



**REQUEST FOR EXEMPTION**  
**From MSD Grease Trap Requirements for Food Establishments (FSE)**  
**MUST SUBMIT SCHEMATIC OF FLOOR PLAN AND LIST OF**  
**KITCHEN EQUIPMENT**

IPS# \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_

\*\*OFFICE USE ONLY\*\*

***I. FSE Information (Please Print)***

a. Business Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

FSE Owner/Agent: \_\_\_\_\_

Telephone No.: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

***II. Exemption Criteria***

a. Do you serve dairy products such as milk and dispose of unused portions to the sink?

b. Do you cook or heat beef, poultry or pork on the FSE premises?

c. Is there any type of frying equipment on the FSE premises?

d. Do you use more than five (5) gallons per day of any type of oil on the FSE premises?

For "YES" answers to questions A, B, or C above, list type and maximum quantities used during a typical one day period. Use attachments as necessary.

1. Type of product cooked/heated: (circle all that apply)      **beef**      **poultry**      **pork**

Method of cooking/heating: \_\_\_\_\_

Maximum pounds in one day: \_\_\_\_\_

2. Type of frying equipment \_\_\_\_\_

Used to fry what product(s): \_\_\_\_\_

Maximum pounds of frying done in a typical one day period: \_\_\_\_\_

3. Are any dishes washed in 3-compartment sink? If so, what type and quantity/day?

4. Is there a dishwasher or sanitizer machine?

5. Describe method used to dispose of used cooking oil/grease (if applicable).

***III. Certification of Owner/Agent***

I hereby certify that I am responsible for operation of the above named FSE facility, I have reviewed and understand the attached instructions and I have provided accurate information to the best of my knowledge.

Owner/Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Chris Clark at (502) 540-6974  
or email to: [chris.clark@louisvillemsd.org](mailto:chris.clark@louisvillemsd.org)