

CITY OF TAMPA
FOOD SERVICE FACILITY PUMP OUT LOG

Food Service Facility Name: _____ ☐ Grease Trap ☐ Interceptor

Food Service Facility Address: Street: _____

City: _____ ST: _____ ZIP: _____

Instructions: Use this form to keep accurate pump out logs. Use a 3-hole punch and place inside a 3 ring binder.

[illegible]