

Your FOOD WASTE REVIEW

Don't include non-food items such as plastics, paper or cardboard in the food waste buckets.



Business name: _____

Start date: _____

End date: _____

- > The three food waste types are to be recorded **each day**.
- > Record your food waste weight in kilograms (kg).

Food that is damaged or out of date, such as spoiled vegetables



Spoilage

Food that is thrown away during preparation, such as offcuts



Preparation waste

Food that is left on customers' plates, such as chips and garnishes



Plate waste

Day 1

Total meals served:

DAILY TOTAL: _____

Day 2

Total meals served:

DAILY TOTAL: _____

Day 3

Total meals served:

DAILY TOTAL: _____

Spoilage

Preparation waste

Plate waste

Day 4

Total meals served:

DAILY TOTAL:

Day 5

Total meals served:

DAILY TOTAL:

Day 6

Total meals served:

DAILY TOTAL:

Day 7

Total meals served:

DAILY TOTAL:

WEEKLY TOTAL: