

APPLICATION FOR FATS, OILS, AND GREASE (FOG) WASTEWATER DISCHARGE PERMIT FOR FOOD SERVICE ESTABLISHMENTS



Instructions: For the City of Lancaster Public Works Utility Services Division (City) to properly evaluate, process, and issue a Fats, Oils, and Grease (FOG) Wastewater Discharge Permit, the applicant must provide a complete permit application.

- The Permit Application Form must be filled out completely. Your application will be returned to you if there is any missing information. Please write *N/A* if the information being requested does not apply.
- The Permit Application must be signed by an official company representative. City will return your permit application if it is not signed by the proper company official.
- The permit application fee is due at the time the permit application is submitted. An application received without remittance will be returned. All required Drawings and Information described in the information brochure must be submitted with this application. Complete the checklist provided to ensure that all requirements are satisfied.

City will not process incomplete Permit Applications. Clearly print or type the information requested.

Section 1- General Information

A. Applicant _____
Corporation or Food Service Establishment Name

B. Doing Business as _____
Food Service Establishment Name used at Sewer Service Address Listed Below

C. Sewer Service Address _____
Street City State Zip Code

D. Phone Number () _____ Fax Number () _____ E-mail _____

E. Responsible Party/Emergency Contact (Required) _____

F. Emergency Contact Phone Number (Required) _____
(24 hour contact number; this should NOT be the phone number to the restaurant)

G. Is your establishment a Sole proprietorship? Partnership? Corporation?

H. Name of Owner, a General Partner, or Chief Executive Officer

Name	Title
Street	City State Zip Code
Phone Number	Fax Number

Section 2 - Facility Operational Characteristics

Please check descriptions that represent your facility.

G.

Type of Food Service Establishment	
<input type="checkbox"/> Fast Food Restaurant	<input type="checkbox"/> Ice Cream Shop
<input type="checkbox"/> Full Service Restaurant	<input type="checkbox"/> Cocktails/Bar
<input type="checkbox"/> Buffet	<input type="checkbox"/> Catering
<input type="checkbox"/> Take Out Facility (only)	<input type="checkbox"/> Food Packager
<input type="checkbox"/> Coffee Shop	<input type="checkbox"/> Meat Processor
<input type="checkbox"/> Bakery	
<input type="checkbox"/> Cafeteria	<input type="checkbox"/> Other

Miscellaneous Information	
Do you wash plates?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Seating Capacity (Inside)	
Seating Capacity (Outside)	

H. Do you currently have a Grease Interceptor? Yes No

(If yes, indicate Type) Gravity Grease Interceptor

Hydromechanical Trap (Grease Trap)

****If you do not have a functioning Grease Recovery Device, you will be required to install one prior to opening****

Section 3 – Certification

I have personally examined and am familiar with the information submitted in the attached document, and I hereby certify under penalty of law that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

I certify that upon issuance of the permit, this firm's operation and its resultant wastewater discharge will achieve consistent compliance with City's FOG Ordinance and applicable regulations, the company will modify its operations, install wastewater pretreatment equipment, or do whatever is necessary to meet discharge requirements.

Certification of Owner, a General Partner, or Chief Executive Officer of FSE (restaurant)

_____	_____
Name	Title
_____	_____
Signature	Date