

## Grease Control Policy Request for Variance Study

<b>Name of Facility</b>	
<b>Contact Name</b>	
<b>Title</b>	
<b>Service Address</b>	
<b>Mailing Address (if different)</b>	
<b>Telephone</b>	
<b>Size of In-ground Interceptor (Must be 1,000 gallons or larger)</b>	
<b>Does this Food Service Establishment Use Enzymes or Biological Additives? If Yes, provide name of product. Attach literature if available.</b>	
<b>Provide Explanation for the need of a Variance From the Monthly Pumping Schedule</b>	
<b>Cost of Variance is \$300 and is non-refundable. Submit check made out to the City of Winston-Salem with application.</b>	

The City will review all information submitted and will notify the Food Service Establishment in writing of its acceptance or denial of the variance request. The City of Winston-Salem will notify the Food Service Establishment to schedule the variance study. Please return this application to Grease Control Policy, 2799 Griffith Road, Winston-Salem, NC 27103.

Manager's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*

**Official Use Only:**

Date Application Received: \_\_\_\_\_ Reviewed By: \_\_\_\_\_

Applicant Eligible For Study  Yes  No Reason: \_\_\_\_\_

Fee Paid: Check # \_\_\_\_\_