

Household Hazardous Waste Collection
User Questionnaire
2018 Season



Name: _____
Street: _____
City/Town: _____ Zip: _____
Phone: _____ - _____ License Plate No: _____

Would you be willing to help at a collection by volunteering?
Yes _____ no _____

Would you be interested in additional projects that the RiverCOG is working on? Please leave your email _____

How Did You Find Out About the Collection? (check all that apply)

Newspaper _____ Radio _____ Fliers/Brochure _____
Town _____ River COG _____ Sign _____
Word-of-Mouth _____ Computer _____ Town Events _____
Transfer Stations _____

Have you been to a collection before? _____
Are you bringing in waste for a friend, neighbor, or relative? _____
If so, how many households are represented today? 1 2 3 4 5
Comments: _____

Types of Waste Disposing of Today -

Paints & Paint-related Products _____ Cleaners _____
Pesticides/Herbicides _____ Fuels _____
Other (*please describe*) _____

- Thank you -