

Date

City of Ashland Building Safety Division

51 Winburn Way • Ashland, OR 97520 Phone (541) 488-5305 • Fax (541) 488-6066

Email: <u>Building@ashland.or.us</u>

FATS, OILS, GREASE (F.O.G) Plumbing Application Form

PERMIT NUMBER:		<u>_</u>	
TYPE OF WORK		CHECKLIST	
☐ COMMERCIAL		☐ Site Plan/Floor Plan/Schematic	
JOB SITE INFORMATION AND LOCATION		☐ New	
Job Address:		☐ Retrofit	
City/State/ZIP:		☐ Hydro-Mechanical	
Subdivision:	Lot:	☐ Gravity	
DESCRIPTION OF WORK		☐ Manufacturer's "Cut Sheet"	
		LIST OF ALL FIXTURES TO BE CONNECTED TO GREASE INTERCEPTOR:	FIXTURE UNITS
BUSINESS NAME			
Name:			
Address:			
City/State/ZIP:			
Phone: ()	Fax: ()		
CONTRACTOR			
Business name:			
Address:			
City/State/ZIP:			
Phone: ()	Fax: ()		
CCB license. no.:			
Print Name:			
Signature			