

THE NOTIFICATION OF COOLING TOWERS AND EVAPORATIVE CONDENSERS REGULATIONS 1992



Please return the completed form to:
Occupational Health & Safety, Environmental Services, Ipswich Borough Council,
Grafton House, 15-17 Russell Road, Ipswich IP1 2DE

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:

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 Question 1.

4. Please give brief location of each piece of equipment being registered at this time (North Works, Main Building, South east corner of third floor roof).

(Please continue overleaf if necessary)

Declarations

Signed by:

Position:

Date:



ACKNOWLEDGEMENT CUT-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 No. in case of query: