

# Preferred Pumper Program Registration

## Fats, Oils, and Grease (FOG) Removal

The Preferred Pumper Program is for those companies that properly pump, haul, and dispose of grease trap/interceptor waste for commercial and institutional food service establishments (FOG-generators). Pumpers will demonstrate both initially and continually that they are able to meet the Preferred Pumper criteria, as outlined below.

1. Before full FOG program implementation pumpers will submit lists of facilities pumped out on a regular basis for baseline trap inspection.
2. Pumpers will satisfactorily pump out grease traps/interceptors.

### Grease Trap

- Pump out completely
- Remove and clean baffles
- Assess and document trap condition
- Re-fill with water

### Grease Interceptor

- Pump out completely
- Pressure wash
- Note tank and baffle condition

3. Haulers will accept limited regulatory responsibility for the FOG-generator, including:
  - Notifying the municipality 24-hours or at least one business day prior to a pump-out.
  - Accurately completing and submitting the Pump-Out Report to the respective municipalities within 10 calendar days of pump-out date.
  - Assuming point of contact responsibility for FOG-generators with the respective municipality concerning discrepancies in the Pump-Out Report submittals and between trap/interceptor pump-out performance.
4. Pumpers will satisfactorily dispose of pump out waste in accordance with all applicable local, state, and federal regulations.
5. Understand that failure to meet the above criteria may result in removal from the Preferred Pumper registry.

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*"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."*

I \_\_\_\_\_ as an authorized representative\*  
Print Name

request that \_\_\_\_\_  
Print Name of Company

be added as a participant in the Preferred Pumper Program. As a participant in this program, our company agrees to meet all of the above listed criteria.

\_\_\_\_\_  
Signature of Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title of Representative

\* An authorized representative is the company owner, facility manager, or has a letter of authorization signed by either a facility manager or company owner.

