



CITY OF WHITE PLAINS

DEPARTMENT OF BUILDING

7-11 South Broadway - Suite 100, White Plains, New York 10601

Phone: (914) 422 - 1269 * Fax: (914) 422 - 1471

Reset Form

<http://www.ci.white-plains.ny.us/building/building.htm>

Print Form

OWNER'S VERIFICATION REPORT FOR KITCHEN EXHAUST & GREASE DUCT SYSTEM CLEANING:

Please check off as applicable:

New Application

Annual Renewal

Establishment Name : _____
 Site Address: _____
 Owner Name: _____
 Owner Phone : _____

Cleaning Company : _____
 Address: _____
 Phone: _____

START OF JOB : Check off status of each of the following items prior to starting cleaning process.

	YES	NO		YES	NO
Fans checked & working	<input type="checkbox"/>	<input type="checkbox"/>	Grease Load in system N H XH XXH	<input type="checkbox"/>	<input type="checkbox"/>
Pilots checked & working	<input type="checkbox"/>	<input type="checkbox"/>	Appliances Disconnected	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: Heat Detectors (Fire Alarm system must be deactivated before start of pressure washing.)

SCOPE OF GREASE EXHAUST SYSTEM CLEANING: Check off all applicable items.

Hood Exterior <input type="checkbox"/>	Holding Duct <input type="checkbox"/>	Fan Blades <input type="checkbox"/>	METHOD OF CLEANING:
Hood Interior <input type="checkbox"/>	Branch Duct <input type="checkbox"/>	Fan Housing <input type="checkbox"/>	Pressure Washed <input type="checkbox"/>
Hood Plenum <input type="checkbox"/>	Horizontal Duct <input type="checkbox"/>	Fan Cowl <input type="checkbox"/>	Hand Washed <input type="checkbox"/>
Grease Filters <input type="checkbox"/>	Roof Horizontal Duct <input type="checkbox"/>	Fan Exterior <input type="checkbox"/>	FLOORS:
Baffle Plates <input type="checkbox"/>	Riser Duct <input type="checkbox"/>	Discharge Duct <input type="checkbox"/>	Swept <input type="checkbox"/>
Plenum Doors <input type="checkbox"/>	Heat Recovery <input type="checkbox"/>	Discharge <input type="checkbox"/>	Mopped <input type="checkbox"/>
Hood Duct Collar <input type="checkbox"/>	Duct Fan Collar <input type="checkbox"/>	Drain Coupler <input type="checkbox"/>	PICTURE TAKEN:
Backsplash <input type="checkbox"/>	Fusible Links (Changed) <input type="checkbox"/>	Access Doors <input type="checkbox"/>	Before <input type="checkbox"/>
Fire Dampers <input type="checkbox"/>	Sprinkler Heads (Changed) <input type="checkbox"/>	Heat Detectors <input type="checkbox"/>	After <input type="checkbox"/>

COMPLETION OF JOB : Check off status of each of the following items upon completion of cleaning. Technician must sign and date.

	YES	NO		YES	NO
Fans checked & working	<input type="checkbox"/>	<input type="checkbox"/>	Inaccessible Areas Exist	<input type="checkbox"/>	<input type="checkbox"/>
Pilots checked & working	<input type="checkbox"/>	<input type="checkbox"/>	Appliances Reconnected	<input type="checkbox"/>	<input type="checkbox"/>

This is to certify that all parts of the Grease Duct System at the above referenced location have been cleaned , inspected and comply with NFPA-96 Chapter 8 and the 2005 City of White Plains Supplemental Code section WPMC Part 1c., and I recommend the City of White Plains to issue a License.

 Technician Signature

 Date

**NOTE: Owner shall forward completed Verification Report immediately to the Building Department.
 Only original signatures will be accepted on Owner's Verification Report.**