FAX (562) 570-2330

BMP MAINTENANCE LOG

FACILITY NAME:			LOCATION:		
CONTACT:			PHONE:		
DEVISE (Grease Interceptor / Trap / Container, Drip Pan, etc.):					
DATE	SERVICED BY WHOM	TYPE OF SERVICE (Pumping / Hauling, Repair, etc.)	DISPOSAL SITE (if known)	VOLUME PUMPED	SERVICE COMMENTS (Problems, etc.)
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