CITY OF STOCKTON
MUNICIPAL UTILITIES
www.stocktongov.com • (209)937-8700

Submit Completed Form To:
Municipal Utilities Department Representative
City of Stockton, Permit Center
345 North El Dorado Street, Stockton, CA 95202

Grease Interceptor Installation Conditional Waiver for New Construction
(Including Remodels)

I, _____ representing _____
(Business Representative's Name) (Title) (Business Name)

_____
(Business Address) (Mailing Address) (Zip Code)

certify that the business named above does not require a grease interceptor installation because it will have negligible fats, oils and grease (FOG) discharge and insignificant impact to the public sewer; and meets the requirements set forth in section 13.40.130 (B) of the Stockton Municipal Code (SMC), *Waiver of Grease Interceptor Requirements.*

I understand that I am required to submit with this application documentation indicating compliance with all of the following requirements, as applicable:

1. The quantity of FOG discharge as measured or indicated by the size of the food service establishment (FSE) based on kitchen ventilation requirements, water usage, menu, seating capacity, number of meals served, amount of on-site consumption of prepared food, number of plumbing fixtures and other conditions does not indicate that the FSE will materially contribute to existing or potential FOG discharges.
2. The FSE does not appear to be a significant contributor of FOG into the sewer system, which is based on inspection or sampling of FOG discharged from the FSEs sewer lateral to the sewer system (remodels only).
3. The FSE has adopted and implemented adequate Best Management Practices (BMPs) and has no recent history of non-compliance with the City's FOG related regulations and requirements (remodels only).
4. The size, grade and condition of the sewer lines serving the FSE do not indicate that the FSE has discharged an excessive amount of FOG in the sewer, and the history of maintenance, blockages and sanitary sewer overflows (SSOs) in the public sewer lines receiving flow from the FSE do not deviate substantially from those experienced in other adjacent sewer lines.
5. There is no reason to believe that the operations of the FSE will change in the foreseeable future in a manner that may significantly increase the FSE's FOG discharge.
6. There is no other condition reasonably related to the generation of FOG discharges into the sewer by the FSE that will warrant the denial of the conditional waiver in the interest of protecting the public health, safety and welfare.

I understand that, upon issuance of this waiver, I may be required to provide space and plumbing segregation for future installation of a grease interceptor.

I understand that I must comply with all other requirements specified in SMC 13.40 (FOG Ordinance) for this waiver to remain valid.

I understand that this waiver may be revoked by the Director at any time upon his or her determination that any of the terms or conditions for its issuance have not been satisfied or if the conditions upon which the waiver was based have changed so that the justification for the waiver no longer exists.

I understand that, should this waiver be revoked, I must install, within one hundred and eighty (180) days of receipt of notification of revocation, a grease interceptor which complies with SMC 13.40.100, Grease Interceptor Requirements.

I understand that this waiver is not transferable.

I understand that the person signing this waiver warrants that he or she has or has obtained the necessary consent and authority to execute this waiver and to make this waiver binding upon itself.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNED (submit original signature) _____ DATE _____

CONTACT PHONE NUMBER _____

Please Do Not Write Below This Line

☐ **APPROVED** ☐ **REJECTED**

COS REPRESENTATIVE _____
PRINT SIGNATURE DATE

REASON FOR REJECTION: _____

_____

cc: FOG Program Manager, Municipal Utilities Department Doc. # 139037