

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

Please return the completed form to:

Regeneration & Environment Directorate  
Environmental Health Division  
Wallasey Town Hall, South Annexe  
Brighton Street, Seacombe  
Wirral CH44 8ED

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

Name of Premises:

Address:

2. Persons(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 of 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) *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:

Additional Details if any:

DO NOT WRITE IN THIS SPACE : FOR LOCAL AUTHORITY USE ONLY