



# BEDFORD BOROUGH COUNCIL

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

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)*

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?

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<sup>rd</sup> Floor Roof): *(Please continue overleaf if necessary and provide a sketch plan)*

Signed by: \_\_\_\_\_

Position: \_\_\_\_\_ Date: \_\_\_\_\_

*Acknowledgement slip: for Local Authority use*

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

To: Name of person(s) in control

Address:

Date of registration:

Number of cooling towers registered:

Ref. number in case of query:

Local Authority  
Stamp

**Additional details (if any) and sketch plan:**

**Please return completed form to:**

**Commercial Regulation Manager  
Bedford Borough Council  
Borough Hall  
Cauldwell Street  
Bedford  
MK42 9AP**

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***Do not write in this space: for Local Authority use only***