

#### 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:

- $1-download\ a\ copy\ of\ the\ form\ from\ this\ web\ site:\ \underline{http://deq.nc.gov/about/divisions/waste-management/solid-waste-section/annual-reporting}$
- 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: <a href="https://get.adobe.com/reader/">https://get.adobe.com/reader/</a> - it is suggested that you complete the form using the latest version of Adobe Reader. Please <a href="DO NOT">DO NOT</a> 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

2018



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

Wrightsville Beach

### State of North Carolina

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

# Local Government Report Form

# 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 Lgt	team@ncdenr.gov by September 1, 2018.				
If you have qu	uestions or need assistance comple	eting this form, please call 919-707-8130	6 or 919-707-8133.			
Person Completing This Rep	port: Daniel Keating	Title: Sanitation	n Superintendent			
Mailing Address: 200 Parme	ele Blvd	City: Town of Wrightsville beach	Zip: 28480			
Phone: 910-256-7935	Fax: 910-256-7939	Date: 7-19	9-2018			
Email: dkeating@towb.org						
	Gene	eral Instructions				
Please remember that the tin for a specific question.	ne period for the report is JULY 1, 20	117 through JUNE 30, 2018. Please check ".	No" if you have nothing to report			
1. Did your local government	ment have a Recycling Coordinator or	r similar position for FY 17-18? Yes	No No			
Name Recycling Coordinator (if different from person completing this report.)						
Name: New Hanover County Environmental Management Title:						
Address: 3002 US high	hway 421 N	City: Wilmington	Zip: 28401			
Telephone: 910-798-44	400 Fax: 910-798-4408	Email: nhcgov.com				
2. Did your local governr	ment have a Solid Waste Director or s	similar position for FY 17-18? Xes	☐ No			
If Yes, Name: Dani	iel Keating	Title: Superinter	Title: Superintendent			
Address: 200 Parmele	Blvd	City: Wrightsville Beach	Zip: 28480			
Telephone: 910-256-79	935 Fax: 910-256-7935	Email: dkeating@towb.org	5			
3. Did your local governr	ment have dedicated or part-time So	blid Waste Enforcement Staff for FY 17-18?	Yes No			
If Yes, Name: Dani	iel Keating	Title: Superinter	Title: Superintendent			
Address: 200 Parmele	Blvd	City: Wrightsville Beach	Zip: 28480			
Telephone: 910-256-7	935 Fax: 910-256-7935	Email: dkeating@towb.org	5			
4. Did your local governr all that apply)	ment have solid waste ordinances in p	place addressing any of the following during	FY 17-18? (if yes, please check			
∑ Disposal Bans	s 🔀 Illegal Dumping 🔀 Litter	ing Other, Please Describe:				
5. Did your local government mulching, composting)		any solid waste services in FY 17-18 (e.g., c	collection, disposal, recycling,  No			
If you d	answer "No" to question 5, the rep	oort is complete, please email to Lgteam@	ncdenr.gov.			

#### Part I. Waste Reduction and Recycling Programs Serving Government Facilities The following questions pertain to waste reduction and recycling activities / programs that serve local government facilities. Did your local government have a recycling program in place for collecting recyclable materials generated at X No public buildings in FY 17-18? 7. Did your local government have any program or policy encouraging or requiring local agencies to X 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 17-18? 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, 2017 through June 30, 2018? 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 $\bowtie$ 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 <b>number of households</b> that participate in the curbside recycling program (estimate if necessary):							
18.	If your curbside recycling program is operated through a <u>public franchise granted to a private company</u> then please answer the following:  Is public participation in the franchise:  Voluntary or Mandatory  Does your franchise consist of:  One service district or Multiple service districts							
19.	What sector(s) of your community was served by the curbside recycling program?  Residential Commercial Industrial							
20.	2. 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) 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?  Local government employees  Private contractor							
	Other (please specify) New Hanover County Environmental Management							
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)  single stream / commingled 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: 5							
31.	How many of these locations were staffed with attendants?							
EL	ECTRONICS RECYCLING PROGRAM							
mate	Is answer the following questions about local government sponsored efforts to collect electronics from the public. The tonnage of any terials 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 17-18? 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:							

33.	Did your electronics recycling program collect 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							
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:							
	Does the electronics recycling vendor(s) listed above hold either the e-Steward or R2 certifications?							
OT	HER PUBLIC RECYCLING PROGRAMS							
<u>the</u> <u>l</u>	use answer the following questions about local government sponsored recycling efforts. List only programs operated or contracted for by local government. The tonnage of any materials collected by the following programs should be listed in the "Other" column in the ycling 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?							
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)							
	□ Public Parks Recycling Program     □ Athletic Field / Venue Recycling Program							
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.							
	1 rograms to manage special musics are addressed in 1 art 111 on page 0, piedse do not include special music 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

PD CCD 134	Cu	ırbside	D	rop-off	All "Otl	ner" 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							
PLASTIC:							
PET #1							
HDPE #2							
All Plastic Bottles							
Other Plastic Containers							
Bulky Rigid Plastics							
METAL:							
Aluminum Cans							
Steel Cans							
White Goods							
Other Metal						15.47	15.47
PAPER:							
Newsprint (ONP)							
Cardboard (OCC)							
Magazines (OMG)							
Office Paper							
Mixed / Other Paper							
Cartons / Aseptic Containers							
WOOD:							
Pallets							
Other Wood - DO NOT							
report yard waste tons her	re U						
OTHER MATERIALS:							
Textiles (clothes etc)							
Televisions							
Other Electronics							
C&D Materials Recycling	ş <u> </u>						
Concrete					$\boxtimes$	23.12	23.12
Asphalt						11.41	11.41
Commingled tons-check a							
items collected above TOTAL TONS:			<u>~ 3</u>			70	50
TOTAL TUNS:						50	50

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) Did program collect this **Special Waste Programs for Collecting** # of Data on quantities collected / managed. material from the public? Materials from Citizens by Material Type Please report in indicated units. sites Used Motor Oil X No X No Used Oil Filters barrels, or lbs Yes Used Antifreeze Yes X No gallons No No # batteries, or Batteries, Lead Acid Yes lbs Batteries, Dry Cell Yes X No lbs Fluorescent Bulbs/Lights Containing Mercury Yes No No lbs, or # bulbs **Propane Tanks** Yes No No lbs, or # tanks Used Cooking Oil / Waste Vegetable Oil Yes No. lbs, or gallons Other Special Wastes - please provide waste Yes No lbs type here: Pesticide Containers (NCDA Program, not # con-Yes No No lbs, or pesticides themselves) tainers NCDA Pesticide Disposal Assistance Program Yes No No lbs (for management of pesticides, not containers) Latex Paint (do not include paint collected at gals, Yes X No lbs HHW event or by a paint exchange program) or 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? 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? c. Did you partner or co-sponsor your HHW program with another <u>local government?</u> Yes Please list partner(s) New Hanover County Environmental management d. Provide number of citizens / households that participated in your HHW collection program this Fiscal Year? e. Did your program accept materials from small businesses (Conditionally Exempt Small Quantity Generators)? If yes, please estimate the amount of business material managed

g. Provide Total Quantity of materials collected by HHW Program. If individual materials were pounds reported in 48f, please net the weight of those materials out of the total listed here. h. Please list HHW Collection Contractor

f. Amounts of individual materials collected by HHW Program: if totals for individual materials are known please itemize below. If data about individual materials is not available, please simply provide total quantity of materials collected by HHW program in 48g below. Note, materials listed here should only be those collected at an HHW Program and should not include materials listed in question 47.

Used Antifreeze (gal)

Lead Acid Batteries (lbs)

Other Batteries (lbs)

Used Motor Oil (gal) \_\_\_\_\_ Used Oil Filters \_\_\_\_ # of Barrels, or \_\_\_\_ lbs.

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.

Fluorescent Bulbs / Lights Containing Mercury (lbs)

i. Estimated cost of HHW / CESQG program or event(s) \$

	Part IV. Yard Waste,	Mul	ching and <b>(</b>	Compostin	g Managemo	ent
ипре	section concerns management of vegetative matermitted sites and it is illegal to burn. Composting at your management of vegetative materials. Do not	and mi	ulching are popi	ular manageme	nt options. Please	answer the questions below
<ul> <li>49. Does your local government operate a yard waste program?  Yes  No If yes please indicate how yard waste is managed checking all that apply:  Collected curbside  Collected at convenience center  Received at yard waste, compost, or LCID for Did a storm event significantly impact the amount of yard waste your government managed during FY 17-18?  Yes  No</li> <li>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.</li> </ul>						
	Destination	Check if used	Tons	Cubic Yards		Name and Location of Facility g Vegetative Materials
	End user (to farmer or home-owner)					
	Your local government's mulch or compost facility					
	Other public mulch or compost facility	$\boxtimes$	117.7		New Hanover County L	andfill Vegetable site
	Private mulch or compost facility					
	Land clearing and inert debris landfill (LCID)					
	Energy / Fuel Use (e.g. boiler fuel market)					
	Total		117.7			
	YARD WASTE MANAGEMENT FORMULA: If estimate yard waste volume. Calculate for each tru volume managed by program in the appropriate box	ck used	in your yard wa	iste managemen	t program, and the	en enter the grand total $yd^3$
	X		X		=	yd³
	Size of Truck (in yards)  Avg. no. of times truck					TOTAL
This 52.	section concerns your local government's provision Please complete the following table about your gov	of solid ernmen	t's solid waste co	c) collection serv	vices.	
	Sector Who Collects Solid Waste? Insert Letter - see codes at right			ight Till Co	llects Solid Waste?	How is Solid Waste Collected? s 1. Once a week at household
	Commercial Primary A Secondary Prim		2 Secondary 4 Secondary Secondary	b. By Co c. Franch d. Local	ontract hise haulers government not led in provision of	2. Twice a week at household 3. Convenience center/greenbox 4. As needed or by request 5. Daily 6. Other
53.	What is the standard collection frequency? What is the typical service point for single family h	ally Aut eekly ousehol	tomated 🔀 S	Semi-Automated les per week	•	Don't know
54.	For municipalities - did your government collect what If so, were white goods delivered to the county for	hite goo marketi	ods at the curb?	No No	]No	
	Part VI. Solid Wast	te and	d Recycling	g Education	nal Activities	S
55.	Did <b>your local government</b> have an education progissues / activities? Yes No (If No	_	inform citizens to Part VII, page	•	out solid waste man	nagement and / or recycling
56.	Please estimate your annual budget for solid waste	related	education and or	utreach activitie	s: \$ <u>2</u> ,000	
57.	Does your community produce recycling education	and ou	treach materials	in languages be	sides English?	Yes No
	If YES, please list other languages used:					
58.	Please provide your recycling website address and p	public i	nformation phon	ne number if app	olicable.	
	Website: http://www.townofwrightsvillebeach.com	n/Docun	nentCenter/Hom	ne/View/1748	Phone #: 910-25	56-7935

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

	ficient resources availab stions deal with funding					these programs. T	The following
	Did your local governm With regards to funding Tipping fees Property tax Per househo	g sources, check all s tes / general fund	that apply to your lower Volume/wee Sale of recy	local government: eight-based fees (e.g	. PAYT)	Yes No  Tire tax  White Goods tax  Disposal Tax	
61.	NC Solid Waste Dispos According to GS 105-1	87.63 these funds n	nust be used by a ci	ity of county solely			
<b>60</b>	How are disposal tax d	C		<u> </u>	, , , , ,	C. It I	
62.	If applicable, please pr a. \$\frac{24.5}{}	•					
	a. \$	per		per		for solid waste	<b>;</b>
	b. \$	per		per		for recycling	
	c. \$	per		per		for yard waste	
	d. \$	per		per		for bulky wast	e
	e.\$	per		per		availability fee	<u> </u>
				per			
63.	Did your local governmare charged a fee by we	nent operate a Pay-A	As-You-Throw prog	gram for residential	garbage during FY		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	services per year			
	\$		_ For recycling per	r year			
			OR				
	\$		_	act (solid waste, and	• 0,		
65.	Collection Programs: P collection programs for not available, please r	waste, recyclables	and yard waste inc	luding materials col			
	, <b>.</b>	# of Households served	Tons Collected	Collection Cost	Disposal Cost (tipping fees paid)	Total Cost including overhead	Cost Per Ton Managed (calculated by form)
M	Iunicipal Solid Waste*	2,802	3,566.88	506,559	185,168	777,295	21
	Recycling Program**	2,802	10	2,340	0	7,124	712
	Yard Waste Program	2,700	117.7	77,646	1,419.36	83,429	70
		(calculated by form):	3,694.58	586,545		867,848	234
*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 s  66. If your government operates a landfill, transfer station, yard waste /compost facility or recycling facility, please provide facility operations (round to nearest dollar). If budgets for different facilities are combined, please attempt to allocate proportionately.  Landfill Budget:  \$					ity, please provide tempt to allocate co	total budget for	
	Tran	sfer Station Budget	: \$				
	Yard	Waste / Compost I	Facility Budget: \$				
		cling Facility Budg					
67.	What was your government	ment's total combine	ed annual budget fo	or all solid waste and	d recycling services	in 17-18? \$ <u>921,13</u> 6	5

### **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.								
	Name:			Title:				
	Address:	C	ity:		Zip:			
	Telephone: Fax:			Email:				
69.	Please provide the physical address of the primary	county white goo	ods colle	ection site.				
	Street 1:							
	Street 2:							
	City:				Zip:			
70.	Please provide the name of the business or person Name:				om white goods.			
	Street:							
	City:		State:	North Carolina	Zip:			
	Phone: Fax:							
71.	Give amounts / types of CFCs removed. Attach rec							
	Type of CFC Removed				Amount	_		
72.	CFCs may be recycled or sent for destruction. Give	e name of firm, d	isposal	method and amount	earned / spent for CF0	C disposal.		
	Firm	M	ethod of	f Disposal	<b>Amount Earned</b>	Amount Spent		
73.	Please report the tonnage of white goods collected white goods tonnage reported on page 5? Ye	•	·18 in th	e Recycling Tonnag	es table on page 5 (qu	estion # 45). Was		
74.	List the amount of revenue for the white goods pro	ogram by source:						
	Revenue collected from sale of scrap:	\$						
	Revenue collected from White Goods Tax Distribu	utions: \$						
	Revenue from other source (e.g. grants):	\$						
	Total Revenue:	\$						
75.	According to the White Goods Law, White Good expenditures White Good Tax Distributions were used to the Cook of th					mounts and types of		
	Operational Expenses: \$							
	~							
	Clean-up of Illegal White Goods Dumps: \$							
	Total Expenditures: \$							

<b>SC</b> .	RAP TIRES					
76.	Please provide name, address, phone number, and on Name:	e-mail of person responsible for scrap tires program.  Title:				
	Address:				Zip:	
	Telephone: Fax:					
77.	Please provide the physical address of the primary Street 1:	county scrap tire	s collection sit	e.		
	Street 2:					
	City:		State: North	n Carolina	Zip:	
78.	Tonnage/Number of scrap tires disposed July 1, 20  Tons	17-June 30, 2018	(excluding ting			
79.	Tonnage/Number of scrap tires disposed from clear Tons		ounty designate	ed nuisance sites Number of tires		
80.	Indicate the types of tires collected by the county: Passenger % Heavy 7	Гruck	%	Large Off-Road		_ %
81.	List the amount of revenue for the scrap tire progra	•				
	Revenue from Scrap Tire Tax Distributions:					
	Revenue from Tire Fees:					
	Revenue from Scrap Tire Clean-up Reimbursemen	its: \$				
	Revenue from Scrap Tire Cost-Overrun Grants:	\$				
	Total Revenue:	\$				
82.	County's total scrap tire program contract expendite excluding costs of nuisance tire cleanups, for FY 1	ure (contract disp 7-18.	osal/hauling c	eosts), \$		
83.	County's additional scrap tire program expenditure  Labor \$		enience center	cost), if any.		
	Site Cost \$					
	Other \$	des	cribe Other: _			
84.	County's contract cost for scrap tire disposal. \$	/	Ton; \$	/ Tire		
85.	Hauling cost or fuel surcharge, if not included in co	ontract cost above	ve. \$	/ Ton; \$	/ Tire	
86.	Total tipping fees collected for tires not eligible for	r free disposal. \$				
87.	Total number of tires collected not eligible for free					
88.	If scrap tires were not hauled off site by contracted	service provider	, were they cut	t and disposed in a lo	cal landfill? Yes	No
89.	Name of tire disposal/recycling firm(s):					
TE	MPORARY DISASTER DEBRIS STAG	ING SITES				
90.	Does your local government have a plan in place for	or management o	f disaster debr	is? Yes	☐ No	
	If yes, indicate if the plan is a stand-alone plan or in	n conjunction wi	th local govern	nment agencies:	Stand-alone In	conjunction
91.	If you indicated having a plan, has the plan been re requirements for public assistance reimbursement is			anagement or FEMA  Yes	to ensure it meets the	e basic
92.	Please list the name, contact numbers(s), and e-mai your local government:	-				ogram for
	<del></del>	me: Glen Rogers		Name: Ti		
		one: 910-239-170			0-239-1770	
	E-mail: bsquires@towb.org E-n	nail: grogers@towb.	org	E-mail: tow	vens@towb.org	

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	Town Hall temporary debris site 1		
2	Town Hall temporary debris site 2		
3	Public Works temporary debris site		

94.	94. Does your plan address the management of household hazardous waste and white goods following a disaster? Yes No								
95.	95. Does your plan address mass animal mortality?  \(\simeg \text{Yes}  \square \text{No}\)								
MA	MANAGEMENT OF ABANDONED MANUFACTURED HOMES BY COUNTIES								
96.	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:

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 <a href="https://deq.nc.gov/conservation/recycling/local-government-recycling-assistance">https://deq.nc.gov/conservation/recycling-local-government-recycling-assistance</a> or e-mail us at Lgteam@ncdenr.gov

