GRAVITY GREASE INTERCEPTOR CERTIFICATION (Form A)
City of Dothan, Alabama

Every food service establishment in Dothan, AL must have their gravity grease interceptor (GGI) certified annually to verify that all components of the grease control equipment are present and in good working condition. Furthermore, the certification will identify any structural problems with the gravity grease interceptor.

Facility Name: ___________________________________________ Phone #: ______________________________

Physical Address: ________________________________________ City: __________________ Zip Code: __________

1. Interceptor completely emptied and cleaned before inspection? ☐ ☐
2. There is access to all interceptor chambers for cleaning and inspections? ☐ ☐
3. Influent (inlet) “T” is attached and extends downward at least 2/3 depth of water? ☐ ☐
4. Influent (inlet) “T” has a minimum 6” nipple firmly attached? ☐ ☐
5. Effluent (outlet) “T” has a minimum 6” nipple firmly attached? ☐ ☐
6. Effluent (outlet) “T” is attached and extends downward to within 12” of tank bottom? ☐ ☐
7. Influent (inlet)/Effluent (outlet) “T” is made of non-collapsible material that does not easily flex or bend (i.e. minimum - schedule 40 PVC, etc.), and is secure, not allowing fats, oils or grease to escape around edges? ☐ ☐
8. Interceptor tank does Not have visible holes or leaks? ☐ ☐
9. Mid-wall baffle(s) is/are secure and operational? ☐ ☐
10. Interceptor tank does Not have signs of significant deterioration? ☐ ☐
11. No sewer clean-out covers missing, damaged or grated? (Enter “Pass” if none present) ☐ ☐

* IMPORTANT REQUIRED INFORMATION & RESPONSE: If the answer to any of the above questions is “Fail”, the equipment does not meet the requirements as stipulated in the FOG Ordinance. In the “Response Comments” section of this form, indicate what corrections are necessary to meet the said requirements.

Inspector Certification – The GGI (DOES) (DOES NOT) meet FOG Ordinance requirements.

I ___________________________ of ___________________________ (print name of grease waste hauler, or plumber) (print company name)
have determined that the above listed facility has an approximate ______ gallon capacity gravity grease interceptor. I have made a visual inspection of said interceptor and attest that the information contained in the report is true and correct.

_________________________ ___________________________ ___________________________
(signature) (date) (phone number)

Facility Owner/Manager

I ___________________________ attest to the best of my knowledge the above statements to be true and correct.

_________________________ ___________________________
(signature) (date)

SUBMIT COMPLETED ORIGINAL CERTIFICATION FORM TO:
City of Dothan, Attn: FOG Program, P.O. Box 2128, Dothan, AL 36302
RESPONSE COMMENTS

This section is required only if “FAIL” is checked. Identify problem, give corrective action and provide planned date of corrective action.