



WATTS BAR UTILITY DISTRICT

Fax: 865-270-8072 - Email: pogs@wbud.org - Web: http://www.wbud.org/wastewater/wastewater/pogs_program.html

Petroleum, Oils, Grease and Sand Reporting Form

(Only one (1) form per Grease Trap)

This form is due within 10 days of Pumping

Name of Facility / Company _____

911 Address _____

County _____

Location of Grease Trap _____
(Maintenance Shop, Wash Bay inside, Wash Bay outside, etc...)

Gallons Pumped or Removed (Approximately) _____

Quarter and Month of Pumping (Please Check the Month of Pumping)

1st Quarter

2nd Quarter

3rd Quarter

4th Quarter

January

April

July

October

February

May

August

November

March

June

September

December

Hauler Name _____

Hauler Phone Number with Area Code _____

I certify that this document and all attachments were prepared under my direction or supervision in accordance with Watts Bar Utility District's Policy and that all 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 fine for knowing violations. Failure to submit maintenance and cleaning logs to WBUD may result in fines or other penalties.

Name (Print) _____

Title _____

Signature _____

Date Completed _____