CITY OF TAMPA
GREASE HAULER MANIFEST FORM

Grease Haulers Information:

Grease Hauler Name: _____

Business Address: Street or P.O. Box: _____

City: _____ *ST:* _____ *ZIP:* _____

City of Tampa Grease Hauler Registration Number: _____

Driver's Name: _____

Driver's License #: _____

Customer Information:

Customer Name	Address Serviced	Date	Time	Interceptor or Trap Serviced?	Estimated Amount of Total Gallons Removed	Estimated Number of Gallons Returned

Grease Disposal Site: *Averett Septic Tank Co.* *Grease Depot* *Hillsborough Co. Land Application Site*
(Circle one) *Address:* _____

Disposal Date: _____ Time: _____ Estimated Amount of Total Gallons Disposed of: _____

I am aware that there are penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations as set forth in Section 26-311(b) of the City of Tampa Code entitled "Falsifying Information", "Additional Criminal Offenses."

_____ _____
Date Signature

_____
Print Name