



Town of South Kingstown Restaurant and Food Preparation Establishments Commercial Grease Trap Application

A. General Information

1. Company Name: _____
2. Facility Mailing Address: _____
3. Facility Premise Address: _____
4. Business Phone Number: _____
5. Facility Contact and Phone Number: _____
6. Name of Person in Charge at Business Location and Phone Number: _____

B. Facility Information

1. Seating Capacity: _____
2. Type of Food Being Prepared: _____
3. Details of Kitchen Fixtures:
 - a. Fryolators _____ Yes _____ No *If Yes, How Many:* _____
 - b. Grills or Ovens _____ Yes _____ No *If Yes, How Many:* _____
 - c. Dishwashers _____ Yes _____ No *If Yes, How Many:* _____
 - d. Garbage Disposal Units _____ Yes _____ No *If Yes, How Many:* _____
 - e. Kitchen Sinks _____ Yes _____ No *If Yes, How Many:* _____
 Number of Compartments in each Sink _____
 - f. Dinnerware Pre-Rinse _____ None _____ Sinks _____ Station
 - g. Floor Drains _____ Yes _____ No *If Yes, How Many:* _____
4. Attach a sketch of kitchen showing location of all equipment in kitchen listed in Question 3.
 Grease removal unit must be included, if applicable.
5. Does this establishment have an installed and working grease removal unit? _____ Yes _____ No
 - A. *If yes*, please provide the following information:

Size _____ (gallons)	Manufacturer _____
Indoor _____	Outdoor _____ Automatic _____ Passive _____

B. *If no*, please attach manufacturer's technical information for the proposed grease trap. Be sure specs include type, size and manufacturer. Grease trap size must be approved by a licensed plumber. Please include diameter of waste pipe, sink dimensions and length of drainage period. Automatic grease traps are required for all restaurant/food establishments, where heavy grease discharges are anticipated. In addition, automated grease traps are recommended in lieu of passive grease traps for all restaurant/food establishments. The Town will not approve passive grease traps with a bolted perimeter. Passive traps must have one center bolt for easy access for routine cleanings.

Please submit grease trap shop drawings to Ms. Krystal Furlong, Pretreatment Coordinator, for review and approval prior to purchase. Once grease trap is approved and installed, please call for an inspection. Contact information is listed below.

Phone: 401-788-9771

Fax: 401-789-3070

Email: kfurlong@southkingstownri.gov

Printed Name: _____

Signature: _____

Title: _____

Date: _____

To be filled out by town employee

Shop drawings: _____

Approved: _____

(date submitted)

Inspection: _____

Approved: _____

(date submitted)

