

CITY OF COLUMBUS DIVISION OF SEWERAGE AND DRAINAGE FATS, OILS, and GREASE (FOG) BEST MANAGEMENT PLAN (BMP) FOOD SERVICE OPERATIONS

Facility Name:				
Co	te: FOG BMPP and Grease Interceptor Cleaning Log(s) must be maintained on-site and available for review upon request by lumbus Public Health and Division of Sewerage and Drainage personnel. Grease Interceptor Cleaning Log(s) must be intained on-site and available with the FOG BMP for any facility with grease interceptor(s).			
(Follow attached instructions and use extra sheets if necessary)				
1.	List FOG sources:			
_	Handling /alconing/facility practices to minimize discharge of EOC or buildup in cower lines.			
_	Handling /cleaning/facility practices to minimize discharge of FOG or buildup in sewer lines:			
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3.	List routine inspection and maintenance procedures of the grease interceptor, including any contract cleaning company used and grease interceptor or cleaning frequency. Attach a copy of the manufacturer's Operations and Maintenance procedures for the grease interceptor(s) if available:			
_				
	CERTIFI CATION STATEMENT			
	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION IN THIS BEST MANAGEMENT PLAN FOR FATS, OILS, AND GREASE REDUCTION AND BELIEVE THE INFORMATION IS TRUE, ACCURATE AND COMPLETE.			
_	Authorized Representative Signature Title Date			



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Facility Name:				
Address:				
Grease Interceptor Size(s):				
Additional Comments:				



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Address: Grease Interceptor Size(s): Note: FOG BMP and Grease Interceptor Cleaning Log(s) must be maintained on-site and available for review upon request by Columbus Public Health and Division of Sewerage and Drainage personnel. Grease Interceptor Cleaning Log(s) must be maintained on-site and available with the FOG BMP for any facility with grease interceptor(s).									
					(Make extra copie	es of this form for future use)			
					GREASE INTERCEPTOR CLEANING LOG				
					RETAIN RECORD(S) IN A PERMANENT LOG BOOK FOR A MINIMUM OF 3 YEARS SEPARATE LOG(S) MUST BE MAINTAINED FOR EACH GREASE INTERCEPTOR				
Date Cleaned	Gallons or Percent Of Grease and Solids Removed	Grease Interceptor Condition Mark satisfactory or unsatisfactory (If unsatisfactory, indicate corrective actions)							
		3							
I CERTIFY UN		CERTIFI CATION STATEMENT /E PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION IN THIS GREASE AND BELIEVE THE INFORMATION IS TRUE, ACCURATE AND COMPLETE.							
Authorized I	Representative Signature	Title Date							