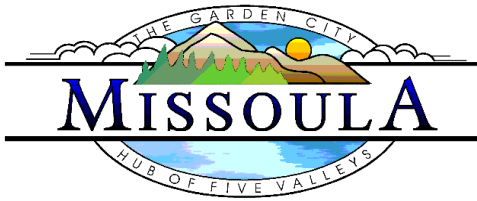


Appendix 5-C2: Grease Interceptor Variance Form



Submit to:
City of Missoula
Utility Permit Coordinator
435 Ryman St
Missoula, MT 59802

Applicants Request: _____

GENERAL INFORMATION:	
Date:	
Establishment Name:	
Establishment Address:	
Property Owner's Name(s):	
Establishment Owner/Operator Name(s):	
PLEASE PHONE APPEAL DECISION ASAP TO:	
Name:	
Phone:	
PLEASE MAIL OR EMAIL WRITTEN APPEAL DECISION TO:	
Name:	
Mailing Address:	
Email Address:	

SPECIFIC INFORMATION NECESSARY FOR VARIANCE:

Please submit the following:

1. Menu
2. Plumbing diagram include all floor drains and sinks
3. Kitchen diagram including all appliances
4. Flow rating on dishwasher if present
5. Compartment Size of 3 compartment sink(s)
6. Detailed description of the reasoning behind the inability to connect all kitchen fixtures to an HGI

Additional Information:

Question	Yes	No	Comments
Will food be served on disposable dishware?			
Will food be prepped on site?			
Will food be cooked on site?			
Deep fat fryer present?			
Grill present?			
Has Health Dept been notified?			

Are there other plans or permits related to this request?			
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Variance Review Fee is due at time of submittal. \$187.00

FOR OFFICE USE ONLY:

Record # _____

Date Received/Staff Initials _____

Per Missoula Municipal Code 13.07.410

Approved

Approval Conditions:

Denied

Reasons for Denial:

Recommended By:

City Plumbing Inspector

City Engineer of Utilities

Lab/Pretreatment Manager