

# GREASE SEPARATION DEVICE PRELIMINARY SITE EVALUATION PRE-EXISTING FACILITIES

**City / Town / Authority of** \_\_\_\_\_

Date: \_\_\_\_\_

Site Location:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Site Inspector: \_\_\_\_\_

Owner/Operator Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

**Site Evaluation**

Food type: \_\_\_\_\_  
\_\_\_\_\_

Hours of operation: (actual/proposed): \_\_\_\_\_

Grease interceptor location (actual/proposed): \_\_\_\_\_

Grease interceptor type: in-floor, in-ground, specialty: \_\_\_\_\_

Observation / Comments:

\_\_\_\_\_  
\_\_\_\_\_

**Site Requirements**

\_\_\_\_\_  
\_\_\_\_\_

Site Layout (sketch on back of this page)