

**CONDITIONAL USAGE- MANUAL OR AUTOMATIC GREASE
RECOVERY DEVICE**

POST AT WASH STATION

CITY OF _____

HOT WATER ONLY PRE-RINSE WASH PROCEDURES

In an effort to control the discharge of fats, oils and greases (FOG) in food service facilities where appropriately sized grease separation devices cannot be installed, the City of _____ authorizes the usage of a hot water-only pre-rinse wash procedure. This procedure, while it is recognized as a second choice over the preferred hydraulic retention an exterior in-ground provides, promotes enhanced FOG removal by isolation from detergents and other chemical emulsifiers in the pre-rinse process.

STATEMENT

(Facility name) _____ located at _____ is hereby authorized by the City of _____ to use the Hot Water Only Pre-rinse Wash Procedure in lieu of exterior grease separation device. This procedure is applicable to this site only and is not transferable to any other location, facility, or ownership.

WARE WASHING PROCEDURES USING 3 or 4 COMPARTMENT SINK

1. Thoroughly scrape all dishes, other utensils and ware into solid waste container prior to pre-rinse.
2. Thoroughly pre-rinse all dishes and cookware in a designated pre-rinse compartment using hot water only. No detergent is to be used in this step. This sink shall be plumbed discreetly and individually to the manual or automatic interior grease separation device with solids strainer.
3. After pre-rinsing, dishes and cookware should be washed in accordance with state restaurant sanitation rules prescribing washing, rinsing and sanitizing. Care must be taken not to transfer detergent from the wash sink back into the pre-rinse sink.

Note: N.C. DEH's hot water heater requirements may need to be altered to adhere to sanitation requirements. Check with _____ County Department of Environmental Services at _____.

For more information contact the City of _____ at: _____

STATEMENT

I (Print Name) _____, understand and hereby agree to follow the Hot Water Only Pre-rinse Wash Procedure, and agree to train operator(s) of wash station(s) to follow and adhere to said procedure. As person in charge of (Facility) _____, I understand and agree that it is my responsibility to control the discharge of fats, oils and greases to the City of _____ collection and treatment system.

(Signature) _____ (Date) _____

Hot Water Only Prerinse Wash Procedure Sample Point Illustration

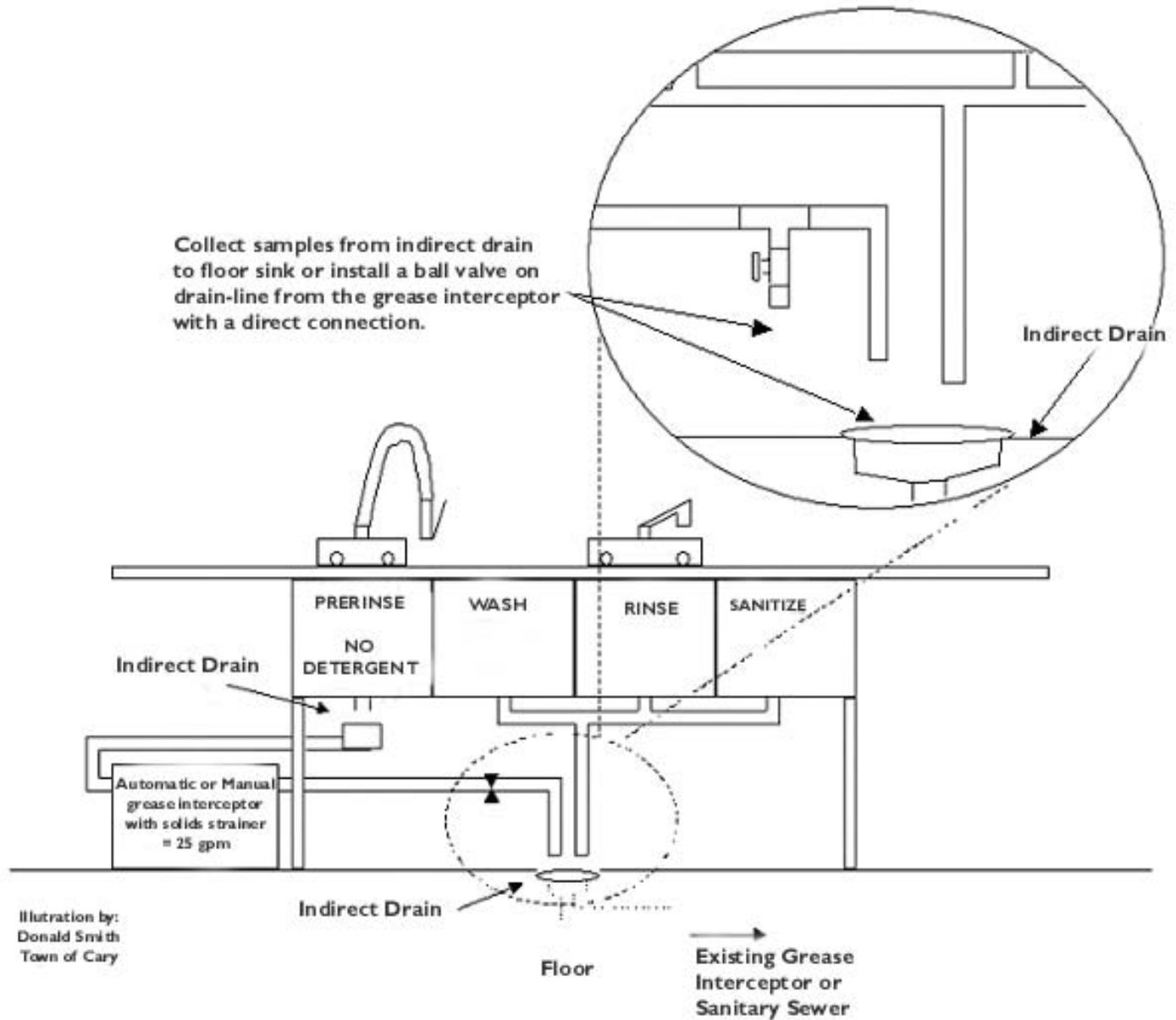


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