



CLARKSVILLE

CONNECTED UTILITIES

Request for Variance for the Installation of a Gravity Grease Interceptor With a Minimum Capacity of 1000 Gallons

Please complete sections 1-5 and submit with plans. Please print legibly or type.

Section 1: Food Establishment Information

Food Establishment Name				
Address	City	State	Zip Code	Telephone
Owner's Name				
Mailing Address	City	State	Zip Code	Telephone
Seating Capacity		Days and Hours of Operation		

Section 2: Project Information

Project Manager/Contact		Company Name		
Address	City	State	Zip Code	Telephone
Alternate Telephone		Email		
Please Check One: <input type="checkbox"/> New Food Establishment <input type="checkbox"/> Existing Food Establishment (remodel)				
Proposed Grease Interceptor Type:				
<input type="checkbox"/> Hydromechanical Grease Interceptor		Flow (GPM):		



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Section 3: Reason for Variance Request

Please state your reason(s) for requesting a variance for the installation of a gravity grease interceptor with a minimum capacity of 1000 gallons:

Space Constraint

Nature of Operations

Section 4:

Please submit a description of the operations at the food establishment on company letterhead and signed by the owner. Include the type of food, methods of cooking and the scope of equipment, maintenance and cleaning. Clearly state your justifications for your request for a variance.

Section 5:

"I certify under penalty of law that I have personally examined and am familiar with the information in this document and that based on my inquiry of those persons immediately responsible for obtaining the information contained herein, I believe that the information is true, accurate and complete. I fully understand that if the approved device is found to be inadequate in properly removing all fats, oils and grease, that I am in direct violation of city ordinance and there are significant penalties for submitting false information, including the possibility of fine and imprisonment as well as immediate disconnection of water service until proper grease interceptor is installed. I also understand that any criteria upon which the approval is based, at the time of approval or at any time thereafter, must be submitted to Clarksville Connected Utilities for review and approval may be revoked if material changes are found and proper grease interceptor will be required in order to continue operations"

Print Name – Authorized representative	Official Title
Signature	Date