## THE NOTIFICATION OF COOLING TOWERS AND EVAPORATIVE CONDENSERS REGULATIONS 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 if n	ecessary			
	Name of Person:				
	Company Name:				
	Address:				
	Tel No:				
	Email:				
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 Main Building, south east corner of 3 <sup>rd</sup> floor roof) Please continue overleaf if necessary				
	Declaration				
	Signed by:				
	Position:	Date:			
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This form should be returned to: Environmental Health, Hull City Council, 33 Witham, Hull, HU9 1DB; or by Email: <a href="mailto:environmental.health@hullcc.gov.uk">environmental.health@hullcc.gov.uk</a>.

Any additional details -		
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