

**NOTIFICATION OF COOLING TOWERS AND EVAPORATIVE  
CONDENSERS REGULATIONS (NORTHERN IRELAND) 1994**

Please return the completed form to:

**1. Address where cooling tower/evaporative condenser is 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 box 1?**

(a) Cooling Towers

(b) Evaporative Condensers

**4. Please give brief location of each piece of equipment being notified at this time - (North Works, Main Building, South East Corner of 3rd floor roof): (Please continue on attached page if necessary)**

Signed by:

Position:

Date:

**Acknowledgement tear-off for District Council use  
NOTIFICATION OF COOLING TOWERS AND EVAPORATIVE CONDENSERS  
REGULATIONS (NORTHERN IRELAND) 1994**

To:

Name of person(s) in control:

Address:

District Council  
stamp

Date of receipt of notification:

Reference number in case of query:

**Additional details if any:**