## South Island Public Service District P. O. Box 5148 Hilton Head Island, SC 29938 (843) 785-6224

## Application to Install Grease Interceptor

Establishment Name:		Date:	
Address:			
	t / Restaurant Owner:		
Telephone Number:		Fax Number:	
Mailing Address:			
	ent (square footage):		
Number of Seats (including bar and outside seating):		Number of Meals/Day:	
Former Use (if not	new):		
SIZE / NUMBER	OF KITCHEN UNITS TO BE SERVE	D BY INTERCEPTO	OR .
Size / Number	Type of Unit	Size / Number	Type of Unit
/	Single compartment scullery sink	/	Hand Sink
/	Double compartment scullery sink	/	Oven (ex. Wok oven)
/	Triple compartment scullery sink	/	Exhaust hood
/	Pre-rinse sink	/	Other (list on back)
Any sink, etc., dis be connected to a	charging into the sanitary sewer that grease interceptor.	is used for cleaning	g and/or food preparation must
Note: Dishwasher	rs and garbage disposals shall NOT bo	e tied into grease in	terceptor.
approved interior a	s must be of the exterior, in-ground type nutomatic grease removal unit may be in	nstalled only where e	exterior units are unfeasible.
Please state any reasons why an exterior, in-ground unit would be unfeasible to install:			
Other comments:			
I certify that the ab	pove information is correct to the best of	f my knowledge.	
Signature of Appli	cant:		Date:

Submit Application with plans and specification (including plumbing diagram) to:
Kyle Steedley
kyle@sipsd.com