

**THE NOTIFICATION OF COOLING TOWERS  
AND EVAPORATIVE CONDENSERS REGULATIONS 1992**

\* Please return the completed form to:  
Principal Environmental Health Officer  
Health & Safety Section  
West Wiltshire District Council  
Bradley Road  
TROWBRIDGE  
Wilts BA14 ORD

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 N°:

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

Declarations

Signed by:

Position:

Date:

Acknowledgement tear-off: for Local Authority use

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To:

Name of person(s) in control:

Address:

Date of Registration:

Number of cooling towers registered:

Reference number in case of query: