



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

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

## Grease or Oil Removal Device Maintenance Log

### Grease and Oil Management Program

1300 S. Queens Ave.

Pueblo, CO 81001

Type of Service Performed (cleaning/pumping or repair)	Date of Service	Time of Service	Volume of liquid and solids removed	Name of person or business performing service	Comments

I certify under penalty of law that this document and all attachments were prepared under my discretion or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted 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 a fine and imprisonment for knowing violations.

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

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

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

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