



**Horsham
District
Council**

PUBLIC HEALTH AND LICENSING

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

- 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 in 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 box 1?**

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- 4. Please give brief location of each piece of equipment being registered at this time – (North Works, main Building, southeast corner of 3rd floor roof)** *please continue overleaf if necessary*

Signed by:.....

Position:.....Date:.....

Please return form to: Public Health and Licensing
Horsham District Council
Park North
North Street
Horsham
West Sussex
RH12 1RL

Additional details if any