The	Notificat	tion of	Coolin	g To	owers a	nd
Eva	porative	Conde	nsers	Reg	ulations	; 1992

Please return this form to: West Dunbartonshire Council Regulatory Services Environmental Health Section Council Offices Clydebank G81 1TG



1. Address where cooling	ower/evaporative conder	nser is to be situated: Contine	ue overleaf if necessary.				
Name of premises:							
Address:							
2. Person(s) in control of premises: Continue overleaf if necessary.							
Name of person:		Tel. No:					
Company name:							
Address:							
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 – (e.g. North Works, Main Building, south east corner of 3 rd floor roof) Continue overleaf if necessary.							
Declarations							
Signed:	Date:	Position:					
×-		×-					
		· -					
Acknowledgement tear-off: for Local Authority Use THE NOTIFICATION OF COOLING TOWERS AND EVAPORATIVE CONDENSERS REGULATIONS 1992							
То:							
Name of person(s) in cont	'ol:						

Address:

Date of registration:

Number of cooling towers registered:

Reference number in case of query:

Local Authority Stamp