Food Service Establishment Grease Interceptor/Grease Trap Verification Form

This form is to be used to document the estimated volume of a food service establishment’s existing grease interceptor or grease trap. This form must be completed by a NC permitted grease waste hauler, a NC licensed plumber, or a NC professional engineer and returned to SRU.

Facility Name: ____________________________________________________________________

Type of device (check one) ____ Outdoor, in-ground interceptor ____ Indoor, in-floor grease trap

Estimated volume (gallons) ________________

Method Used (gallons of waste removed, device dimensions, etc.)________________________________________________________

_________________________________________________________________________________

Name of Evaluator (please print) __________________________________________________________

Signature ____________________________________________________________

Company _________________________________________________________________

Phone Number ______________________________

Facility Representative ___________________________________________________________

Title ______________________________

Please submit the completed form to:

Salisbury-Rowan Utilities
FOG Program
132 N. Main Street
Salisbury, NC 28144
Or
FAX: (704) 638-8481

Note: A form provided by the company performing the evaluation may be submitted in lieu of this form as long as the required information is included.