

WATER POLLUTION CONTROL AUTHORITY

The City of Ansonia 253 Main Street Ansonia, Connecticut 06401 (203) 736-5948

Date:	

Facility Registration for F.O.G. (fats, oil, & grease) Permit

General Permit for the discharge of Wastewater Associated with Food Service Establishments (FSE)

Registration Information (Mailing / Billing address)						
Business Name:	ess Name:					
Mailing Address:						
City/Town	State	e: Zip:				
Business Phone:		Fax:				
Contact person:		Title: Email:				
Please check the appropriate menu classification (Health Dept. License Class):						
Class I	Class III					
Class II	Class IV					
Please choose the one	description that describes t	the facility for which this registration is being made for:				
Fast Food re	staurant	Hospital				
Full Service restaurant		Nursing Home				
Coffee Shop		Club organization				
Bakery		Supermarket				
	Please indicate each item that you currently have in your facility's food preparation, cooking, and clean up area. Please include the quantity of each: If none denote with a zero					
Grill		Tilt Kettle / Crock Pot				
Oven		Garbage disposal				
Dishwasher		3 Bay Pot Sink				
Pre-Rinse sink		2 Bay Pot Sink				
Mop Sink		Single bay Sink				
Deep Fryer		Hand Sink				
Floor drains		Other Equipment (i.e. Wok Station)				
	lease Complete the following for the type of Outdoor In-Ground Grease trap, or Indoor Automatic rease Recovery Unit (AGRU) installed:					
Manufacturer _		Size (gal or lbs.)				
Indoor	-	Automatic				
Outdoor		Location				
What is the disposal me	What is the disposal method for the grease removed from the FOG pretreatment unit:					
Grease from	Grease from AGRU is taken to an approved disposal site					
	Grease from the AGRU is mixed with render able grease					
		s the outdoor tank and disposes grease				

)	ther Establishment						
		Container	(Other)				
)	Name of company that takes, disposes and/or maintains grease/grease trap AGRU						
Company name Phone Number							
)	PLEASE ATTACH A COPY OF YOUR MENU TO THIS REGISTRATION						
	CERTIFICA	TION					
	I certify that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, opt rose persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete.						
	Name: Titl	e:					
	Signature: Dat	e:					
	PLEASE NOTE:						
	Food Service Establishments shall be subject to inspection by Ansonia WP requirements set forth in the General Permit are being met. Inspections nand review of all grease trap / AGRU inspection logs, cleaning and mainte	nay include but not					
	In the event that a Food Service Establishment's grease interceptor or AG analysis during an inspection, Ansonia WPCA will issue a written notice of Preparation Establishment shall take immediate steps to bring the establishment.	violation for non-co	ompliant conditions. The Food ance. After the 30 days is up				
	a re-inspection will be scheduled with a \$50.00 re-inspection fee, to make	sure establishment	is back in compliance.				
	If you have any questions or concerns, contact Superintendent John Toma	sella by phone at (2	203)-736-5948 or by email				