

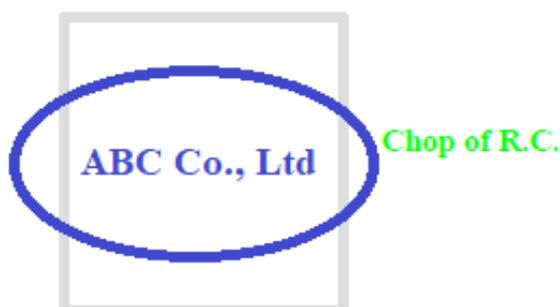


Application form for reassessment of chemical oxygen demand (COD) values in trade effluent

To: Drainage Services Department (DSD)

Account No.: 12345678901, 55556555566

We, the undersigned, have appointed DEF Laboratory
(**laboratory**[#]) to apply for reassessment of COD values for the account. We understand that the revised COD values are not transferable if there is a change in the registered consumer, and that any change in the appointed laboratory should be approved by DSD before sampling starts.



Registered Consumer (R.C.) : ABC Co., Ltd

Name of R.C. representative : Wong Ka Fat

Post : Director

Signature of R.C. representative: *Wong KF*

Date : 29/10/2xxx

Name of establishment : ABC Restaurant

Address : 2/F, Sha Tin Centre, Sha Tin, N.T.

Business Registration No. : 12345678-123-12-12-1
(if applicable)

The Laboratory must be a laboratory accredited within the Hong Kong Laboratory Accreditation Scheme (HOKLAS) for the analyses described in this application.

Statement of Purposes

1. When processing this application, DSD may ask the applicant / applicant's appointed laboratory to provide additional information and the submission of information is voluntary. Insufficient information may prevent DSD from processing your application.
2. The applicant / applicant's appointed laboratory fully understands and agrees that DSD may use the information provided for the purpose of or in connection with this application or other related matters, or transfer to other government departments for law enforcement purpose.
3. You have a right of access and correction with respect to personal data as provided for in Sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of your personal data. Such requests may be made in writing. A fee may be imposed for complying with a data access request.
4. Any person who offers any advantage to a public servant due to this application shall be guilty of an offence under the Prevention of Bribery Ordinance. If any person solicits or accepts any advantage due to this application, please contact the Independent Commission Against Corruption (Phone no.: 25266366).
5. Any person who, in an application or in an attachment to an application, furnishes or supplies with intent to deceive any false or misleading information commits an offence.

Letter of undertaking

To: Drainage Services Department (DSD)

For revision of Trade Effluent Surcharge rate of

Name of registered : ABC Co., Ltd.

consumer

Name of : ABC Restaurant

establishment _____ (if different from above)

We, DEF laboratory (laboratory#), agree to undertake full responsibility of sampling and testing for the application. We confirm that the information provided in this COD reassessment proposal is correct and up-to-date.

Sampling personnel are staff of our laboratory. They have been trained by approved trainer of our laboratory for trade effluent sample collection. They meet the criteria as listed in Appendix V of "Guidelines on Application for Reassessment of COD".

List of sampling personnel for this application: (in alphabetical order by last name)

Please refer to the latest competent sampler list submitted to DSD by our laboratory on 20-9-2xxx (reference no. 345678)

Declaration:

1. We understand that unacceptable performance in the sampling or testing, the COD reassessment application may be rejected by DSD and/or incident will be referred to Hong Kong Accreditation Service.
2. We understand that DSD will delete any sampler, who commits an act that casts doubt on the integrity of representative sampling or commits acts of incompetence during sampling in connection with COD reassessment application, from the competent samplers list.
3. We declare that the sampler(s) on the competent samplers list ~~*is (are)~~/is not (are not) engaged in other work or employment with the applicant or any wastewater treatment contractors which could create or potentially give rise to a conflict or potential conflict between their personal/financial interests and their duties in connection with this application.

Name of

Laboratory

Representative : TONY CHANPost : Laboratory Manager

Signature of

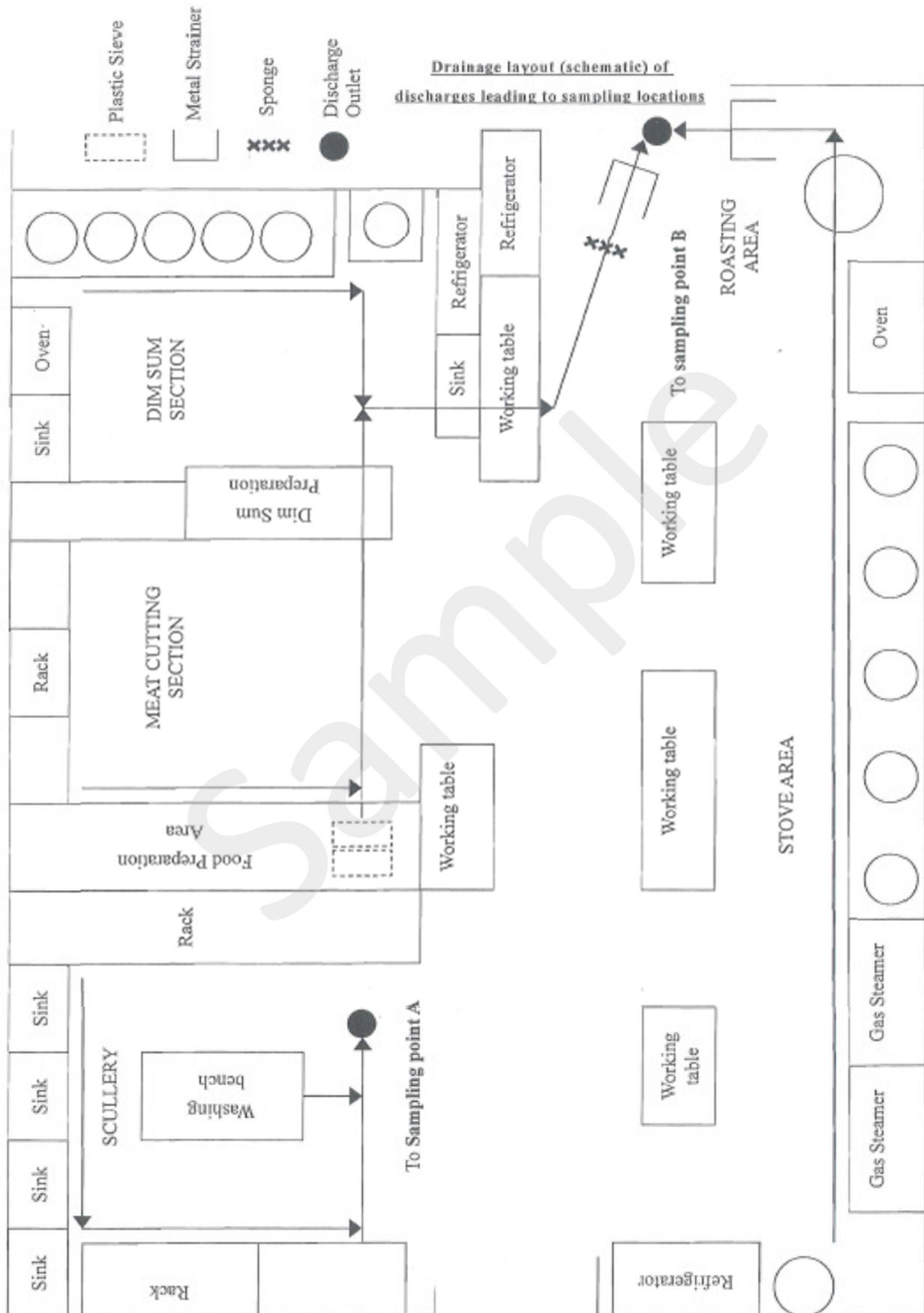
Laboratory

Representative : _____

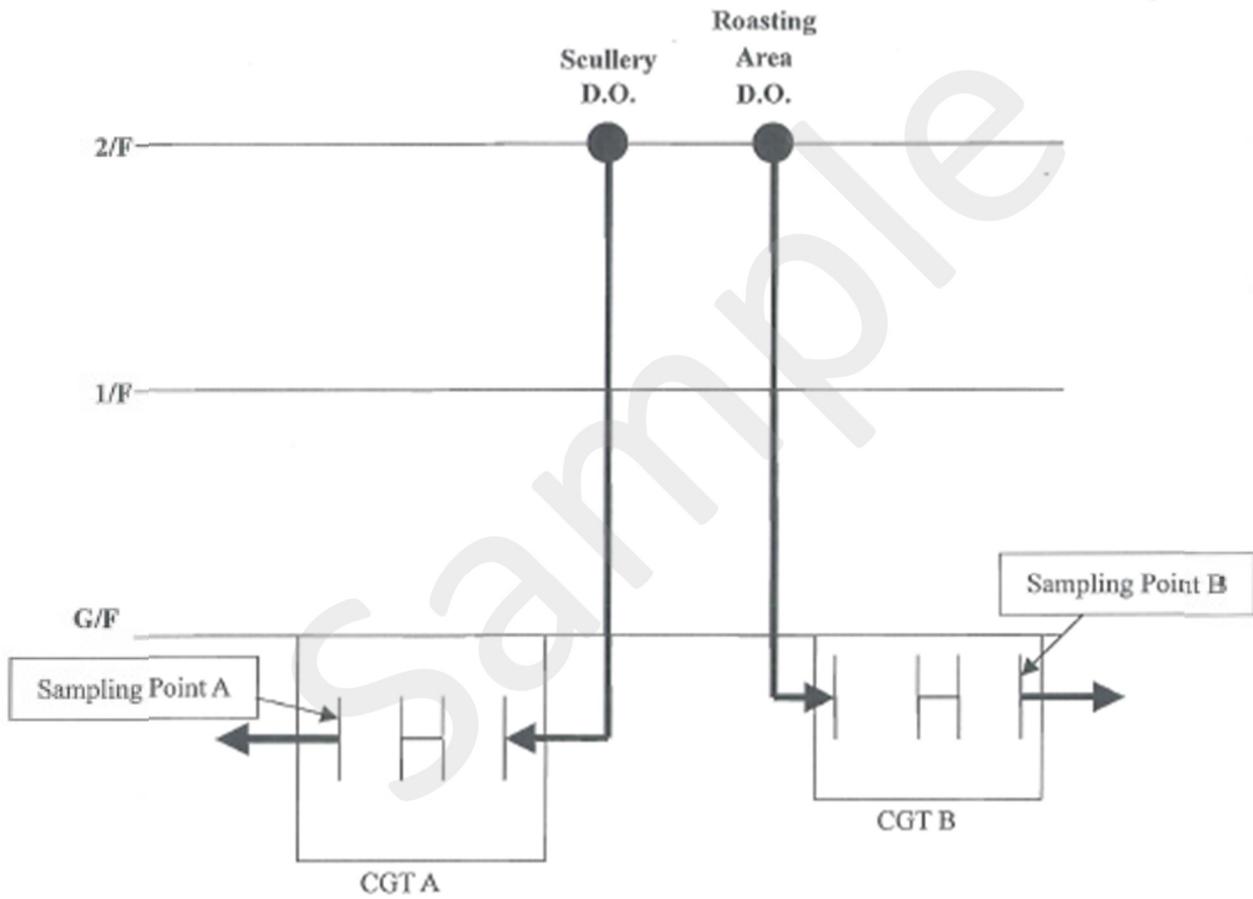
Date : 29/10/2xxxChop of
Laboratory

* Delete whichever if inappropriate

The Laboratory must be a laboratory accredited within the Hong Kong Laboratory Accreditation Scheme (HOKLAS) for the analyses described in this application.



Cross-section layout (schematic) of discharges from multi-storey building leading to sampling locations



ABC Restaurant

A/C No. 12345678901 (Main)

A/C No. 55556555566 (Hydro-vent)

Sampling plan

- Name of the Establishment : ABC Restaurant
1. Sampling time from 04:00 to 01:30, with sampling time interval of 15min.
 2. Sampling location G/F
 3. Sampling point :
 - Total No. of discharged point : 2
 - Location of discharged point : Scullery, and roasting area
 - Total No. of Sampling Point : 2 (sampling points A and B)
 - Location of Sampling Point : Samples collected at the outlets of central grease traps
 4. Sampling proposal :
 - Sampling Date : To be confirmed
 - No. of Sampling Days : Minimum 4
 - Sampling Period : 04:00-01:30
 - Sampling Frequency : Every 15 minutes
 - Sampling method and tools : Using wide mouth glass sampling bottles (see note)
 - Sampling Volume : 500 ml
 - Sample container : Glass bottle
 5. Water meter(s) location G/F (2 meters, Main meter no. M-12121212
Hydro-vent meter no. M-34343434
 6. Procedure :
 - 6.1 Record water meter reading from 04:00 to the time of last sample, with a time interval of one hour. Water meter reading for last sample should also be recorded.
 - 6.2 Sampling staff should arrive at the sampling location 15 to 30min. before the sampling time.
 - 6.3 All necessary items and equipment should be ready including wide mouth sampling bottles (which should have been thoroughly cleaned prior to use), sample log sheet, sample storage box with sufficient ice, pump, bucket, tape etc.
 - 6.4 Individual samples should be collected at a time interval of 15min. and the sampling should be punctual.
 - 6.5 Individual samples should be collected at specified location using specified sampling method.
 - 6.6 All sampling staff should fully understand the sampling arrangement before the commencement of sampling.
 - 6.7 Sampling equipment should be cleaned to avoid contamination. The sampling bottles should be rinsed two to three times in the discharge stream, prior to collection of the sample except where high concentrations of grease and solids are present.
 - 6.8 Exercise care during sampling to avoid incorporation of solids that may be attached to the effluent channel or pipe.

- 6.9 Deliver sample into sample bottle up to bottle neck, cover it and seal properly with tape and sign at the junction.
- 6.10 Attach sample label(s) to the sample bottle.
- 6.11 Place the sample bottle into sample storage box with sufficient ice inside to keep samples at 0 – 4°C to minimize change in sample quality.
- 6.12 Sign on the sample log sheet to confirm the collection of the sample.

Note :

Sampling method :

- I Using wide mouth glass sampling bottles : All samples should be well mixed and transferred into sample bottles provided by DEF Laboratory. Sampling staff may use the sample bottles as provided by DEF Laboratory directly to collect sample at sampling location and the sampling point should be at middle level of water depth in the Central Grease Trap (CGT).
- II Siphon / Open tap / Electric pump method : Effluent flow should be allowed for at least one minute before sample is collected. The discharge volume should be large enough to displace effluent remaining in the sampling line during the last sampling. The intake of the sampling line should be placed at middle level of water depth in the CGT. The linear velocity of the sample in the pipe should not be less than 0.5m/s (based on maximum internal diameter of the sampling hose / tap).

ABC Restaurant



Central Grease Trap A (CGT-A) was located at the G/F car park (near the passenger lift). "Bio-substance" was placed inside the 1st chamber of the CGT. Sampling point A was at the outlet of the CGT. Water Meter Room was located at the G/F car park. The entrance of the room was beside the management office.

ABC Restaurant

Sampling Tool : Wide mouth glass sampling bottle



Central Grease Trap B (CGT-B) was located at the entrance of the G/F car park. "Bio-substance" was placed inside the 1st chamber of the CGT. Sampling point B was at the outlet of the CGT.

Water Consumption Record
of
ABC Restaurant

Account No. (Main) : 12345678901
 Account No. (Hydro-Vent) : 55556555566
 Meter No. (Main) : MKP-12121212
 Meter No. (Hydro-Vent) : MNDL-34343434

Proposed number of sampling days

Previous Date	Present Date	Previous Meter Reading (Cubic meter)	Present Meter Reading (Cubic meter)	Monthly Consumption (Cubic meter)	No. of days	Daily Consumption (Cubic meter)
<u>Meter no.</u> 24-01-2000	MNDL-34343434 15-05-2000	376	961	585	112	5.22
15-05-2000	05-09-2000	961	1,583	622	113	5.50
				1,207	225	5.36
<u>Meter no.</u> 02-04-2000	MKP-12121212 03-05-2000	29,999	34,201	4,202	31	135.55
03-05-2000	03-06-2000	34,201	38,386	4,185	31	135.00
03-06-2000	07-07-2000	38,386	42,677	4,291	34	126.21
07-07-2000	31-07-2000	42,677	45,855	3,178	24	132.42
31-07-2000	01-09-2000	45,855	49,822	3,967	32	123.97
01-09-2000	29-09-2000	49,822	52,740	2,918	28	104.21
				22,741	180	126.34
						131.70

Daily Average

REMARKS:

According to the generic COD (total) value of Restaurants and the water consumption record, we propose that the no. of sampling days is 4. $(1630 \text{ g/m}^3 \times 131.70 \text{ m}^3/\text{day} \times 0.8 \div 1000 = 171.74 \text{ kg/day})$

Procedures for sample storage, delivery, and preservation

1. Sample storage : After the completion of sampling, all samples should be kept at 0 – 4°C in sample storage box(es) under custody with locks provided by laboratory.
2. Sample delivery : All collected samples to be transported to the laboratory by sampling/laboratory staff (note1) as soon as possible, and not later than the end of each sampling day the latest (note 1)

	Person-in-charge /company (at sampling location)	Place of departure & departure time	Person-in-charge /company (at place of destination)	Place of destination & arrival time	Means of transport/ Transport company
Immediate delivery	Staff of DEF Laboratory (Mr LEE Ming-fai)	ABC Restaurant B2/F 01:45	Staff of DEF Laboratory (Mr LEE Ming-fai)	DEF Laboratory 03:00	DEF Laboratory vehicle

3. Sample preservation and mixing :

According to the requirements stipulated in the “Technical Memorandum on procedures and methods for sampling and analysis of trade effluents”

Note 1: Sample delivery**1.1 Immediate delivery -**

After completion of sampling, the sampler(s) should securely and properly store the samples in sample storage container(s) with sufficient ice provided by the laboratory to maintain a temperature of 0 – 4 °C and deliver them under custody with all sampling record from sampling location to the laboratory immediately. On leaving the sampling location, the sampler(s) should record in sample log sheet the time and location of leaving, as well as the name(s) and signature(s) of staff responsible for sample delivery. On arrival at the destination, an approved laboratory staff should unlock the sample storage container(s), put the samples into laboratory refrigerator, record the time of arrival and the name of the laboratory staff with signature.

1.2 Delayed delivery -

If samples cannot be delivered immediately after completion of sampling, the sampler(s) should keep the samples under custody, securely and properly store them in sample storage container(s) with sufficient ice provided by the laboratory to maintain a temperature of 0 – 4 °C and transport them to the laboratory as soon as possible. On leaving the sampling location, the sampler(s) should record in sample log sheet the time and location of leaving, as well as the name(s) and signature(s) of staff responsible for sample delivery. On arrival at the destination, an approved laboratory staff should unlock the sample storage container(s), put the samples into laboratory refrigerator, record the time of arrival and the name of the laboratory staff with signature.

1.3 Split delivery -

If there are too many samples, and it is anticipated that they cannot be delivered to the laboratory in one batch, the sampler(s) should arrange to deliver part of the samples collected earlier to the laboratory and deliver the rest immediately after the completion of all sampling work. At all time, samples should be kept under custody, securely and properly stored in sample storage container(s) with sufficient ice provided by the laboratory to maintain a temperature of 0 – 4 °C and transported to the laboratory as soon as possible. On leaving the sampling location, the sampler(s) should record in sample log sheet the time and location of leaving, as well as the name(s) and signature(s) of staff responsible for sample delivery. On arrival at the destination, an approved laboratory staff should unlock the sample storage container(s), put the samples into laboratory refrigerator, record the time of arrival and the name of the laboratory staff with signature.

Sample Storage Containers with Lock





Declaration of kitchen practice for restaurant and food factory

 Name of the Establishment : ABC Restaurant

 Address : 2/F, Shatin Centre, Shatin, N.T.

 Nature of the business : Restaurant – Chinese

A. Kitchen Practice (Kitchen or Food Factory – hereafter referred to as Kitchen)

1. Which preliminary procedure is used for cleaning the tableware and food utensils ?
 - The food waste is scraped into waste bins
 - The food waste is cleared by flushing with water
 - Other, please specify Dish-washing machine
2. Are *stainless steel / ~~plastic strainers~~ used in the sinks to remove food dregs from the cleaning process ?
 - Yes No
3. Are there any grease boxes installed under the sink ?
 - Yes No
 If “yes”, the cleaning frequency is 1 times per 1 day and carried out by *staff / ~~other,~~
~~please specify~~ _____
4. Are there any devices used at washing bench to remove food dregs during cleaning ?
 - Yes No
 If “yes”, which type of device is used?
 - *~~Bamboo~~ / Stainless steel / Plastic strainer
 - Other, please specify _____
5. Other than fixed bar screens, any other devices used to retain food dregs in the drainage of kitchen ?
 - Yes No
 If “yes”, which type of device is used?
 - *Stainless steel / Plastic strainer
 - Other filtering device → please complete **section A.6**
6. In surface channel(s), other filtering device in use is *~~sponge / other,~~ please specify _____

 Near the drainage outlet(s), other filtering device in use is *~~sponge / other,~~ please specify _____

 Will their use in the drainage system interrupt flow of wastewater ? will will not

*Delete whichever if inappropriate

6.1 Is the same device used in other operations of the kitchen or scullery ?

Yes No

If “yes”, please specify _____

6.2 What is the average consumption of the filtering device / material ? 4 pieces / month

(supported with copies of invoices for the previous four months)

7. How is frozen food thawed in the food preparation ?

- In *buckets / sinks with water
- In *buckets / sinks with running water
- Thaw slowly at room temperature

8. Which kind of ventilation device is installed in the kitchen ?

*Hydro-vent / Air-filter system / ~~Other~~, please specify _____

9. How is the oily matter gathered from the kitchen and scullery being disposed ?

- Disposed directly into *waste bins / garbage bags by staff
- Disposed into the central grease traps
- Stored in buckets and collected by ABC Oil Company

_____ (contractor) for *disposal / other recycling purposes.

10. How many drainage outlets in kitchen and scullery ?

Note: An uninterrupted flow should be maintained.

- | | |
|---|------------------------------|
| 10.1) <u>1</u> No.(s) at <u>Roasting Area</u> | 10.6) _____ No.(s) at _____ |
| 10.2) <u>1</u> No.(s) at <u>Scullery</u> | 10.7) _____ No.(s) at _____ |
| 10.3) _____ No.(s) at _____ | 10.8) _____ No.(s) at _____ |
| 10.4) _____ No.(s) at _____ | 10.9) _____ No.(s) at _____ |
| 10.5) _____ No.(s) at _____ | 10.10) _____ No.(s) at _____ |

11. Are there any recycle tanks in operation during cleaning?

Yes No

B. Central Grease Traps

Any central grease trap(s) provided for the Establishment ?

Yes No

If “yes”, please complete **sections B1-B6**:

1. Information of the grease traps : 2 No.(s) of grease traps in operation

Overall dimensions (LxWxH)	No. of chambers	Effective depth	Effective volume	No. of such grease trap	Total effective volume
2.4 m x 1.2 m x 1.2 m	2	0.8 m	2.3 m ³	1	4.2 m ³
2.6 m x 1.2 m x 0.8 m	2	0.6 m	1.9 m ³	1	
m x m x m		m	m ³		
m x m x m		m	m ³		
m x m x m		m	m ³		

Other, please specify _____

*Delete whichever if inappropriate

2. Is wastewater generated from ALL operations of the kitchen and scullery discharged to the public drain via those grease traps ?
 Yes No
3. Is wastewater from other establishments discharged to the above-mentioned grease traps?
 Yes No
4. What is the pump-out frequency ?
1 time(s) per 1 month and carried out by XYZ Environmental Treatment Co.
 _____ (contractor).
(supported with copies of invoices for cleaning of grease trap and grease trap waste disposal record (DSD/TES9(e)) for the previous four months)
5. If the Establishment maintains the grease traps by its own staff, please state the procedure, time and frequency taken to remove and dispose of the scum and settled solids below.
(supported with a logbook verified by authorized person with signature and grease trap waste disposal record (DSD/TES9(e)) for the previous four months)

6. Are there any treatment materials added directly or indirectly to the grease traps for improving the quality of effluent ?
 Yes No

If “yes”, please give the names of the products and responsible local Supplier / Contractor in the following table.

*(supported with an effective Contract OR with *invoices / a dosing logbook verified by authorized person with signature for the previous four months)*

Product#	Supplier / Contractor
Bio-substance	DEF Treatment Co.

Remark # Please submit technical information of the product(s) in detail

State the procedure of application of the product(s), including dosage and dosing point below

2.5 kg “bio-substance” (totally 5 kg) was separately put in 1st chamber of CGT A and B.

Replacement would be performed every month.

C. Other methods of treatment

Other ~~*physical / chemical / biological~~ procedures in wastewater treatment

(supported with records verified by authorized person with signature for the previous four months)

*Delete whichever if inappropriate

Note: Unless explicitly approved by Drainage Services Department, any other enhancement or treatment, e.g. filter, net, sponge, or biological products not declared in this form should NOT be temporarily implemented or augmented during the sampling period.

Other Remarks

Fish pool was connected to CGT. The restaurant manager promised to avoid discharging or replacing water of fish pool during sampling date. Otherwise, sampling arrangement would be cancelled for that day.

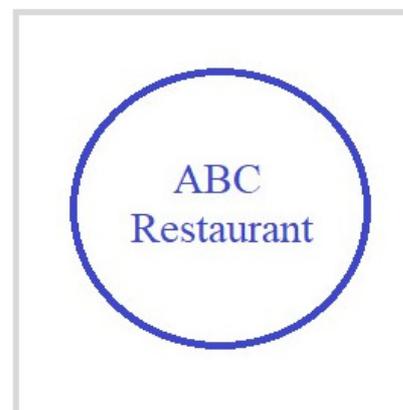
Declaration

I declare on behalf of the Establishment that the information given in the above Sections A to C is correct. The business operation practices as reported in these Sections are strictly adhered to at all times.

Name of Representative : Chan Tai Man

Post : Restaurant Manager

Signature : Chan TM



Company Chop

Date : 29/10/2xxx

Grease trap waste disposal record

Part A – To be completed by grease trap waste producer

I certify, at the following date, the personnel or grease trap waste collector as stated in **Part B** was appointed to collect the mentioned quantity of grease trap waste from the declared waste producing location.

Name of Personnel in Charge : Wong Ka Tak

Post : Manager Signature : Wong KT

Waste Producing Location : ABC Restaurant

Address : 2/F, Shat Tin Centre, Sha Tin, N.T.

Grease Trap Cleaning Invoice

Ref. No.

(if applicable) : 1115

Date of Grease Trap Cleaning : 3/7/2xxx


Part B – To be completed by grease trap waste collector

I certify that I collected 4 (m³) of grease trap waste as per the date and location listed in **Part A** in vehicle (Registration No)(if applicable) ZZ1234 and delivered it to the mentioned waste disposal location on the declared date (and time) below.

Name of Personnel in Charge : Chan Chain Kit

Post : Driver Signature : CHAN CK

Company^ : XYZ Environmental Treatment Co.

Waste Disposal Location : West Kowloon Transfer Station

Transaction Record Ref. No.

(if applicable) : 12/361650

Time of delivered to disposal location : 10:08

Date of delivered to disposal location : 4/7/2xxx



Note : The record should be completed properly for every collection of grease trap waste, and submitted together with the transaction record issued by grease trap waste handling facility whenever it is requested by Drainage Authority.

Remarks : ^ For the grease trap waste producer who appoints its staff to collect grease trap waste, please fill in the relevant information of producer.

Grease trap waste disposal record

Part A – To be completed by grease trap waste producer

I certify, at the following date, the personnel or grease trap waste collector as stated in **Part B** was appointed to collect the mentioned quantity of grease trap waste from the declared waste producing location.

Name of Personnel in Charge : Wong Ka Tak

Post : Manager Signature : Wong KT

Waste Producing Location : ABC Restaurant

Address : 2/F, Shat Tin Centre, Sha Tin, N.T.

Grease Trap Cleaning Invoice Ref. No. (if applicable) : 1119

Date of Grease Trap Cleaning : 2/8/2xxx



Part B – To be completed by grease trap waste collector

I certify that I collected 4 (m³) of grease trap waste as per the date and location listed in **Part A** in vehicle (Registration No)(if applicable) ZZ1234 and delivered it to the mentioned waste disposal location on the declared date (and time) below.

Name of Personnel in Charge : Chan Chain Kit

Post : Driver Signature : CHAN CK

Company^ : XYZ Environmental Treatment Co.

Waste Disposal Location : West Kowloon Transfer Station

Transaction Record Ref. No. (if applicable) : 42/364710

Time of delivered to disposal location : 11:12

Date of delivered to disposal location : 3/8/2xxx



Note : The record should be completed properly for every collection of grease trap waste, and submitted together with the transaction record issued by grease trap waste handling facility whenever it is requested by Drainage Authority.

Remarks : ^ For the grease trap waste producer who appoints its staff to collect grease trap waste, please fill in the relevant information of producer.

Grease trap waste disposal record

Part A – To be completed by grease trap waste producer

I certify, at the following date, the personnel or grease trap waste collector as stated in **Part B** was appointed to collect the mentioned quantity of grease trap waste from the declared waste producing location.

Name of Personnel in Charge : Wong Ka Tak

Post : Manager Signature : Wong KT

Waste Producing Location : ABC Restaurant

Address : 2/F, Shat Tin Centre, Sha Tin, N.T.

Grease Trap Cleaning Invoice Ref. No. (if applicable) : 1123

Date of Grease Trap Cleaning : 5/9/2xxx



Part B – To be completed by grease trap waste collector

I certify that I collected 4 (m³) of grease trap waste as per the date and location listed in **Part A** in vehicle (Registration No)(if applicable) ZZ1234 and delivered it to the mentioned waste disposal location on the declared date (and time) below.

Name of Personnel in Charge : Chan Chain Kit

Post : Driver Signature : CHAN CK

Company^ : XYZ Environmental Treatment Co.

Waste Disposal Location : West Kowloon Transfer Station

Transaction Record Ref. No. (if applicable) : 19/234980

Time of delivered to disposal location : 15:32

Date of delivered to disposal location : 6/9/2xxx



Note : The record should be completed properly for every collection of grease trap waste, and submitted together with the transaction record issued by grease trap waste handling facility whenever it is requested by Drainage Authority.

Remarks : ^ For the grease trap waste producer who appoints its staff to collect grease trap waste, please fill in the relevant information of producer.

Grease trap waste disposal record

Part A – To be completed by grease trap waste producer

I certify, at the following date, the personnel or grease trap waste collector as stated in **Part B** was appointed to collect the mentioned quantity of grease trap waste from the declared waste producing location.

Name of Personnel in Charge : Wong Ka Tak

Post : Manager Signature : Wong KT

Waste Producing Location : ABC Restaurant

Address : 2/F, Shat Tin Centre, Sha Tin, N.T.

Grease Trap Cleaning Invoice Ref. No. (if applicable) : 1130

Date of Grease Trap Cleaning : 4/10/2xxx



Part B – To be completed by grease trap waste collector

I certify that I collected 4 (m³) of grease trap waste as per the date and location listed in **Part A** in vehicle (Registration No)(if applicable) ZZ1234 and delivered it to the mentioned waste disposal location on the declared date (and time) below.

Name of Personnel in Charge : Chan Chain Kit

Post : Driver Signature : CHAN CK

Company^ : XYZ Environmental Treatment Co.

Waste Disposal Location : West Kowloon Transfer Station

Transaction Record Ref. No. (if applicable) : 14/316792

Time of delivered to disposal location : 12:01

Date of delivered to disposal location : 5/10/2xxx



Note : The record should be completed properly for every collection of grease trap waste, and submitted together with the transaction record issued by grease trap waste handling facility whenever it is requested by Drainage Authority.

Remarks : ^ For the grease trap waste producer who appoints its staff to collect grease trap waste, please fill in the relevant information of producer.

Proposed number of sampling days

THE GOVERNMENT OF THE HKSAR
WEST KOWLOON TRANSFER STATION
TRANSACTION RECORD
香港特別行政區政府
西九龍廢物轉運站交易紀錄

Date: 4/7/2xxx Ref. No.: 12/361650
日期 參考號碼

Veh. Reg. Mark: ZZ1234 VRM A/O No.: 1234567
車輛登記號碼 帳戶編號

Time in: 10:08 Time out: 10:29
進入時間 離開時間

Weight in: 23.34 (tonne) 入貨量 (公噸)
Weight out: 12.66 (tonne) 出貨量 (公噸)

Net weight: 10.68 (tonne) 淨物量 (公噸)
Load charged: 10.68 (tonne) 收費量 (公噸)

Incident Form: 事故紀錄
Complementary ticket: 免費券 N XYZ
Environmental Treatment Co.

Telephone enquiry (查詢熱線) : 2271 0876

THE GOVERNMENT OF THE HKSAR
WEST KOWLOON TRANSFER STATION
TRANSACTION RECORD
香港特別行政區政府
西九龍廢物轉運站交易紀錄

Date: 3/8/2xxx Ref. No.: 42/364710
日期 參考號碼

Veh. Reg. Mark: ZZ1234 VRM A/O No.: 1234567
車輛登記號碼 帳戶編號

Time in: 11:12 Time out: 11:42
進入時間 離開時間

Weight in: 23.34 (tonne) 入貨量 (公噸)
Weight out: 12.66 (tonne) 出貨量 (公噸)

Net weight: 10.68 (tonne) 淨物量 (公噸)
Load charged: 10.68 (tonne) 收費量 (公噸)

Incident Form: 事故紀錄
Complementary ticket: 免費券 N XYZ
Environmental Treatment Co.

Telephone enquiry (查詢熱線) : 2271 0876

THE GOVERNMENT OF THE HKSAR
WEST KOWLOON TRANSFER STATION
TRANSACTION RECORD
香港特別行政區政府
西九龍廢物轉運站交易紀錄

Date: 6/9/2xxx Ref. No.: 19/234980
日期 參考號碼

Veh. Reg. Mark: ZZ1234 VRM A/O No.: 1234567
車輛登記號碼 帳戶編號

Time in: 15:32 Time out: 16:01
進入時間 離開時間

Weight in: 23.34 (tonne) 入貨量 (公噸)
Weight out: 12.66 (tonne) 出貨量 (公噸)

Net weight: 10.68 (tonne) 淨物量 (公噸)
Load charged: 10.68 (tonne) 收費量 (公噸)

Incident Form: 事故紀錄
Complementary ticket: 免費券 N XYZ
Environmental Treatment Co.

Telephone enquiry (查詢熱線) : 2271 0876

THE GOVERNMENT OF THE HKSAR
WEST KOWLOON TRANSFER STATION
TRANSACTION RECORD
香港特別行政區政府
西九龍廢物轉運站交易紀錄

Date: 5/10/2xxx Ref. No.: 14/316792
日期 參考號碼

Veh. Reg. Mark: ZZ1234 VRM A/O No.: 1234567
車輛登記號碼 帳戶編號

Time in: 12:01 Time out: 12:30
進入時間 離開時間

Weight in: 23.34 (tonne) 入貨量 (公噸)
Weight out: 12.66 (tonne) 出貨量 (公噸)

Net weight: 10.68 (tonne) 淨物量 (公噸)
Load charged: 10.68 (tonne) 收費量 (公噸)

Incident Form: 事故紀錄
Complementary ticket: 免費券 N XYZ
Environmental Treatment Co.

Telephone enquiry (查詢熱線) : 2271 0876

XYZ Environmental Treatment Company,
1/E., Kowloon Centre, Kowloon, Hong Kong.

Tel: 12345678
Fax: 23456789

INVOICE 發票

Client 客戶名稱	No. 貨單編號	1115
ABC Restaurant	Issue Date 發出日期	July 25 2xxx
	Customer No. 客戶編號	12345
Site Address 工作地點	Your Ref. 客戶訂單編號	CGT0708
Sha Tin Centre, Sha Tin, N.T (G/F car park, CGT)	Salesman 營業員	Kay
	Payment Terms 付款方式	NET 30

產品編號 ITEM CODE	產品說明 PRODUCT DESCRIPTION	數量 QTY	單位 UNIT PRICE	金額 AMOUNT
CGT0708	Central Grease Trap Cleaning 3 July 2xxx	1	1000.00	1000.00

Certified true copy

Jack

(Jack CHAN)
Director

XYZ
Environmental
Treatment Co.

XYZ Environmental Treatment Company,
1/E, Kowloon Centre, Kowloon, Hong Kong.

Tel: 12345678
Fax: 23456789

INVOICE 發票

Client 客戶名稱	No. 貨單編號	1119
ABC Restaurant	Issue Date 發出日期	Aug 25 2xxx
	Customer No. 客戶編號	12345
Site Address 工作地點	Your Ref. 客戶訂單編號	CGT0808
Sha Tin Centre, Sha Tin, N.T (G/F car park, CGT)	Salesman 營業員	Kay
	Payment Terms 付款方式	NET 30

產品編號 ITEM CODE	產品說明 PRODUCT DESCRIPTION	數量 QTY	單價 UNIT PRICE	金額 AMOUNT
CGT0808	Central Grease Trap Cleaning 2 August 2xxx	1	1000.00	1000.00

XYZ
Environmental
Treatment Co.

Certified true copy

Jack

(Jack CHAN)
Director

XYZ Environmental Treatment Company,
1/E., Kowloon Centre, Kowloon, Hong Kong.

Tel: 12345678
Fax: 23456789

INVOICE 發票

Client 客戶名稱	No. 貨單編號	1123
ABC Restaurant	Issue Date 發出日期	Sept 25 2xxx
	Customer No. 客戶編號	12345
Site Address 工作地點	Your Ref. 客戶訂單編號	CGT0908
Sha Tin Centre, Sha Tin, N.T (G/F car park, CGT)	Salesman 營業員	Kay
	Payment Terms 付款方式	NET 30

產品編號 ITEM CODE	產品說明 PRODUCT DESCRIPTION	數量 QTY	單價 UNIT PRICE	金額 AMOUNT
CGT0908	Central Grease Trap Cleaning 5 September 2xxx	1	1000.00	1000.00

Certified true copy

Jack

(Jack CHAN)
Director



XYZ Environmental Treatment Company,
1/F., Kowloon Centre, Kowloon, Hong Kong.

Tel: 12345678
Fax: 23456789

INVOICE 發票

Client 客戶名稱	No. 貨單編號	1130
ABC Restaurant	Issue Date 發出日期	Oct 25 2xxx
	Customer No. 客戶編號	12345
Site Address 工作地點	Your Ref. 客戶訂單編號	CGT1008
Sha Tin Centre, Sha Tin, N.T (G/F car park, CGT)	Salesman 營業員	Kay
	Payment Terms 付款方式	NET 30

產品編號 ITEM CODE	產品說明 PRODUCT DESCRIPTION	數量 QTY	單價 UNIT PRICE	金額 AMOUNT
CGT1008	Central Grease Trap Cleaning 4 October 2xxx	1	1000.00	1000.00

Certified true copy

Jack

(Jack CHAN)
Director



DEF Treatment Company,
11/F., Kowloon Building, Kowloon, Hong Kong.
Tel. (852)-2345-6780 Fax (852)-2345-6788

INVOICE NO #123456
DATE : 25/10/2xxx

ABC Restaurant
Sha Tin Centre,
Sha Tin, N.T
(G/F car park, CGT, 1st chamber)

INVOICE

Product Description	Qty / Unit Price
Bio-substance (生化處理劑)	
July 2xxx	5 kg / 200
August 2xxx	5 kg / 200
September 2xxx	5 kg / 200
October 2xxx	5 kg / 200
Spongy filter cost	
July 2xxx	4 pcs / 10
August 2xxx	4 pcs / 10
September 2xxx	4 pcs / 10
October 2xxx	4 pcs / 10
TOTAL	DEF Treatment Co. 840.00

Certified true copy

Mary

(Mary LAU)
Technical Officer

Payment by ABC Restaurant
Payment period 30 days *
For any enquires please contact Kay Chan, (852)-2345-6780

Thank You !


Drainage Services Department
 The Government of the Hong Kong Special Administrative Region

Declaration of proposed cleaning frequency and date(s) for central grease trap(s) (CGT)

 Account No. : 12345678901, 55556555566

In connection with the application of COD reassessment for the above account(s) submitted by the applicant, Drainage Services Department (DSD) will decide the sampling dates in between the cleaning dates of the CGT(s) with a view to obtain representative samples which can truly reflect the actual pollution strength. Such arrangement of sampling dates is therefore based on the cleaning date(s) and frequency as declared by the applicant, the laboratory[#] authorized by the applicant to handle this application, as well as the grease trap waste (GTW) collector *and the treatment consultant authorized by the applicant to clean CGT(s).

Therefore, the applicant, the laboratory, GTW collector * and the treatment consultant have to explicitly declare and duly sign to confirm all necessary information below and submit the completed form to DSD as soon as possible:

Frequency of CGT cleaning (from <u>10</u> / <u>2xxx</u> month/year to <u>9</u> / <u>2xxa</u> month/year)	The CGT(s) is/are cleaned <u>1</u> time(s) for every : <u>year</u> / <u>1</u> month / <u>week</u> / <u>day</u> *
Dates of CGT cleaning (from <u>10</u> / <u>2xxx</u> month/year to <u>3</u> / <u>2xxb</u> month/year)	4/10, 5/11, 4/12/2xxx, 6/1, 3/2, 3/3/2xxb

The Laboratory must be a laboratory accredited within the Hong Kong Laboratory Accreditation Scheme (HOKLAS) for the analyses described in this application.

After completion of sampling, the applicant, the laboratory *and the treatment consultant should submit records of CGT cleaning for the period covering at least 30 days before the first sampling date and 15 days after the last sampling date. The submission shall include GTW disposal record, transaction record issued by grease trap waste treatment facility and copy of invoice for the cleaning (wherever applicable).

If no written notification is received, DSD shall assume that the applicant, GTW collector *and treatment consultant will carry out cleaning of the CGT according to the above frequency and dates. For cleaning of the CGT on the date(s) other than those declared and without made known to DSD, all samples collected and corresponding results would become void.

* Delete whichever if inappropriate

Applicant

Name of Establishment : ABC Restaurant
Name of Representative : Chan Tai Man
Post : Restaurant Manager
Signature of Representative : Chan TM
Date : 29/10/2xxx



Company Chop

Treatment Consultant

Name of Treatment Consultant : DEF Treatment Co.
Name of Representative : Mary LAU
Post : Technical Officer
Signature of Representative : Mary
Date : 29/10/2xxx

Grease trap waste collector

Name of grease trap waste collector : XYZ Environmental Treatment Co.
Name of Representative : Jack Chan
Post : Director
Signature of Representative : Jack
Date : 29/10/2xxx

Statement of Purposes

1. The applicant / laboratory / treatment consultant / GTW collector fully understands and agrees that DSD may use the information provided for the purpose of or in connection with this application or other related matters, or transfer to other government departments for law enforcement purpose.
2. You have a right of access and correction with respect to personal data as provided for in Sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of your personal data. Such requests may be made in writing. A fee may be imposed for complying with a data access request.


Drainage Services Department
 The Government of the Hong Kong Special Administrative Region

Declaration of use of strainers at drainage outlets and surface channels

To: Drainage Services Department (DSD)

 Account No. : 12345678901, 55556555566

I/We declare that the number of strainers and their locations at drainage outlets and surface channels are as below:

Item	Location	No. of drainage outlets/surface channels with strainers	Type	No. of strainers (pcs)	Remark
1	Roasting Area	1 *drainage outlets/ surface channels	*Non-detachable/ Detachable	2 *metal/ plastic	
2	Meat cutting section	1 *drainage outlets/ surface channels	*Non-detachable/ Detachable	2 *metal/ plastic	
3		*drainage outlets/ surface channels	*Non-detachable/ Detachable	*metal/ plastic	
4		*drainage outlets/ surface channels	*Non-detachable/ Detachable	*metal/ plastic	
5		*drainage outlets/ surface channels	*Non-detachable/ Detachable	*metal/ plastic	
6		*drainage outlets/ surface channels	*Non-detachable/ Detachable	*metal/ plastic	
7		*drainage outlets/ surface channels	*Non-detachable/ Detachable	*metal/ plastic	
8		*drainage outlets/ surface channels	*Non-detachable/ Detachable	*metal/ plastic	
9		*drainage outlets/ surface channels	*Non-detachable/ Detachable	*metal/ plastic	
10		*drainage outlets/ surface channels	*Non-detachable/ Detachable	*metal/ plastic	

* Delete whichever if inappropriate

Declaration:

I/We understand that the above-mentioned use of strainers as pollution control measure is not long-lasting in view of their temporary effect and the difficulty in maintaining consistent and efficient operation. Thus, I/We have taken due care in considering their use. If I/We insist upon their use, any revision of TES rate approved by DSD is based on the provision that such use of strainers (including numbers and locations) must be at all times the same as the status quo during the course of sampling. I/We clearly understand that if there is any change in such use of strainers (including their numbers and locations), all previous collected samples and COD results, as well as the application, would be void.

Remark:

The locations of strainers declared above should be consistent with those as shown in the diagrams and photographs submitted by applicant.



Company Chop

Applicant

Name of Establishment : ABC Restaurant

Name of Representative : Chan Tai Man

Post : Restaurant Manager

Signature of Representative : Chan TM

Date : 29/10/2xxx

Laboratory[#]

Name of Laboratory : DEF Laboratory

Name of Representative : Tong Chan

Post : Laboratory Manager

Signature of Representative : Tong

Date : 29/10/2xxx

The Laboratory must be a laboratory accredited within the Hong Kong Laboratory Accreditation Scheme (HOKLAS) for the analyses described in this application.



Declaration of use of sponges at drainage outlets and surface channels

To : Drainage Services Department (DSD)

Account No. : 12345678901, 55556555566

I/We declare that the number of sponges and their locations at drainage outlets and surface channels are as below:

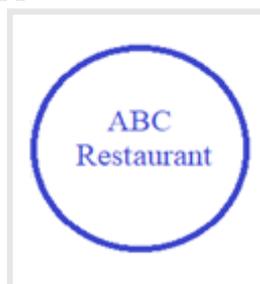
Item	Area	Total no.	Sponge locations (no.)	Total no. of sponges (pcs)	Remark
1	Drainage outlet	1	1	1	Near roasting area
2					
3					
4					
5					
6					
7					
8					
9					
10					

Declaration:

I/We understand that the above-mentioned use of sponges as pollution control measure is not long-lasting due to the transient nature of their effect and difficulty in maintaining their effectiveness. Thus, I/We have taken due care in considering their use. If I/We insist upon their use, any revision of TES rate approved by DSD is based on the provision that such use of sponges (including numbers and locations) must be at all times be the same as the status quo during the course of sampling. I/We clearly understand that if there is any change in such use of sponges (including numbers and locations), all previous samples collected and COD results, as well as the application, would be void.

Remark:

The locations of sponges declared above should be consistent with those as shown in the diagrams and photographs submitted by the applicant.



Company Chop

Applicant

Name of Establishment : ABC Restaurant

Name of Representative : Chan Tai Man

Post : Restaurant Manager

Signature of Representative : Chan TM

Date : 29/10/2xxx

Laboratory#

Name of Laboratory : DEF Laboratory

Name of Representative : Tong Chan

Post : Laboratory Manager

Signature of Representative : Tong

Date : 29/10/2xxx

The Laboratory must be a laboratory accredited within the Hong Kong Laboratory Accreditation Scheme (HOKLAS) for the analyses described in this application.