

**Eligibility Requirements:**

Applicants seeking approval from Austin Water to reduce the grease trap cleaning frequency requirement from every 90 days to a less frequent schedule must be in compliance with [Chapter 15-10 of the Austin City Code \(Wastewater Regulations\)](#), and must be able to show that they are currently:

1. Completely removing all Fat, Oil and Grease (FOG) waste, or other liquid waste, semi-solid or solid and residue from the grease trap when the grease trap is cleaned.
2. Cleaning the grease trap the earlier of:
  - a. Every 90 days; or
  - b. When 50% or more of the wetted height of the grease trap, as measured from the bottom of the grease trap to the invert of the outlet pipe, contains grease and solids; and
3. Disposing of the waste removed from the grease trap according to applicable local, state, and federal regulations.

The applicant must meet the following pre-conditions for the site where the grease trap is located before a reduction in grease trap cleaning frequency request will be considered:

1. The site is permitted as an [Industrial User](#) by Austin Water;
2. The current grease trap installed has been approved by Austin Water;
3. The grease trap has been installed according to applicable code requirements as amended by the City of Austin;
4. The grease trap is structurally sound with all features in proper working order according to manufacturer specifications;
5. All required plumbing fixtures discharge into the grease trap;
6. The amount of grease and solids after a 90 day period does not exceed 50% of the wetted height of the trap;
7. There is no verifiable history of grease trap waste-related wastewater line maintenance problems either caused by the discharge from the applicant's site or in conjunction with the discharges from other users in the collection system located immediately downstream of the applicant; and,
8. There is no historical data indicating that the business has exceeded the 200 mg/L FOG limit within the last two (2) years or since the date the discharge commenced if the applicant has been at this site for less than two (2) years.

## Procedures:

1. Contact Austin Water Industrial Waste at 512-974-7293 to determine if you are eligible for a reduction in the grease trap cleaning frequency.
2. Complete the following application and submit it (along with the liquid waste hauler manifests and updated kitchen plumbing plan for the facility) to Industrial Waste via mail or email:

**Mail:** Industrial Waste – Austin Water  
6310 Wilhelmina Delco Dr., 3rd Floor  
Austin, TX 78752

**Email:** [IndustrialWaste@austintexas.gov](mailto:IndustrialWaste@austintexas.gov)

3. Once your application has been reviewed, a Pretreatment Compliance Specialist (Specialist) from Industrial Waste will contact you to confirm eligibility for consideration. If you are still eligible, the Specialist will schedule an initial inspection of your grease trap. You will be asked to set a date and time to have your grease trap completely cleaned by a [Liquid Waste Hauler permitted by the City of Austin](#) so that an inspection can be conducted when the grease trap is emptied. During the inspection, the Specialist will inspect and measure the dimensions and wetted height of the emptied grease trap; inspect and possibly dye test the site to determine the number, size and types of drains and fixtures that contribute waste to the grease trap; and locate and inspect the sample port. You will be asked a series of questions pertaining to practices and procedures conducted at your site that may impact the quality and quantity of waste being discharged. This initial inspection will also serve as the baseline for determining the accumulation of solids and grease during the 90-day period.
4. Three (3) months after the initial inspection is conducted, the Specialist will contact you and schedule a return visit to your site to measure the amount of grease and solids that have accumulated in the grease trap and to collect a FOG sample. The Specialist will review the results from this inspection and the sample and approve or reject the application for the reduced cleaning frequency.
5. The Specialist will contact you and schedule a return visit to your site approximately when your proposed alternate cleaning frequency comes due. During this inspection, the Specialist will measure the amount of grease and solids that have accumulated in the grease trap and collect a FOG sample. The Specialist will review the results from this inspection and sample and approve in writing if you have been allowed to clean your grease trap at the proposed reduced pump out frequency.
6. Authorization by Austin Water Industrial Waste to clean your grease trap at a reduced frequency (i.e., less often than every 90 days) may be forfeited if the reduced cleaning frequency contributes to or causes a violation of Chapter 15-10.



# Reduced Grease Trap Cleaning Frequency: Application

Provide the following information as requested. *A separate application must be submitted for each grease trap.*

Business Name: \_\_\_\_\_

Service Address: \_\_\_\_\_

\_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Type of Business: \_\_\_\_\_

(e.g., Restaurant, Bakery, Deli, School, etc.)

Indicate whether the activities contributing waste to the grease trap are:

- Continuous throughout the year, or
- Seasonal - If seasonal, indicate the months of the year during which this activity occurs:
 

<input type="checkbox"/> January	<input type="checkbox"/> February	<input type="checkbox"/> March
<input type="checkbox"/> April	<input type="checkbox"/> May	<input type="checkbox"/> June
<input type="checkbox"/> July	<input type="checkbox"/> August	<input type="checkbox"/> September
<input type="checkbox"/> October	<input type="checkbox"/> November	<input type="checkbox"/> December

Comments:

---



---



---



---

Does operation shut down for vacation, maintenance, or other reasons for more than 30 days? If yes, indicate reasons and period when shutdown occurs.

Yes       No

Comments:

---

---

---

---

Please provide the number of kitchen fixtures currently on site **and** submit an updated kitchen plumbing plan for this facility.

3- Compartment Sink	_____	2- Compartment Sink	_____
1- Compartment Sink	_____	Food Preparation Sink	_____
Hand Sink	_____	Mop Sink	_____
Floor Sink	_____	Floor Drain	_____
Dishwasher	_____	Disposal	_____
Wok Stove	_____	Other ( _____ )	_____

Total grease trap volume (gallons): \_\_\_\_\_  Actual       Estimate

Wetted height of trap at outlet side (inches): \_\_\_\_\_  Actual       Estimate

**Attach copies of the liquid waste hauler manifests used to document the cleaning and proper disposal of your grease trap waste for the previous two (2) years, or inception of discharge if site is less than two (2) years old.**

**Application Request:**

I \_\_\_\_\_ (Authorized Representative) request that \_\_\_\_\_ (Business Name) located at \_\_\_\_\_ (Service Address) be granted a reduced pump out frequency of the grease trap to a frequency of a least one (1) pump out every \_\_\_\_\_ days.

*The Authorized Representative designated as a signatory authority for this facility must complete and sign this application. The Authorized Representative must be a person having legal responsibility for the overall operation of the discharging facility.*

**Certification Statement:** (To be signed by the Authorized Representative)

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 gathered and evaluated the information submitted, and 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.

Authorized Representative: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_