



# Sewer Discharge Compliance Application

revised February 5, 2026

Call 615-862-4590 with any questions or concerns



## ALL APPLICANTS COMPLETE ITEMS #1-16

1. **BUILDING PERMIT APPLICATION NUMBER:** \_\_\_\_\_ If N/A, explain why
2. Name of Business: \_\_\_\_\_
3. New Business at this location? YES/NO      4. Renovation of an existing building? YES/NO      5. Demolition? YES/NO
6. Is a commercial food prep or cleanup area affected? YES/NO      7. Is this a shell for future use? YES/NO
8. Name of previous business at this location: \_\_\_\_\_
9. Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip Code: \_\_\_\_\_
10. Brief Scope of Work: \_\_\_\_\_ Type of Business: \_\_\_\_\_

### POINT OF CONTACT FOR REVIEW

11. Name of Applicant: \_\_\_\_\_ Title: \_\_\_\_\_
12. Phone: \_\_\_\_\_ 13. Email: \_\_\_\_\_

### AUTHORIZED CONSTRUCTION CONTACT

14. Name: \_\_\_\_\_ Title: \_\_\_\_\_
15. Phone: \_\_\_\_\_ 16. Email: \_\_\_\_\_

### FOOD SERVICE ONLY – INSERT KITCHEN QUANTITIES IN FIELDS BELOW (if none, mark 0)

3-Comp Sink	Floor Drain	Floor Sink	2-Comp Sink & Prep Sink
Hand Sink	Mop Sink	Dish Machine	Dish Machine Prerinse Sink
Wok	Fryer	Grill / Griddle	Stove / Oven
Range	Food Grinder / Disposal	Self-Cleaning Hood Present? Y / N	Is this a Food Truck? Y / N
Seats Available	Employees	Transactions Per Day	Average Hours Open Per Day

### GREASE CONTROL DEVICE: New OR Existing (circle one)

Proposed Grease Control Make & Model: \_\_\_\_\_ hydromechanical trap \_\_\_\_\_ gravity flow interceptor

Proposed Grease Control Capacity: \_\_\_\_\_ gpm / \_\_\_\_\_ lbs OR \_\_\_\_\_ gal

Visit [ECO.NASHVILLE.GOV](http://ECO.NASHVILLE.GOV) → GREASE MANAGEMENT for resources on installation or sizing requirements

#### INCLUDE A TABLE OF WHICH PAGES IN THE PLANS THE FOLLOWING DETAILS CAN BE FOUND:

Grease Waste Plumbing, Sanitary Plumbing, Kitchen Floor Plan and Equipment Schedule, Grease Control Installation Detail (with elevation and clearances), Self-Cleaning Hood plans, VIN (food trucks only), and complete Menu.

**FOR EPLANS: INCLUDE THIS FORM AND ALL LISTED REQUIREMENTS IN UPLOAD  
ALL OTHER APPLICANTS SEND APPLICATION PACKET TO [MWS.SDC@NASHVILLE.GOV](mailto:MWS.SDC@NASHVILLE.GOV)**