Grease Trap Monitoring and Cleaning Log Sheet

Restaurant Name: _____

Address: _____

Unit Identification: _____

Date/Time	Cleaned By	Witnessed By	Grease Depth	Measured/Estimated Volume Removed	Waste Disposal Location/Method	Comment

Recommendation: Organize and maintain all records, receipts, invoices, etc. in a binder, and identify each specific service with labeled tabs.

*Note: Service invoice documentation and manifests, must be kept on site and readily available for inspector(s) to review for a **5-year period.**