

Please Return to:
 SW Suburban Sewer District
 17840 Des Moines Memorial DR. S.
 Burien, WA. 98148
 Attn: Justin Salgado

Southwest Suburban Sewer District



35 (75 (\$70 (17#33/,&\$7,21#					
\$33/,&\$17#1)250 \$7,21#					
Business Name:				Date:	
Business Owner:				Phone:	
Business Address:					
City:		State:		ZIP Code:	
E-mail:		Cell:		Business Lic#	
FACILITY INFORMATION					
Point of Contact/Manager:			Phone:		Email:
Days/Hours of Operation:				Flatware: Yes No	
Seating Capacity:		Meals Per Hour:		Number of Employees:	
GREASE RETENTION DEVICE (GRD)					
Model:		Gallons:		Pounds:	
Location:	Cleaning Frequency:			Repairs:	
Maintenance Log: Yes No		Log Up To Date: Yes No		Need Log? Yes No	
Cleaning/Disposal Service Provider:					
FIXTURES & EQUIPMENT QUANTITY CONNECTED TO GREASE RETENTION DEVICE (GRD)					
Dishwasher: #	GRD: Yes No	Sinks: #	GRD: Yes No		
Floor Drains: #	GRD: Yes No	Fryers:#	GRD: Yes No		
Grills: #	GRD: Yes No	Mop Sink:#	GRD: Yes No		
BEST MANAGEMENT PRACTICES (BMP)					
Staff Training Program: Yes No		Spill Prevention Plan: Yes No		Water Temp Max 140°: Yes No	
Dry Wipe Pots, Pans, Dishes Before Washing? Yes No				"No Grease" Signage: Yes No	
Recycle Cooking Oil: Yes No		Food Disposal Method: Solid Waste or Food Waste Grinder			
Outside Cooking Oil Grease Storage Covered? Yes No				Date Grease Interceptor was Cleaned Last:	
Routinely Cleaning Kitchen Exhaust System Filter: Yes No					
INSPECTION PREFERENCE					
Time:			Day:		
SIGNATURE					
I declare that I am the applicant involved in this application, and the foregoing statements and answers herein contained and the information herewith submitted are in all respects true and correct to the best of my knowledge.					
PRINT NAME:					
SIGNATURE:				DATE:	
SOUTHWEST SUBURBAN SEWER DISTRICT STAFF ONLY					
Sewer Account #			Fog Account #		
Area-			Recommended Inspection:		