The Notification of Cooling Towers and Evaporative Condensers Regulations 1992

Please return the completed form to:

Safer Communities (Public Health & Protection Services) Chelmsford City Council Duke Street Chelmsford Essex, CM1 1JE

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:

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

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

4. Please give brief location of each piece of equipment being registered at this time (North Works, Main Building, south east corner of 3rd floor roof) Please continue overleaf if necessary

Declarations

Signed by:

Position:

Date:

Acknowledgement tear-off (for Local Authority use) The Notification of Cooling Towers and Evaporative Condensers Regulations 1992

| То: | |
|--------------------------------------|--------------------|
| Name of person(s) in control: | |
| Address: | Local Authority |
| Date of registration: | Stamp |
| Number of cooling towers registered: | |
| Reference number if case of query: | |



DO NOT WRITE IN THIS SPACE (FOR LOCAL AUTHORITY USE)

