2							
All Plastic Bottles	$\square$						
Other Plastic Containers	$\square$						
Bulky Rigid Plastics	$\square$						
METAL:							
Aluminum Cans	$\square$						
Steel Cans							
White Goods					$\square$		
Other Metal					$\square$		
PAPER:							
Newsprint (ONP)	$\square$						
Cardboard (OCC)							
Magazines (OMG)	$\square$						
Office Paper	$\square$						
Mixed / Other Paper							
Cartons / Aseptic Containers	$\square$						
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons here <b>OTHER MATERIALS</b> :							
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling							
Commingled tons-check all items collected above		7,231.91					7,231.91
TOTAL TONS:		7,231.91					7,231.91

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

Used Motor Oil       Yes       No       gallons         Used Oil Filters       Yes       No       burrels, or       bbs         Batteries, Lead Acid       Yes       No       gallons       bbs         Batteries, Lead Acid       Yes       No       gallons       bbs         Batteries, Dry Cell       Yes       No       bbs       bbs         Propane Tanks       Yes       No       bbs, or       # bulbs         Propane Tanks       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         Other Special Wastes - please provide waste       Yes       No       bbs, or       gallons         NCDA Pesticide Disposal Assistance Program       Yes       No       bbs, or       gallons         MCDA Pesticide Disposal Assistance Program       Yes       No       gallons       bbs         Houschold Hazardous Waste Chellwain docalizations       Yes       No       gallos       bbs	47.	Special Waste Programs for Collecting Materials <u>from Citizens</u> by Material Type		n collect this m the public?	# of sites	-	quantities collected / managed. se report in indicated units.				
Used Antifreeze               Vestore              No              galons          Batteries, Lead Acid              Yestore              No              # batteries, or               Ibs          Batteries, Dry Cell              Yes               No               # batteries, or               Ibs          Fropane Tanks              Yes               No               Ibs, or               # tanks          Used Coxing Oil / Waste Vegetable Oil               Yes               No               Ibs, or               # tanks          Used Coxing Oil / Waste Vegetable Oil               Yes               No               Ibs, or               gallons          Other Special Wastes - please provide waste               Yes               No               Ibs          Pesticide Containers (NCDA Program, not             pesticides, not containers               Yes               No               gals               Ibs          Household Hazardoss Maste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event               Sol your local govermment oreparta is nous		Used Motor Oil	Yes	🛛 No				gallons			
Batteries, Lead Acid       □       Yes       No       # batteries, or       Its         Batteries, Dry Cell       □       Yes       No       □       Its         Fluorescent Bulbs/Lights Containing Mercury       Yes       No       □       bs, or       # bulbs         Propane Tanks       □       Yes       No       □       bs, or       # tanks         Used Cooking Oil / Waste Vegetable Oil       □       Yes       No       □       bs, or       # tanks         Other Special Wastes - please provide waste       □       Yes       No       □       bs, or       # tanks         Other Special Wastes - please provide waste       □       Yes       No       □       bs, or       # con-         Pesticide Containers (NCDA Program, not       □       Yes       No       □       bs, or       □       tanes         NCDA Pesticide Disposal Assistance Program       Yes       No       □       gals       □       □       bs         HCDA Pesticide Disposal Assistance Program       Yes       No       □       gals       □       □       bs         Hueschold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       48. Did your local government operate a houschold hazardous w		Used Oil Filters	Yes	🛛 No		barr	els, or	lbs			
Batteries, Dry Cell       □       Yes       No       □ <td></td> <td>Used Antifreeze</td> <td>Yes</td> <td>No No</td> <td></td> <td></td> <td></td> <td>gallons</td> <td></td>		Used Antifreeze	Yes	No No				gallons			
Fluorescent Bulbs/Lights Containing Mercury       Yes       No       bs. or       # bulbs         Propane Tanks       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # tanks         Used Cooking Oil / Waste Vegetable Oil       Yes       No       bs. or       # con-         Pesticide Containers (NCDA Program, not       Yes       No       bs. or       # con-         nearcoment of pesticides, not containers)       Yes       No       gals.       bs         HHW event or by a paint exchange program       Yes       No       gals.       or       bs         Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       48       bd       bor or co-sponsor your rearrow reare a houschold hazardous waste collection program or event in FY 17-18?       Yes       No         If Yes, please respond to the following questions:       a. Was HHW collected at a perminted Temporary Event or at a Permanent HHW		Batteries, Lead Acid	Yes	🛛 No		# b	atteries, or	lbs			
Propane Tanks       □       Yes       No       □       bbs, or       # tanks         Used Cooking Oil / Waste Vegetable Oil       □       Yes       No       □       bbs, or       gallons         Other Special Wastes - please provide waste       □       Yes       No       □       bbs, or       gallons         Other Special Wastes - please provide waste       □       Yes       No       □       bbs, or       # con-         Ipsticide Stemsselves)       □       Yes       No       □       bbs, or       # con-         NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)       Yes       No       □       gals, or       □       bbs         HIW event or by a paint exchange program       □       Yes       No       □       gals, or       □       bbs         HOUsehold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       1       Bos       Ibs         How event or by a paint exchange program)       □       Yes       No       □       □       □       □       □       Ibs		Batteries, Dry Cell	Yes	🖂 No				lbs			
Used Cooking Oil / Waste Vegetable Oil       Yes       No       Ibs. or       gallons         Other Special Wastes - please provide waste type here:       Yes       No       Ibs. or       gallons         Pesticide Containers (NCDA Program, not pesticides themselves)       Yes       No       Ibs. or       # con- tainers         NCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)       Yes       No       Ibs.       # bbs         NUCDA Pesticide Disposal Assistance Program (for management of pesticides, not containers)       Yes       No       Ibs.       # bbs         HHW event or by a paint exchange program)       Yes       No       gals.       Ibs.       # bbs         HUSehold Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       148. Did your local government operate a household hazardous waste collection program or event in FY 17-182       Yes       No         If Yes, please respond to the following questions:       a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Facility?       Permanent       Temp. Event         b. How many days was your HHW program open to accept materials during this Fiscal Year?		Fluorescent Bulbs/Lights Containing Mercury	Yes	🖂 No			lbs, or	# bulbs			
Other Special Wastes - please provide waste       Yes       No       Ibs         ivpe here:       Pesticide Containers (NCDA Program, not       Yes       No       Ibs, or       #con-tuiners         NCDA Pesticide Disposal Assistance Program       Yes       No       Ibs, or       #con-tuiners         NCDA Pesticide Disposal Assistance Program       Yes       No       Ibs, or       #toon-tuiners         NCDA Pesticide Disposal Assistance Program       Yes       No       Ibs       Ibs         NCDA Pesticide Disposal Assistance Program       Yes       No       Ibs       Ibs         Latex Paint (do not include paint collected at       Yes       No       Ipaint       Ibs         Household Hazardous Waste (HHW) and Conditionally Exempt Small Quantity Generator (CESQG) Program or Event       48       Did your local government operate a household hazardous waste collection program or event in FY 17-18?       Yes       No         If Yes, please respond to the following questions:       a. Was HHW collected at a permitted Temporary Event or at a Permanent HHW Collection Program met       Temp. Event         b. How many days was your HHW Program open to accept materials during this Fiscal Year?		Propane Tanks	Yes	No No			lbs, or	# tanks			
type here:       Image: Second S		Used Cooking Oil / Waste Vegetable Oil	Yes	No No			lbs, or	gallons			
pesticides themselves)       Image: Im			Yes	No No				lbs			
(for management of pesticides, not containers)       Yes       No			Yes	No No			lbs, or				
HHW event or by a paint exchange program)       Image: Yes       Image: No       Image: Or       Image:		· · ·	Yes	No No				lbs			
<ul> <li>48. Did your local government operate a household hazardous waste collection program or event in FY 17-18? Yes No If Yes, please respond to the following questions: <ul> <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>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> </ul> </li> <li>f. Amounts of individual materials collected by HHW Program: if totals for individual materials collected by HHW Program in 48g below. Note, materials listed here should only be those collected at an HHW Program. and should not include materials listed in question 47. Used Motor Oil (gal) Lead Acid Batteries (lbs) Other Batteries (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs) Fluorescent Bulbs / Lights Containing Mercury (lbs)</li> <li>g. Provide Total Quantity of materials collected by HHW Program. If individual materials were reported in 48f, please net the weight of those materials out of the total listed here.</li> <li>h. Please list HHW Collection Contractor</li> <li>i. Estimated cost of HHW / CESQG program or event(s) \$</li> </ul>			Yes	No No			-	lbs			
<ul> <li>g. Provide Total Quantity of materials collected by HHW Program. If individual materials were reported in 48f, please net the weight of those materials out of the total listed here.</li> <li>h. Please list HHW Collection Contractor</li> <li>i. Estimated cost of HHW / CESQG program or event(s) \$</li> </ul>		<ul> <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. Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in question 47.</li> <li>Used Motor Oil (gal) Used Oil Filters # of Barrels, or lbs.</li> </ul>									
reported in 48f, please net the weight of those materials out of the total listed here.		_									
i. Estimated cost of HHW / CESQG program or event(s) \$		reported in 48f, please net the weight of those		ut of the total	listed he	ere.			pounds		
		i. Estimated cost of HHW / CESOG program of	or event(s) \$								
	Pag						at thev DO	provide recvcling	services.		

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.

- 49. Does your local government operate a yard waste program? ⊠ Yes □ No If yes please indicate how yard waste is managed by checking all that apply: ⊠ Collected curbside □ Collected at convenience center □ Received at yard waste, compost, or LCID facil.
- 50. Did a storm event significantly impact the amount of yard waste your government managed during FY 17-18? 🗌 Yes 🛛 🕅 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	$\square$	10,510		New Hanover County YW Disposal/Diversified Biomass LLC
Land clearing and inert debris landfill (LCID)				
Energy / Fuel Use (e.g. boiler fuel market)				
Total		10510		

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 (in yards)	Avg. no. of times true	ck fills each week # of weeks truck i	s used during year	TOTAL	
	Part V. S	Solid Waste Collection	n Services		

This section concerns your local government's provision of solid waste (garbage) collection services.

52. Please complete the following table about your government's solid waste collection system.

	Sector	SectorWho Collects Solid Waste?How is Solid Waste Collected?Insert Letter - see codes at rightInsert # - see codes at right				Who Collects Solid Waste? How is Solid Waste Co					
	Residential	Primary	a a	Secondary	0	Primary		Secondary	4	<u> </u>	2. Twice a week at household
	Commercial	Primary	а	Secondary		Primary	1	Secondary	4	d. Local government not	<ol> <li>Convenience center/greenbox</li> <li>As needed or by request</li> <li>Daily</li> </ol>
	Industrial	Primary	d	Secondary		Primary		Secondary		1	6. Other
53.	If you provide	residenti	i <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 co	ollection	metho	od is used	?	Fully A	Automa	ated 🔀	Semi-A	utomated 🗌 Manual	Don't know
	What is the star	ndard co	llectio	n frequen	cy?	Weekl	у [	Two tir	nes per v	week Other	
	What is the typical service point for single family household waste? 🛛 Curbside 🗌 Back yard / Back door									k door	
	What type of collection container is used? 🔀 Government-provided carts 🗌 Resident-provided container 🗌 Bags										
	Do you offer be	ulky was	ste coll	ection sei	vices?	Ye	es	🗌 No			
54.	For municipalities - did your government collect white goods at the curb? $X$ Yes $\Box$ No If so, were white goods delivered to the county for marketing? $\Box$ Yes $X$ No										
	,	-			•		-			cational Activities	
55.	Did <b>your local government</b> have an education program to inform citizens specifically about solid waste management and / or recycling issues / activities? Xes No (If No, skip to Part VII, page 8)										
56.	Please estimate your annual budget for solid waste related education and outreach activities: \$27,700										
57.	Does your com	munity j	produc	e recyclir	ig educat	ion and	outrea	ch materials	s in lang	uages besides English?	Yes No
	If YES, please	list othe	r langu	ages used	l: Spanis	sh					
58.	Please provide	your rec	ycling	website a	address a	nd publi	c infor	mation pho	ne numb	ber if applicable.	
	Website: www.wilmingtonnc.gov/recyclingPhone #: 910-341-7875										

Part	t VII. Resources for Soli	d Waste Management and	d Full Cost Accounting
		t programs are essential for continue aste and materials management progr	d success of these programs. The following
-		nd for solid waste services in FY 17-1	
	funding sources, check all that apply		
e		olume/weight-based fees (e.g. PAYT)	Tire tax
	erty taxes / general fund $\boxtimes$ Sa		White Goods tax
	ousehold charges $\square$ G	-	$\square$ Disposal Tax
61. NC Solid Waste	Disposal Tax proceeds are distribute	ed to eligible local governments on a	quarterly basis by the Department of Revenue. waste management programs and services.
How are disposa	al tax distributions being used?opera	ation of solid waste services and progr	ams
62. If applicable, ple	ease provide your FY 17-18 househo	old fees. (e.g., a. <u>\$45.00</u> per <u>year</u> per	household for solid waste)
a. \$ <u>26.29</u>	permonth	per cart	for solid waste
b. \$	per	per	for recycling
c. \$	per	per	for yard waste
d. \$	per	per	for bulky waste
e. \$	per	per	availability fee
f. \$ <u>26.29</u>	per month	per all services	total charge
	overnment operate a Pay-As-You-The by weight or volume for the amour		during FY 17-18? (a system where residents es No
According to GS 13 inform users of such		required to conduct full cost accour	nting annually and to develop a system to
64. If your local gov	vernment contracts for solid waste or	r recycling services, please report the	annual contract amount.
\$	For soli	id waste services per year	
\$		ycling per year	
	OR		
\$	Combir	ned Contract (solid waste, and recycli	ng)
collection progra		waste including materials collected fr	play the full costs of your local government's om convenience centers. <b>If full cost analysis is</b>

	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
Municipal Solid Waste*	31,129	24,425	2,425,120	1,172,421	3,597,541	147
Recycling Program**	26,145	7,231	561,160	76,951	638,111	88
Yard Waste Program	31,129	10,726	1,498,338	227,305	1,725,643	160
Totals (calculated by form):		42,382	4,484,618	1,476,677	5,961,295	140

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

\*\*for materials collected by public recycling programs including those services offered to commercial and industrial generators. Do not include special waste services.
 66. If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide total budget for facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate costs proportionately. Landfill Budget:

\$

\_\_\_\_\_

Transfer Station Budget:

Yard Waste / Compost Facility Budget: \$

Recycling Facility Budget:

67. What was your government's total combined annual budget for all solid waste and recycling services in 17-18? \$8,329,920

\$

2017-2018 Local Government Annual Report *Due Date: September 1, 2018* 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: Fa	ıx:		Email:		
69.	Please provide the physical address of the	e primary co	unty white go	ods collection site.		
	Street 1:					
	Street 2:					
	City:			_ State: North Carolina	Zip:	
70.	Please provide the name of the business of Name:	-			) from white goods.	
	Street:					
	City:				Zip:	
	Phone: Fax:					
71.	Give amounts / types of CFCs removed.					
	Type of CFC Ren				Amount	
72.	CFCs may be recycled or sent for destruc	ction Give n	ame of firm	lisposal method and amo	unt earned / spent for CE	C disposal
12.	Firm			ethod of Disposal	Amount Earned	Amount Spent
73.	Please report the tonnage of white goods white goods tonnage reported on page 5?		ring FY 2017	-18 in the Recycling Ton	nages table on page 5 (qu	luestion # 45). Was
74.	List the amount of revenue for the white	goods progra	am by source:			
	Revenue collected from sale of scrap:		\$			
	Revenue collected from White Goods Ta	ax Distributio				
	Revenue from other source (e.g. grants):					
	Total Revenue:					
75.	According to the White Goods Law, Wh expenditures White Good Tax Distribution					mounts and types of
	Operational Expenses:	\$				
	Capital Improvements:					
	Clean-up of Illegal White Goods Dumps					
	Total Expenditures:	\$				
201	17-2018 Local Government Annual Report	Report Di	ue Date: Sept	ember 1, 2018 Submit	to: Lgteam@ncdenr.gov	Page 9 of 11

76.	Please provide name, address, phone number, and e-ma	ail of person respo	onsible for			
	Name:			Title:		
	Address:					
	Telephone: Fax:			:		
77.	Please provide the physical address of the primary course Street 1:	• 1		2.		
	Street 2:					
	City:	Sta	te: North	Carolina	Zip:	
78.	Tonnage/Number of scrap tires disposed July 1, 2017-J Tons <b>or</b>	fune 30, 2018 ( <u>ex</u>	<u>cluding</u> tir	es from cleanup of nu Number of tires	uisance sites)	
79.	Tonnage/Number of scrap tires disposed from cleanup Tons <b>or</b>	of state or county	designate	d nuisance sites Number of tires		
80.	Indicate the types of tires collected by the county: Passenger % Heavy Truc	k	%	Large Off-Road		%
81.	List the amount of revenue for the scrap tire program b	ф.				
	Revenue from Scrap Tire Tax Distributions:	¢.				
	Revenue from Tire Fees:					
	Revenue from Scrap Tire Clean-up Reimbursements:	¢				
	Revenue from Scrap Tire Cost-Overrun Grants:					
	Total Revenue:	\$				
82.	County's total scrap tire program contract expenditure excluding costs of nuisance tire cleanups, for FY 17-18	(contract disposal 3.	hauling co	osts), \$		
83.	County's additional scrap tire program expenditure (i.e Labor \$	<i>'</i>	ce center o	cost), if any.		
	Site Cost \$					
	Other \$	describe	Other:			
84.	County's contract cost for scrap tire disposal. \$	/ Ton	\$	/ Tire		
85.	Hauling cost or fuel surcharge, if not included in contr	act cost above. \$		/ Ton; \$	/ Tire	
86.	Total tipping fees collected for tires not eligible for fre	e disposal. \$				
87.	Total number of tires collected not eligible for free dis	posal:				
88.	If scrap tires were not hauled off site by contracted services					
89.	-	-	-	-		
TE	MPORARY DISASTER DEBRIS STAGINO					
90.	Does your local government have a plan in place for m		aster debri	s? Xes	No	
	If yes, indicate if the plan is a stand-alone plan or in co	njunction with lo	cal govern	ment agencies:	Stand-alone	In conjunction
91.	If you indicated having a plan, has the plan been review requirements for public assistance reimbursement in a			nagement or FEMA	to ensure it meets	the basic
92.	Please list the name, contact numbers(s), and e-mail ad your local government:	_	n(s) in cha	-	-	
	·	Richard Porter		Name:		
		910-341-0081		Phone:		
	E-mail: dave.mayes@wilmingtonnc.gov E-mail:	rick.porter@wilming	tonnc.gov	E-mail:		

2017-2018 Local Government Annual Report *Report Due Date: September 1, 2018* Submit to: Lgteam@ncdenr.gov

Page 10 of 11

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
1	New Hanover County Landfill/Yard Waste	6	City of Wilmington Operations Center
2	Diversified Biomass Yard Waste Site		
3	Waste Industries/Sampson County Landfill C&D		
4	Olsen Park TDMS		
5	Optimist Park TDMS		

94.	Does your plan address the management of household hazardous waste and white goods following a disaster?	Xes Yes	No No
-----	--	---------	-------

95. Does your plan address mass animal mortality?  $\Box$  Yes  $\boxtimes$  No

#### MANAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES

96. Has your county considered whether to implement a program for the management of abandoned manufactured homes? 🗌 Yes 📃 No

If yes, has your county developed a written plan for the management of abandoned manufactured homes? Yes

## Part IX. Comments

Use this section to elaborate on any info provided in your report as necessary. We would appreciate your comments about this report or other matters regarding solid waste management in North Carolina. Thank you for your time. You may submit additional sheets if needed.

All solid waste services are covered by the monthly fee except for household trash that will not fit into the provided roll out cart. When extra trash is outside the cart each bag requires a sticker that cost \$1.25.

35 gallon cart- \$21.36 p/m 95 gallon cart- \$26.29 p/m additional 95 gallon cart- \$12.03 p/m

MULTI-FAMILY FEES

35 gallon cart- \$21.36 p/m 95 gallon cart- \$26.29 p/m additional 35 gallon cart- \$12.03 p/m additional 95 gallon cart- \$9.28 p/m

COMMERCIAL FEES

35 gallon cart- \$29.84 95 gallon cart- \$35.09 additional 35 gallon cart- \$9.28 additional 95 gallon cart- \$12.03

Additional 95 gallon recycling cart- \$4.51p/m

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

Matt James, email: matt.james@ncdenr.gov phone 919-707-8133

Wendy Worley, email: wendy.worley@ncdenr.gov phone: 919-707-8136

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



No