

FATS, OILS, AND GREASE (FOG) CONTROL PLAN



Physical Address: Auburn City Hall Annex, 2nd Floor 1 East Main Street Mailing Address: 25 West Main Street Auburn, WA 98001-4998 Webpage & Email:

www.auburnwa.gov
permitcenter@auburnwa.gov

Phone and Fax: Phone: 253-931-3090 Fax: 253-804-3114

Nar	ne of Facility														
Nar	me of Owner		Phone						ail						
	ne of Manager							Em							
		<u> </u>			=	an I									
	Mailing Address Eacility Address														
	cility Address					1	1								
	idlord/Property nager Name						Phone								
	<u>-</u>	I.													
	TYPE OF FACILITY														
	Full Service Restaura	ant	☐ Hospital	☐ Ice Cream Shop				☐ Coffee Shop							
	Fast Food Restauran	t	☐ School / College		Club / Org	ganization		☐ Convenience Store							
	Bakery		☐ Nursing Home	☐ Grocery Store				☐ Other:							
		•		Į.											
Sea	ating Capacity		Days of Operation	Sun		Mon	Tues	Tues Wed		Thurs	Fri	Sat			
Nur	mber of Employees		Days of Operation												
BEST MANAGEMENT PRACTICES															
Check each of these Best Management Practices that you and your staff actively use to prevent FOG discharge to the sanitary sewer system.												tem.			
	Train kitchen staff in		Proper food waste disposal (in trash, not down drain)												
	Post "no grease" siç		Water Temperature less than 140°F												
	Collect waste fryer for recycling		Dry wipe or scrape pots, pans, and dishware prior to washing												
	Routine maintenand		Scrape and sweep up spills before using water for clean up												
	Grease covered and		Routine in sink o		l to gre		exhaust s retention								
	Drain screens insta					Eliminate garbage grinders									
	Skim or filter fryer g when necessary	only		Mop water and mat cleaning water discharged to the sanitary sewer											
	Other:														

			TYF	PES OF	FIXTURES (L	JIST (QUANTIT	Y OF EA	(CH)					
	Deep	Fryers		3-Com	partment Sinks		Tilt Kettles		Wok		/ok Ranges			
	Grills	ills 2-Cor		2-Com	2-Compartment Sinks		Garbage	Grinders		Pre-V	Vash Sinks			
	Ovens		1-Compartment Sinks			Dishwash	hers		Mop Sinks					
	Othe	r		Floor Drains										
Do yo	u cur	rently have a gi	ease		PRETRI									
interc	eptor	trap installed?*		orgroups	I device designed	to ron	no from your	□ No vour kitchen wastewater.						
					ocated under the									
	/DEC	OF OPEACE	A D A TEM	FNIT										
1 1	TYPES OF GREASE ABATEME (Check all that apply)			QUANTITY			SERVICES BY							
	☐ Outside Interceptor						Pumper / I	Hauler Na	r Name:					
	☐ Inside Grease Trap (Kitchen)						☐ Self	☐ Haule	☐ Hauler Name:					
☐ Unknown / Other							☐ Self	☐ Haule	ler Name:					
1. Wł	nat is	the size (gallon	s) of the o	device?										
		s the device loc	•											
3. Is the device adequate and functioning as designed? ☐ Yes ☐ No										□ No				
4. Ho	w ofte	en is the device	inspected	d or serv	iced?									
5. Wł	nen w	as the device la	ast service	ed?										
6. If t			•	•	is the waste beir tractor Handles D	•		er cleaning er (specify	•					
7. If a					d/or OUTDOOR d			\ 1		ation fo	r that			
COI	mpan	y:												
8. Do you have receipts available?											□ No			
ma Co Au	ainter pies ıburn	nance service. may be E-Mail , WA 98001; or	Self-clea ed to clea Faxed to	ners ma aningrep o (253) 9	ance and cleaning submit reports ort@auburnwa 31-3053. , the City of Aubu	quar gov; N	terly. ⁄lailed to Er	ngineerin	g Services,	25 Wes	st Main Street,			
		City Code and the business lice		ions of th	nis agreement. Fa	ailure t	o comply w	ith an insp	ection reque	est can	result in the			
Wh	nat wo	ould be your pre	eferred ins	spection	time during regula	ar busi	ness hours	?						
	A.M.	(8-11)	□ P.M.	(1-4)	☐ Other									

Title:

Date:

Owner/Authorized Representative (PRINT):

Signature: