

3801 Third Street, Suite 600 San Francisco, CA 94124 Telephone: (415) 695-7310 Fax: (415) 695-7388 www.sfwater.org

FOOD SERVICE ESTABLISTMENT GREASE CAPTURING EQUIPMENT INSTALLATION VERIFICATION FORM

Use this form to submit documentation that your food service establishment (FSE) has installed grease capturing equipment that qualifies the establishment's water account for a 14.2% reduction on the sewer service charge portion of the water/sewer bill.

1. Name of Food Service Establishment:

2. Address of Food Service Establishment:

3. Grease capturing equipment installed:

		If "YES", how many?
Automatic grease removal device (GRD)	YES	
Gravity grease interceptor (GGI – minimum 300 gallons)	YES	

4. Kitchen fixtures connected to grease capturing equipment:

Pot sink(s)	YES
Pre-rinse sink(s)	YES
Soup kettle(s) or similar fixture(s)	YES
Mop sink(s)	YES
Wok station(s)	YES
Exhaust hood filters wash station	YES

5. Copies of equipment documentation required

- Equipment invoice/receipt showing manufacturer and model number
- For GRDs, certification by a recognized third party testing agency to show conformance with the American Society of Mechanical Engineers (ASME) standards ASME 112.14.3 and ASME 112.14.4. This should be provided to you by the equipment manufacturer/vendor.
- "Job card" from San Francisco Department of Building Inspection (or similar document from Port of San Francisco Building Permit Group, if the FSE is located on Port property), indicating final inspection has been completed and approved by a Plumbing Inspector.

6. Water account information

Account number:_____

Account address:

Name on account:

7. Certification statements

I certify that the grease capturing equipment installed is fully operational and properly maintained and serviced, according to the manufacturers' recommendations; and that I can submit copies of maintenance receipts.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure 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 imprisonment for knowing violations.

Name:_____

Title:

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Send the completed grease capturing equipment installation verification form, together with the required copies of documentation to the address below:

SFPUC-WWE/CSD 3801 - 3rd Street, Suite 600 San Francisco, CA 94124 *Attention: FOG Program*

¹ To be signed by an authorized representative of the applicant. An authorized representative may be (a) a principal executive officer or official; (b) a general partner or proprietor; or (c) a duly authorized representative of the individual designated in (a) or (b).