

FOOD SERVICE ESTABLISHMENT FATS, OILS, GREASE (FOG) PROGRAM INFORMATION FORM

PLEASE PROVIDE THE FOLLOWING INFORMATION TO BEGIN THE FOG PROGRAM REVIEW TO OBTAIN A FOG PERMIT & MEMORANDUM.

1.	THE FOOD SERVICE ESTABLISHMENT'S (FSE) NAME :
2.	THE FSE'S <u>ADDRESS</u> (INCLUDE SUITE # AND ZIP CODE):
3.	THE FSE OWNER <u>NAME</u> AND APPLICANT/REPRESENTATIVE'S <u>NAME</u> :
4.	THE FSE OWNER/APPLICANT/REPRESENTATIVE'S PHONE NUMBER AND EMAIL ADDRESS :
5.	THE PROPERTY WATER ACCOUNT # AND WATER SERVICE ADDRESS:
6.	PLEASE CHECK THE CONDITION THAT APPLIES TO THIS FSE: OPTION 1: THIS IS A NEW FSE

OPTION 2: THIS IS AN EXISTING FSE (IF CHECKED, CONTINUE TO

QUESTION 6)

7. IF THIS IS AN EXISTING FSE, CHECK ALL STATEMENTS THAT APPLY:

THIS FSE IS GOING THROUGH A CHANGE OF OWNERSHIP

THIS FSE IS GOING THROUGH A CHANGE OF NAME

THIS FSE IS GOING THROUGH REMODELING*

THIS FSE IS GOING THROUGH A CHANGE OF USE

THIS FSE IS CURRENTLY OUT OF SERVICE AND WILL BE REOPENED WITH NO REMODELING

Month: Year:

8. CHECK THE FSE TYPE THAT BEST REPRESENTS YOUR FACILITY:

American-Burger Ice Cream
Bagel Indian
Bakery Italian

Barbecue Japanese/Sushi

Cafeteria/Buffet Korean

Chicken Meat/Carniceria

Chinese Mexican
Coffee Shop Pizza
Cookie Seafood
Deli/Sandwich Steakhouse
Doughnut Vegetarian
French Vietnamese
Greek Other:

9. SPECIFY THE NUMBER OF EACH TYPE OF CURRENT/PROPOSED FSE EQUIPMENT:

Equipment	#	Equipment	#	Equipment	#	Equipment	#
Automatic		Grill		Rethermalizer		3 Compartment	
Dishwasher						Sink	
Broiler		Hood		Rotisserie		Tilt Skillet	
Char Boiler		Kettle		Skillet		Wok	
Deep Fryer		Oven		Smoker		Stove	
Griddle		Pressure Cooker		Steamer			

10. SPECIFY THE NUMBER OF EACH TYPE OF CURRENT/PROPOSED SEATING CAPACITY:

Location	#	Location	#	Location	#
Inside Seating:		Outside Seating:		Other:	

^{*}Note: If remodeling or improvements are planned, please include a digital copy of the facility plans with this application.