FATS, OILS, GREASE (F.O.G) Plumbing Application Form

PERMIT NUMBER:

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| --- | --- | --- |
| TYPE OF WORK | | |
| COMMERCIAL | | |
| JOB SITE INFORMATION AND LOCATION | | |
| Job Address: | | |
| City/State/ZIP: | | |
| Subdivision: | Lot: | |
| DESCRIPTION OF WORK | | |
|  | | |
| BUSINESS NAME | | |
| Name: | | |
| Address: | | |
| City/State/ZIP: | | |
| Phone: ( ) | Fax: ( ) | |
| CONTRACTOR | | |
| Business name: | | |
| Address: | | |
| City/State/ZIP: | | |
| Phone: ( ) | | Fax: ( ) |
| CCB license. no.: | | |
| Print Name: | | |
| Signature Date | | |

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| --- | --- |
| CHECKLIST | |
| Site Plan/Floor Plan/Schematic |  |
| New  Retrofit |  |
| Hydro-Mechanical  Gravity |  |
| Manufacturer’s “Cut Sheet” |  |
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| LIST OF ALL FIXTURES TO BE CONNECTED TO GREASE INTERCEPTOR: | FIXTURE UNITS |
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