

GREASE INTERCEPTOR PERMIT APPLICATION

Name of Establishment: _____

Type of Business (e.g., restaurant, cafeteria, daycare, bakery): _____

Physical Address: _____

Owner/Address: _____

Operator/Manager:

Name: _____

Title: _____

Telephone: _____

Maximum Number of Meals Served:

Morning: _____

Noon: _____

Evening: _____

List Days Open Per Week: _____ Hours Open Per Day: _____

Size of Trap: _____ Gallons/Pounds

Depth: _____

Width: _____

Location of Trap: _____

Name/Address of Party Servicing Trap: _____

Please submit application and fee, if required, to:

Huntington Sanitary Board

555 7th Avenue

P.O. Box 7098,

Huntington, WV 25775

New Permit: \$250.00