Regulated Water System Public Health Act 2010 Notification of Installation or Change in Particulars



Under the Public Health Act 2010 and Public Health Regulation 2022

About this form

You may use this form to apply for registration of a regulated water system such as a water cooling or warm water system. Warm water systems other than in hospitals (which includes nursing homes, declared mental health facilities, private facilities) are exempt from notifying. Evaporative cooling systems are not required to be registered.

How to complete this form

- 1: Ensure that all fields have been filled out correctly.
- 2: Please note that fields on this form marked with an * are mandatory and must be completed before submitting the application.
- 3: Once completed you can submit this form by mail and in person together with payment of the prescribed fee of \$120. Please refer to the Lodgement details section for further information.

Part 1: System Details	
☐ Cooling Water System* ☐ Warm Water System*	
Site Address*	Site Phone Number
Occupier Name *	Occupier Mobile/Business Number
Occupier Postal Address *	
Occupier Email	Occupier ABN/ACN*
Occupier Residential and Business Address	
Building Manager Name Building	Manager Mobile Number *
Building Manager Email Address	
Location of System within premise *	
Cooling System Details (no. of towers, make and model) *	
Water Treatment Company	
Part 2: Type of Notification *	
☐ Installation ☐ Go to part 3 ☐ Change of Occupier ☐ Go to part 4	Change of Paticulars/Decommisioning Go to part 5
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Part 3: Installation *	
Date System Installed*	
Part 4: Change of Occupier *	
New Occupier Name	
New Occupier Email Address	Occupier Phone Number

Part 4: Change o	of OccupierCont*	
New Occupier Resid	dential Address	
New Occupier ABN/	ACN	Date Change of Occupier occurred
Part 5: Change in	n Particulars* (please selec	ct relevant changes and specify details in the spaces)
Change in Occu	pier contact details	
Change in Buildi	ng Manager's contact details	
Cooling tower/s	added to system	
Cooling tower/s	removed from system	
☐ Warm water sys	tem type changed/modified	
_	Tower Unique ID	
	n decommissioned	
(please attach w	ritten confirmation of decommiss	sioning from the duly qualified person)
Part 6: Declaration	on*	
Name of person con	npleting the form*	vail*
Postal Address*		
Role of person comp	oleting form*	Employer*
Signature*		Date*
		Authorised person from the company* Yes No
Part 7: Privacy 8	& Personal Information Pro	tection Notice
Purpose of collection	n:This information is being colle	cted for the purpose of registering a warm water or water cooling
	system.	
Intended recipients:	City of Sydney employees, NS	W Health are intended recipients. Any approved contractors required to
	provide this service.	
Supply:	The supply of this information is	s required by law. If you are unwilling to provide this information, the
	City of Sydney may be unable	to provide access to City of Sydney services.
Access/Correction:	Please contact Customer Servi	ice on 02 9265 9333 or at council@cityofsydney.nsw.gov.au to
	access or correct your personal	l information.
Storage:	The City Planning, Developmen	nt and Transport Unit at the City of Sydney, located at 456 Kent Street,
		g this information and the City of Sydney will store it securely.
Other uses:	The City of Sydney will use you	ur personal information for the purpose for which it was collected and
	may use it as is necessary for t	
For further details on I	now the City of Svdnev manages	s personal information, please refer to our Privacy Management Plan
	v.au/policies/privacy-manage	

Part 8: Loc	dgement Details		
You can lodge the completed application by:			
EMAIL:	council@cityofsydney.nsw.gov.au		
MAIL:	GPO Box 1591 Sydney NSW 2001		
IN PERSON:	Town Hall House - Level 2, 456 Kent Street, Sydney See our website for details of all customer service centres and opening hours: cityofsydney.nsw.gov.au/customer-service-centres		
WHAT NOW:	Once your application is received a Council Officer will contact you if further information is required.		
For further information regarding your application please contact us by visiting cityofsydney.nsw.gov.au/contact-us			
Office Use	Only		
Receiving Offic	eer (print name) Registration Period Registration Number Date		