



EXISTING **HYDROMECHANICAL** FOG CONTROL DEVICE

(FCD) CONDITION ASSESSMENT

DATE: ___/___/_____

PUMP-OUT INFORMATION

The contents (Fats, Oils & Grease, Wastewater and Sludge) of the FOG Control Device(s) being assessed shall be completely pumped-out prior to performing visual inspection

Liquid Waste Transporter Company Name: _____
DERM LWT Permit No.: _____ LWT- _____ Pump-out Date: _____

Required Attachments

- 1) Pump-out receipt
- 2) Disposal Facility Ticket
- 3) FOG Waste Manifest
- 4) Photos of FCD Location
- 4) Photos of FCD inside walls
- 5) Photos of Inlet and Outlet Manholes/Lids

CONDITION ASSESSMENT CERTIFICATION

The Condition Assessment shall be certified by a Professional Engineer or Licensed Plumber

Company Name : _____ Email: _____
 Company Address : _____
 Professional Engineer Licensed Plumber License No.: _____
 Name: _____ Phone No.: _____
 Signature: _____ Date: _____

By signing above, I certify that I performed the assessment and visually inspected the tanks listed below.

FOOD SERVICE ESTABLISHMENT / GDO PERMITTED FACILITY

Name: _____ GDO No.: _____
Address: _____

INSPECTION REPORT

Complete checklist below for each FOG Control Device (FCD). Attach additional sheets if > 4 Tanks

Item No.	Item	Tank 1	Tank 2	Tank 3	Tank 4
		Yes/No	Yes/No	Yes/No	Yes/No
1	Flow control device installed?				
2	Inlet and outlet chambers accessible?				
3	Watertight manholes?				
4	External Sampling Point?				
5	If automatic unit, power provided? If the unit is not automatic answer N/A				
6	For units installed below ground: Infiltration or exfiltration observed?				
7	For units installed above ground: Unit leaking?				
8	If metallic unit, corrosion observed in interior surfaces?				
9	Tanks' material: <input type="checkbox"/> Metal <input type="checkbox"/> Polyethylene <input type="checkbox"/> Other _____				

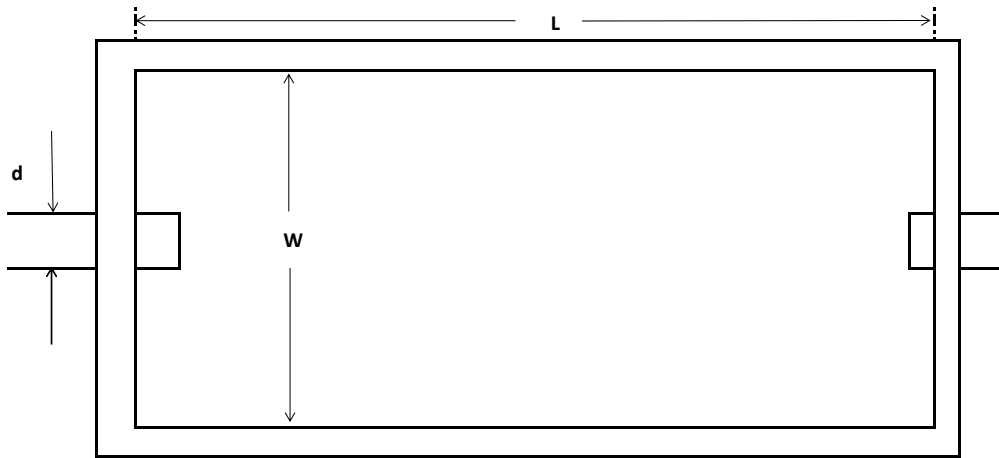
Any deficiencies identified above will be verified by the Department and may result in tank replacement.

Facility Owner Name: _____ Signature: _____

FOR DERM USE ONLY:

GREASE INTERCEPTOR PLAN VIEW (N.T.S)

Show internal components in place, label all parts.



Dimensions (inches)				
	Tank 1	Tank 2	Tank 3	Tank 4
L=				
W=				
H*=				
d=				

*H, is defined as the height of the tank measured from the bottom of the tank up to the outlet invert.

Grease Interceptor Capacity	Tank 1	Tank 2	Tank 3	Tank 4
Manufacturer				
Model				
Capacity (gallons per minute-gpm)				
Grease Retention (lbs)				

ADDITIONAL NOTES

INCLUDE SITE SKETCH HERE (N.T.S)

For outdoor units show building footprint, main streets, and location of the FCD

For indoor units show site plan of main area where the unit is located (i.e. kitchen). Include vertical clearance of the unit