Town of Cary

Fats, Oils, and Grease Control Ordinance (Sec 36-183) Food Service Establishment (FSE) Grease Interceptor Service Record Optional Use*

FSE Name: _____

Grease inches inches	.ddress:			
Grease Interceptor (GI)** Service Date: Service Time: GI Size: Gallons (total wetted volume) GI Location: Compartment #1 Compartment #2 Compartment Grease inches inches Solids inches inches Total Waste Removed (gallons): Disposal Location: Established (contracted) Service Frequency:	e Interceptor Service Co	mpany Name:		
Service Date: Service Time: GI Size: Gallons (total wetted volume) GI Location: Compartment #1 Compartment #2 Compartment Grease inches inches Solids inches inches Total Waste Removed (gallons): Disposal Location: Established (contracted) Service Frequency:	e Company Operator/Di	iver Name:		
Service Date: Service Time: GI Size: Gallons (total wetted volume) GI Location: Compartment #1 Compartment #2 Compartment Grease inches inches Solids inches inches Total Waste Removed (gallons): Disposal Location: Established (contracted) Service Frequency:		Cucago Intonom	Atom (CI)**	
Service Time: GI Size: Gallons (total wetted volume) GI Location: Compartment #1 Compartment #2 Compartment Grease inches inches Solids inches inches Total Waste Removed (gallons): Disposal Location: Established (contracted) Service Frequency:	Camrias Datas	Grease Intercep)(OI)***	
GI Size: Gallons (total wetted volume) GI Location: Compartment #1 Compartment #2 Compartment Grease inches inches Solids inches inches Total Waste Removed (gallons): Disposal Location: Established (contracted) Service Frequency:		AM / PM (sirals ana)		
GI Location: Compartment #1 Compartment #2 Compartment Grease inches inches Solids inches Total Waste Removed (gallons): Disposal Location: Established (contracted) Service Frequency:				me)
Compartment #1 Compartment #2 Compartment Grease inches inches Solids inches inches Total Waste Removed (gallons): Disposal Location: Established (contracted) Service Frequency:			sarrons (total wetter void	inc)
Grease inches inches Solids inches Total Waste Removed (gallons): Disposal Location: Established (contracted) Service Frequency:				
Grease inches inches Solids inches Total Waste Removed (gallons): Disposal Location: Established (contracted) Service Frequency:		Compartment #1	Compartment #2	Compartment #3
Total Waste Removed (gallons): Disposal Location: Established (contracted) Service Frequency:	Grease	•		inches
Disposal Location: Established (contracted) Service Frequency:	Solids	inches	inches	inches
Disposal Location: Established (contracted) Service Frequency:				
Established (contracted) Service Frequency:	Total Waste Removed (ga	llons):		
Comments:	Established (contracted) S	ervice Frequency:		
	Comments:			

(Name) ______, (Title) _____

FSE Personnel Confirming Adequate Service:

Note: Signature required if GI is serviced during hours of FSE operation

⁽Signature) ______, (Date) _____, (Time) _____AM / PM

^{*} Alternative service record forms may be used if all of the required information detailed above is contained therein