

# Application for registration of a cooling tower system

**Cooling tower registrations** Telephone: 1800 248 898 Fax: 1300 769 748 legionella@health.vic.gov.au

Please ensure that you print in BLOCK LETTERS and answer every question.

## 1. Site address:

Complex name and address

Please provide a site building name which helps identify the premises

Level/unit Level  Unit  Street no from  to

Street name  Street type (ie avenue, street)

Postal type (ie DX or PO box)  Postal delivery ID (PO box no)

Locality (suburb)  Postcode

This site already has a CTS registered with the Department of Health

Note: This site address must be valid. We may contact you if it does not match LandVic data.

## 2. Responsible person: (must be a person)

Name of the responsible person who monitors any ongoing maintenance

Title  First name  Surname

Phone  Mobile  AH phone

Email

Fax  Pager  Contact via email  Yes  No

Responsible person's address and contact details

Level/unit Level  Unit  Street no from  to

Street name  Street type (ie avenue, street)

Postal type (ie DX or PO box)  Postal delivery ID (PO box no)

Locality (suburb)  Postcode

## 3. CTS details:

Location (i.e. on the roof)  Area served (i.e. how many floors)

Nature of business (i.e. Education, Dairy Industry, Manufacturing)

Number of towers

Physical details  Purpose (i.e. air conditioning, industrial process, refrigeration)

#### 4. Land owner details:

Name of the person/organisation that owns the land where the cooling tower system(s) is/are located.

Title:  First name:  Surname:   
Organisation name:  ABN:  ACN:

#### Land owner's registered office address and contact details

Phone:  Mobile:  AH phone:   
Email   
Fax  Pager  Contact via email  Yes  No  
Level/unit: Level  Unit  Street no from  to   
Street name  Street type (ie avenue, street)   
Postal type (ie DX or PO box)  Postal delivery ID (PO box no)   
Locality (suburb)  Postcode

Land owner's postal address. If the same as registered office address, select 'as above'.

As above  
Level/unit Level  Unit  Street no from  to   
Street name  Street type (ie avenue, street)   
Postal type (ie DX or PO box)  Postal delivery ID (PO box no)   
Locality (suburb)  Postcode

#### 5. Agent:

Name of the agent who the landowner has allowed to act on their behalf.

Title  First name  Surname   
Organisation name  ABN  ACN

#### Agent's registered office address and contact details

Phone  Mobile  AH phone   
Email   
Fax  Pager  Contact via email  Yes  No  
Level/unit: Level  Unit  Street no from  to   
Street name  Street type (ie avenue, street)   
Postal type (ie DX or PO box)  Postal delivery ID (PO box no)   
Locality (suburb)  Postcode

Agent's postal address. If the same as registered office address, select 'as above'.

As above  
Level/unit Level  Unit  Street no from  to   
Street name:  Street type (ie avenue, street)   
Postal type (ie DX or PO box)  Postal delivery ID (PO box no)   
Locality (suburb)  Postcode

## 6. Cooling tower system owner

### Name of the cooling tower system owner

Title  First name  Surname   
Organisation name  ABN  ACN

### The cooling tower system owners registered office address and contact details

Phone  Mobile  AH phone   
Email   
Fax  Pager  Contact via email  Yes  No  
Level/unit: Level  Unit  Street no from  to   
Street name  Street type (ie avenue, street)   
Postal type (ie DX or PO box)  Postal delivery ID (PO box no)   
Locality (suburb)  Postcode

### Cooling tower system owner's postal address. If same as registered office address, please select 'as above'.

As above  
Level/unit: Level  Unit  Street no from  to   
Street name  Street type (ie avenue, street)   
Postal type (ie DX or PO box)  Postal delivery ID (PO box no)   
Locality (suburb)  Postcode

## 7. Water treatment service provider:

### Name of the water treatment service provider for the cooling tower system(s)

Title  First name  Surname   
Organisation name  ABN  ACN

### The water treatment service providers registered office address and contact details

Phone  Mobile  AH phone   
Email   
Fax  Pager  Contact via email  Yes  No  
Level/unit: Level  Unit  Street no from  to   
Street name  Street type (ie avenue, street)   
Postal type (ie DX or PO box)  Postal delivery ID (PO box no)   
Locality (suburb)  Postcode

### The water treatment service providers postal address. If same as registered office address, please select 'as above'.

As above  
Level/unit: Level  Unit  Street no from  to   
Street name  Street type (ie avenue, street)   
Postal type (ie DX or PO box)  Postal delivery ID (PO box no)   
Locality (suburb)  Postcode

## 8. Registration holder:

For the purposes of this application the registration holder is responsible for maintaining the ongoing registration affairs for the cooling tower system. The registration holder will be the primary contact.

Please select one of the following to be deemed the registration holder:

- Land owner  
 Agent  
 Cooling tower system owner  
 Water treatment provider  
 Responsible person

## Registration term

Please indicate the term of licence for which you are applying.

### Licence term:

- 1 year  2 years  3 years

### Fees

Fee consists of an application fee that is non-refundable and a licence fee that is payable if your application is approved. The licence fee schedule is located on our website at [www.health.vic.gov.au/environment/legionella/](http://www.health.vic.gov.au/environment/legionella/)

**DO NOT SEND IN PAYMENT** – You will be invoiced when your application has been assessed.

## Acknowledgement

- As the applicant or the applicants authorised representative, I acknowledge that I have read the above notes and provided the required information

Form completed by

Date form completed

## Contact Us

If you intend to post, fax or email this form please use the details provided below:

Registration and Licensing  
Department of Health  
GPO Box 4541  
Melbourne, Victoria, 3001

Telephone: **1800 248 898**  
Fax: **1300 769 748**  
Email: [legionella@health.vic.gov.au](mailto:legionella@health.vic.gov.au)  
Website: [www.health.vic.gov.au/environment/legionella](http://www.health.vic.gov.au/environment/legionella)

## Privacy

The Department of Health is bound by Victoria's privacy laws, including the *Information Privacy Act 2000*. The *Public Health & Wellbeing Act 2008* provides that an application for registration must include certain information.

We will use the personal information provided by you on this form to assess your application for registration and to monitor your compliance with the Act. If you do not provide us with information, we may not be able to assess your application. It is an offence for you to operate a Cooling Tower System unless your registration is current. You have the right under FOI legislation to apply for access to, and correction of, your personal information held by the Department of Health. For more information about how to make a request, please visit the Department of Human Services' FOI website at [www.dhs.vic.gov.au/foi/](http://www.dhs.vic.gov.au/foi/) or call **(03) 9606 8449**.

Section 56 of the *Public Health & Wellbeing Act 2008* allows the Department to disclose information that it collects under the *Public Health & Wellbeing Act 2008* or the *Public Health & Wellbeing Regulations 2009* to certain persons and agencies (including the Health Services Commissioner, the Victorian Workcover Authority, the Commonwealth Health Insurance Commission and some practitioner registration boards) for the purpose of performing its statutory functions or to assist other government bodies to perform their functions.

### **False of Misleading Information**

It is an offence to give information that is false or misleading. If you give false or misleading information, your application may be refused and/or you may be prosecuted and fined.

### **Privacy Policy**

Personal information supplied by the applicant is collected, used and stored in accordance with the *Information Privacy Act 2000*. In accordance with the Department of Health's privacy policy and relevant laws, you may be able to gain access to any personal or health information held about you by the Department of Health.

A copy of the Department of Health's privacy policy can be obtained from its website.