



Notice of Waiver Application

For reduction to minimum 180-day Interceptor cleaning frequency

*Please fill one application for each Special Waste#

Special Waste #:			Telephone No:				
Company Name:				Email Address:			
Interceptor Address:			s:		City:	Zip:	
Mailing Address:					City:	Zip:	
For Notice of Waiver to be reviewed, please answer the following:							
	YES	NO					
1.			Has your interceptor or holding tank overflowed during the previous 12 months?				
2.			Have you received a verbal warning, notice of violation or a citation regarding your interceptor from any governmental entity (including, but not limited to, City of Houston Health Department) during the previous 12 months?				
3.			Is the capacity of your interceptor consistent with uniform plumbing code, as currently adopted by the city?				
4.			Will the interceptor produce an effluent consistent with the discharge parameters specified by Chapter 47-514 of Code of Ordinances with the reduced frequency requested?				
5.			Will the interceptor contain more than 25% of floating materials, sediment, oils, or grease at any time based on the reduced cleaning frequency				
IMPORTANT INFORMATION							
Violations of ARTICLE XI. TRANSPORTATION AND TREATMENT OF CERTAIN WASTES Sec 47-411 through 47-600 will result in the Notice of Waiver being denied or cancelled. All representations in Notice of Waiver are conditions upon which the generator shall operate its interceptor. The applicant will operate its interceptor in compliance with the Code of Ordinances of the City of Houston and all applicable laws. The signature below indicates that, based on information and belief after reasonable inquiry, the statements on this Notice of Waiver are true, accurate and complete. Generator is responsible for submitting waiver application to the City of Houston Health Department. Must be in operation and in compliance for a full 12 months and have a 90 day pump out history before waiver will be granted. In the event you are approved the waiver is only valid for that ownership and Special Waste #. All sections of this application MUST be complete, or application will not be reviewed. E-mailed/Faxed applications will not be accepted it must be mailed in. Please mail completed Notice of Waiver Application, most current (4) copies of waste manifest and Affidavit of Holding Capacity to: City of Houston-FOG Program 7427 Park Place Houston, TX. 77087 Generator's Certification for Questions #1,2 and 3 above							
Print Name of Generator (Owner Representation)				Generator Signature		 	
TRANSPORTER'S CERTIFICATION FOR QUESTIONS 4 AND 5 ABOVE Transporter Certification: I certify that the frequency (#Times/Yr) of cleaning at this facility is sufficient to maintain required effluent discharge or will demonstrate less than 25% of wetted height of Sludge Judge. (Sec.47-512(e)(2)) Transporter Company Rep. (Print Name) Signature Date							
Transporter Company's Name COH Permit No							
OFFICE USE ONLY							
Signature of Reviewer Date						☐ Approved ☐ Denied	
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