



City of Milledgeville
Fats, Oil, and Grease
Program

FOG Packet
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City of Milledgeville

Fats, Oil, and Grease (FOG) Program Information

Authority: Ordinance O-1311-013, Chapter 91 entitled Food Service and Food Preparation Recovery System

Objective: Set forth a minimum and uniform requirement for the treatment and disposal of commercial waste into the sanitary sewer system, and the transportation and ultimate disposal of commercial waste sludge and by products.

Coverage: Applies to any facility that generates commercial wastes, to any person who removes commercial wastes, and to any person who accepts commercial waste for final disposal.

Requirements: Users properly operate and maintain their FOG interceptors and ensure that commercial waste is removed and properly treated, discharged, transported, and disposed of.

New Facilities/Expansion/Renovation: Required to install an approved pretreatment device/interceptor. Must be installed prior to opening or reopening of facilities.

Existing Facilities: Required to install an approved pretreatment device/interceptor when found to be contributing FOG in quantities sufficient enough to cause line stoppages or necessitate increased maintenance on the collection system, remodeling of food preparation or kitchen waste plumbing facility, or change of ownership or lease holder.

Maintenance: Shall be maintained at originators expense. Pumped out at a frequency not to exceed 90 days.

Under Sink Traps: Prohibited without written approval of the city. No less than 50 lbs. must be cleaned monthly.

Manifest: Requires signatures from originator, transporter, and disposer in order to maintain and establish accountability. Must keep manifest on site for a period of three years and make it available for inspection by the city. Must be sent to the city within 10 working days upon receipt of completed copy from the transporter.

City of Milledgeville

Fats, Oil, and Grease (FOG) Program - Interceptor Information

Authority: Ordinance O-1311-013, Chapter 91 entitled Food Service and Food Preparation Recovery System

Specifications: Interior and Exterior FOG interceptors shall conform to the interceptor design requirements as defined in Chapter 91, Sec. 91-7 of the Code of Ordinances of the City of Milledgeville.

Exterior Interceptor Standards:

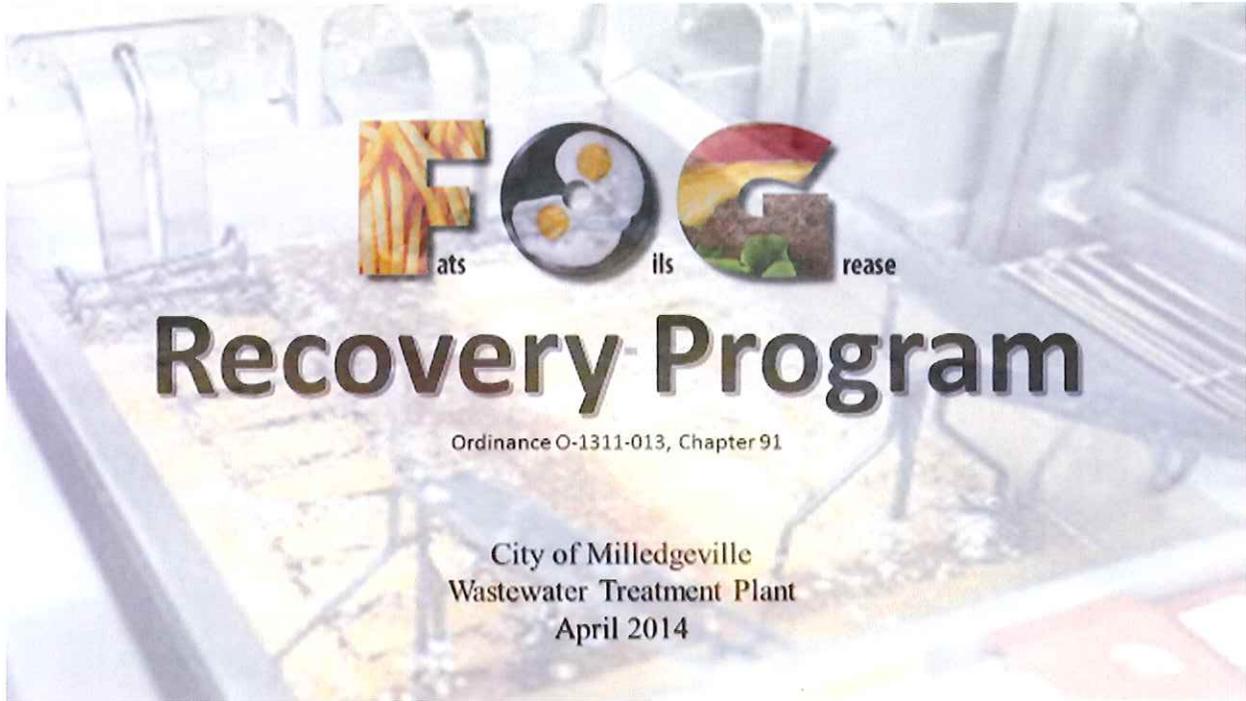
1. Installed by a plumber licensed by the state of Georgia
2. Minimum sizing of 1000 gallons in capacity
3. Located 25 feet from last appliance connected

Interior Interceptor Standards:

1. Rated by the Plumbing and Drainage Institute (PDI)
2. Installed by a plumber licensed by the state of Georgia
3. Minimum capacity of 50 pounds
4. Fifteen feet distance between FOG interceptor and last fresh air fixture

Violation Enforcement:

1. Written Warning – User has ten working days (or ninety days for a notice to install) to complete corrective action and submit evidence to the city.
2. Notice of Violation – After re-inspection, if not corrected, the user has ten working days to completed corrective action and submit evidence to the city
3. Show Cause Hearing – If user fails to complete corrective actions within specified time, the user will be notified by certified mail of a date, time, and place of a hearing. The hearing date shall be within ten days of the date the notice is mailed.
4. Extension or Suspension – Upon hearing, water and wastewater services may be suspend immediately or an additional time of up to fifteen working days (thirty days for interceptor violations) to remedy the violation.
5. The city shall be authorized to impose a civil penalty not to exceed one thousand dollars for each violation.



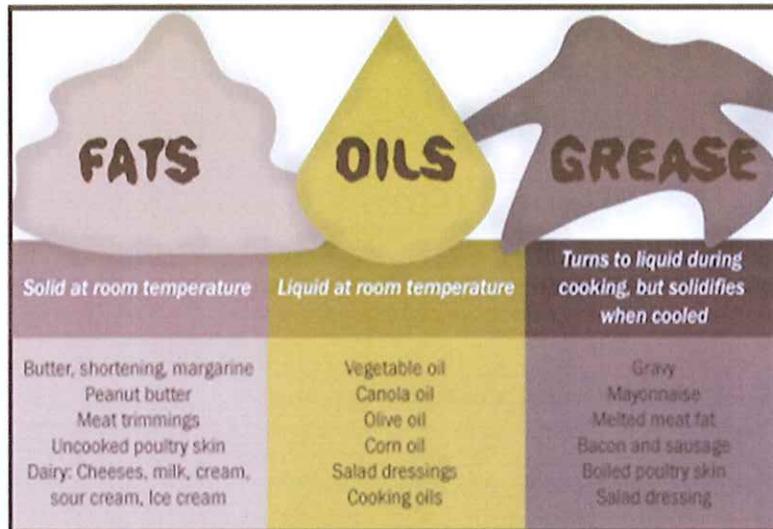
F.O.G. Program Objectives:



- Reduce commercial, industrial and institutional fats, oils and grease discharge into sewer system.
- Prevent sewer blockages from F.O.G, which result in sewage spills.
- Protect public health and the environment.
- Educate business about their responsibilities and the effects F.O.G. can have on them and their community.

What is F.O.G.?

- F.O.G. stands for “Fats, Oils, and Grease.”
- F.O.G. is any combination of animal fats and/or vegetable oils that are used to prepare food, or are found in food.
- It is a byproduct of food or drink preparation.
 - Example: Meat Cutting
- F.O.G coats pots, pans, utensils and equipment after preparing or serving food.



Why is F.O.G. Important?



- When discharged into sewer lines, F.O.G. can accumulate and stick to pipe walls.
- This accumulation causes clogs and eventually overflow in the sewer system which leads to:
 - Increases sewer cleaning and maintenance cost
 - Reduction in sewer pipe life
 - Reduction in pipe capacity
 - Health risks
 - Negative impacts on local businesses
 - Negative impacts on environment

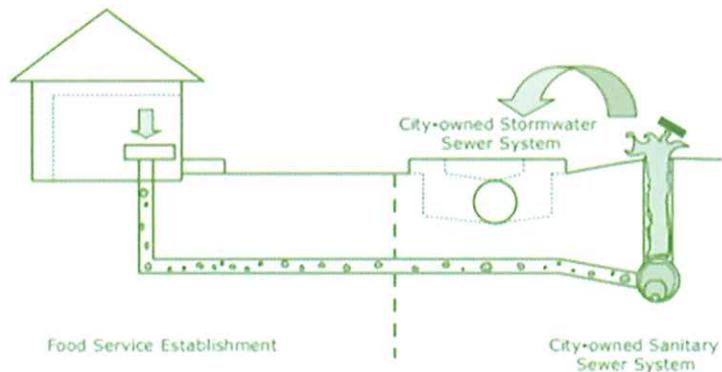
Where Do F.O.G. Blockages Come From?

- F.O.G. occurs when cooking oil and other food grease is improperly disposed of in drains.
- Sources of F.O.G.:
 - Fatty foods
 - Cooking oils
 - Residual food debris
 - Kitchen utensils
 - Dinnerware
 - Deep fryers
 - Leftovers
 - and more!
- The main source of F.O.G. is residential homes and food service establishments.

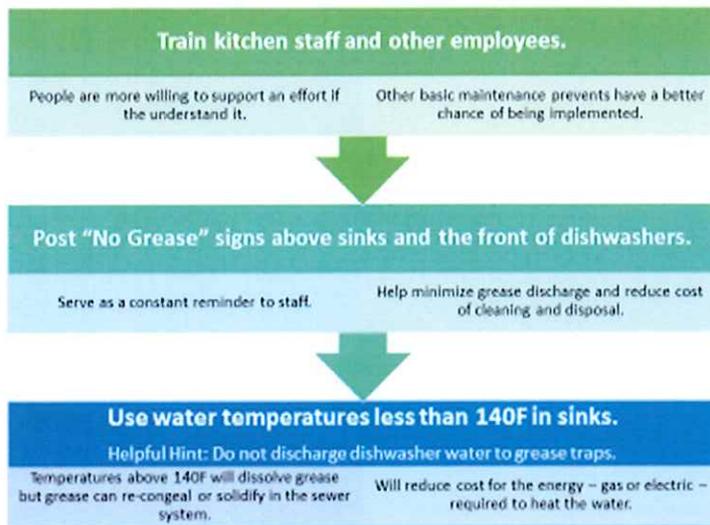


How Do F.O.G. Blockages Occur?

Did you know that nearly 50 percent of all sewage overflows nationwide are caused by people who improperly dispose of everyday fats, oils and grease?



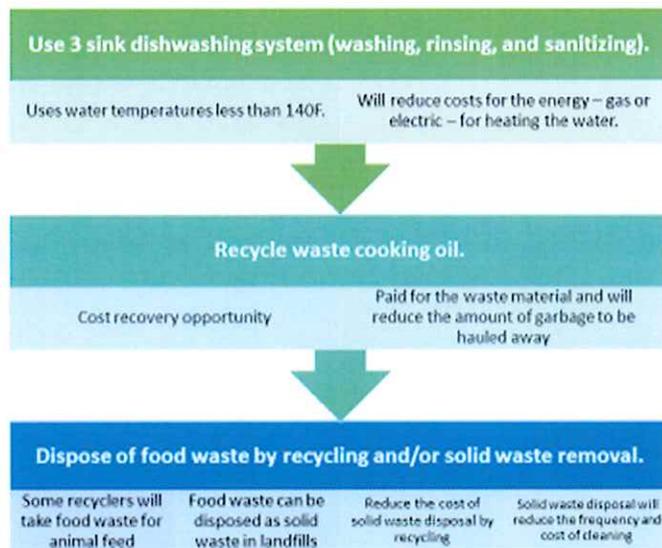
How To Prevent Blockages In Sewer System:



How To Prevent Blockages In Sewer System:



Feed your drain a low-fat diet.
Properly dispose of fats, oils and grease.



How To Prevent Blockages In Sewer System:



Dry wipe pots, pans, and dishware prior to dishwashing

Grease and food that remain in pots, pans, and dishware will likely go to landfill.

Material will not be sent to grease traps or interceptors

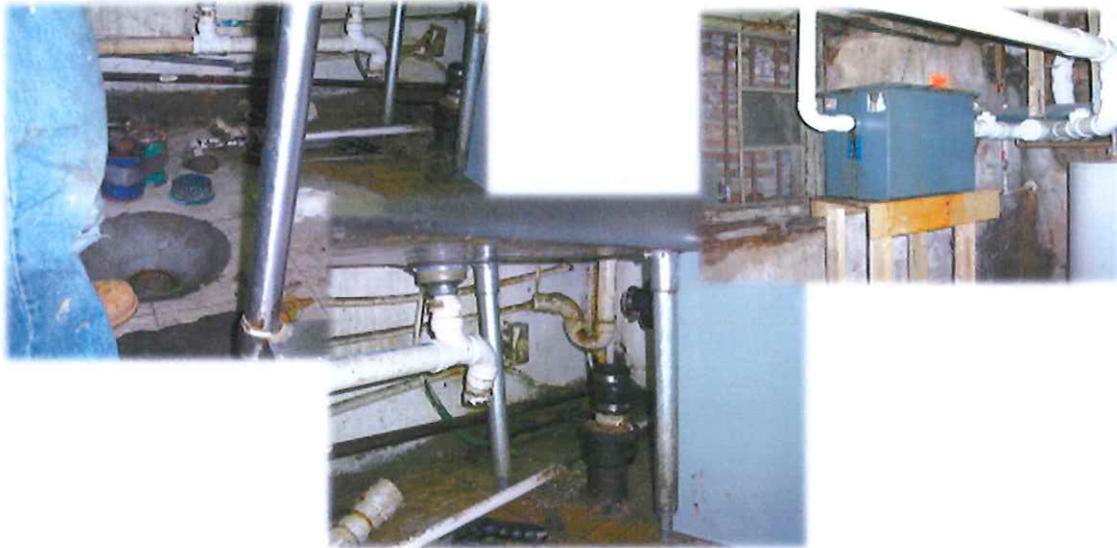
Reduce the frequent cleaning and maintenance of cleaning

F.O.G. In Our Local Community:



- FOG buildup and blockages can occur anywhere.
- Common sources of FOG blockages are businesses that do not properly follow EPA regulations.
- When a sewer line is blocked the water will continue to build up until it overflows out of another connecting area.
- Often the water overflow is not fresh, clean water but rather wastewater.
- All the photos shown were taken in Milledgeville, GA from 2005 to 2014.

F.O.G. In Our Local Community:



F.O.G. In Our Local Community:



Grease Removal Devices (GRD) And Who Needs Them:



- Grease Removal Devices (GRD) include grease traps, grease interceptors, and automatic GRD's.
- Traps and GRDs are small and meant for domestic kitchens and are placed under kitchen sinks to clean the wastewater
- Interceptors are used in the wastewater lines of commercial kitchens and feature a more elaborate chambered systems to help clean large quantities of waste water.
- Any establishment that handles any type of food should install a grease removal device.
- Even small food service providers like coffee shops who serve products with dairy should install a grease trap or interceptor.

Grease Removal Devices (GRD) – Exterior Interceptors Regulations:

Installed by a licensed plumber

Properly sized

Not in areas
subject to
traffic

Adequate
reinforcement
and cover

Minimum
1000
gallons

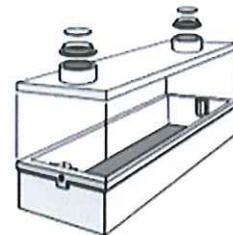
Accessible
for
inspection

On a stable
base

At least 25
feet from
last
appliance
on line

Connected
to all fresh
air fixtures
(sink, etc.)

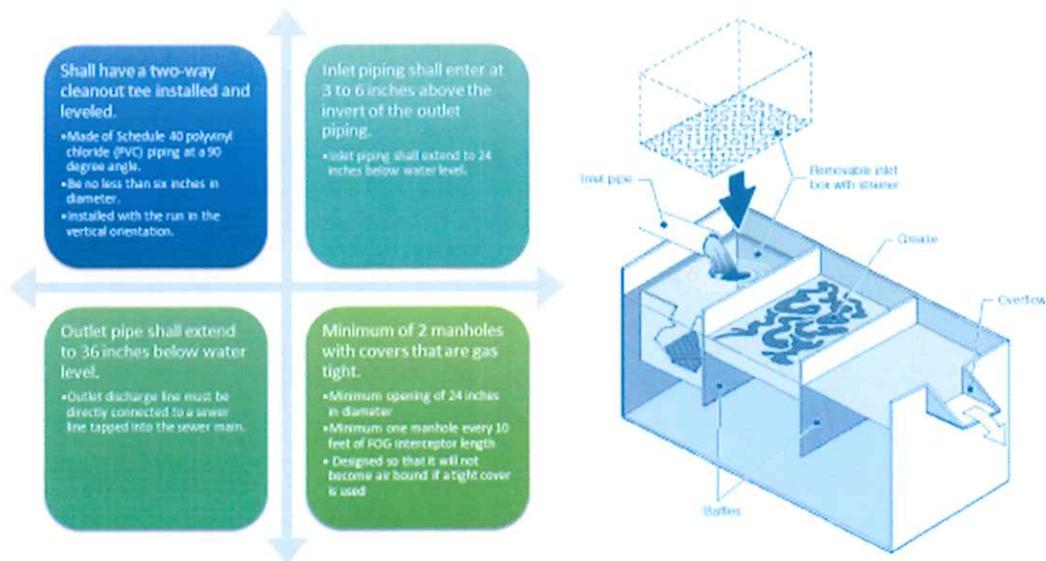
No
wastewater
from sewer
fixtures
(toilets,
etc.)



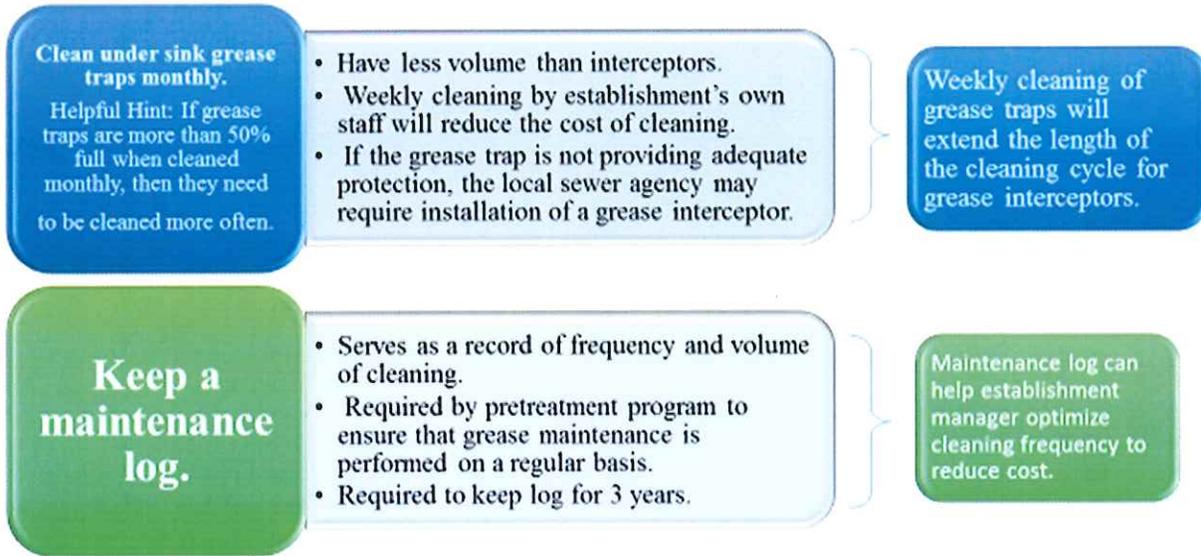
Grease Removal Devices (GRD) – Interior Interceptors Regulations :



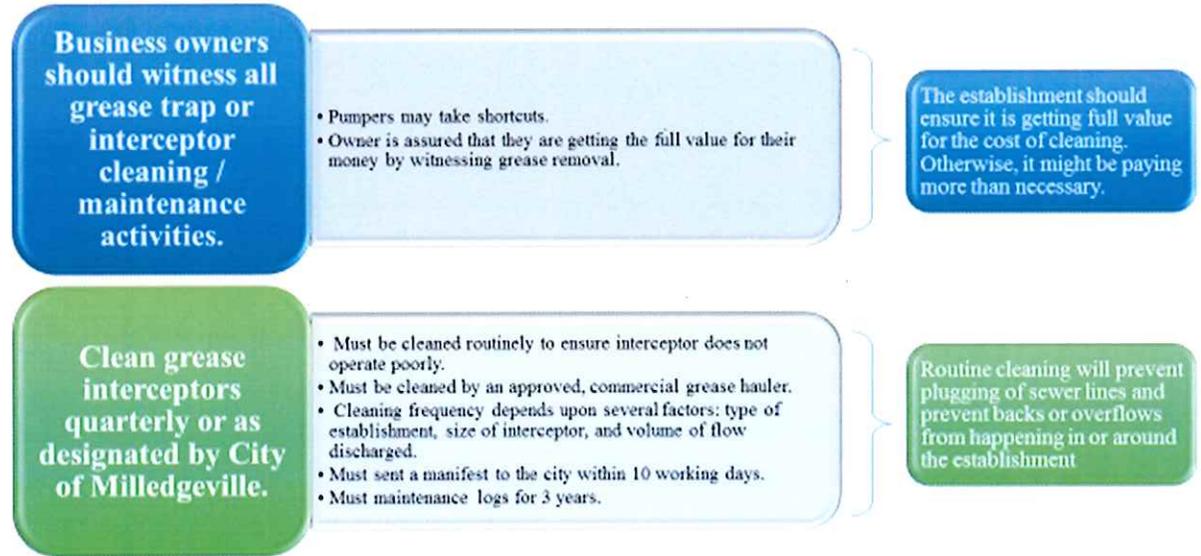
Inlet and Outlet Piping Regulations:



How To Properly Maintain Grease Removal Devices



How To Properly Maintain Grease Removal Devices



Enforcement of F.O.G. Regulations:



1. Inspection and Entry

- FOG inspector shall be permitted to enter the premises of any originator, transporter, processor, disposal site, or food establishment.
- The FOG inspector may review records to determine compliance.
- All food service, maintenance, service facilities, and car washes will be inspected at least once a year.
- Inspections will include:
 - All equipment
 - Used grease and oil bins
 - Grease and oil collection tanks
 - Food processing and storage areas
 - Processes that produce wastewater discharged through grease removal device
 - Interceptor and trap maintenance log book and files
 - Other pertinent data
 - Level of interceptor/trap contents

Enforcement of F.O.G. Regulations:

- The inspector shall record all observations in a written report and any deficiencies shall be noted, including but not limited to:
 - Failure to properly maintain grease trap or interceptor.
 - Failure to report changes in operations or waste water constituents and characteristics.
 - Failure to maintain logs, files, records, access for inspection, or monitoring activities.
 - Any other inconsistency with the program that requires correction.
 - Inability of existing grease interceptor or trap to prevent discharge of grease into the sanitary sewer system.

WARNING
Current actions are
OUT OF COMPLIANCE



Enforcement of F.O.G. Regulations:



2. Monitoring:

- The city may require the user to provide, operate, and maintain at the user's expense appropriate monitoring facilities.
- The city may impose additional limitations and monitoring requirements for the discharge to publically owned treatment works.

Enforcement of F.O.G. Regulations:

3. Violations of Facility Management Practices:

- **Written Warning**
 - User shall have 10 working days to complete corrective action and submit evidence to the city.
 - Warnings will be issued for failure to:
 - Report pumping activities
 - Maintain on site records at all times
 - Maintain the pretreatment device and associated components
 - Maintain inspection area
- **Notice of Violations**
 - Inspector shall re-inspect the user which received the written warning after the original inspection.
 - If user has returned to compliance with all defiances, the inspector shall provide a written notice of compliance.
 - If the user has not take the corrective actions specified, then the inspector shall issue a notice of violation for failure to comply.
 - The user shall have 10 working days to complete corrective action and submit evidence to the city.
 - In the even to continued non-compliance, consecutive re-inspections will be scheduled and appropriate fees shall be charged.



Enforcement of F.O.G. Regulations:



- **Show Cause Hearing**

- When the user fails to initiate or complete corrective action within the specified time period in response to a notice of violation, the director shall notify the user by certified mail to the date, time, and place of a hearing.
- The certified letter will also include:
 - The proposed enforcement action to suspend service
 - The reasons for such action
 - A request that the user show cause why water and/or wastewater service should not be suspended immediately.
- The hearing shall be within 10 working days of the date the notice is mailed.

Enforcement of F.O.G. Regulations:

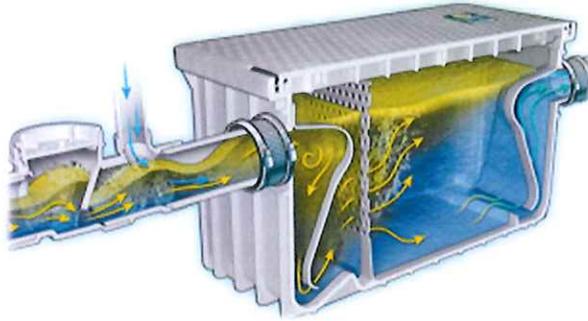
- **Show Cause Hearing**

- The director shall preside as hearing officer.
- Upon hearing, the director may suspend service immediately or extend an additional time of up to 15 working days to remedy the violations.
- The user shall have the right to have or not have an attorney, introduce evidence, and cross examine witnesses at the hearing.
- If the user is not compliance by the end of the extended time, water and wastewater services will be suspended.
- The decision of the hearing officer shall be final.
- The results will be submitted to the user in writing by certified mail.



Enforcement of F.O.G. Regulations:

4. Violations Regarding Interceptor Non-compliance:



- **Notice to Install**
 - If an inspector determines a new facility does not have a pretreatment device, or an existing facility has a pretreatment interceptor that is not functioning properly then the inspector shall issue a Notice to Install a properly functioning pretreatment device.
 - The user shall have 90 working days to come into compliance by installing such a device/interceptor.
- **Show Cause Hearing**
 - If not remedied at the end of 90 day period, as shown by a second inspection, the director shall issue a second notice via certified mail.
 - The second notice will include:
 - Date, Place, and Time of Hearing
 - Request to show cause as to why the water and/or wastewater service to the user should not be suspended immediately
 - The hearing date shall be within 10 working days of the notice being mailed.

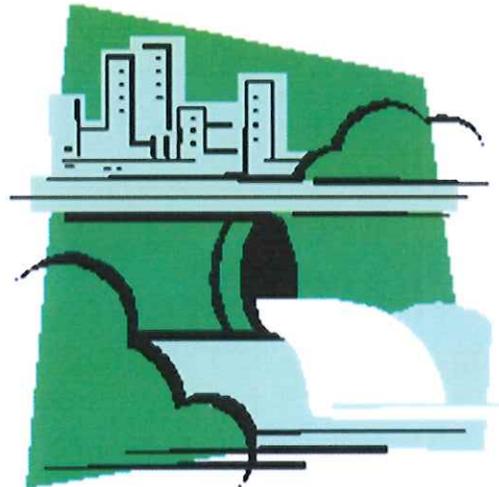
Enforcement of F.O.G. Regulations:

5. Emergency Suspension of Services

- The city may suspend water and/or wastewater service when an actual or threatened discharge may present an imminent or substantial endangerment to the health or welfare of persons or the environment.
- This includes:
 - Sanitary sewer stoppages or overflows
 - Damage to the sanitary sewer collection system
 - Interference to the POTW
 - Violation of a NPDES and/or LAS permit.

6. Reinstatement of Fees and Charges

- The user shall pay all outstanding city fees and other charges prior to restoration of water and/or wastewater services.



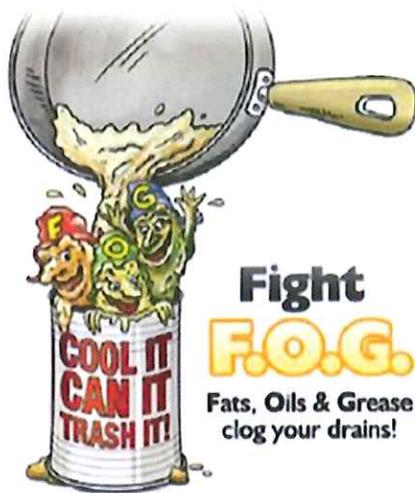
Enforcement of F.O.G. Regulations:



The city is authorized to impose a civil penalty not to exceed one thousand dollars for each violation of the commercial waste handling or pretreatment device/interceptor provisions by an person, originator, or transporter.

O.C.G.A. 12-15-21(d)

F.O.G. Review:

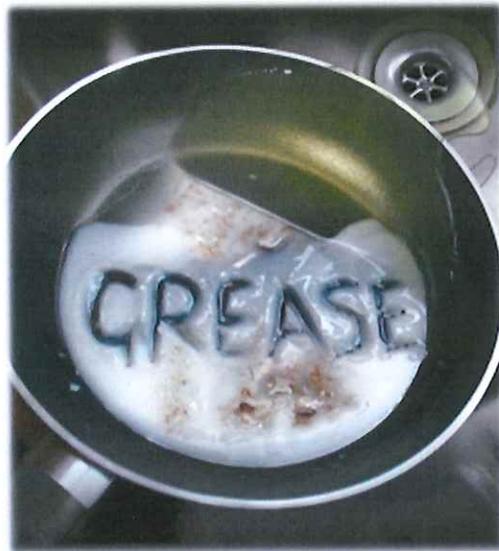


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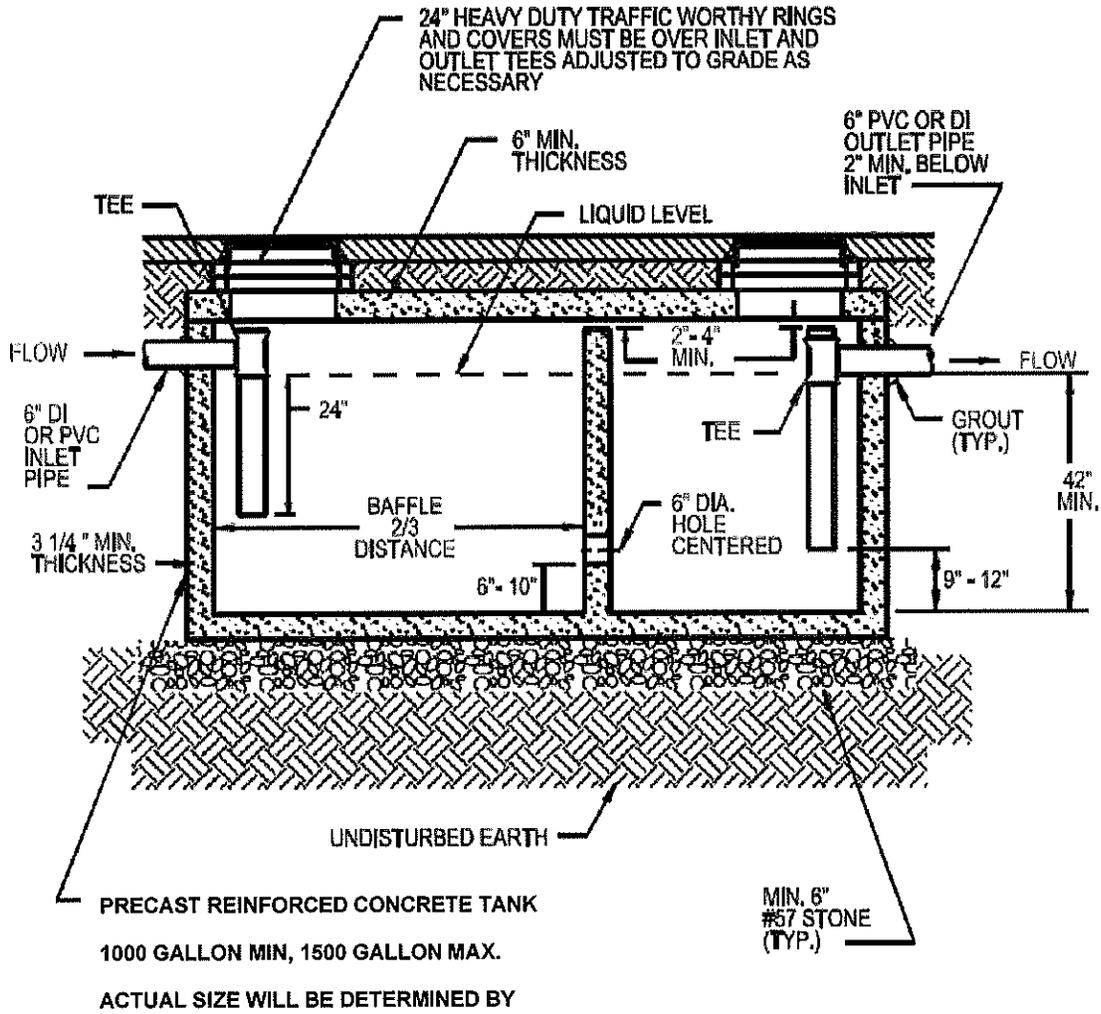
- F.O.G. is any combination of animal fats and/or vegetable oils that are used to prepare food, or are found in food.
- When discharged into sewer lines, F.O.G. can accumulate and stick to pipe walls.
- F.O.G. occurs when cooking oil and other food grease is improperly disposed of.
- Stop F.O.G. by:
 - Training staff
 - Posting "No Grease" signs
 - Keeping water temperature below 140F
 - Use 3 sink system
 - Recycle cooking oil
 - Dispose of food waste
 - Dry wipe pots, pans, and dishes

F.O.G. Review:

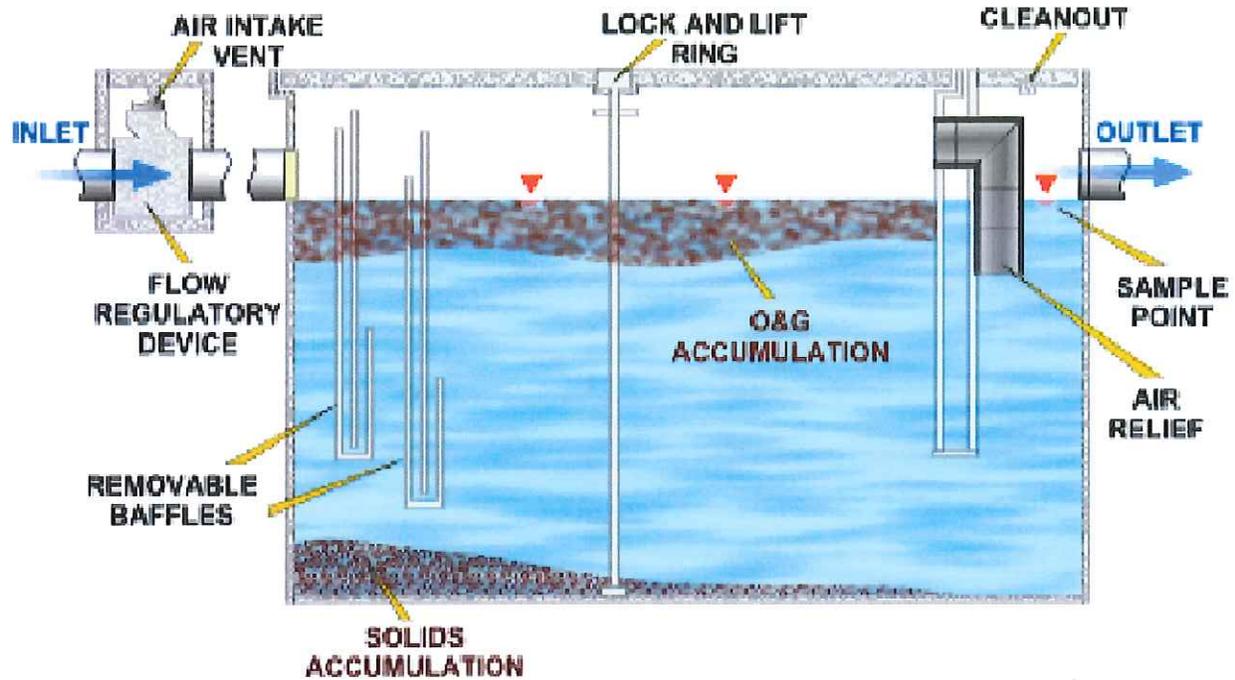
- Grease Removal Devices:
 - Installed by licensed plumber
 - Properly sized
 - Accessible for inspection
 - Connected to fresh water fixtures
- Maintain grease removal devices by:
 - Witness grease removal
 - Clean under sink grease traps monthly
 - Clean interceptors quarterly
 - Keep a maintenance log
- Any establishment that handles any type of food should install a grease removal device.
- Enforcement of F.O.G. Regulations
 - Inspection and Entry
 - Monitoring
 - Violations (Written Warnings & Hearing)
 - Facility Management Practices
 - Interceptor Non-Compliance
 - Emergency Suspension of Services
 - Reinstatement of Fees and Charges



Exterior Grease Trap Interceptor Design Specifications



Interior Grease Trap Design Specifications



50 Lb. Minimum

Must be approved on a case by case evaluation and authorized by the city.



Georgia General Assembly

State of Georgia Senate Bill 568 effective June 1, 2005 (excerpt):

1. All Commercial Waste transporters (grease trap/interceptor pumpers) must have a State of Georgia permit issued by the Environmental Protection Division of the Department of Natural Resources. Their trucks are required to have this clearly visible in two inch letters and numbers. (Example: GA-FOG001-001)
2. All Commercial Waste transporters (grease trap/interceptor pumpers) must provide a State of Georgia manifest for each pump-out at each location.
3. Every facility must keep this manifest on-site for a period of three (3) years.
4. Every facility will be inspected for compliance by the City of Milledgeville Water and Sewer Pretreatment Department.

In accordance with the City of Milledgeville's Ordinance O-1311-013, Chapter 91 entitled Food Service and Food Preparation Recovery System, every facility shall provide to the City of Milledgeville, within the first 10 days after grease trap/interceptor pumping, a copy or fax of each Manifest.

For additional information, please visit www.georgiafog.com or contact the City of Milledgeville's Water and Sewer Commission's Pretreatment Department via phone or fax at:

Phone: 478-414-4059

Fax: 478-414-4057



City of Milledgeville
Wastewater Treatment Plant
211 Highview Road
Milledgeville, GA 31061
(478) 414-4059 Main
(478) 414-4057 Fax

State of Georgia

Commercial Waste Haulers for the City of Milledgeville Area

FOOD SERVICE Grease Traps, Interceptors, and Recycle Oil Bins:

American Protein	770-886-2250
Apex Environmental Services	513-392-4903
Atlantic Pit Services	770-962-1811
Birmingham Hide & Tallow Co.	205-281-2971
Commercial Waste Management	770-623-6979
Georgia Green Environmental	912-632-8891
Grease Masters Unlimited	478-447-2725
Griffin Industries (Darling & Boca)	478-290-1702
Hulsey Environmental	770-536-1161
Industrial Services, Inc.	404-346-6866
January Transport	615-242-3787
Rapid Rooter Sewer & Drain Service	706-543-1234
Ricky Heath Plumbing Company	478-738-0882
Southern Green Industries	404-219-9709
Valley Proteins	800-871-3406
Watson Plumbing	478-788-0292

24 HOUR NOTICE REQUIRED BEFORE PUMPING!

Call Amanda Martin Akins, Pretreatment Coordinator, at (478) 414-4059.

For additional information, please visit www.georgiafog.com

Refer to State of Georgia Senate Bill 568, effective June 1, 2005

Refer to City of Milledgeville Ordinance O-1311-013, Chapter 91
entitled Food Service and Food Preparation Recovery System

NOTICE

THIS IS A COPY OF THE MANIFEST FORM FOR THE STATE OF GEORGIA AS MANDATED THAT EPD CREATE A UNIFORM STATE WIDE MANIFEST.

YOU ARE ALLOWED TO ADD YOUR LOGO AND ADDRESS TO THE TOP OF THE PAGE AND YOU ARE ALLOWED TO PRE-FILL IN THE INFORMATION IF YOU ARE THE HAULER AND DISPOSAL LOCATION. SOME INFORMATION MIGHT NOT PERTAIN TO YOUR BUSINESS SO YOU DON'T HAVE TO INCLUDE IT. PLEASE REMEMBER THAT YOU WILL BE GETTING A FOG PERMIT NUMBER SO THAT WILL NEED TO BE ON THIS FORM ALSO BEFORE YOU GO AND HAVE SOME PRINTED.

ALL OTHER INFORMATION IS TO STAY THE SAME AND ADDITIONS ARE NOT ALLOWED UNLESS APPROVED BY EPD.

Company name (Logo) address, phone, etc.

Manifest No. _____

Commercial Waste Manifest

ORIGINATOR INFORMATION

Originator Name _____ Contact Name _____

Address _____ Phone (____) _____

City, State _____ Zip _____ County _____

Customer # _____

Type of Trap: Grease Interceptor Oil/Water Separator Grit/Sand Trap Outside Inside

Other: _____ Trap Condition: _____

Tank #1 _____ gallons Tank #2 _____ gallons Service Frequency _____ Weeks

Tank #3 _____ gallons Tank #4 _____ gallons

Generator Certifications: I hereby certify that the wastes listed under this consignment are not hazardous, as defined in regulations promulgated by the State of Georgia, Dept. of Natural Resources, and that the type wastes and quantity indicated are fully accurate.

Originator Name (Printed)	Signature	Date	Time

TRANSPORTER INFORMATION

Company _____ Driver Name _____

Address _____ Phone (____) _____

City, State _____ Zip _____

FOG Permit #: _____ Truck #: _____

Transporter Certification: I hereby acknowledge receipt of the above listed waste and will transport and dispose of it in accordance with all applicable laws.

Driver Name (Printed)	Signature	Date	Time

RECEIVER/DISPOSAL INFORMATION

Disposal Name _____ Contact Name _____

Address _____ Phone (____) _____

City, State _____ Zip _____ County _____

EPD Approval/Permit # _____ NPDES # _____ LAS # _____

Solid Waste Handling # _____ Industrial Pretreatment Permit # _____

Total Quantity Received Gallons _____

Certification of Receipt: The above waste was received by this facility within the authorized property boundaries and will be processed, disposed of, or recycled in accordance with all applicable laws.

Disposal Name (Printed)	Signature	Date	Time

HAULER GENERATOR DISPOSAL GENERATOR COUNTY or INSPECTOR

Fats, Oils, and Greases (FOG) Program Maintenance Reporting Form Instructions

The FOG Program Maintenance Reporting Form is designed to assist you with keeping your facility up-to-date on inspection, cleaning, and maintenance of your grease trap(s) or interceptor(s). Proper and timely use of this form is essential. Failure to do so may trigger a FOG Inspection by the City of Milledgeville.

Please follow the steps detailed below to ensure you remain in compliance with the goals of the FOG Management Program as careful maintenance of your trap or interceptor will help keep the sanitary sewer system free of unnecessary grease buildup and blockages.

Post the Reporting Form in an obvious location near the trap or on a door on the way out to the interceptor. Use only ink when filling in the spaces.

- Instruct any employee that may inspect, clean, or maintain traps or interceptors on proper procedures.
- Fill in each space per row every time the trap or interceptor is inspected or cleaned.
- Have a manager inspect all skimming and cleanings done by employees and sign off in the signature column. Professional cleanings do not require managerial inspections, but knowing what to expect from the cleaners will help protect you from certain liabilities.
- The City's FOG program requires all grease traps be cleaned monthly and all grease interceptors be cleaned quarterly or more if they are over 25 percent full of grease at the time of cleaning.

When the form is full, mail or fax to City of Milledgeville.

City of Milledgeville: FOG Section
PO BOX 1900
Milledgeville, GA 31061
Phone: 478-414-4059, Fax: 478-414-4057

A new form will be sent to you when we receive your old one.

Remember, implementation of your FOG Management Plan can protect your business from possible fines, penalties, and health-related problems.

If at any time you have any questions about the FOG Program or would like to request FREE technical assistance visit, please contact City of Milledgeville Utilities at 478-414-4059.

**CITY OF MILLEDGEVILLE UTILITIES DEPARTMENT
FATS, OILS, AND GREASES (FOG) PROGRAM
GREASE TRAP ON-SITE REPORTING FORM**

Company Name: _____ Reporting Period: _____ Address: _____

	Date	Maintenance Performed (Inspected, or Cleaned, or Pumped)	Performed By:	Gallons of FOG Removed	Disposed of Location	Managers Signature	Manifest Sent to City (Y/N)
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

Submitted by: _____

Notes & Comments:

Additional copies of this form are available by calling 478-414-4059 Fax 478-414-4057.

**CITY OF MILLEDGEVILLE UTILITIES DEPARTMENT
 FATS, OILS, AND GREASES (FOG) PROGRAM
 On-Site Training Records**

Company Name: _____ Reporting Period: _____ Address: _____

	Date:	FOG Training Performed:	Performed By:	Attendee Name:	Managers Signature	Sent to City (Y/N)
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Submitted by: _____

Notes & Comments:

Additional copies of this form are available by calling 478-414-4059 Fax 478-414-4057.

City of Milledgeville Grease Management Program Initial Customer Interview

Interview Date: _____

Interviewed by: _____

If your business processes, prepares, or otherwise handles food products your facility may be required by the City of Milledgeville to operate and maintain a grease interceptor (or grease trap) that prevents the excessive discharge of fats, oils, and greases to the sanitary sewer system.

Section I – Business Information

1. Applicant: _____
Corporation or Food Service Establishment Name

2. Doing Business as: _____
Food Service Establishment Name

3. Address: _____
Street City State Zip Code

4. Phone Number: () _____ Fax Number: () _____

Email Address: _____

5. Is your establishment a: Sole Proprietorship Partnership Corporation

6. Name of Business Owner, a General Partner, or Chief Executive Officer:

Name Title

Street City State Zip Code

Phone Number Fax Number

7. Facility Contact during Inspections:

Please, check if this is the same person identified in Line 6 or provide the information below:

Name Title

Phone Number

8. Corporate Contact:

Please, check if this is the same person identified in Line 7 or provide the information below:

Name	Title
Phone Number	

Section II – Facility Information

9. Property Owner:

Please, check if this is the same person identified in Line 6 or provide the information below:

Name			
Street	City	State	Zip Code
Phone Number		Fax Number	

10. Building Type: Own Building Rent Building

11. Property Type: Own Property Rent Property

12. Please indicate the business' property lines:

Location	Approximate Distance from Building
Front	
Back	
Left	
Right	

13. Please check the descriptions that represent your facility.

Location	
<input type="checkbox"/> Stand-alone Restaurant	<input type="checkbox"/> Hospital
<input type="checkbox"/> Strip Mall Attached	<input type="checkbox"/> Nursing Home
<input type="checkbox"/> Mall/Food Court	<input type="checkbox"/> Hotel/Motel
<input type="checkbox"/> School	<input type="checkbox"/> Supermarket
<input type="checkbox"/> Club/Organization	<input type="checkbox"/> Church
<input type="checkbox"/> Company/Office	<input type="checkbox"/> Prison
<input type="checkbox"/> Stadium/Amusement Park	<input type="checkbox"/> Other: _____

14. Please provide the seating capacity for your operation:

Seating Type	Number Seated
Maximum Capacity:	Qty: _____
Bar Seating:	Qty: _____
Inside Seating:	Qty: _____
Outside Seating:	Qty: _____
Other: _____	Qty: _____

Section III – Operation Information

15. Please check the descriptions that represent your facility.

Type of Food Service Establishment	
<input type="checkbox"/> Fast Food Restaurant	<input type="checkbox"/> Ice Cream Shop
<input type="checkbox"/> Full Service Restaurant	<input type="checkbox"/> Cocktail Bar
<input type="checkbox"/> Buffet	<input type="checkbox"/> Catering
<input type="checkbox"/> Take Out (Only)	<input type="checkbox"/> Food Packager
<input type="checkbox"/> Coffee Shop	<input type="checkbox"/> Meat Processor
<input type="checkbox"/> Bakery	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Cafeteria	

16. Please indicate operating schedule:

Days of Operation	Hours of Operation				
Sunday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed
Monday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed
Tuesday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed
Wednesday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed
Thursday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed
Friday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed
Saturday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed

17. Please indicate maximum preparation and clean up time for each business day.

Days of Operation	Hours of Operation				
Sunday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed
Monday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed
Tuesday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed
Wednesday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed
Thursday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed
Friday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed
Saturday	Start: _____	Stop: _____	Start: _____	Stop: _____	<input type="checkbox"/> 24 Hours or <input type="checkbox"/> Closed

18. What are the peak hours for your operation? _____

19. How many customers does your operation serve daily? _____

20. Please indicate the status of your operation: Chain Independent
21. Please indicate the type of operation: Sit-down Take-out (Only) Both
22. How many employees does your operation employ at this location? _____

Section IV – Facility Operational Characteristics

23. Please indicate each item that you currently have in your facility and the quantity of each.

Food Processing Equipment			
<input type="checkbox"/> Deep Fryer	Qty: _____	<input type="checkbox"/> Rotisserie	Qty: _____
<input type="checkbox"/> Charbroiler	Qty: _____	<input type="checkbox"/> Stove	Qty: _____
<input type="checkbox"/> Griddle	Qty: _____	<input type="checkbox"/> Wok	Qty: _____
<input type="checkbox"/> Grill	Qty: _____	<input type="checkbox"/> Other: _____	Qty: _____
<input type="checkbox"/> Oven	Qty: _____	<input type="checkbox"/> Other: _____	Qty: _____

Kitchen Equipment			
<input type="checkbox"/> Dishwasher	Qty: _____	<input type="checkbox"/> Kitchen Hand Sink:	Qty: _____
<input type="checkbox"/> Pre-Rinse Sink	Qty: _____	<input type="checkbox"/> Single Compartment Sink:	Qty: _____
<input type="checkbox"/> Mop Sinks	Qty: _____	<input type="checkbox"/> Double Compartment Sink:	Qty: _____
<input type="checkbox"/> Floor Drains	Qty: _____	<input type="checkbox"/> Triple Compartment Sink:	Qty: _____
<input type="checkbox"/> Garbage Disposal	Qty: _____	<input type="checkbox"/> Other: _____	Qty: _____

24. List the make and model number of the dishwasher: _____

25. List the dimensions of the kitchen equipment:

Kitchen Equipment			
<input type="checkbox"/> Dishwasher	Length: _____	Width: _____	Depth: _____
<input type="checkbox"/> Pre-Rinse Sink	Length: _____	Width: _____	Depth: _____
<input type="checkbox"/> Mop Sinks	Length: _____	Width: _____	Depth: _____
<input type="checkbox"/> Floor Drains	Length: _____	Width: _____	Depth: _____
<input type="checkbox"/> Garbage Disposal	Length: _____	Width: _____	Depth: _____
<input type="checkbox"/> Kitchen Hand Sink:	Length: _____	Width: _____	Depth: _____
<input type="checkbox"/> Sink Compartment Sink:	Length: _____	Width: _____	Depth: _____
<input type="checkbox"/> Double Compartment Sink:	Length: _____	Width: _____	Depth: _____
<input type="checkbox"/> Triple Compartment Sink:	Length: _____	Width: _____	Depth: _____
<input type="checkbox"/> Other: _____	Length: _____	Width: _____	Depth: _____

26. List the size of the facility's floor drains: _____

27. How does your facility dispose of cooking grease and deep fry grease? _____

28. How are the grill cleanings disposed of? _____

29. Approximately how much frying or cooking oil is purchased per month? _____ Gallons or Pounds

30. How much oil does the deep fryer hold? _____ Gallons or Pounds

31. How often is the oil changed in the deep fryers? _____

32. How often and how are the fryers cleaned? _____

33. Where is water from the boil out (cleaning) disposed of? _____

34. Describe how other cooking equipment is cleaned, include how often:

Section V – Under Sink (Indoor) Grease Trap Characteristics

35. Does this facility have any indoor in-line or under sink grease traps? Yes No

36. Does this facility have an automatic grease removal device? Yes No

37. How many under sink grease traps does this facility have total? _____

38. Please indicate the capacity for each under-sink grease trap:

Trap 1:

Size: _____ Cleaning Frequency: _____

Dimensions: _____ Manifest Log: Yes No

Last Cleaning: _____

Trap 2:

Size: _____ Cleaning Frequency: _____

Dimensions: _____ Manifest Log: Yes No

Last Cleaning: _____

Trap 3:

Size: _____ Cleaning Frequency: _____

Dimensions: _____ Manifest Log: Yes No

Last Cleaning: _____

39. Who empties or cleans the under-sink grease traps?

Please, check if the facility empties its own under sink grease traps.

Company Name		Contact Name	
Street	City	State	Zip Code
Phone Number		Fax Number	

40. Where is the grease from the under the sink grease traps disposed at? _____

41. Are service receipts available? Yes No

42. Does sanitary wastewater flow to the grease trap? Yes No

Section VI – Grease Interceptor (Outdoor) Characteristics

43. Does this facility have an in-ground grease interceptor? Yes No

44. How many interceptors does this facility have total? _____

45. What is the age of the interceptor(s)? _____

46. List in-ground interceptor specifications:

In-Ground Interceptor			
Size:	_____ gallons, _____ gallons, _____ gallons		
Dimensions:	Depth: _____ ft.	Width: _____ ft.	Length: _____ ft.
	Depth: _____ ft.	Width: _____ ft.	Length: _____ ft.
	Depth: _____ ft.	Width: _____ ft.	Length: _____ ft.
Location(s):	_____		
Date Last Serviced:	_____		
How Often Serviced:	<input type="checkbox"/> Every 6 Weeks	<input type="checkbox"/> Every 12 Weeks	<input type="checkbox"/> Monthly
	<input type="checkbox"/> Bi-Monthly	<input type="checkbox"/> Every 6 Months	<input type="checkbox"/> Once a Year
	<input type="checkbox"/> As needed	<input type="checkbox"/> Other: _____	

47. Who empties or cleans the grease interceptor?

Company Name		Contact Name	
Street	City	State	Zip Code
Phone Number		Fax Number	

48. Where is the grease from the grease interceptor disposed at? _____

49. Are service receipts available? Yes No

Section VII – Grease Container Characteristics

50. Does the facility have a reuse grease container? Yes No

51. List the capacity of each grease container unit:

Unit 1: _____ Unit 2: _____

Unit 3: _____ Unit 4: _____

52. How often is the grease container emptied? _____

53. Who picks up the grease container?

Company Name		Contact Name	
Street	City	State	Zip Code
Phone Number		Fax Number	

54. Is the portable grease container shared with other businesses? Yes No

55. If so, list the names of the other businesses or restaurants that it is shared with:

*****Please attach a copy of your menu to this form.*****

Form completed by: _____ Date: _____

Contact Information: _____

All information on this form will be kept confidential.

Milledgeville

FOOD SERVICE ESTABLISHMENT (FSE) INSPECTION FORM (FOG INSPECTOR)

AUTHORITY: Chapter 91 of the City of Milledgeville's *Food Service and Food Preparation Recovery System Ordinance*

GENERAL INFORMATION

Business Name:

Phone:

Contact Person Name and Title:

Business Address:

Date:

Time Inspection Started:

Time Inspection Completed:

Inspection Item

Compliance Status

Explanation (if required)

NO

1 A training program has been established and signs are posted appropriately (in location and language).

2 All BMPs are installed per plans.

3 The FSE has records of recycling waste cooking oil. All waste cooking oil on site is in a covered grease container for recycling.

4 Water temperature at sinks are measured as less than 140°F (particularly those used for pre-rinsing).

5 FSE scrapes or dry wipes dishes to dispose of food waste to dishwashing.

6 Kitchen drains have adequate screens.

7 The floor appears to be properly cleaned of any FOG.

8 FSE routinely cleans kitchen exhaust filters. (The roof shows no signs of grease and oil from exhaust system.)

9 No indication of illicit dumping (debris or loose screws in drains, missing or altered maintenance logs, etc.).

10 Overall BMPs appear to be operated and maintained properly.

Milledgeville

FOOD SERVICE ESTABLISHMENT (FSE) INSPECTION FORM (FOG INSPECTOR)

NO	Inspection Item	Compliance Status	Explanation (if required)
11	FOG traps are maintained regularly and noted on a maintenance log (list trap size and note the cleaning frequency).		
12	FOG Interceptor is maintained regularly and noted on a maintenance log (note the interceptor size and cleaning frequency).		
13	FOG Interceptor does not include greater than 25% the depth in grease accumulation or in sediment accumulation. (Estimate and record the depths.)		
14	Outdoor FOG storage containers are: 1) covered, 2) do not show signs of overflowing, and 3) protected from discharge to storm drains (storm drain shows no sign of spills).		
15	Manifests from haulers detailing pickup dates / volumes for services completed since last inspection are provided.		
16	Additional Notes:		
Inspector's Name		Signature	Date

Compliant status: N/A = not applicable, C = compliant, V = violation (explanation required), DNC = did not check (explanation required)



City of Milledgeville
Wastewater Treatment Plant
 211 Highview Road
 Milledgeville, GA 31061
 Pretreatment: 478-414-4059
 Fax: 478-414-4057

PRETREATMENT COMPLIANCE EVALUATION
 City of Milledgeville, Ordinance O-1311-013, Chapter 91 (Food Service and Food Preparation Recovery System)

Action Required:	<input type="checkbox"/> Acceptable, No Action Required	<input type="checkbox"/> Conference
	<input type="checkbox"/> Written Warning	<input type="checkbox"/> Notice of Violation

Facility Representative:

Facility Name:

Facility Address:

Contact Phone:	Alternate Phone:
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TYPE of PRETREATMENT DEVICE:	PRETREATMENT DEVICE CONDITION:
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FOG Interceptor:	Inlet Tee:	Outlet Tee:
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Oil/Water Separator:	Baffle Tee:	Outlet Filter:
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Grit/Sand Separator:	Rings & Covers Secure & Accessible:
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VIOLATIONS OBSERVED:	CORRECTIVE ACTION(S) REQUIRED:
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(i) Failure to report pumping activities:	Submit manifest on or before:
(ii) Failure to maintain records on-site:	Correct on or before:
(iii) Failure to maintain pump-out schedule:	Full pump out on or before:
(iv) Failure to maintain inspection access:	Correct on or before:
(v) Failure to maintain 25% rule:	

Additional Comments and/or Requirements:

COMPLIANCE STATEMENT:

Failure to initiate and/or correct the above violation(s) can and will result in the following enforcement actions:
 (1) You shall be required to appear at a Show Cause Hearing.
 (2) Termination of your water and sewer services.

Signature of Facility Representative:	Date: _____/_____/_____
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Signature of Inspector:	Date: _____/_____/_____
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