

PREFERRED PUMPER PROGRAM REGISTRATION

The Preferred Pumper Program is an alliance of companies that properly pump, haul and dispose of grease interceptor waste for commercial and institutional food service establishments (FOG generators). These pumpers must 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 a list of the facilities they pump out on a regular basis for a baseline grease interceptor inspection.
2. Pumpers will satisfactorily pump Hydromechanical Grease interceptors (HGI) and Gravity Grease Interceptors (GGI).

Hydromechanical Grease Interceptor (Grease Trap)

- Pump out completely
- Remove and clean baffles
- Assess and document condition
- Refill with water

Gravity Grease Interceptor

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

3. Haulers accept limited regulatory responsibility for the FOG generator as follows:
 - Notify the municipality one week in advance of any pumpout. This notification will include the start times of routes and contact information for the driver.
 - Accurately complete and submit the FOG Pump Out Report within 10 days of pumpout.
 - Assuming point of contact responsibility for FOG generators with the respective municipality concerning discrepancies in the FOG Pump Out Report submittals and between interceptor pump-out performance.
4. Pumpers will satisfactorily dispose of pumpout waste in accordance with all applicable local, state, and federal regulations. Decanting or stacking, which involves returning wastewater from a grease hauler truck back into the grease interceptor or directly to the sewer after it has been pumped out, is never permitted.
5. It shall be the responsibility of the Pumping Company to update this registration with any new contact information, signatory, authorized representative or waste disposal site within 10 days or be removed from the Preferred Pumper Program until update information is received.
6. Failure to meet the above criteria and program standards may result in removal from the Preferred Pumper registry.

"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* request that _____
Print Name Name of Company
be added as a participant in the Municipalities Regional Preferred Pumper Program. As a participant in this program, our company agrees to meet all of the above listed criteria as well as the program standards.

Signature of Representative

Date

Title of Representative

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

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Company Information

Company name _____

Street address _____

City _____ State _____ Zip _____

Mailing address (if different from above) _____

City _____ State _____ Zip _____

Primary contact _____ Phone number _____

Email address _____

Waste Disposal Method

The following information is needed for each disposal location. If sites change or additional sites are added, the pumper has 10 days to update the information and submit it to Western States Alliance or be removed from the website until required information is submitted.

Primary site name _____

Street address _____

City _____ State _____ Zip _____

Secondary site name _____

Street address _____

City _____ State _____ Zip _____

How is waste handled? _____

Send completed form to the following:

Ali Dirks
6543 N Burlington Ave.
Portland, OR. 97203
Phone: 503.823-7993
ali.dirks@portlandoregon.gov