

END OF CLEAN UP REPORT



POST, SCAN OR FAX AND INCLUDE THE VOLUNTEER REGISTRATION FORM

CLEAN UP AUSTRALIA 193 DARLINGHURST RD, DARLINGHURST NSW 2010
FAX: 02 8221 9513 OR SCAN TO: CLEANUP@CLEANUP.COM.AU

Please mark event type and date.

Event Type :

- Community
- Primary School
- Business
- Youth (including High School)

Event Date :

/ /

Start Time: _____ AM/PM

Finish Time: _____ AM/PM

PART 1 ACTIVITY SUMMARY

This first page provides an overview of the results of your Clean Up Activity.

Clean Up Site Details

Nominate only 1 Site for each Rubbish Report Survey

Site Supervisor name: _____

Site Number: _____

Group/Organisation/School name: _____

Site address: _____

Town/Suburb: _____

State: _____ Postcode: _____

Council area: _____

Is your Site Regional Metropolitan Recurring

Site category (please tick one box only, more detailed definitions follow)

- River/Creek Parks
- Beach/Coastal Roadway
- Public Bushland Shops/Malls
- School Grounds Outdoor Transport
- Dive Site Other _____

Volunteers (estimate)

No. of volunteers: _____

No. of adults: _____ No. of children (u16): _____

No. of males: _____ No. of females: _____

Your Clean Up event

Did an accident/incident occur at your Site?

- Yes No

If 'Yes', please complete and return an Accident/Incident Report Form to Clean Up Australia.

Were any syringes found at your Site?

- Yes No Approx. no. _____

Does this Site attract illegal dumping? i.e. cars/whitegoods

- Yes No

Rubbish Summary

No. of Clean Up (or similar) bags collected at your Site: _____

No. of Clean Up (or similar) bags opened and counted for Part 2 of the rubbish survey (pgs 2-4): _____

Estimated total site area: _____ m² or _____ km²

Approx. weight of rubbish collected in bags surveyed: _____ kg

Any interesting or unusual items collected? _____

Did you recycle any rubbish?

Yes No

If 'Yes', please indicate items recycled:

- Aluminium Plastics
- Glass Paper/Cardboard
- Other (specify) _____ Steel

Most Significant Change

Please take time to tell us about significant changes that have occurred as a result of your participation this year.





PART 2 RUBBISH SURVEY *continued*

This section of the form is optional. The collection of this information enables us to access valuable statistical data from activities conducted nationally and forms the basis of our annual Rubbish Report. Please read the instructions below before starting the survey. Data is also shared with state & federal agencies such as the CSIRO to assist with litter mapping.

- This survey requires you to identify and count a proportion of the rubbish collected at your Site and record the results. To make it easier, work in teams of two.
- When you separate recyclable items from rubbish items into different bags, please capture a representative sample from both types of bags – that is, if your site collects 10 rubbish bags and 5 recyclable bags, count the items from 2 rubbish bags and 1 recyclable bag.
- We suggest you count the rubbish collected in every 5th bag. Stop when you have surveyed 6 bags in total. If you collect just 5 bags of rubbish, survey the contents of just 1 bag.
- Thank you for taking the time to complete this report. Your feedback helps ensure the ongoing success of the campaign.

Ⓡ Items commonly recyclable through kerbside collections.

ⓈⓇ Items which are specialist recyclable. For additional information please refer to the 'Guide to rubbish items' in the Site Guide.

| Rubbish Type | No. of items (tally mark) | Total | Are these recyclable in your area? | | |
|---|---------------------------|-------|------------------------------------|----|--------|
| | | | Yes | No | Unsure |
| EXAMPLE | | | | | |
| chips & confectionery | IIII | 4 | | ✓ | |
| Plastic bags | | | | | |
| chips & confectionery | | | | | |
| food | | | | | |
| garbage/rubbish | | | | | |
| ⓈⓇ supermarket/retail | | | | | |
| other (specify) | | | | | |
| Plastic bottles/containers | | | | | |
| ⓈⓇ automotive oils | | | | | |
| Ⓡ food (sauces etc) | | | | | |
| Ⓡ milk | | | | | |
| Ⓡ laundry/cleaning | | | | | |
| Ⓡ PET drink containers  | | | | | |
| Ⓡ fruit juice    | | | | | |
| non PET containers | | | | | |
| other (specify) | | | | | |
| Plastic miscellaneous | | | | | |
| Ⓡ bottle caps & lids | | | | | |
| cigarette lighters | | | | | |
| cling wrap | | | | | |
| ⓈⓇ packaging | | | | | |
| containers (ice cream etc) | | | | | |
| cutlery/cups/utensils | | | | | |
| disposable nappies | | | | | |
| fishing equipment | | | | | |
| toys and sporting equipment | | | | | |
| ⓈⓇ plastic crates (milk etc) | | | | | |
| plastic rope (length= _____ m) | | | | | |
| pvc piping (length= _____ m) | | | | | |
| sanitary pads/surgical dressings | | | | | |
| six-pack rings/wrapping | | | | | |
| straws | | | | | |
| tapes/straps/fastenings | | | | | |
| other (specify) | | | | | |

PART 2 RUBBISH SURVEY *continued*

| Rubbish Type | No. of items (tally mark) | Total | Are these recyclable in your area? | | |
|---|---------------------------|-------|------------------------------------|----|--------|
| | | | Yes | No | Unsure |
| Polystyrene foam | | | | | |
| cups/plates | | | | | |
| fast food containers | | | | | |
| <input type="checkbox"/> packaging | | | | | |
| pieces | | | | | |
| other (specify) | | | | | |
| Glass | | | | | |
| <input type="checkbox"/> alcoholic beverage bottles | | | | | |
| <input type="checkbox"/> food jars | | | | | |
| <input type="checkbox"/> pieces | | | | | |
| <input type="checkbox"/> soft drink bottles | | | | | |
| <input type="checkbox"/> fruit juice bottles | | | | | |
| light globe | | | | | |
| other (specify) | | | | | |
| Rubber | | | | | |
| condoms | | | | | |
| gloves | | | | | |
| thongs/shoes | | | | | |
| <input type="checkbox"/> tyres | | | | | |
| other (specify) | | | | | |
| Paper / cardboard | | | | | |
| <input type="checkbox"/> bags | | | | | |
| <input type="checkbox"/> boxes | | | | | |
| <input type="checkbox"/> cigarette packets | | | | | |
| <input type="checkbox"/> cups | | | | | |
| <input type="checkbox"/> drink cartons | | | | | |
| <input type="checkbox"/> milk cartons | | | | | |
| <input type="checkbox"/> egg cartons | | | | | |
| <input type="checkbox"/> fast food packaging | | | | | |
| napkins & tissues | | | | | |
| <input type="checkbox"/> newspapers/books/magazines | | | | | |
| <input type="checkbox"/> large paper | | | | | |
| <input type="checkbox"/> small paper | | | | | |
| <input type="checkbox"/> wine casks | | | | | |
| other (specify) | | | | | |
| Metal / aluminium cans | | | | | |
| <input type="checkbox"/> aerosol | | | | | |
| <input type="checkbox"/> alcoholic beverage | | | | | |
| <input type="checkbox"/> soft drink | | | | | |
| <input type="checkbox"/> food | | | | | |
| other (specify) | | | | | |

PART 2 RUBBISH SURVEY *continued*

| Rubbish Type | No. of items (tally mark) | Total | Are these recyclable in your area? | | |
|---|---------------------------|-------|------------------------------------|----|--------|
| | | | Yes | No | Unsure |
| Metal / aluminium miscellaneous | | | | | |
| <input type="checkbox"/> appliances | | | | | |
| <input type="checkbox"/> bottle caps | | | | | |
| construction materials | | | | | |
| foil/confectionery wrappers | | | | | |
| <input type="checkbox"/> forty-four gallon drums | | | | | |
| paint tins | | | | | |
| <input type="checkbox"/> large metal pieces | | | | | |
| pipe (length=_____ m) | | | | | |
| small metal pieces | | | | | |
| wire (length=_____ m) | | | | | |
| other (specify) | | | | | |
| Wood | | | | | |
| construction materials | | | | | |
| ice cream sticks | | | | | |
| pieces | | | | | |
| <input type="checkbox"/> bottle corks | | | | | |
| other (specify) | | | | | |
| Miscellaneous | | | | | |
| <input type="checkbox"/> batteries | | | | | |
| car/machinery parts | | | | | |
| carpet (larger than this sheet) | | | | | |
| ceramics | | | | | |
| cigarette butts | | | | | |
| <input type="checkbox"/> clothing | | | | | |
| <input type="checkbox"/> e waste (mobiles, computers etc) | | | | | |
| <input type="checkbox"/> food scraps | | | | | |
| <input type="checkbox"/> furniture | | | | | |
| <input type="checkbox"/> shopping trolleys | | | | | |
| syringes | | | | | |
| other (specify) | | | | | |

Major Partners



Partner



Suppliers



THANK YOU FOR TAKING THE TIME TO COMPLETE THIS SURVEY