



CALENDAR YEAR 2014



www.cityofrockhill.com/fog
803-329-8703

**FOOD SERVICE ESTABLISHMENT (FSE)
FATS, OIL AND GREASE DISCHARGE PERMIT (GDP) APPLICATION FORM**

Note: Please read City of Rock Hill's Fats, Oil and Grease Control Policy and all attached instructions prior to completing this application.

RETURN THIS FORM TO:
**F.O.G. Management Program - Manchester W.W.T.P.
 P.O. Box 11706
 Rock Hill, SC 29731-1706**
 or
Email to FOG@cityofrockhill.com

SECTION A – GENERAL INFORMATION (PLEASE PRINT LEGIBLY)

1. Facility Name: _____ **Store #** _____
Federal ID # / EIN: _____

2. Facility Street Address DO NOT USE P.O. BOX: _____ **Suite** _____
City: _____ **State:** _____ **Zip:** _____
Phone Number: _____ **Website:** _____

3. Business Mailing Address: (if different from 2. above)
Street: _____
City: _____ **State:** _____ **Zip:** _____

4. Owner of Premises (if different than facility):
Name (Mr./ Mrs./ Ms.): _____
Address: _____
Telephone Number: _____
Federal ID # / EIN / Social Security #: _____

5. Designated signatory authority of the facility [See Instructions]:
Name: _____
Title: _____
Address: _____
City: _____ **State:** _____ **Zip:** _____
Telephone Number: _____ **E-mail Address:** _____

6. Designated facility contact:
Name: _____
Title: _____
Telephone Number: _____ **E-mail Address:** _____

SECTION B – FACILITY OPERATIONAL CHARACTERISTICS (PLEASE PRINT LEGIBLY)

1. Please choose one description that best describes your facility.

- | | |
|---|--|
| <input type="checkbox"/> Fast Food Restaurant | <input type="checkbox"/> Nursing Home / ALF |
| <input type="checkbox"/> Full Service Restaurant | <input type="checkbox"/> Hotel / Motel |
| <input type="checkbox"/> Drive Through / Take-out (only) Restaurant | <input type="checkbox"/> School |
| <input type="checkbox"/> Seasonal Restaurant | <input type="checkbox"/> Club / Organization |
| <input type="checkbox"/> Coffee Shop | <input type="checkbox"/> Company / Office Building |
| <input type="checkbox"/> Bakery | <input type="checkbox"/> Ice Cream Shop |
| <input type="checkbox"/> Supermarket | <input type="checkbox"/> Hospital |
| <input type="checkbox"/> Religious Institution | <input type="checkbox"/> Other _____ |

2. Please indicate each item that you currently have or will install in your facility and the quantity of each:

- Grill ____ Grease Tray / Drawer _____ Grease Disposal Method: Trash Recycle Other _____
- Oven _____
- Range / Stove ____ # Burners _____
- Dishwasher ____ Pre Rinse Sink ____ Waste Trap / Basket _____
- Mop Sink / Can wash _____
- Deep Fryer ____ Size _____ Baskets per Fryer ____ Oil Disposal Method _____
- Floor Drains # ____ Screened ____ Screens installed with screws, liquid nail, etc. _____
- Tilt Kettle / Crock Pot ____ Grease Disposal Method _____
- Garbage Disposal _____
- 3 Compartment Sink ____ 2 Compartment Sink ____ Prep Sink ____ Hand Wash Sink ____
- Other Equipment (Hot Dog Rollers, etc.) _____

3. If your facility has grills / ovens which type of exhaust cleaning system do you use?

- Automatic Manual What is the name of the Company Used? _____

4. What is the seating capacity at your Facility? _____

5. What are the days and hours of operation and times of shifts? _____

6. What is the number of employees? _____

7. What is the estimated highest number of meals served during peak meal period? _____

SECTION C – WASTEWATER DISCHARGE INFORMATION (PLEASE PRINT LEGIBLY)

1a. Please check the item which best describes your current wastewater discharge.

- Existing Sewer Discharge Existing Septic System Proposed (New) Sewer Discharge

1b. Estimated monthly wastewater discharge from food service (gallons) _____

2. Are there any changes or expansions planned in the next three years that could alter the wastewater volumes or characteristics? Yes No

3. If yes to question 2. above briefly describe these changes and their effects on the wastewater volume and characteristics. (Attach additional sheets if needed.)

Provide a copy of the indoor and outdoor plumbing floor diagrams, which should include the location of all water meters, facility sewer connections, grease interceptors, sinks, floor drains, dishwashers, restrooms, etc. (see instructions for additional information).

SECTION D – TREATMENT-GREASE REMOVAL DEVICE (GRD) (PLEASE PRINT LEGIBLY)

All GRD shall be easily accessible and shall not be obstructed by landscaping, parked cars, shelving, or other obstructions. Any temporary or permanent obstruction to safe and easy access to the areas to be inspected / monitored shall be removed promptly by the responsible party at the written or verbal request of the City. The costs of clearing such access shall be borne by the responsible party.

1. Do you currently have a grease interceptor or grease trap? (See instructions for definitions)

Interceptor Trap Both None

2. Complete the following for all grease removal device(s):

a. Make and Model: _____

Location (kitchen, parking lot, etc): _____

Capacity of grease removal device (in gallons): _____

b. Make and Model: _____

Location (kitchen, parking lot, etc): _____

Capacity of grease removal device (in gallons): _____

3. If the **INDOOR** grease trap is being maintained on-site, how do you dispose of the waste after cleaning the trap?

Trash Contractor disposes of grease Other- explain: _____

4. If a contractor(s) cleans the Grease Removal Device(s), please list the following:

a. Contractor Name: _____

Address: _____

City: _____ State: ____ Zip: _____

Telephone Number: _____

5. Are there any additives placed in the plumbing, grease interceptor or grease trap (i.e. enzymes, bacteria, etc.?) Yes No

6. If yes to question 5 above, please complete the following and attach Safety Data Sheets (SDS) for each product:

Location additive is added:

Additive Name:

Additive Frequency:

Additional Comments:

SECTION F – RECYCLING (PLEASE PRINT LEGIBLY)

1. Do you or will you recycle the grease produced at your facility? Yes No

2. If yes, which company(ies) recycles your grease or will recycle your grease?

3. Is there a recycling container on-site? Yes No How many and location _____

4. Have pollution prevention measures been implemented? (**Best Management Practices**)

Yes No If yes, explain briefly the pollution prevention measures that have been implemented.

(Attach additional sheets if necessary) _____

ATTACH A COPY OF YOUR MENU TO THE APPLICATION

ATTACH COPIES OF MANIFESTS AND / OR RECEIPTS FOR ANY GREASE REMOVAL DEVICE PUMPING OR MAINTENANCE ACTIVITIES PERFORMED WITHIN THE PAST YEAR

Authorized Representative Statement:

I certify that I have read City of Rock Hill's Fats, Oil and Grease Control Policy and understand that all Food Service Establishments (FSE) must have a Grease Removal Device before discharge of fats, oil and grease to the City of Rock Hill's sanitary sewer system.

I further certify under penalty of law that this document and all attachments were prepared under my direct supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/ or imprisonment for knowing violations.

Print Name: _____

Print Title: _____

Signature Date

FOR City of Rock Hill USE ONLY

Application Complete [] Yes [] No

Date of pre-permit inspection: _____

Permit to be granted _____ or rejected _____

Explanation for rejection _____

Date: _____

Application Reviewer Signature

INSTRUCTIONS & DEFINITIONS FOR APPLICATION FORMS

SIGNATORY AUTHORITY

This refers to legal power delegated by an authoritative body (such as a board of directors) to organizational positions (such as president, managing director, manager) appointing them as agents of the organization for general or specific purposes (such as payment authority, revenue authority, spending authority).

GREASE REMOVAL DEVICE DEFINITIONS

Grease removal device (GRD) refers generically to grease traps and grease interceptors.

Grease interceptor means a device located underground and usually outside of a Food Service Establishment (FSE) designed to collect, contain or remove food wastes and grease from the wastestream while allowing the balance of the liquid waste to discharge to the wastewater collection system by gravity. Interceptors shall be in conformance with the provisions of the [City's FOG Control Policy](#) and the South Carolina Plumbing Code.

Grease trap means a device located in a FSE usually under a sink designed to collect, contain or remove food wastes and grease from the wastestream while allowing the balance of the liquid waste to discharge to the wastewater collection system by gravity. Traps shall be in conformance with the provisions of the [City's FOG Control Policy](#) and the South Carolina Plumbing Code.

INDOOR/OUTDOOR PLUMBING FLOOR DIAGRAMS

Refers to a drawing in sufficient detail to show the location of all kitchen equipment that produces wastewater, floor drains, sewer connections, grease interceptors and appurtenances in the FSE's premises if known or it may be readily ascertained.

DIPPING METHODS (SLUDGE JUDGE READINGS, ETC.)

Refers to devices of measurement approved by the City used to determine levels of grease, solids and total depth of G.R.D.(s).