This certification form must be completed by a "Metro Certified" Grease Waste Hauler or Plumber.

GREASE INTERCEPTOR CERTIFICATION (Form A)

Every food service establishment in the Metro Nashville Department of Water & Sewerage Services' area must have their grease interceptor certified annually, as required by their FOG permit, to verify that all components of the grease control equipment are present and in good working condition. Furthermore, the inspection will identify any structural problems with the grease interceptor.

Facility Name**:**_____Phone #:_____

Address:_____City:_____**,**TN. Zip Code_____

	PASS	FAIL*
1. Interceptor completely emptied and cleaned before inspection?	□	□
2. There is access to all interceptor chambers for cleaning and inspections?	□	□
3. Influent (inlet) T is attached and extends downward at least 2/3 depth of tank?	□	□
4. Effluent (outlet) T is attached and extends downward to within 12" of tank bottom?	□	□
5. Effluent (outlet) T is made of non-collapsible material that does not easily flex or bend (i.e. minimum schedule 40 PVC, etc.), and is secure, not allowing fats, oils or grease to escape around edges?	□	□
6. Interceptor tank does Not have visible holes or leaks?	□	□
7. Mid-wall baffle(s) is secure and operational?	□	□
8. Interceptor maintaining structural integrity?	□	□
9. No Sewer clean-out covers missing or damaged?	□	□

*** IMPORTANT REQUIRED INFORMATION & RESPONSE**: **If the answer to any of the above questions is "Fail", the equipment has failed certification. A statement of the plan of action to be taken, with date to be completed, needs to be provided on the attached sheet under "Response Comments" (attach additional sheets to explain corrective action if necessary):**

Inspector Certification **– This grease interceptor has** □ PASSED □ FAILED **certification.**

I _____ of _____
(print name of inspector) *(print company name)*

certify that the above listed facility has an approximate _____ gallon capacity interceptor. I have examined the interceptor and provided the above information.

_____ _____ _____
(signature) *(date)* *(phone number)*

Facility Owner/Manager Certification

I _____ certify to the best of my knowledge the above
(print name)

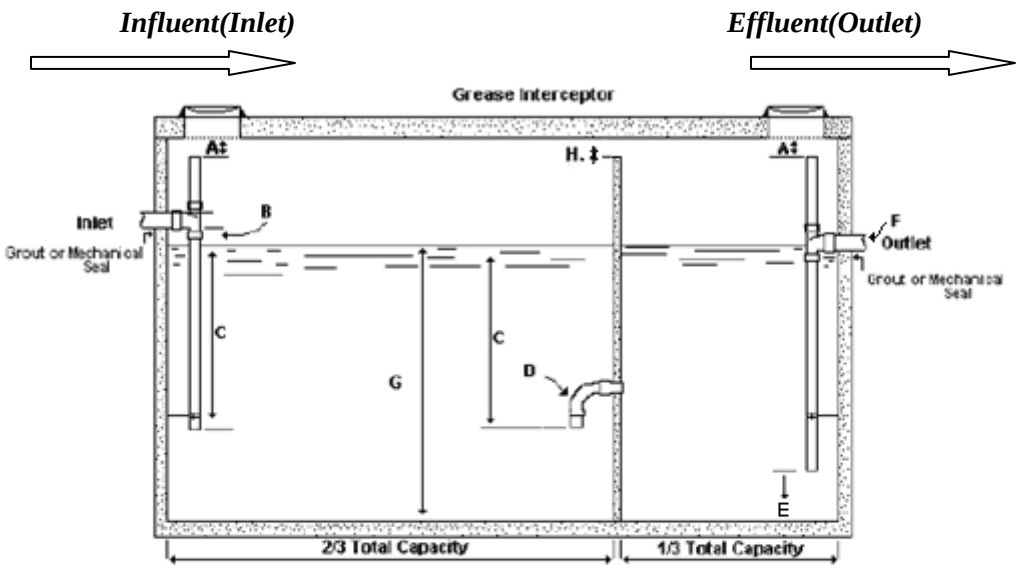
statements to be true and correct. _____ _____
(signature) *(date)*

SUBMIT ***ORIGINAL*** *CERTIFICATION FORM TO:*

Metro Water Services, FOG Control Program, 1607 County Hospital Road, Nashville, TN 37218

MUST COMPLETE ALL INFORMATION

Grease Interceptor Diagram



A.) Minimum 6", but not less than pipe diameter.
B.) Inlet pipe invert to be 2 1/2" above liquid surface.
C.) Inlet pipe to terminate 2/3 depth of water level.
D.) 90 degree Sweep, minimum size - 6" and same depth as inlet pipe
E.) 12" from floor to end of outlet pipe.
F.) Outlet pipe no smaller than inlet pipe, minimum - 4".
G.) Minimum depth of liquid capacity - 42".
H.) Maximum distance from ceiling - 6".

RESPONSE COMMENTS (required if "Fail" checked, identify problem, corrective action and provide planned date of corrective action)