



# Fats, Oils and Grease Control Program

Department of Public Works  
200 S. President Street / PO Box 17  
Jackson, MS 39205

## FOG Control Permit

New     Remodel     Change of Ownership

Facility Name: \_\_\_\_\_

Address: \_\_\_\_\_ Jackson, MS \_\_\_\_\_

Owner: \_\_\_\_\_ Phone No. \_\_\_\_\_

Email Address: \_\_\_\_\_

Authorized Representative (if other than owner): \_\_\_\_\_

### Mailing Address (if different from above)

Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_

### Grease Control Device / Sand and Oil Interceptor

Exterior Grease Interceptor Capacity	Automated Interior Grease Trap	Manual Interior Grease Trap	Sand/Oil Interceptor <sup>1</sup>
<input type="checkbox"/> 750 <input type="checkbox"/> 1000 <input type="checkbox"/> 1000 <input type="checkbox"/> 2500 <input type="checkbox"/> 1500 <input type="checkbox"/> 3000 <input type="checkbox"/> _____	Mfg:  Size/Capacity:	Mfg:  Size/Capacity:	Volume (gal):  No. Compartments:

<sup>1</sup>Automotive facilities only

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. The information submitted is true, accurate, and complete to the best of my knowledge.

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
FOG Control Inspector

Application and FOG Control Permit approved:  Yes  No    Permit No.: \_\_\_\_\_

\_\_\_\_\_  
April Sawyer, FOG Program Coordinator

\_\_\_\_\_  
Date

Application Fee:  
\$200.00

Drawing of kitchen layout, or automotive facility layout for sand/oil separators, and plumbing showing location of grease control device(s) and sampling points. Attach calculations to support size of grease control device selected and manufacturer information on the unit.

