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# Grease Trap/Interceptor Maintenance Log

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| **Permit #** |  | **Business Name** |  |
|  |  |  |  |  |
| **Owner Name** |  | **Address** |  |
|  |  |  |  |  |
|[ ]  ***Interceptor*** | ***Size*** |  | **Device Location** |  |
|[ ]  ***Trap*** |  |  |  |

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| A log indicating each pumping for the previous 24 months shall be maintained by each food service establishment. This log shall be kept in a conspicuous location where it can be inspected by the health department and Township personnel at least one (1) time per year. |

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| **Date** | **Time** | **Serviced By** | **Type of Service*****(Clean/Repair)*** | **Volume Removed** | **Disposal Location** | **Comments** |
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