THE NOTIFICATION OF COOLING TOWERS AND EVAPORATIVE CONDENSERS REGULATIONS 1992

Please return the completed form to:
Bristol City Council, Public Protection Team (CH), Health and Safety, PO Box 3300, Bristol, BS1 9LN

1 Address where cooling tower/evaporative condenser is to be situated: *please continue overleaf if necessary*

Name of premises:

Address:

2 Person(s) in control of premises: *please continue overleaf if necessary*

Name of person:

Company name:

Address:

Tel no.

Name and address of water treatment company for Cooling Towers:

NB: This information is required to enable access to be gained at all times to the notifiable device.

3 How many cooling towers or evaporative condensers are at the address shown in box 1?

4 Location (e.g. south east corner of 3rd floor roof): please continue overleaf if necessary

Signed by:

Position: Date:

……

Acknowledgement tear-off: for Local Authority use

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To:

Name of person(s) in control:

Address:

Number of cooling towers registered:

Reference number in case of query Date:

Local Authority Stamp