

South Carolina Adopt-A-Beach Clean Up Reporting Form

Organization: _____ Number of participating volunteers: _____

Beach Area: _____ Date(s) of cleaning: _____

Total bags of garbage: _____ Estimated Weight Collected: _____ lbs. Estimated Time (hours): _____

ENTANGLED ANIMALS (Dead or Alive) List all entangled animals found during your cleanup. Tell us if they were dead or alive and what they were entangled in (fishing line, net, etc.)

DEBRIS REPORT

Please indicate how many items of each material were collected. Keep track of your collection by entering tick marks on the line and entering the total in the boxes provided.

SHORELINE AND RECREATIONAL ACTIVITIES

(Debris from beach-goers, games, litter, etc.)

<input type="checkbox"/>	Bags _____	<input type="checkbox"/>	Food Wrappers/Containers _____
<input type="checkbox"/>	Balloons _____	<input type="checkbox"/>	Pull Tabs _____
<input type="checkbox"/>	Beverage Bottles(plastic) _____	<input type="checkbox"/>	6-Pack Holders _____
<input type="checkbox"/>	Beverage Cans _____	<input type="checkbox"/>	Shotgun Shells/Wadding _____
<input type="checkbox"/>	Clothing, Shoes _____	<input type="checkbox"/>	Straws/Stirrers _____
<input type="checkbox"/>	Cups, Plates, Forks, Knives, Spoons _____	<input type="checkbox"/>	Toys _____
<input type="checkbox"/>	Fireworks _____	<input type="checkbox"/>	Caps/Lids _____

SMOKING -RELATED ACTIVITIES

<input type="checkbox"/>	Cigarettes/Cigarette Filters _____
<input type="checkbox"/>	Butane Lighters _____
<input type="checkbox"/>	Cigars/Tips _____
<input type="checkbox"/>	Tobacco Packaging/Wrappers _____

DUMPING ACTIVITIES

<input type="checkbox"/>	Appliances (refrigerators, washers, etc.) _____
<input type="checkbox"/>	Batteries _____
<input type="checkbox"/>	Building Materials _____
<input type="checkbox"/>	Cars/Car Parts _____
<input type="checkbox"/>	Large Capacity Drums _____
<input type="checkbox"/>	Tires _____

MEDICAL/PERSONAL HYGIENE

DEBRIS ITEMS OF LOCAL CONCERN

<input type="checkbox"/>	Band-aids/gauze _____	<input type="checkbox"/>	_____
<input type="checkbox"/>	Condoms _____	<input type="checkbox"/>	_____
<input type="checkbox"/>	Diapers _____	<input type="checkbox"/>	_____
<input type="checkbox"/>	Syringes _____	<input type="checkbox"/>	_____
<input type="checkbox"/>	Tampons/Applicators _____	<input type="checkbox"/>	_____

Tell us the most interesting or unusual item you came across:

Did you encounter debris items that you were not able to remove? If so, please list item and its approximate location:

How far into the water did you go to remove litter items?

Please return as soon as possible after your cleaning date to joynercm@dhec.sc.gov or mail to:

**Adopt-A-Beach
c/o DHEC – OCRM
1362 McMillan Ave.
Suite 400
Charleston, SC 29405**

THANK YOU! Remember to Recycle Whenever Possible!