



## **City of Henderson**

Department of Utility Services 240 S. Water St., P. O. Box 95050 Henderson, NV 89009-5050

Utility Services 702-267-3670

Building & Fire Safety 702-267-3600

# GREASE INTERCEPTOR ALTERNATIVE METHOD OF DESIGN Provide Equivalency

☐ APPROVED ☐ DISAPPROVED

INTRODUCTION:		
Date:	Building Permit #:	
Project Name:		
Project Address:		

#### **ORDINANCE AND CODE REQUIREMENTS:**

#### **Department of Utility Services**

The City of Henderson (City) Pretreatment Program regulates discharges to the City's publicly owned treatment works under the authority granted to the Department of Utility Services under Henderson Municipal Code (HMC) Chapter 14.09. Section 14.09.080 requires that a grease interceptor be installed by any facility with the potential to discharge fats, oils, and grease (FOG) into the City's publicly owned treatment works. As a result, most food service establishments fall under this requirement.

#### **Building and Fire Safety**

The Uniform Plumbing Code as adopted by the City of Henderson requires a grease interceptor be provided for proper handling of liquid wastes containing grease. A grease interceptor shall be installed in any commercial establishment where grease may be introduced into the sewer system. This includes:

- any business establishment with kitchen facilities including restaurants, cafes, lunch counters, cafeterias, supermarkets, convenience stores, bakeries, bars and clubs, hotels, hospitals, sanitariums, factory, or school kitchens.
- any fish, fowl and animal slaughterhouse or establishment.
- any fish, fowl and meat packing or curing establishment.
- any soap factory, tallow rendering, fat rendering and hide curing establishment; or
- any other establishment from which grease is likely to be discharged into the sewer system.

Each grease interceptor shall serve only one business establishment.

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Company Fax

I am requesting the following for the above listed	d business:					
1 6	of fats, oils or grease that may enter the sewer					
system and I wish to provide no protection	•					
☐ This business has limited amounts of fat and I wish to provide other means of	This business has limited amounts of fats, oils or grease that may enter the sewer system and I wish to provide other means of protection (such as a hydromechanical grease					
☐ I wish to provide a grease interceptor the enclosed documents indicating the but	interceptor) for the sewer system. I am proposing to use  I wish to provide a grease interceptor that will serve more than a single business. I hav enclosed documents indicating the businesses that will utilize the interceptor, the operation of such businesses, and the responsible party for the maintenance of the server of the maintenance of the server of t					
JUSTIFICATION:						
Provide supporting data such as:	2.11					
• Kitchen floor plan showing the location of						
Menu, either completed or in outline form     Lint/description of food and due to purple of the due to purple of the due to the						
<ul><li>List/description of food products purchas</li><li>List of kitchen and food preparation equi</li></ul>						
<ul> <li>List of kitchen and rood preparation equi-</li> <li>List of food preparation utensils</li> </ul>	pment					
<ul> <li>List of food preparation defishs</li> <li>List/description of utensils and tableware</li> </ul>	used for food service					
<ul> <li>Description of food packaging for "to-go</li> </ul>						
<ul> <li>Description of food packaging for 10-go</li> <li>Description of the process for all food pro</li> </ul>						
<ul> <li>Description of the process for an root pro-</li> <li>Description of all cleaning processes</li> </ul>	-paration					
	ings, sketches, technical reports, data sheets,					
modeling, calculations, etc. Attach separa						
<i>5</i> , , , , , , , , , , , , , , , , , , ,	•					
OUDMITTED DV	OWNED A OKNOW! EDGEMENT.					
SUBMITTED BY:	OWNER ACKNOWLEDGEMENT:					
If prepared by a registered professional provide a "wet seal"	Owner's or owner's Authorized Representative acknowledgement of this request:					
Signature	Signature					
Name	Name					
Title	Title					
Date						
Company Name	Date					
	Date Company Name					
Company Address						
Company Address  Company Phone	Company Name					

Company Fax

Grease Interceptor Alternative Method of Design Page 3 of 3  $\,$ 

### **DETERMINATION:**

Mark check box on first page.

Department of Utility Services	<b>Building and Fire Safety</b>		
Reviewed By:	Reviewed By:		
Name	Name		
Title	Title		
Date	Date		
change includes any portion of the equipment change, tableware or change, etc. If the approval is voithe codes and ordinances. It may Alternative Method of Design" at the	s submittal may void this approval. An operational submittal such menu change, food preparation change utensil change, cleaning process change, ownership ded the business must be made fully compliant with the possible to provide another "Grease Interceptor hat point that includes the new information." If from the Southern Nevada Health District.		
Additional Conditions of Approval			