

GREASE TRAP PERMIT (GTP) APPLICATION FORM

Applicants shall submit a completed form with all required attachments

I. PROJECT INFORMATION

Project Number (Aqua): _____
(Aqua Project Number Format: 00-111-AAA)

II. FACILITY INFORMATION

Maximum Daily Flow Rate: _____ Average Daily Flow Rate: _____

Number of Drainage Fixtures: _____ Facility Area (SF): _____

Operating Information:

No. of days per year: _____ No. of hours per day: _____

No. of days per week: _____ No. of shifts per day: _____

Employees per shifts: _____ Seasonal Operations: From _____ To _____

III. TREATMENT INFORMATION

Size of Grease Trap: _____

Location of Grease Trap: _____

Type of Grease Treatment to be used: _____

IV. CONDITIONS OF APPROVAL

Should this permit be approved, it is conditioned upon the following:

1. The Applicant shall ensure compliance with the requirements of the "Manual for Army Project Services".
2. Please provide Grease interceptor sizing calculations (include list of Drainage Fixture Units), Construction drawings of the proposed pre-treatment unit, and a design/construction schedule.

FOR AQUA ENGINEERS USE ONLY	
GT Permit No.: _____ <i>(Format: 00-111-AAA-B-CCCC-222)</i>	
Grease Trap Application Approved? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Comments: 	
_____ Signature	_____ Title
_____ Print Name	_____ Date