The Notification of Cooling Towers and Evaporative Condensers Regulations 1992

Please print and return completed form to: Environmental Health Community Protection and Enforcement – Walsall Council, Darwall Street, WS1 1TP

1. Address where the cooling tower/evaporative condenser is to be situated: (Please continue in the additional information section if necessary)

Name of premises:				
Address:				
How many cooling towers or evaporative condensers are at this address:				
Cooling Towers	Evaporative Condensers			
Please complete as necessary the Name and address of the registered head office: (where different to the address given above)				
2. Person(s) in control o				
N.B. This information is device at any time (night	required to enable access to be gained to the notifiable to day).			
Name of Person:				
Company Name/Position Within the Company:				
Address:				
Email Address:				

-	additional/other relevant person who are also in control of
the premises/can provid	le access to the equipment being registered:
(Please use the addition persons contact details	al information section if you wish to provide additional
Name of Person:	us necessary).
ranio or rotoon.	
Company	
Name/Position Within	
the Company:	
Address:	
Email Address:	
Telephone Number:	
releptione Number.	
4. Provide brief location	details for each notifiable equipment being registered:
	s, Main Building, south east corner of 3rd floor roof, please use the
additional information sect	tion as necessary)
Notifiable	
Equipment piece 1	
Notifiable	
Equipment Piece 2	
Notifiable	
Equipment Piece 3	
Notifiable	
Equipment Piece 4	
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Additional Information	(if any):

Declaration:	
Signed:	
Please print full name:	Date:
Position within the organisation/company:	

Please note that you will receive confirmation via email that this document has been received. If you do not receive confirmation, please contact The Environmental Health Team Leader on: 01922 653024 or the Environmental Health department via email at: EnvironmentalHealth@walsall.gov.uk