



File No:.....

NOTIFICATION OF MICROBIAL CONTROL

Registration under Public Health Act 2010 and Public Health Regulation 2012

Details

Business name, ABN/ACN, address, phone number **Business**
 Name:.....
 ABN/ACN:.....
 Unit/Shop No:.....Street No:.....Street:
 Suburb:.....
 Lot:.....DP:.....
 Type of Premises:.....

Name, residential address and contact phone numbers of the Occupier **Occupier's**
 Name:.....
 Address Residential.....
 Address Business:.....
 Post Code.....
 Phone: Home..... Mobile:
 Fax:..... Email:.....
 AABN/CAN.....

Certifier Name.....
 Address.....
 Phone (M).....Phone (Bus).....

Type of System Water Cooling System (Cooling towers) Warm Water System (Thermostatic mixing vales)
 Number of Systems.....
 Location of Systems.....

Emergency Contact Name.....
 Phone (M).....Phone (Bus).....
 Address.....

Note: The occupier of premises at which a water-cooling system or warm-water system is installed must cause notice of that fact to be given to the person prescribed by the regulations in the approved form and in the manner prescribed by the regulations, Section 31 of the Public Health Act 2010.

Signature: Signature of Occupier: _____
 Date: _____