



**CONSTRUCTION APPLICATION
ANNUAL OPERATING PERMIT OR EXEMPTION RENEWAL
GREASE INTERCEPTOR AND OIL SEPARATORS
Indian River County Ordinance No. 90-23**



PERMIT NO: 31-62-_____

DATE PAID: _____

FEE PAID: _____

Check the Appropriate Box:

<input type="checkbox"/> New Construction Application (\$150.00 Fee)	<input type="checkbox"/> Variance or Exemption Application Initial (\$50.00 Fee)	<input type="checkbox"/> Annual Operating Permit (OVER) (\$100.00 Fee)	<input type="checkbox"/> Annual Exemption Renewal (OVER) (No Fee Required)
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Name of Establishment: _____

Address: _____
Street City State Zip

Owner: _____ Telephone No.: _____

Mailing Address: _____

Agent: _____ Telephone No.: _____

Type of Establishment: _____

❖ **Complete the section below for new permits, change in ownership, change of use or change in operation by providing the following information:**

- Floor Plan with Equipment Schedule (Attachment)
- Site Plan (Attachment)
- Menu (Attachment)
- Existing: _____
- Proposed Grease Trap: _____

Days of Operation: _____

Hours of Operation: _____

Number of Inside and Outside Seats: _____

Check one of the following service types:

- Full Service
- Single Service
- Other: _____

Describe business activities in detail: _____

Applicant Signature: _____ Date: _____

(OVER)

Have there been changes in business operations since your grease interceptor was permitted or exempted? Yes or No If yes please describe changes below:

Interceptor Capacity (Gallons): (1) _____ (2) _____ (3) _____

Annual Maintenance Conditions:

1. Permit requires that the applicant enter into a contract with a State Approved Wastewater Hauler pursuant to Ordinance No. 90-23 to pump-out interceptor minimally every 6 months or more often as needed to retain grease onsite.
2. A representative of the Florida Department of Health in Indian River County shall be admitted onto the subject premises at reasonable times to inspect the premises and review the records to verify compliance with Ordinance No. 90-23.
3. **Keep copy of pump-out records onsite.**
4. Solvents shall not be used as a method of grease control.

Name of Licensed Service Company: _____

Attach copy of last year's pump-out receipts.

Applicant Initials _____