



This certification form must be completed by a "Kingsport certified" Grease Waste Hauler or plumber.

GREASE TRAP CERTIFICATION (Form B)

The City of Kingsport Wastewater Department is requiring that this grease trap certification form be completed annually to verify all components of the grease trap are present and in good working condition.

Facility Name: \_\_\_\_\_ Phone #: \_\_\_\_\_
Address: \_\_\_\_\_ City: Kingsport, TN. Zip Code \_\_\_\_\_
Email Address: \_\_\_\_\_

PASS FAIL\*

- 1. Grease trap completely emptied and cleaned before inspection?
2. There is access to all trap chambers for cleaning?
3. Flow restrictor device is installed (before grease trap or at grease trap inlet)?
4. Flow restrictor device installation is correct (proper flow direction and orientation)?
5. Grease trap is vented (vent on flow restrictor)?
6. Grease trap has NO visible holes or leaks?
7. Baffle(s) (inlet, middle and outlet...depending on design) are secure and operational?
8. Automatic or machine dishwasher is NOT connected to the grease trap?
9. No Sewer clean-out covers missing or damaged?

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\* IMPORTANT REQUIRED INFORMATION & RESPONSE: If the answer to any of the above questions is "Fail", the equipment has failed certification. A statement of the plan of action to be taken, with date to be completed, needs to be provided on attached sheet under "Response Comments" (attach additional sheets to explain corrective action if necessary):

Inspector Certification - This grease trap has [ ] PASSED [ ] FAILED certification.

I \_\_\_\_\_ of \_\_\_\_\_
(print name of inspector) (print company name)

certify that the above listed facility has a \_\_\_\_\_ gallons per minute / \_\_\_\_\_ pound capacity grease trap. I have examined the grease trap and provided the above information.

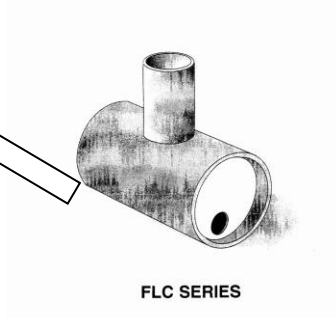
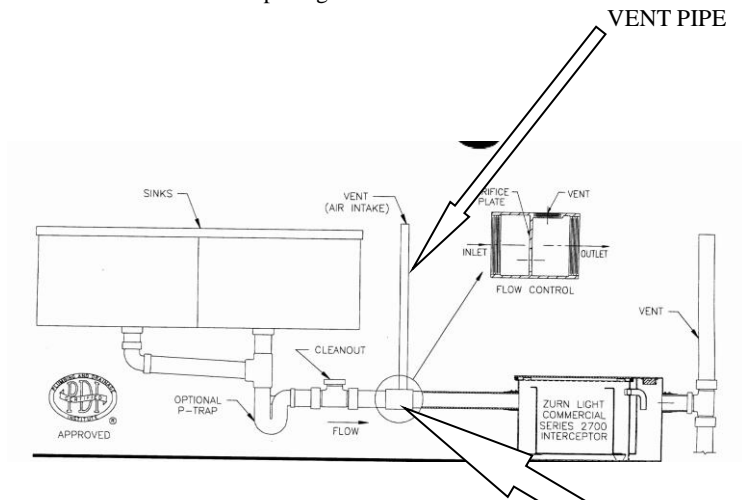
(signature) (date) (phone number)

Facility Owner/Manager Certification

I \_\_\_\_\_ certify to the best of my knowledge the above
(print name)
statements to be true and correct. \_\_\_\_\_ (signature) (date)

SUBMIT ORIGINAL CERTIFICATION FORM TO:
City of Kingsport, FOG Control Program, 620 W. Industry Drive, Kingsport, TN 37660

Under the Sink Grease Trap Diagram



**FLC SERIES**  
*FLOW RESTRICTOR (Key component)*

**RESPONSE COMMENTS (required if “Fail” checked, identify problem, corrective action and provide planned date of corrective action)**

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