WASTE AUDIT METHODOLOGY

What you need:

- weighing scale;
- containers (preferably drums or pails that have been calibrated to measure volume) for each type of waste;
- ground sheet;
- tongs for picking up and sorting;
- and waste charts and forms.
- 1. Collect all the wastes that are generated or found in the designated clean up area / site.
- 2. Segregate and classify the waste collected based on the Waste Classification Table found on page 2.
- 3. Using common containers or pails of the same size and weight or those that have been equally calibrated, determine the volume and weight of each type of waste and tally them using the form. There's no need to compress or flatten the piles of waste inside the containers when getting the estimated volume. Enter the data immediately into the forms after each measurement, by volume and by weight.
- 4. After tallying, rank all the wastes according to volume and then according to weight. Please note that determining volume is important as plastic discards like polystyrene or plastic bags , while lighter in weight tend to occupy more space.

1



CLASSIFICATION TABLE

1. Plastic Bags	T shirt hags
	T-shirt bags
2. Composite/Multi-layered packaging	Shampoo packets, toothpaste sachets, coffee
	sachets, junk food wrappers, etc
3. Single-layer plastics	Clear flexible plastics and other plastics that do not
	fall under numbers 1 & 2.
4. Polystyrene	Food containers, coffee cups, disposable plastic cups
	and utensils (usually designated by #3 printed at
	bottom of container)
5. Hard Plastic (HDPE / /LDPE / PP)	All kinds of hard plastics like shampoo bottles, lotion
	bottles, bottle caps, (usually designated by the
	numbers 2, 4, 5 printed at bottom of container)
6. PET plastics	Soda bottles, water bottles, juice bottles (usually
	designated by the #1 printed at bottom of container)
7. Drinking straws	
8. Diapers and sanitary pads	
9. Metals / Cans	Aluminum, foil, other types of metals
10. Glass	All kinds of glass EXCEPT thermometers, light bulbs,
	medicine packs and bottles, medical supplies
11. Paper / cartons / cardboards	All kinds of paper products
12. Biodegradable waste	All kinds of bio waste except paper and cartons
13. Cigarette butts	
14. Textile	All kinds of cloths, rags, etc
15. Ceramics	Pottery, plates, mugs, ceramic figurines, etc
16. Hazardous waste	Paint cans, light bulbs, PVC plastics (PVC plastic can
	be rigid or flexible and is commonly used as pipes,
	wrapping for bedding, deli and meats, shrink wraps,
	plastic toys, table cloths, shower curtains, usually
	designated by #3 printed at the bottom of the
	container), etc
17. Medical waste	Thermometers, syringes, medicine bottles, etc
18. Footwear	Slippers and shoes
19. Others	Rubbers, all other kinds of waste that don't fall
	under the categories above



AUDIT

Name of Organization: Names of Recorders:		Date o	of Audit:	
Names of Sorters: Time of Audit (Start/End):		Zones	s/Area Audited:	
CLASSIFICATION		VOLUME	WEIGHT	Time Recorded
1. Plastic Bags				
(Weighing	g) 1 st			
	2 nd			
	3 rd			
	4 th			
	5 th			
	6 th			
	7 th			
	8 th			
	9 th			
	10 th			
TC	OTAL			
2. Composite/Multi-layers				
	1 st			
	2 nd			
	3 rd			
	4 th			
	5 th			
	6 th			
	7 th			
	8 th			
	9 th			
	10 th			
	OTAL			

WASTE AUDIT FORM

Time Recorded
Time Recorded
I .

WASTE AUDIT FORM

Name of Organization: Names of Recorders:	Date o	of Audit:		
Names of Sorters: Time of Audit (Start/End):	Zones/Area Audited:			
CLASSIFICATION	VOLUME	WEIGHT	Time Recorded	
5. Hard Plastics				
(Weighing) 1st				
2 nd				
3 rd				
4 th				
5 th				
6 th				
7 th				
8 th				
9 th				
10 th				
TOTAL				
6. PET plastics				
1 st				
2 nd				
3 rd				
4 th				
5 th				
6 th				
7 th				
8 th				
9 th				
10 th				
TOTAL				
Remarks:				
Name of Organization:	VASTE AUDIT FO	RM of Audit:		

VOLUME	s/Area Audited:	Time Recorded
VOLUME	WEIGHT	Time Recorded
		WASTE AUDIT FORM Date of Audit:

ames of Recorders: ames of Sorters:			
ne of Audit (Start/End):	Zones/	Area Audited:	
CLASSIFICATION	VOLUME	WEIGHT	Time Recorded
9. Metals/cans			
(Weighing) 1st			
2 nd			
3 rd			
4 th			
5 th			
6 th			
7 th			
8 th			
9 th			
10 th			
TOTAL			
10. Glass			
1 st			
2 nd			
3 rd			
4 th			
5 th			
6 th			
7 th			
8 th			
9 th			
10 th			
TOTAL			
narks:			
V	VASTE AUDIT FO	RM	
umo of Organization:	Data	of Audite	

Names of Recorders: Names of Sorters:		<u> </u>		
Time of Audit (Start/End):	Zones/Area Audited:			
CLASSIFICATION	VOLUME	WEIGHT	Time Recorded	
11. Paper/cartons/cardboard				
(Weighing) 1 st				
2 nd				
3 rd				
4 th				
5 th				
6 th				
7 th				
8 th				
9 th				
10 th				
TOTAL				
12. Biodegradable waste				
1 st				
2 nd				
3 rd				
4 th				
5 th				
6 th				
7 th				
8 th				
9 th				
10 th				
TOTAL				
emarks:				
V	VASTE AUDIT FO	RM		
Name of Organization:	Date o	f Audit:		

ames of Sorters:	Zanas/Aura A. Prad			
me of Audit (Start/End):		'Area Audited:		
CLASSIFICATION	VOLUME	WEIGHT	Time Recorded	
13. Cigarette butts				
(Weighing) 1st				
2 nd				
3 rd				
4 th				
5 th				
6 th				
7 th				
8 th				
9 th				
10 th				
TOTAL				
14. Textile				
1 st				
2 nd				
3 rd				
4 th				
5 th				
6 th				
7 th				
8 th				
9 th				
10 th				
TOTAL				
marks:				
V	VASTE AUDIT FO	RM		
ame of Organization:	Date	of Audit:		
lames of Recorders:	Dute			

Names of Sorters: Time of Audit (Start/End):		Zones/Area Audited:			
CLASSIFICATION		VOLUME	WEIGHT	Time Recorded	
15. Ceramics					
(Wei	ghing) 1 st				
	2 nd				
	3 rd				
	4 th				
	5 th				
	6 th				
	7 th				
	8 th				
	9 th				
	10 th				
	TOTAL				
16. Hazardous waste					
	1 st				
	2 nd				
	3 rd				
	4 th				
	5 th				
	6 th				
	7 th				
	8 th				
	9 th				
	10 th				
	TOTAL				
Remarks:					
	v	VASTE AUDIT FO	RM		
Name of Organization: Names of Recorders: Names of Sorters:	Date of Audit:				
Time of Audit (Start/End):	: Zones/Area Audited:				

CLASSIFICATION	VOLUME	WEIGHT	Time Recorded
17. Medical waste			
(Weighing) 1st			
2 nd			
3 rd			
4 th			
5 th			
6 th			
7 th			
8 th			
9 th			
10 th			
TOTAL			
18. Footwear			
1 st			
2 nd			
3 rd			
4 th			
5 th			
6 th			
7 th			
8 th			
9 th			
10 th			
TOTAL			
Remarks:			
•	WASTE AUDIT FO	RM	
Name of Organization: Names of Recorders: Names of Sorters:	Date	of Audit:	
Time of Audit (Start/End):	Zone	es/Area Audited:	

CLASSIFICATION	VOLUME	WEIGHT	Time Recorded
19. Others			
(Weighing) 1 st			
2 nd			
3 rd			
4 th			
5 th			
6 th			
7 th			
8 th			
9 th			
10 th			
TOTAL			

Remarks:		

WASTE AUDIT FINAL TALLY FORM

Name of Recorder:	Date:
Marine of Mecorders	Date.

Total Volume of Waste		_	
Collected:			
Total Weight of Waste Collected:			

CLASSIFICATION	VOLUME	%	WEIGHT	%	RANK
1. Plastic Bags					
2. Composite/Multi-layered packaging					
3. Single-layer plastics					
4. Polystyrene (PS)					
5. Hard Plastic (HDPE / LDPE / PP)					
6. PET plastics					
7. Drinking straws					
8. Diapers and sanitary pads					
9. Metals / Cans					
10. Glass					
11. Paper / cartons / cardboards					
12. Biodegradable waste					
13. Cigarette butts					
14. Textile					
15. Ceramics					
16. Hazardous waste					
17. Medical waste					
18. Footwear					
19. Others					
TOTAL					

Remarks / Comments:		