

# City of Elkhart

## Technical Review Process for Commercial, Industrial, Multi-Family (3 or more units), and Public/Institutional Projects

### Development Review Procedure-Technical Review

The City of Elkhart Planning Services Division, the Office of Public Works and Utilities, and the Fire Department have bi-weekly plan review meetings (Technical Review) to review development proposals. The intent of this process is to allow the developer to receive comments from each department, and give them an opportunity to revise or provide additional information before the meeting. Developers must submit development plans at least one (1) week prior to the review deadline allow enough time for each department to review and prepare comments (See Technical Review Calendar for deadlines). A project representative must be present at the Technical Review Committee Meeting after we have received revisions/supplemental information. A \$200 application fee is required. The general technical review procedure is as follows:

1. One (1) paper set of plans and plan review applications and one (1) Commercial & Industrial Pretreatment Questionnaire with attached floor plan are **submitted to the Public Works & Utilities Department, 1201 S. Nappanee St Elkhart, IN 46516, by the deadline**. Providing a digital submissions along with the paper copy is encouraged. Digital documents shall be emailed to [plans@coei.org](mailto:plans@coei.org) or delivered to Public Works via flash drive. The following information is required (also see checklist in plan review application):
  - a. Planning Services
    - i. Site Plan, Landscaping, Drainage, Floor Plan, Elevations, and Photometric diagram. If project is in an Overlay District or Historic District, additional information will be required (See Overlay Districts, Historic Commission).
    - ii. **New Construction:** A Certificate of Address will be required. Certificates of Address are issued by the Office of Planning & Development, Planning Services Division.
  - b. Public Works and Utilities
    - i. Site Drainage Drawings, Calculations (MS4), Size area of earth disturbance
    - ii. Curb/Drive—Site Plan w/ Turning radii and measurements
    - iii. Sewer/Water—Sewer/Water Drawings
    - iv. Pretreatment—Pretreatment Questionnaire with a copy of the floor plan attached to the questionnaire. Water & Sewer plans will not be approved until the Commercial & Industrial Pretreatment Questionnaire is filled out and submitted with a copy of the floor plan showing bathrooms and floor drains.
    - v. Erosion Control Plan (MS4)
  - c. Fire Department
    - i. Site Plan showing location of Fire Hydrant(s)
    - ii. Fire Department hookup
  - d. **Submit separately for Building Department Local Plan Review the following:**
    - i. **One full set of construction drawings**
    - ii. **Construction Design Release**
2. Public Works & Utilities keeps three sets and routes remaining plan sets to Planning and Zoning (1), and Fire (1).
3. Plans are reviewed by each department and comments are prepared. Written comments are then distributed to the project/development representative via email (See calendar for dates).
4. **If revisions are required, the applicant must email amended plans to [plans@coei.org](mailto:plans@coei.org) or drop off hard copies at Public Works & Utilities. The revision deadline is ten days after comments are sent out (see calendar for dates).**
5. If revisions are not required, the plans are approved, and the signature sheet for the project is completed.

6. If necessary additional processes may be required (Planned Unit Development approval, Final Site Plan, PUD Amendment, or Subdivision Approval, etc.)
7. Applicant referred to the Office of Public Works & Utilities to obtain a driveway/curb cut permit if required; if so, Board of Works approval must be given at a regular Tuesday meeting.
8. Applicant needs to go to the Office of Public Works to finalize utility hook-ups.
9. After applicant submits revised plans, staff from departments and the project/development representatives meet for a technical review committee meeting to review and discuss project. (See calendar for scheduled meeting dates)
10. A Zoning Clearance is issued by the Planning Services staff. Excavation permits are issued by the Office of Public Works and Utilities. If required, driveway permits and revocable permits are issued by the Office of Public Works and Utilities following Board of Public Works approval.
11. A Building Permit is issued by the Building Department once a proposed development has passed the Building Department's Local Plan Review, a Zoning Clearance is issued, and zoning and building permit fees have been paid.
12. Required inspections are conducted by Building Department and Planning Services staff prior to occupancy.
13. A Certificate of Occupancy (CO) is issued by the Building Department. The Certificate of Occupancy must be signed by both the Building Commissioner and the Zoning Administrator. A building may not be occupied or opened for business until a Certificate of Occupancy is issued.

**2023 Technical Review Committee Calendar**

Application Deadline at Public Works ^	Applications sent to Departments	Department Comments to P&Z	Comments to Applicant/Consultant *	Revisions Deadline at P&Z ^^	Technical Review Committee Meeting **
3:00 PM Thursday, December 15, 2022	3:00 PM Friday, December 16, 2022	3:00 PM Thursday, December 22, 2022	9:00 AM Friday, December 23, 2022	<b>9:00 AM Tuesday, January 3, 2023</b>	9:00 AM Thursday, January 5, 2023
3:00 PM Thursday, December 29, 2022	3:00 PM Friday, December 30, 2022	3:00 PM Thursday, January 5, 2023	9:00 AM Friday, January 6, 2023	<b>9:00 AM Tuesday, January 17, 2023</b>	9:00 AM Thursday, January 19, 2023
3:00 PM Thursday, January 12, 2023	3:00 PM Friday, January 13, 2023	3:00 PM Thursday, January 19, 2023	9:00 AM Friday, January 20, 2023	3:00 PM Monday, January 30, 2023	9:00 AM Thursday, February 2, 2023
3:00 PM Thursday, January 26, 2023	3:00 PM Friday, January 27, 2023	3:00 PM Thursday, February 2, 2023	9:00 AM Friday, February 3, 2023	3:00 PM Monday, February 13, 2023	9:00 AM Thursday, February 16, 2023
3:00 PM Thursday, February 9, 2023	3:00 PM Friday, February 10, 2023	3:00 PM Thursday, February 16, 2023	9:00 AM Friday, February 17, 2023	3:00 PM Monday, February 27, 2023	9:00 AM Thursday, March 2, 2023
3:00 PM Thursday, February 23, 2023	3:00 PM Friday, February 24, 2023	3:00 PM Thursday, March 2, 2023	9:00 AM Friday, March 3, 2023	3:00 PM Monday, March 13, 2023	9:00 AM Thursday, March 16, 2023
3:00 PM Thursday, March 9, 2023	3:00 PM Friday, March 10, 2023	3:00 PM Thursday, March 16, 2023	9:00 AM Friday, March 17, 2023	3:00 PM Monday, March 27, 2023	9:00 AM Thursday, March 30, 2023
3:00 PM Thursday, March 23, 2023	3:00 PM Friday, March 24, 2023	3:00 PM Thursday, March 30, 2023	9:00 AM Friday, March 31, 2023	3:00 PM Monday, April 10, 2023	9:00 AM Wednesday, April 13, 2022
3:00 PM Thursday, April 6, 2023	<b>3:00 PM Monday, April 10, 2023</b>	3:00 PM Thursday, April 13, 2023	9:00 AM Friday, April 14, 2023	3:00 PM Monday, April 24, 2023	9:00 AM Thursday, April 27, 2023
3:00 PM Thursday, April 20, 2023	3:00 PM Friday, April 21, 2023	3:00 PM Thursday, April 27, 2023	9:00 AM Friday, April 28, 2023	3:00 PM Monday, May 8, 2023	9:00 AM Thursday, May 11, 2023
3:00 PM Thursday, May 4, 2023	3:00 PM Friday, May 5, 2023	3:00 PM Thursday, May 11, 2023	9:00 AM Friday, May 12, 2023	3:00 PM Monday, May 22, 2023	9:00 AM Thursday, May 25, 2023
3:00 PM Thursday, May 18, 2023	3:00 PM Friday, May 19, 2023	3:00 PM Thursday, May 25, 2023	9:00 AM Friday, May 26, 2023	3:00 PM Monday, June 5, 2023	9:00 AM Thursday, June 8, 2023
3:00 PM Thursday, June 1, 2023	3:00 PM Friday, June 2, 2023	3:00 PM Thursday, June 8, 2023	9:00 AM Friday, June 9, 2023	<b>9:00 AM Tuesday, June 20, 2023</b>	9:00 AM Thursday, June 22, 2023
3:00 PM Thursday, June 15, 2023	3:00 PM Friday, June 16, 2023	3:00 PM Thursday, June 22, 2023	9:00 AM Friday, June 23, 2023	3:00 PM Monday, July 3, 2023	9:00 AM Thursday, July 6, 2023
3:00 PM Thursday, June 29, 2023	3:00 PM Friday, June 30, 2023	3:00 PM Thursday, July 6, 2023	9:00 AM Friday, July 7, 2023	3:00 PM Monday, July 17, 2023	9:00 AM Thursday, July 20, 2023
3:00 PM Thursday, July 13, 2023	3:00 PM Friday, July 14, 2023	3:00 PM Thursday, July 20, 2023	9:00 AM Friday, July 21, 2023	3:00 PM Monday, July 31, 2023	9:00 AM Thursday, August 3, 2023
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*Calendar change because of city holiday*

**^ Applications to be submitted to Public Works and Utilities, 1201 South Nappanee Street, Elkhart. Digital applications (pdf files, see checklist) are encouraged. Digital documents shall be emailed to plans@coei.org or delivered to Public Works via flash drive. For physical applications, five (5) hard copies of all documents are required. Applicants are responsible for timely delivery.**

**^** If an application is deemed "incomplete" due to critical missing checklist items (per the cover sheet), it will be returned to the applicant for re-filing and will not be placed on the Technical Review Committee Agenda.

**\*** If Plan Commission, Board of Zoning Appeals, or Board of Public Works action is required, the applicant will be notified on the required action and the schedule for submittals and meetings on this date.

**^^** Revised applications must be submitted digitally (pdf files) or by hard copy (one copy) for public record. Applicants are responsible for timely email and/or hard copy delivery.

**\*\*** Technical Review Committee shall include Assistant Director for Planning and Zoning (or his/her designee), City Engineer (or his/her designee), Fire Chief (or his/her designee), and Plan Commission President (or his/her designee). Projects shall be approved by unanimous decision of the Technical Review Committee members. If not approved, projects shall be scheduled for the next Technical Review Committee meeting, with Plan Revisions due back to P&Z as shown on the schedule for that meeting.

**\*\*** Any appeal of Technical Review Committee decisions shall be made to the Board of Zoning Appeals and/or the Board of Public Works.

# City of Elkhart

## **APPLICATION FOR TECHNICAL SITE PLAN REVIEW COMMERCIAL, INDUSTRIAL, MULTI-FAMILY (3 OR MORE UNITS), PUBLIC/INSTITUTIONAL**

All commercial, industrial, multi-family (3 or more units), public/institutional projects must **submit applications to Public Works and Utilities, 1201 South Nappanee Street, Elkhart**. One hard copy and one digital copy (if available) of all required documents should be submitted. Digital documents shall be emailed to [plans@coei.org](mailto:plans@coei.org) or delivered to Public Works via flash drive. Submissions shall be in accordance with the deadline dates shown on the Technical Review Calendar. Late submissions will be reviewed on the next regularly scheduled Technical Review Committee round. Submittal Fee is \$200.00 payable to City of Elkhart.

Project Name & Description: \_\_\_\_\_

Property Address (assigned by Planning and Zoning Department): \_\_\_\_\_

Location of Project: \_\_\_\_\_

Parcel ID (Tax key ID Number, ex. 04-22-210-009): \_\_\_\_\_

Current Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_

Current Use of Property: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

Size of Parcel: \_\_\_\_\_ Floodway: Yes / No    Floodplain: Yes / No    Compact Agreement: Yes / No

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

Applicant Email: \_\_\_\_\_ Applicant Telephone: \_\_\_\_\_

Relation to the Project: \_\_\_\_\_

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

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

Owner Email (required): \_\_\_\_\_ Owner Telephone: \_\_\_\_\_

Contractor Name, Address, Email, Telephone: \_\_\_\_\_

**Incomplete Plans will not be accepted. If the project is located in a floodplain, floodway, historic district or designated Overlay District, additional materials will be required for submission. An Accurate Site Plan in Compliance with Section 26 of the Zoning Ordinance containing the following information is required. Please indicate on the checklist the plan page number on which the information can be found. All Site Plans must contain the following:**

## City of Elkhart | Technical Review Applications | Checklist

Plan Item	Applicant	Staff
All plan sheets must be signed and sealed by a registered professional (architect, engineer, or land surveyor)		
Plans shall be divided into sheets/sections: <b>Existing Conditions, Proposed Geometry, Proposed Grading/Drainage, Proposed Landscape/ Lighting Plan, and Proposed Utilities</b>		
Plans shall be created at a standard engineering scale (1"=20', 1"=30', 1"=40', 1"=50', or 1"=100')		
North shall be oriented to the top or left of each plan sheet		
The type of submittal should be noted on the plan (PUD, PUD amendment, final site plan, plat, subdivision, etc.)		
Complete legal description		
Contents of Existing Conditions Plan:		
Property Owner name, address, telephone number, and email address		
Developer name, address, telephone number, and email address		
Consultant name, address, telephone number, and email address		
Property Lines, with bearings and dimensions (in feet)		
Boundary Line of Proposed Development (if different from property lines)		
Name and Right-of-Way Width of adjoining streets and alleys and designation of street (primary arterial, minor arterial, major collector, minor collector, or local)		
Existing Improvements (buildings, driveways, pavements, trees, fences, water service, sanitary sewer service, oil/ water separators, other utility connections, etc.)		
Existing Topography (spot elevations or contours); Field collected topography is preferred, but LIDAR contours from Elkhart County may be accepted		
Stormwater Outfall identification, location, and type (combined sewer, separated sewer, regulated drain, surface water, etc.)		
Project Location Map		
Contents of Proposed Geometry Plan:		
Building Footprint location(s), dimensions, and size (area), with dimensions lines to each adjoining property line		
Building Doorway and Overhead Door locations and sizes		
Maximum Building Height in feet and floors		
Pavement locations(s), dimensions, and size (area), with dimensions lines from edge of pavement to each adjoining property line		
Pavement designations (concrete, asphalt, etc.), with pavement section details and curbing plan (curbs are required for all commercial, multi-family, and institutional developments)		
Parking Space demarcation, dimensions, and number of spaces including handicap accessible (including parking table)		
Driveways with dimensions, thickness cross-sections, and radii		
Anticipated average number of vehicles per day, number of employees on largest shift, and seating capacity (seating capacity for restaurants, theaters, and churches)		
Sidewalks and pedestrian walkways		
Vision triangle clear or distance to other buildings, if applicable		
On-site maneuvering and loading dock, if applicable		
Signage (Note that a separate sign permit must be issued for all signs)		
Stormwater Containment Area outline, with dimension lines from edge of area to each adjoining property line.		
Fence materials, heights, and locations, with dimensions lines to each adjoining property line		
Dumpster enclosure (Must meet Section 26.2.C.6)		

Flood district and/or wetland boundaries (if any)		
<b>Plan Item</b>	<b>Applicant</b>	<b>Staff</b>
Contents of Proposed Landscape/Lighting Plan/Architectural Plans:		
Landscaping areas dimensions		
Species list and size of plants a installation		
Location of overhead utility lines (electric, telephone, cable, etc.)		
Irrigation system or mehod of maintenance		
Location and species of proposed trees and shrubs, including street trees (trees located in the tree lawn, between the road and the sidewalk)		
Location, distribution, height of light poles / fixtures, including light levels and distribution of light (photometric)		
If in a design district, color façade elevations are required for each affected façade.		
Contents of Proposed Grading/Drainage Plan:		
Building Footprint and finish floor elevation(s)		
Pavement edges, with spot elevations along pavement edge		
Inlet/Catch Basin location, grate elevation, invert elevation(s), and sump elevation		
Stormwater Treatment System(s) identification, location, type, etc.		
Size of area of ground disturbance (should include all areas of ground disturbance)		
Stormwater Containment Area outline, with dimension lines from edge of area to each adjoining property line.		
Stormwater Containment Area contours		
Stormwater Containment Area stage-storage calculations (capacity of stormwater containment area at one-foot intervals from bottom to top)		
Stormwater Control Structures identification, location, type, elevations, and dimensions		
Stormwater Outfall identification, location, and type (combined sewer, separated sewer, regulated drain, surface water, etc.).		
Stormwater Containment Requirements [3" rainfall over entire site, with run-off coefficients (0.90 for impervious; 0.30 for non-impervious)]		
Stormwater Containment Requirements alternate calculation (only for outfalls other than combined sewer; to be determined in consultation with City Engineer and approved by City Engineer)		
Contents of Proposed Utilities Plan:		
NOTE: IDEM PERMIT APPLICATIONS AND PLANS ARE REQUIRED FOR ALL WATER AND SANITARY SEWER CONNECTIONS TO MORE THAN ONE BUILDING. THE CITY OF ELKHART ISSUES IDEM PERMITS LOCALLY, BUT THE APPLICATION PROCESS AND PLAN REQUIREMENTS EXCEED THE TECHNICAL REVIEW PROCESS REQUIREMENTS. CONTACT THE CITY ENGINEER FOR DETAILS.		
<b><i>A Commercial and Industrial Wastewater Questionnaire must be submitted with all Technical Review applications. If there is no change to the types of uses or processes at the site, and there are no changes to the sanitary sewer service, only the top section of the application must be completed and signed. If any changes to the types of uses or processes at the site, or there is a new or revised sanitary sewer service, the top section of the application should be left blank and the remaining application should be submitted. A floor plan of the facilites must also be attached.</i></b>		
If no new water/sewer construction or plumbing will occur on site, state on the plans.		
Water Service tap location and size (normally, only a single tap is allowed; fire protection, domestic, and irrigation are to be split at the property line with individual shut-off valves)		
Water Service pipe location, size, type, and material, including shut-off valves (it is expected for a site to have domestic, fire protection, and irrigation water lines)		
Domestic, fire protection, and irrigation lines must be shown, if project will not have an irrigation line, state on plans		
Water Service Meter location(s) and size(s) (shown within building footprint)		
Nearest fire hydrant and location of fire department connection		
Sanitary Sewer Service tee location, size, and invert elevation		
Sanitary Sewer Monitoring Manhole location, size, lid elevation, and invert elevation		
Sanitary Sewer Service pipe location, size, type, material, and slope, including clean-outs		

Plan Item	Applicant	Staff
Contents of Proposed Utilities Plan:		
Storm Sewer Catch Basin/Inlet and Manhole location, grate/lid elevation, invert elevation(s), and sump elevation		
Storm Sewer pipe location, size, type, material, and slope		
Storm Sewer outfall location, size, type, material, and protection details		
Electric, Natural Gas, and Telecommunication Utility Service line location(s) and meter locations		
Note on the plan stating that all water and sanitary sewer utility construction must be permitted and inspected by Public Works and Utilities through the Excavation Permit process		
Note on the plan stating that all stormwater improvements must be permitted, inspected, and accepted through the SWPPP process		
FOG Application (for any uses that include food service) to be attached to plan set		
Complete Commercial and Industrial Wastewater Questionnaire and attach floor plan		
SWPPP Application to be attached to plan set		

\_\_\_\_\_ **COMMERCIAL & INDUSTRIAL WASTEWATER QUESTIONNAIRE WITH COPY OF FLOOR PLAN ATTACHED.**

**If in an Overlay District, the requirements of Section 24 apply, including TYPE I and TYPE II Architectural Standards. See SUPPLEMENTAL OVERLAY DISTRICTS APPLICATION.**

***Established Design Overlay Districts***

- |                       |  |
|-----------------------|--|
| 1. Cassopolis Street: | Bristol Street to North City Limits      |
| 2. Main Street:       | Lusher Avenue to South City Limits       |
| 3. Nappanee Street:   | Bristol Street to South City Limits      |
| 4. Bristol Street:    | Nappanee Street to 600 Feet East of Oslo |
| 5. C.R. 6:            | Between East and West City Limits        |
| 6. Johnson Street:    | St. Joseph River to Bristol Street       |
| 7. C.R. 17:           | Between North and South City Limits      |
| 8. CBD                | Central Business District                |

***Please note: After Technical Review final sewer and water connection must be finalized by an engineer at Public Works prior to installation. See additional information from Public Works in Public Works chapter for detailed information on water and sewer, drainage, traffic (driveway and pavement thickness), revocable permits and excavation permits.***

***Please note: Erosion Control Plans must be submitted to the MS4 Stormwater Manager at the Elkhart County Soil and Water Conservation District office. Call 574.533-3630 x 3 for additional information.***

***Please note: Technical Review is not Local Plan Review. Building Plans, Plumbing, Mechanical and Electrical Specifications must be submitted to the Permit Center for Local Plan Review. Local Plan Review is conducted weekly by the Building Department. See Local Plan Review information.***

# COMMERCIAL / INDUSTRIAL WASTEWATER QUESTIONNAIRE

## INTRODUCTION

The City is required by State and Federal environmental agencies to adequately control commercial industrial discharges into the Publicly Owned Treatment Works (POTW). Toward this end, new connections or discharges must meet prior City approval. The complexity of the application and review process (as well as controls, if any) will depend on the prospective User's potential impact on the POTW.

## OVERVIEW OF PRETREATMENT REQUIREMENTS

*The City of Elkhart Wastewater Utility Use Ordinance No. 5746 states:*

### 5.11 Control Manhole Requirements

*5.11.1 All non-Residential Users who own, operate, or maintain a commercial or industrial facility connected to the POTW who make a new connection or modify an existing connection to the POTW shall install a Control Manhole unless the Director determines that a Control Manhole is not required.*

*5.11.2 Additionally, the Director shall have the authority to require any User, at the User's expense, to install a Control Manhole if determined that such manhole is necessary to protect the POTW.*

The City **will require** of any business the installation of a control monitoring manhole to provide access for evaluation of quality and quantity of wastewater discharge. The following is an overview of additional pretreatment requirements by business category:

- **RESTAURANTS / FOOD SERVICE ESTABLISHMENTS:**

At minimum, any establishment that will have food on site for public consumption is required to submit a FOG Discharge Certificate Application. In addition, all food service establishments will be categorized. Based on that category, the establishment will be required to install and adequately operate and maintain a grease control device that meets City approval (per Ordinance No. 5746, as amended & Ordinance No. 5434, as amended).

- **AUTOMOTIVE SERVICES WITH FLOOR DRAINS:**

Must install and adequately operate and maintain sediment and oil interceptor facilities that is compliant with Indiana Plumbing Code.

- **BUSINESSES / INDUSTRIES DISCHARGING WASTES BESIDES DOMESTIC WASTEWATER.**

Facilities with the **potential** to discharge wastes besides domestic wastewater (e.g. spill or process wastewater) to the sewer may require a Discharge Permit and associated controls.

## **INSTRUCTIONS FOR APPLYING FOR APPROVAL TO CONNECT / DISCHARGE**

ALL commercial and industrial businesses shall submit to the City of Elkhart Public Works & Utilities a completed "COMMERCIAL / INDUSTRIAL WASTEWATER QUESTIONNAIRE".

**Note: A site plan, floor plan, and plumbing plan of the facility MUST be included with this form or it will be rejected.**

## **ADDITIONAL INFORMATION**

Available upon request, copies of pages of the City's Wastewater Utility Use Ordinance, No. 5746, as amended or the Wastewater Utility Rates and Charges Ordinance No. 5286, as amended, pertaining to permit requirements, discharge prohibitions and surcharge rates. These ordinances are available online at the City's website:

<https://elkhartindiana.org/government/public-works/>



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CITY OF ELKHART  
**COMMERCIAL / INDUSTRIAL WASTEWATER QUESTIONNAIRE**

**THE PRETREATMENT STAFF IS REQUESTING THAT EACH SECTION IN THIS QUESTIONNAIRE BE ADDRESSED. ANSWER EACH INQUIRY IN FULL DETAIL, DO NOT LEAVE BLANK. INSERT N/A FOR NOT APPLICABLE, IF NEEDED.**

**SECTION A: GENERAL INFORMATION** (PLEASE TYPE OR PRINT)

COMPANY NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

FACILITY ADDRESS: \_\_\_\_\_

WASTEWATER DISCHARGES TO:

CITY SEWER SYSTEM

PRIVATE SEPTIC SYSTEM

NATURAL OUTLET (POND, ETC)

OTHER: \_\_\_\_\_

CONTACT OFFICIAL:

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DO YOU HAVE A CURRENT RULE 6 PERMIT?  YES\*  NO

\*IF YES, PLEASE LIST YOUR PERMIT NUMBER: \_\_\_\_\_

**SECTION B: FOOD SERVICE:**

WILL THIS ESTABLISHMENT HAVE ANY FOOD FOR PUBLIC CONSUMPTION ON SITE?  YES\*  NO

IS A FOOD SERVICE LICENSE BEING OBTAINED FROM THE ELKHART COUNTY HEALTH DEPARTMENT?  YES\*  NO

**\*IF YES, A FOG DISCHARGE CERTIFICATE APPLICATION IS REQUIRED TO BE SUBMITTED WITH THIS COMPLETED FORM. AN APPLICATION CAN IS AVAILABLE ONLINE AT: <https://elkhartindiana.org/government/public-works/>**

**SECTION C: SERVICE OR PRODUCT INFORMATION**

**THIS QUESTIONNAIRE WILL NOT BE ACCEPTED IF THIS SECTION IS NOT COMPLETED.**

**GIVE A BRIEF DESCRIPTION OF THE TYPES OF ACTIVITIES ON THE PREMISES. A DESCRIPTION OF THE BUILDING'S USE MUST BE INCLUDED. IF WAREHOUSING, WHAT IS BEING WAREHOUSED? (USE ADDITIONAL SHEETS IF NECESSARY):**

PROVIDE THE FOLLOWING INFORMATION ON CHEMICALS AND COMPOUNDS USED:

CHEMICAL NAME	SIZE OF LARGEST CONTAINER (GALLONS)	RATE OF HANDLING/USAGE (PER MONTH OR YEAR)	MAXIMUM QUANTITY ON SITE AT ANY ONE TIME

LIST ALL PRODUCTS MANUFACTURED OR SERVICES PROVIDED BY YOUR FACILITY ALONG WITH THE CORRESPONDING SIC NUMBER ACCORDING TO THE STANDARD INDUSTRIAL CLASSIFICATION MANUAL, BUREAU OF BUDGET, 1972 AS AMENDED:

PRODUCT OR SERVICE	SIC CODE

**SECTION D: PLANT OPERATIONAL CHARACTERISTICS**

**1. INDICATE WATER CONSUMPTION IN FACILITY**

PROCESS \_\_\_\_\_ GALLONS PER DAY  
 CONTACT COOLING WATER \_\_\_\_\_ GALLONS PER DAY  
 NON-CONTACT COOLING WATER \_\_\_\_\_ GALLONS PER DAY  
 BOILER FEED \_\_\_\_\_ GALLONS PER DAY  
 CONTAINED IN PRODUCT \_\_\_\_\_ GALLONS PER DAY  
 SANITARY\* \_\_\_\_\_ GALLONS PER DAY  
 OTHER: \_\_\_\_\_ GALLONS PER DAY

\* SANITARY FLOW MAY BE ESTIMATED AT 20 GPD PER EMPLOYEE

**2. INDICATE AVERAGE VOLUME OF DISCHARGE OR LOSS TO:**

CITY SEWER SYSTEM \_\_\_\_\_ GALLONS PER DAY  
 SEPTIC SYSTEM \_\_\_\_\_ GALLONS PER DAY  
 SURFACE DISCHARGE \_\_\_\_\_ GALLONS PER DAY  
 WASTE HAULER \_\_\_\_\_ GALLONS PER DAY  
 EVAPORATION \_\_\_\_\_ GALLONS PER DAY  
 OTHER: \_\_\_\_\_ GALLONS PER DAY



**SECTION H: ATTACHMENTS**

INITIAL EACH LINE TO INDICATE THE ATTACHMENTS HAVE BEEN INCLUDED WITH THE QUESTIONNAIRE:

**REQUIRED DOCUMENTS:** (NOTE: FAILURE TO SUBMIT THE FOLLOWING DOCUMENTS MAY RESULT IN A REJECTED QUESTIONNAIRE)

DESCRIPTION THE TYPES IF ACTIVITIES ON THE PREMISES (SECTION C)

\_\_\_\_\_ INCLUDED IN QUESTIONNAIRE ON PAGE 3

\_\_\_\_\_ ATTACHED TO THIS DOCUMENT

\_\_\_\_\_ SITE PLAN (SECTION G)

\_\_\_\_\_ FLOOR PLAN (SECTION G)

\_\_\_\_\_ PLUMBING PLAN (SECTION G)

ADDITIONAL DOCUMENTS (AS NEEDED):

\_\_\_\_\_ ADDITIONAL CHEMICALS AND COMPOUNDS (SECTION C)

\_\_\_\_\_ DESCRIPTION OF WASTEWATER TREATMENT PROCESS (SECTION E)

\_\_\_\_\_ WASTEWATER TREATMENT DESIGN/PLAN (SECTION E)

\_\_\_\_\_ OTHER (SPECIFY): \_\_\_\_\_

**SECTION I: SIGNATURE & CERTIFICATION STATEMENT**

CERTIFICATION STATEMENT: (TO BE SIGNED BY THE PROPERTY OWNER OR AN AUTHORIZED REPRESENTATIVE OF THE COMPANY/FACILITY IDENTIFIED)

I CERTIFY THAT I AM FAMILIAR WITH THE FACILITY IN QUESTION AND THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION CONTAINED IN THIS QUESTIONNAIRE IS TRUE AND ACCURATE.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

TITLE: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

FACILITY ADDRESS: \_\_\_\_\_

**SECTION J: MAILING ADDRESS**

Please send the completed questionnaire and any supporting documentation to:

Pretreatment Division  
Public Works & Utilities  
1201 S. Nappanee Street  
Elkhart, Indiana 46516

Email: [pretreatment@coei.org](mailto:pretreatment@coei.org)



# FATS, OILS AND GREASE REGISTRATION CERTIFICATE APPLICATION FORM

## INSTRUCTIONS

All Food Service Establishments (FSEs) connected to the City of Elkhart's sewer system are required to register their establishment with the City of Elkhart's Public Works and Utilities (PWU). If this FSE is not connected to the City of Elkhart's sewer system, completion of this application is not required.

To aid in the opening of a new food service establishment, this application has been divided into two main Parts. **A complete application includes Part 1 and Part 2 and must be submitted no less than 30 calendar days prior to commencing food preparation activities.** To determine an FSE's Category, Part 1 can be submitted prior to Part 2. Once received and reviewed by Public Works, the FSE will be notified of the Category and minimum grease control device requirements. In addition, if the FSE is involved in the City's Tech Review Process, Part 1 must be submitted. Part 2 can then be filled out with the appropriate information including the grease control device information.

Please refer to the following definitions when filling out this form.

Authorized Representative of the Food Service Establishment (FSE) means the following:

(a) If the FSE is a corporation:

- (1) The president, secretary, treasurer, or a vice-president of the corporation in charge of a principal business function, or any other person who is authorized to perform similar policy or decision-making functions for the corporation; or
- (2) The manager of one or more operating facilities, provided the manager is: authorized to make management decisions that govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations; initiate and direct other comprehensive measures to ensure long-term environmental compliance with environmental laws and regulations; can ensure that the necessary systems are established or actions are taken to gather complete and accurate information for individual FOG Registration requirements; and authority to sign documents and bind the corporation has been assigned or delegated to the manager in accordance with corporate procedures.

(b) If the FSE is a partnership or sole proprietorship: a general partner or proprietor, respectively.

(c) If the FSE is a Federal, State, or local governmental facility: a director or highest official appointed or designated to oversee the operation and performance of the activities of the government facility, or their designee.

(d) The individuals described in paragraphs (a) through (c), above, may designate a duly authorized representative if the authorization is in writing, the authorization specifies the individual or position responsible for the overall operation of the facility from which the discharge originates or having overall responsibility for environmental matters for the company, and the written authorization is submitted to the Director (the person responsible for supervising the operation of the POTW, or that person's duly authorized representative)..

Designated Facility Contact is the person responsible for day-to-day activities and operation of the FSE.

Existing FSE means a Food Service Establishment that is in operation on June 1, 2015.

New FSE means a Food Service Establishment that begins operation after June 1, 2015.

**General FOG Program Reminders:**

**Grease Trap & Interceptor Cleaning and Maintenance**

FSEs are required to obtain and maintain a copy of cleaning and maintenance records of all grease control devices including grease traps (inside), grease interceptors (outside) and cooking oil/grease dumpsters, on site for a minimum of 3 years. This may be a log or the waste hauler’s manifest. Please refer to the table below for the minimum requirements.

	Grease Trap or Interceptor	Cooking Oil or Grease Dumpster
Name and address of person cleaning or hauling company.....	✓	✓
Name and signature of person performing the maintenance.....	✓	✓
Documentation of full pump-out with volume of FOG, water and solids removed .....	✓	✓
Documentation of the amount of each of the following found in each device:		
floating FOG.....	✓	
water.....	✓	
settled solids.....	✓	
Documentation if repairs to the FOG Control Device or dumpster are required or performed.....	✓	✓
Identification of the where the contents are disposed.....	✓	✓



# FATS, OILS AND GREASE REGISTRATION CERTIFICATE APPLICATION FORM

**PLEASE PRINT CLEARLY!**

- **PART 1-must be completed for Tech Review and for Pretreatment staff to determine what grease control device(s) may be required.**
- **The completed application (Parts 1 & 2 and all required attachments) is required to be submitted at least 30 days prior to commencing food preparation activities.**

Is this application for a (select ONE):

- New FSE in a new building
- New FSE in an existing building
- New FSE due to a transfer of ownership.  
*\*Please note: The application is due within 15 days of notification of the transfer of ownership.*
- Existing FSE not previously registered.

## PART 1

### SECTION A - General Information

Name of Food Service Establishment (FSE): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Website of FSE: \_\_\_\_\_

Email Address of FSE: \_\_\_\_\_

### Authorized Representative:

**NOTE:** The Authorized Representative will receive all communications regarding this facility.

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

Mailing Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

### Owner of FSE:

Check if same as Authorized Representative

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

Mailing Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

### Designated Facility Contact (on-site contact):

Check if same as Authorized Representative

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

Email: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

### FOR INTERNAL USE ONLY:

Date Complete: \_\_\_\_\_ Category: \_\_\_\_\_ Facility #: \_\_\_\_\_

**PLEASE PRINT CLEARLY!**



Will this site be connected to City water?  Yes  No  
 Will this site be connected to City sewer?  Yes  No  
 If yes, is there an existing connection?  Yes  No  
 Or will this site be proposing a new sewer connection?  Yes  No

What is your expected average monthly water usage? \_\_\_\_\_ Gallons

What is your expected maximum monthly water usage? \_\_\_\_\_ Gallons

Expected opening date: \_\_\_\_\_

If this is a transfer of ownership, when did (or when will) the transfer occur? \_\_\_\_\_

For existing FSE's not previously registered, when did this FSE begin operations under the current owner? \_\_\_\_\_

**SECTION B – Operation and Facility Information**

Please choose those that best describe your facility:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Bakery                      | <input type="checkbox"/> Drive Thru (only) | <input type="checkbox"/> Hotel/Motel                |
| <input type="checkbox"/> Cafeteria                   | <input type="checkbox"/> Fast Food         | <input type="checkbox"/> Ice Cream Shop             |
| <input type="checkbox"/> Catering (including mobile) | <input type="checkbox"/> Food Packager     | <input type="checkbox"/> Meat Processor             |
| <input type="checkbox"/> Church                      | <input type="checkbox"/> Food Manufacturer | <input type="checkbox"/> Nursing Home               |
| <input type="checkbox"/> Club/Organization           | <input type="checkbox"/> Food Truck        | <input type="checkbox"/> School                     |
| <input type="checkbox"/> Coffee Shop                 | <input type="checkbox"/> Full Service      | <input type="checkbox"/> Seasonal Supermarket       |
| <input type="checkbox"/> Correctional Facility       | <input type="checkbox"/> Hospital          | <input type="checkbox"/> Wholesale Food Preparation |
| <input type="checkbox"/> Other, specify: _____       |  |   |

Please select the ONE that best describes your operation:

- Full kitchen that serves food on dishes that are washed on site
- Full kitchen that serves food on disposable dishes or dishes not washed on site
- Prepares prepackaged food and serves food on dishes that are washed on site
- Prepares prepackaged food and serves food on disposable dishes
- Limited use kitchen-carry-in for prep and clean-up

**Operating Hours & Number of Meals Served:**

Please indicate, in the table below, the hours of operation (including preparation and clean up time) as well as the typical number of meals served on each day.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<b>Hours</b> (ex. 10am-11:30pm)							
<b>Avg. # of Meals</b>							

Number of meals served during busiest hour of day: \_\_\_\_\_

Facility seating capacity: \_\_\_\_\_

Number of employees on largest shift: \_\_\_\_\_

Will take-out or carry-out service be available?  Yes  No

**PLEASE PRINT CLEARLY!**

**Equipment & Serving Information**

Please check all that apply and indicate the quantity & dimensions of each item as applicable:

<input type="checkbox"/> Dishwasher	_____	<b>Quantity &amp; attach specifications</b>
<input type="checkbox"/> Garbage Disposal or Food Grinder	_____	Establishments beginning operation after June 1, 2015 are not allowed to install or replace a garbage disposal or food grinder.
<input type="checkbox"/> 3-Basin Sink	_____	<b>Quantity &amp; length, width &amp; depth of bowl(s)</b>
<input type="checkbox"/> 2-Basin Sink	_____	<b>Quantity &amp; length, width &amp; depth of bowl(s)</b>
<input type="checkbox"/> 1-Basin Sink	_____	<b>Quantity &amp; length, width &amp; depth of bowl</b>
<input type="checkbox"/> Hand Sink	_____	<b>Quantity &amp; length, width &amp; depth of bowl</b>
<input type="checkbox"/> Mop Sink	_____	<b>Quantity &amp; length, width &amp; depth</b>
<input type="checkbox"/> Grill	_____	Quantity
<input type="checkbox"/> Stove	_____	Quantity
<input type="checkbox"/> Oven	_____	Quantity
<input type="checkbox"/> Wok Station (attach specifications)	_____	Quantity
<input type="checkbox"/> Deep Fryer	_____	Quantity
If checked: Is it used for daily food preparation		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Floor Drains	_____	Quantity
<input type="checkbox"/> Drive-Thru	_____	
<input type="checkbox"/> Other fixtures:	_____	

**SECTION D – Part 1 Certification**

I certify that the information submitted is true, accurate and complete to the best of my knowledge, and that I am the Authorized Representative.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

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

**PLEASE PRINT CLEARLY!**

## PART 2

***The following sections are required to be submitted at least 30 days prior to commencing food preparation activities.***

### SECTION E - Water Supply

Name as it appears on the Elkhart Public Works & Utilities Water/Sewer bill: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Elkhart Public Works Water/Sewer Account Number(s): \_\_\_\_\_

If there are any additional account numbers associated with this FSE please attach a separate piece of paper with the above information.

### SECTION F – Facility Information

Please attach the following documents to the application:

Site and plumbing plan(s) for all buildings, structures, facilities or installations that discharge or may discharge into the City's sewer system

The site plan or site map should indicate where the various areas of the establishment are located. These areas should include the outside property areas including parking lot, outdoor fixtures as well as inside features such as dining room, kitchen, bathroom, office, store room, etc. If you do not have a professionally drawn copy, one drawn on the computer or by hand will be adequate.

Plumbing plans should include floor diagrams, sewer connections, grease traps, sink drains, floor drains, dishwashers, restrooms, etc. If there are multiple FOG control devices planned, label appropriately and use the same references in Section G of this application.

All proposed menus for this facility.

### SECTION G - Treatment or FOG Control

Grease Trap       Grease Interceptor       Both       None

Brand Name or Manufacturer: \_\_\_\_\_

*For grease traps:* Flow

Rate (GPM): \_\_\_\_\_

*For grease interceptor:*

Capacity (gallons): \_\_\_\_\_

Model: \_\_\_\_\_

Location: \_\_\_\_\_

Devices/Fixtures Connected to FOG Control Device: \_\_\_\_\_

Cleaning Frequency: \_\_\_\_\_

\*If there are additional FOG control devices, please attach a separate piece of paper with the above information included for each additional device.

**PLEASE PRINT CLEARLY!**

City of Elkhart FOG Registration Certificate Application

If the **INDOOR** grease trap will be maintained in-house, how will the waste be disposed after cleaning the trap?

- Trash     Contractor disposes of grease     Recycle  
 Other: \_\_\_\_\_

**Grease Trap/Interceptor Hauler Information:**

If a contractor(s) will clean the grease trap and/or interceptor, please provide the following:

Contracting Company Name: \_\_\_\_\_  
Contact Name (if applicable): \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone Number of Hauler: \_\_\_\_\_

**Note:** Records of cleaning/pumping all grease control device **MUST** be kept on site for a minimum of 3 years. Please refer to the overview sheet of this application for more information.

**Additive Information:**

Will this facility use any additives in the plumbing, grease interceptor or grease trap (i.e., enzymes, bacteria, etc.)?

- Yes     No

If yes, please complete the following table and attach a Safety Data Sheet for each product.

Location	Additive Name	Amount Added	Additive Frequency

If your facility has grills/ovens what type of exhaust cleaning system do you use?

- Automatic     Manual     Not Sure     Not Applicable

Does your facility recycle fryer oil?

- Yes\*     No\*\*     Not Applicable

\*If yes:

Recycling Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone Number of Hauler: \_\_\_\_\_

\*\*If no, what do you do with your spent oil?

Is there a recycling container on-site?     Yes     No

If yes, where is it located? \_\_\_\_\_

**PLEASE PRINT CLEARLY!**

**Spill Prevention & Clean-Up Plan:**

All FSEs are **required** to have a FOG Spill Prevention & Clean-Up Plan. Please attach a copy of your FOG Spill Prevention & Clean-Up Plan to this application. At a minimum, this plan should include the following information:

- How are you going to prevent the spill from going down any floor or storm drains on the property?
- How will spill clean-ups be handled?
- What will be done with the mop water and any rags or other supplies used in cleaning the spill?

Do you have an oil spill clean-up kit?

Yes     No

**SECTION H - Additional Information**

Is there any additional information or unique circumstances regarding the facility or property that the City should be aware of (such as apartments connected to or in the same building as the FSE, additional sources of waste water beyond those of the FSE)?

\*Please attach additional sheets if necessary.

**SECTION I - Certification**

Please initial each appropriate line to indicate the following attachments have been included with the application:

**Required Documents:**

- \_\_\_\_\_ Site Plan (Section F)
- \_\_\_\_\_ Plumbing Plan (Section F)
- \_\_\_\_\_ All menus for FSE's (Section F)
- \_\_\_\_\_ Spill Prevention & Clean-Up Plan (Section G)

**Additional Documents (As Needed):**

- \_\_\_\_\_ Additional Water/Service Account Information (Section E)
- \_\_\_\_\_ Additional Interceptor Information (Section G)
- \_\_\_\_\_ Safety Data Sheets (Section G)

I certify that the information submitted is true, accurate and complete to the best of my knowledge, and that I am the Authorized Representative.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

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

**Please Return This Form & Associated Documents To:**

**Elkhart Public Works & Utilities  
Pretreatment Division  
1201 S. Nappanee St.  
Elkhart, IN 46516  
[pretreatment@coei.org](mailto:pretreatment@coei.org)**



# FATS, OILS AND GREASE REGISTRATION CERTIFICATE APPLICATION FORM

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	Grease Trap or Interceptor	Cooking Oil or Grease Dumpster
Name and address of person cleaning or hauling company.....	✓	✓
Name and signature of person performing the maintenance.....	✓	✓
Documentation of full pump-out with volume of FOG, water and solids removed.....	✓	✓
Documentation of the amount of each of the following found in each device:		
floating FOG.....	✓	
water.....	✓	
settled solids.....	✓	
Documentation if repairs to the FOG Control Device or dumpster are required or performed.....	✓	✓
Identification of the where the contents are disposed.....	✓	✓