



GREASE TRAP CLEANING & DISPOSAL LOG

Name of Facility: _____

Address: _____

Contact Name: _____ Phone # _____

| Week | Date of Grease Trap Cleaning | Amount of Solid & Grease Removed | Method of Disposal | Managers Signature |
|---------|------------------------------|----------------------------------|--------------------|--------------------|
| Week 1 | | | | |
| Week 2 | | | | |
| Week 3 | | | | |
| Week 4 | | | | |
| Week 5 | | | | |
| Week 6 | | | | |
| Week 7 | | | | |
| Week 8 | | | | |
| Week 9 | | | | |
| Week 10 | | | | |
| Week 11 | | | | |
| Week 12 | | | | |

As a reminder, the permittee is responsible for the proper maintenance and weekly cleaning of the Grease Trap per City of Largo Ordinance, Sec. 23-120

During inspection of the grease trap, the establishment will be required to provide documentation that required cleaning and maintenance is being performed.

Please fax or mail this form quarterly (March, June, September, December) to:

City of Largo, Environmental Control Department

Attn: Patricia Koker

5100 150th Ave. North

Clearwater, FL 33760

Fax: (727) 518-3081

GREASE TRAP MAINTENANCE LOG

| Date of Maintenance Performed | Brief Description of Repairs | Manager's Initials |
|-------------------------------|------------------------------|--------------------|
| | | |
| | | |
| | | |