

APPLICATION FOR FATS, OILS, AND GREASE (FOG) WASTEWATER DISCHARGE PERMIT FOR FOOD SERVICE ESTABLISHMENTS



Instructions: For the City of Lancaster Public Works Utility Services Division (City) to properly evaluate, process, and issue a Fats, Oils, and Grease (FOG) Wastewater Discharge Permit, the applicant must provide a complete permit application.

- The Permit Application Form must be filled out completely. Your application will be returned to you if there is any missing information. Please write *N/A* if the information being requested does not apply.
- The Permit Application must be signed by an official company representative. City will return your permit application if it is not signed by the proper company official.
- The permit application fee is due at the time the permit application is submitted. An application received without remittance will be returned. All required Drawings and Information described in the information brochure must be submitted with this application. Complete the checklist provided to ensure that all requirements are satisfied.

City will not process incomplete Permit Applications. Clearly print or type the information requested.

Section 1- General Information

A. Applicant _____
Corporation or Food Service Establishment Name

B. Doing Business as _____
Food Service Establishment Name used at Sewer Service Address Listed Below

C. Sewer Service Address _____
Street City State Zip Code

D. Phone Number () _____ Fax Number () _____ E-mail _____

E. Is your establishment a Sole proprietorship? Partnership? Corporation?

F. Name of Owner, a General Partner, or Chief Executive Officer

Name	Title
Street	City State Zip Code
Phone Number	Fax Number

Section 2 - Facility Operational Characteristics

Please check descriptions that represent your facility.

G.

Type of Food Service Establishment	
<input type="checkbox"/> Fast Food Restaurant	<input type="checkbox"/> Ice Cream Shop
<input type="checkbox"/> Full Service Restaurant	<input type="checkbox"/> Cocktails/Bar
<input type="checkbox"/> Buffet	<input type="checkbox"/> Catering
<input type="checkbox"/> Take Out Facility (only)	<input type="checkbox"/> Food Packager
<input type="checkbox"/> Coffee Shop	<input type="checkbox"/> Meat Processor
<input type="checkbox"/> Bakery	
<input type="checkbox"/> Cafeteria	<input type="checkbox"/> Other

Miscellaneous Information	
Do you wash plates?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Seating Capacity (Inside)	
Seating Capacity (Outside)	

H. Do you currently have a Grease Interceptor? Yes No

(If yes, indicate Type) Gravity Grease Interceptor

Hydromechanical Trap

****If you do not have a functioning Grease Recovery Device, you will be required to install one prior to opening.**

Section 3 – Certification

I have personally examined and am familiar with the information submitted in the attached document, and I hereby certify under penalty of law that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

I certify that upon issuance of the permit, this firm's operation and its resultant wastewater discharge will achieve consistent compliance with City's FOG Ordinance and applicable regulations, the company will modify its operations, install wastewater pretreatment equipment, or do whatever is necessary to meet discharge requirements.

Certification of Owner, a General Partner, or Chief Executive Officer of FSE (restaurant)

Name

Title

Signature

Date

APPLICATION PACKAGE CHECKLIST

Submitted (Please check appropriate box)

PERMIT APPLICATION

FOOD SERVICE ESTABLISHMENT or RESTAURANT

Name: _____

Address: _____

PERMIT FEE REMITTANCE (\$340.00)

Check No.: _____

Acct. No.: 480-3601-100

BUSINESS LICENSE NUMBER

By my signature below, I confirm the items checked above are included in this submittal package and authorize the credit card listed below to be charged if used as the form of payment.

Applicant Signature

Date

Note: This checklist must be submitted with the FOG Wastewater Discharge Permit Application, along with your payment to the City of Lancaster located at 44933, Fern Avenue, Lancaster, CA 93534, Attn: Finance Department. You may pay by cash (in person) or by check payable to the City of Lancaster, or by Visa, MasterCard, or Discover card.

If you are mailing this form and paying by credit card, fill in below:

Name on Credit Card:

Credit Card Number:

Expiration Date:

Security Code:
