

# APPLICATION FOR REGULATED SYSTEM

## Regulated Systems

☐ Application for Registration of Regulated System | \$145.00

☐ Application for Renewal of Registration of a Regulated System | \$145.00

## APPLICANT DETAILS

Applicant Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Contact Number(s): M: \_\_\_\_\_ H: \_\_\_\_\_

Email Address: \_\_\_\_\_

## ADDRESS WHERE REGULATED SYSTEM(S) IS LOCATED

Business Name: \_\_\_\_\_

Name depicted on the street frontage of the premises: \_\_\_\_\_

Business Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

## AFTERHOURS EMERGENCY ACCESS CONTACT

Contact Name: \_\_\_\_\_

Contact Number(s): M: \_\_\_\_\_ H: \_\_\_\_\_

Total Number of Cooling Towers on the Premises: \_\_\_\_\_

Total Number of Warm Water Systems on the Premises: \_\_\_\_\_

Details of premises where the regulated system is located, or cooling tower are operated:

\_\_\_\_\_  
\_\_\_\_\_

## RETURN COMPLETED FORMS TO:

Planning & Compliance Department

P: (03) 6471 4700

E: [wcc@westcoast.tas.gov.au](mailto:wcc@westcoast.tas.gov.au)

PO BOX 63, Queenstown TAS 7467

11 Sticht Street, Queenstown TAS 7467



The following details must be provided for each cooling tower or warm water system on the premises. Please attach additional pages, if necessary.

### LOCATION DETAILS

Business Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Description of where the system is located at the above address:

☐ Cooling Tower

☐ Warm Water System

System make/model: \_\_\_\_\_

Serial Number: \_\_\_\_\_

Owners Identifying Number: \_\_\_\_\_

### DOCUMENTS TO BE ATTACHED

☐ Risk assessment for the system, OR

☐ Risk assessment previously provided remains current and therefore have been no significant modifications to the system.

☐ Water testing results, if carried out.

☐ Maintenance specifications and certification of completion.

☐ Certification of the disinfection process.

☐ Details of water treatment processes.

### THESE ITEMS DO NOT APPLY TO WARM WATER SYSTEMS

Note The Guidelines for Legionella 2001 set out important requirements for the operation of certain regulated systems. You should refer to the Guidelines for details.

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**DATE**

Application Fee: \$ \_\_\_\_\_ Receipt No: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_