



GREASE TRAP INSPECTION FORM FOR FOOD SERVICE ESTABLISHMENTS

DATE: _____

RETURN TO: ALBANY PUBLIC WORKS, INDUSTRIAL SAMPLING DEPARTMENT

Final inspection of the food establishments grease trap was completed on the above date at the following location.

New Change of Ownership Change of Permit Holder Remodel

Restaurant Tavern Caterer Mobile Food Unit Institution

Hotel/Motel School Other: _____

ESTABLISHMENT NAME: _____

LOCATION: _____

TYPE OF GREASE TRAP: _____

PERMIT #: _____

PUBLIC WORKS DEPARTMENT APPROVAL **DISAPPROVE** **N/A**

INSPECTED BY: _____ **DATE:** _____