

Dothan, AL - FOG Inquiry Form

Submit completed forms to:
City of Dothan, FOG Program
POB 2128
Dothan, AL 36302



For assistance completing this form,
contact the FOG Department at
(334) 615-4454 or 615-3246
strawick@dothan.org
jsullivan2@dothan.org

I. General Information:

1. Name of establishment: _____
2. Establishment / Commissary Address: _____
3. Establishment Phone Number: _____ Available Seating: _____
4. Days/Hours of Operation: _____ Grease Recycle Bin Available? () Yes () No
5. Disposable dinnerware? Yes () No () Drive-Thru or Take-Out ? Yes () No ()
6. Describe food items to be served, or attach menu: _____

II. Authorized Representative Information:

1. Owner name (Mr) (Ms): _____
2. Owner mailing address: _____
3. Owner phone: _____ Owner email: _____

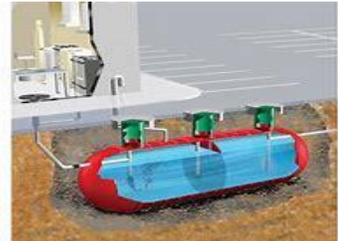
III. Mobile Unit Information (complete the section only if you will operate as a mobile food vendor):

1. Is there a restroom onboard your unit? Yes () No ()
2. Is the waste holding tank permanently attached to the unit, or is the tank removable? _____

3. Describe your plans for disposing of wastes at your commissary. Consider disposal methods (via hose, clean out, etc.).
Attach additional sheets if needed: _____

IV. Grease Control Equipment (Mark the equipment present at your establishment/commissary):

- () Gravity Grease Interceptor (GGI) – usually a large tank located in the ground
Size: () 1000 gallon () 1500 gallon () 2000 gallon
- () Hydromechanical Grease Inceptor (HGI) – usually small trap located under 3 compartment sink or in floor of kitchen
Size: () 20 gpm/40 lb () 35 gpm/70 lb () 50 gpm/100 lb () Other: _____
- () Unknown Grease Control Equipment () No Grease Control Equipment Present



Pictures for illustration purposes only

V. Kitchen Appliances and Plumbing Fixtures (If you are a mobile food vendor, list items present on your unit):

Kitchen Appliances	Number of	Kitchen Appliances	Number of	Plumbing Fixtures	Number of
Wok		Steam Warmer		Under Counter / Commercial Dishwasher	
Fryer		Ice Cream / Yogurt Machine		Clothes Washer	
Grill		Ice Cream Dip Wells		4 Compartment Sink	
Stove		Meat Band Saw		3 Compartment Sink	
Oven		Meat Slicer		2 Compartment Sink	
Microwave		Meat Grinder		Service Sink	
Tilt Kettle		Ice Machine		Hand Sink	
Griddle		Ice Box		Power Wash Sink	
Rotisserie		Vent Hood		Waste Food Grinder	
Conveyor Oven		Auto Hood Wash Unit		Mop / Can Wash- Location: () Inside () Outside	
Rice Steamer				Floor Drains (Kitchen)	
List other appliances and/or fixtures not mentioned above:					

VI. Signature - By signing below, I state that the above information provided is true and correct.

Signature: _____ Date: _____

(Applicant will need to monitor their email for FOG correspondence and updates)

For Official Use Only

A. Approved as submitted: () Yes () No *(Checking "no" will require part B of this section to also be completed)*

If no, explain GCE modifications / installs necessary for approval to be issued. Provide date of non-compliance.

Non-Compliance Date: _____

B. Modifications / installations made:

Detail work performed to bring FSE's GCE into compliance. Provide compliance date.

Compliance Date: _____

FSE Classification: _____

Signature of FOG Inspector: _____ Date: _____