



**I. Waste information**

**1. How well do you feel informed about how to sort your waste?**

*(Only one answer possible)*

Very well informed	Fairly well informed	Rather poorly informed	Poorly informed
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**2. Where can you find information about how to sort your waste?**

*(Several answers possible)*

Website of collector	Leaflets distributed to the mailbox
Website of municipality	Information on containers
Local newspaper	« Waste consultants »
Bilboards	TV announcement/ advertisement
Other: <i>(please specify)</i>	

**3. For paper and cardboard waste, how well do you feel informed about what to do with it?**

*(Only one answer possible)*

Very well informed	Fairly well informed	Rather poorly informed	Poorly informed
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**4. In what form was this information about paper and cardboard waste provided to you?**

*(Several answers possible)*

Website of collector	Leaflets distributed to the mailbox
Website of municipality	Information on containers
Local newspaper	« Waste consultants »
Bilboards	TV announcement/ advertisement
Other: <i>(please specify)</i>	No information was provided

**II. Waste management services**

**4. Do you use waste management services provided by your municipality?**

Yes	No
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**ONLY if Q5 is "Yes":**

**Q5a. Overall, how satisfied or dissatisfied are you with the waste management services provided by your municipality?**

*(Only one answer possible)*

Very satisfied	Somewhat satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Very dissatisfied
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**Q5b. Please indicate to what extent you agree or disagree with the following words describing the waste management services provided by your municipality**

*(Only one answer possible per line)*





	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Reliable					
High quality service					
Effective					
Practical					
Good service for money					
Transparent					

### III. Waste sorting

#### 5. How regularly do you sort the waste generated in your shop/ business?

(Only one answer possible)

Always	Very often	Sometimes	Almost never	Never
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#### 6. How easy do you consider the following actions?

(Only one answer possible per line)

	Very easy	Easy	Neither easy nor difficult	Difficult	Very difficult
Sort glass					
Sort paper & cardboard					
Sort lightweight packaging					
Reduce the waste produced in your shop/ business					

#### 7. Why do you think the above mentioned activities are easy or difficult?

Sort glass:
Sort paper & cardboard:
Sort lightweight packaging:
Reduce the waste produced in your shop/ business:

#### 8. Why do you sort paper and cardboard waste generated in your shop/ business?

(Several answers possible)

It can be recycled	It is a legislative requirement/ municipality's instruction
We can sell it and get some revenues	We will get a fine if we do not sort paper
It is easy to sort paper	We do not sort
Other (please specify)	

#### 9. How do you manage your paper and cardboard waste?

We use the street containers (same as for private households)
Through individual contract with a waste management company
It is managed centrally by the business headquarters
Other (please specify)





Empty rectangular box for identification or contact information.

**10. Please indicate to what extent you agree or disagree with the following statements**

*(Only one answer possible per line)*

	Strongly agree	Agree	Neither disagree nor agree	Disagree	Strongly disagree
Waste production is a major environmental issue.					
Waste reduction is everybody's business.					
Sorting waste is important.					
Separating glass, paper & cardboard and lightweight packaging from the residual waste is important.					

**IV. Other information**

**11. In which municipality is your shop/ business located?**

Empty rectangular box for municipality name.

**12. What is your age?**

*(Only one answer possible)*

Under 18	18 – 24	25 – 34	35 – 44	45 – 54	55 – 64	65 or older
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**13. What is your position in your company?**

Horizontal line for text input.

**14. How long has this shop/business been operating?**

*(Only one answer possible)*

Less than 6 months	6 months – 1 year	1 - 2 years	3 – 5 years	More than 5 years
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**15. How long have you yourself been working in this shop/business?**

*(Only one answer possible)*

Less than 6 months	6 months – 1 year	1 - 2 years	3 – 5 years	More than 5 years
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**16. Do you have any other comments, questions, or concerns?**

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