



Grease Evaluation Form

Ph: 800/961-1220 Fax: 480/425-3061

Facility Name: _____ Phone _____

Address: _____ Email _____

Department Supervisor: _____ WW Manager _____

City/State/Zip: _____

Wastewater Treatment Facility:

1. Describe treatment system _____

2. Design capacity _____ M.G.D. Average daily flow _____

3. No. of Receptors or Tanks _____ Size or Dimensions _____

4. No. of Lift Stations _____ Size or Dimensions _____

5. No. of Wells _____ Size or Dimensions _____

5. No. of Pits _____ Size or Dimensions _____

7. Gravity Flow? Yes _____ No _____ Force Main? Yes _____ No _____ Length _____

8. Surface grease thickness _____ Grease Color & Consistency _____

9. How often pumped? _____ Associated Cost? _____

10. Odor concern? Yes _____ No _____ Stringy debris in the well? Yes _____ No _____

11. Foaming issues? Yes _____ No _____ Color? _____

Describe your problem/ issue? _____

Have you utilized or are you currently using any type of treatment to control this problem?

Wastewater Characteristic

1. Influent: pH _____ D.O. _____ Susp. solids _____ B.O.D. _____ Temp _____
2. Effluent: pH _____ D.O. _____ Susp. solids _____ B.O.D. _____ Temp _____
3. Volatile Organic Carbon measured?. _____ Influent _____ Effluent _____
4. Bacteria or enzyme products used now? _____ Past? _____
5. Brand & cost per month _____ Results? _____
6.

Chemicals in WW	Quantity/Month (Gal./Pounds)	Organic Compounds
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Influent components: (list all potential influent components with percentage of total flow)

Domestic wastes _____% Industrial Wastes _____% Toxic _____%

General

1. Are W.W.T.P effluent limits being met? Y _____ N _____

If yes describe the nature of the problem _____

2. What is the distance from the unit location to the point of entry? _____

3. Available power: 1 phase Y _____ N _____ or 3 phase Y _____ N _____

4. Will sound be an issue at the location site? Y _____ N _____

Please describe any other information that you believe would be relevant or helpful in determining a solution to your issue / problem. _____

Please draw a diagram of your facility including the holding ponds and showing the flow from influent to ponds.

