

Waste Diversion Survey – Landfill 1

Please **check** the waste diversion programs in which you participate:

- Blue Box Recycling/Recycling Center
- Hazardous Waste Collection Days
- Electronics
- Scrap Metal
- Composting
- LCBO/Beer Store Return Programs

OTHER: _____

Please **check** the box that you agree with:

I think **mandatory** blue box recycling should be enforced by the Township

I think blue box recycling should be on a **voluntary** basis only

Please **check** the statements that apply to you:

I recycle.

If **no**, please explain why:

I don't have the storage space

I don't have the time

I don't consider it important

I don't have recyclable waste

OTHER: _____

Any other comments, suggestions, ideas, concerns? _____

THANK YOU!