

City of Greater Sudbury:



Facility Name: _____

Address: _____

Cleaning Frequency:

☐ Daily ☐ Weekly ☐ Bi-weekly ☐ Monthly ☐ Other: _____

Grease Interceptor Service Record

Date	Contractor/Employee Name	Signature	Depth Measurement (cm)			Condition of Grease Trap
			FOG	Sludge	Free Water	
						<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor
						<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor
						<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor
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For more information please contact (705) 674-4455 ex. 3600