

GREASE TRAP/INTERCEPTOR MAINTENANCE LOG

RECORD VERIFICATION FORM

Facility Name: _____

Address: _____

Please select one:

- ☐ The grease trap is self-cleaned.
- ☐ The grease trap/interceptor is serviced by:

Company Name _____

Company Phone _____

DATE/TIME	CLEANED BY	Volume in Gallons	DISPOSAL SITE	OBSERVATIONS*
*Examples:	Trap is clean, no issues Trap is broken, piping or baffles missing, needs repair New trap installed			