



Grease Rendering Container Clean Out Log

FSE (Restaurant) Name: _____ Address: _____

Grease Rendering Container Location: _____

PLEASE KEEP THESE RECORDS IN YOUR “FOG BINDER”

Date of Removal	Company	Initials of Owner or Authorized Representative

**Any falsification, misrepresentation, or misleading information VOIDS this maintenance log.
I hereby certify that I am the Owner or that I have authority on behalf of the Owner to make entries
to the foregoing maintenance log and that the information contained on this sheet is correct.**

Signature of Owner / Authorized Representative _____ Date _____

Please use back of page for additional entries



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