

City of South Burlington, Vermont
Grease, Oil and Sand Interceptor Permit

Date _____ Permit Number _____

Applicant

Name: _____

Mailing Address: _____

Applicant Phone _____ Fax _____ E-mail _____

Business Name: _____

Physical Address of Business: _____

Business Phone _____ Fax _____ E-mail _____

Please attach plan and description of interceptor device to this application

My signature indicates I have read and will comply with the terms of the South Burlington Sewer and Stormwater Ordinance effective March 22, 2005, in particular Article II, Section 4 (prohibited discharges) and Article VII (inspection and enforcement).

If the applicant is not the owner of the property, both signatures are required.

Applicant

Property Owner

Permit Approved: _____ Date: _____

Permit Denied: _____ Date: _____

Reason for Denial: _____

