



VERIFICATION OF
GREASE TRAPS AND OIL/SAND INTERCEPTORS

1.) CUSTOMER INFORMATION:

COMPANY: _____

ADDRESS: _____

CONTACT NAME: _____ TITLE: _____

PHONE: _____

2.) TYPE OF TRAPS/INTERCEPTOR

A: GREASE.....OUTSIDE / INSIDE

B: OIL.....OUTSIDE / INSIDE (CIRCLE ALL THAT

C: SAND.....OUTSIDE / INSIDE APPLY)

D: NONE

3.) If "NONE", sign by customer signature below, date and return to the Byron-Gaines Utility Authority.

4.) If you have circled choices A, B, or C, please indicate how often you have the device(s) cleaned and inspected.

*NOTE: Byron and Gaines Township Water and Sewer Ordinance, Section 1406 states that yearly inspection and cleaning of these devices is required.

A: MONTHLY

B: QUARTERLY (CIRCLE ONE)

C: YEARLY

D: OTHER _____

5.) As proof of cleaning and inspection, please send us a copy of your last paid invoice from your environmental inspection company as soon as possible. Thank you for your prompt attention in this matter.

6.) COMMENTS: _____

CUSTOMER SIGNATURE: _____ DATE: _____