

Borough of Fair Lawn
Clean Communities Program
Storm Drain Marker Program



Date: _____

Crew: _____

Location: _____

Name of Business: _____

Area Type: Residential Business Industrial Park Parking Lot

Type of litter found within 6 feet of storm drain: (check as many as applicable)

- | | |
|--|--|
| <input type="checkbox"/> Grass Clippings | <input type="checkbox"/> Plastic bottles |
| <input type="checkbox"/> Leaves | <input type="checkbox"/> Glass bottles |
| <input type="checkbox"/> Brush / Branches | <input type="checkbox"/> Aluminum / Tin Cans |
| <input type="checkbox"/> Cigarette Butts | <input type="checkbox"/> Newspaper / Magazines |
| <input type="checkbox"/> Clothing / Cloth / Textiles | <input type="checkbox"/> Plastic bags / wrappers |
| <input type="checkbox"/> Fast food containers: _____ | <input type="checkbox"/> Caps / Lids to containers |
| <input type="checkbox"/> Six pack holders | <input type="checkbox"/> Plastic or foam cups / containers |
| <input type="checkbox"/> Motor Oil | <input type="checkbox"/> Straws |
| <input type="checkbox"/> Paint | <input type="checkbox"/> Pet Waste |
| <input type="checkbox"/> Other: _____ | |

Degree of Litter / Pollution: Minor Moderate Severe Extreme

Additional Observations: _____
