WASTE DIVERSION THIRD PARTY SURVEY REPORT FORM

Name of Company: **Surveyor:** **Today's Date:**

Survey Type	Audit Ref. #	Type of Business	SIC	# Of Empl.	Audit Date	Material Type	Diversion Activity	Recycling (lbs/yr)	Source Reduction (lbs/yr)	Composting / Other (lbs/yr)	Reference Source for Conversions	Calculations
Sub-Total								**0**	**0**	**0**		

Sub-total	Recycling (lbs/yr) 0	Source Reduction (lbs/yr) 0	Composting/Other (lbs/yr) 0			
Total Waste Audit Diversion	(0) **+**	(0) **+**	(0) **+**	**= 0.00**	**Divide by 2,000 lbs.** **= 0.00**	**0.00 / 12 months** **= *0.00***