

Purpose of the approved form

The *Public Health Regulation 2022* (the Regulation) requires occupiers to ensure that the Local Government Authority (LGA) is notified of the following changes to their cooling water system and warm water system: notification of installation (within 1 month), change of occupier (within 1 month), and any change in particulars (such as change in occupier, within 7 days). Notification of installation or changes is also required for warm water systems installed in public hospitals, declared mental health facilities, private health facilities, and nursing homes. In accordance with section 20 of the Regulation, the LGA may require a fee to be paid on submission of this form.

This approved form must be completed in accordance with section 31 of the *Public Health Act 2010* and sections 8, 20, and 25 of the Regulation. Further information on the process and timeframe for notification is provided in the [NSW Guidelines for Legionella Control in Cooling Water Systems](#) (the Guidelines).

Notification of installation or change in particulars

This notification relates to:	<input type="checkbox"/> Installation <input type="checkbox"/> Change of occupier <input type="checkbox"/> Change in particulars
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Notification of installation (complete if relevant)

Record	Details
Cooling water system or warm water system	Click or tap here to enter text.
Local Government Authority (where this system is located)	Click or tap here to enter text.
Site address	Click or tap here to enter text.
LGA Site ID (if known)	Click or tap here to enter text.
Occupier details (the person or entity who owns the system):	Name: Click or tap here to enter text. Phone number: Click or tap here to enter text. Postal address: Click or tap here to enter text. Email: Click or tap here to enter text. ABN/ ACN: Click or tap here to enter text.
Building manager name and contact details (the person who manages the system on behalf of the occupier)	Click or tap here to enter text.
Date of system installation	Click or tap to enter a date.

Location of system within premises	Click or tap here to enter text.
Cooling water system details (number of cooling towers, and unique identification number for each cooling tower)	Click or tap here to enter text.

Notification of change of occupier (complete if relevant)

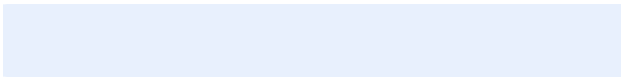
Record	Details
Cooling water system or warm water system	Click or tap here to enter text.
Local Government Authority (where this system is located)	Click or tap here to enter text.
Site address	Click or tap here to enter text.
Previous occupier name and contact details (the person or entity who previously owned the system)	Click or tap here to enter text.
New occupier details (the person or entity who will now own the system):	Name: Click or tap here to enter text. Phone number: Click or tap here to enter text. Postal address: Click or tap here to enter text. Email: Click or tap here to enter text. ABN/ ACN: Click or tap here to enter text.
Cooling water system details (number of cooling towers, and unique identification number for each cooling tower)	Click or tap here to enter text.

Notification of change in particulars (complete if relevant)

Record	Details
Cooling water system or warm water system	Click or tap here to enter text.
Local Government Authority (whether this system is located)	Click or tap here to enter text.
Site address	Click or tap here to enter text.
Cooling water system details (number of cooling towers, and unique identification number for each cooling tower)	Click or tap here to enter text.

Change in particulars:	
<ul style="list-style-type: none"> Change in occupier/ building manager's details 	Click or tap here to enter text.
<ul style="list-style-type: none"> Cooling tower(s) added to system (Note: a new unique identification number should be issued for each new tower, including when an existing tower is replaced with a new tower. Refer to Section 8.5 of the Guidelines) 	Click or tap here to enter text.
<ul style="list-style-type: none"> Cooling towers(s) removed from system 	Click or tap here to enter text.
<ul style="list-style-type: none"> Warm water system type changed or modified 	Click or tap here to enter text.
<ul style="list-style-type: none"> System has been decommissioned 	Click or tap here to enter text.
Where relevant, was the RMP audited prior to decommissioning? If no, why?	<input type="checkbox"/> Yes <input type="checkbox"/> No If No, why? Click or tap here to enter text.

Details of person completing the form

Name of person completing the form	Contact details (phone number, email, postal address)
Click or tap here to enter text.	Click or tap here to enter text.
Signature of person completing the form	Date
	Click or tap to enter a date.
Role of person completing the form	Employer (name of company or organisation)
Click or tap here to enter text.	Click or tap here to enter text.

Local Government Authority use

Record	Details
Date received	Click or tap to enter a date.
Name and position of receiving officer	Click or tap here to enter text.
Notification received within required timeframe	<input type="checkbox"/> Yes <input type="checkbox"/> No

Action taken (date and time):	
<input type="checkbox"/>	Register of cooling water systems updated
<input type="checkbox"/>	Unique identification number(s) issued to occupier
<input type="checkbox"/>	Payment processed