



CITY OF TITUSVILLE

"Birthplace of the Oil Industry"

107 N Franklin St Titusville PA 16354

City Manager's Office (814) 827-5300 ext 303

www.cityoftitusvillepa.gov

admins@cityoftitusvillepa.gov

GREASE TRAP/LINE ANNUAL INSPECTION FORM

1. _____
Name of Reporting Restaurant/Food Preparation Facility

Address

Phone
2. Name and title of person completing report:* _____
Name Title
3. Name of person maintaining and record of maintenance (separate sheet):** _____
4. Method of disposal of grease: _____

(Affiliated disposal company name)

(Address)

(Phone number)
5. Cleaning or repair company:

(Name)

(Address)

(Phone number)
6. Location of and size of each grease trap device: _____
(if multiple - attach separate reporting form for each grease trap)
7. Method and frequency of cleaning: (Use separate sheet.)
8. Date of cleaning and inspection: (Use separate sheet.)

"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, as to the best of my knowledge and belief, true, accurate, and complete. I am aware that there is a significant penalty for submitting false information, including the possibility of fine up to ONE THOUSAND (\$1,000.00) Dollars."

Signature*: _____ Date: _____

* Should be same person.

** Could be same person as Line #2.

Submit completed form and log to: Building Inspector, 107 N. Franklin St., Titusville, PA 16354

INCOMPLETE FORMS WILL BE RETURNED!