



WARM WATER SYSTEM Registration Form

APPLICATION / REGISTRATION INFORMATION

OVERVIEW:

The *South Australian Public Health (Legionella) Regulations 2013* require the owner of premises on which a warm water system is installed to ensure the system is registered with the Local Council for the area in which the premises are situated. This form is designed for the mandatory registration of warm water system(s) under the *South Australian Public Health (Legionella) Regulations 2013* and must be completed in its entirety.

Registration / Registration Renewal Fees

Registration / registration renewal fees payable to the Local Council are prescribed in Schedule 2 of the *South Australian Public Health (Legionella) Regulations 2013*, as follows:

For registration of 1 warm water system	\$44.00
For registration of each additional water system installed on the same premise	\$29.25
Renewal of registration of a high risk manufactured water system (per system)	\$22.20

Please note: These fees do not include inspection fees; testing fees and applications to the minister.

Changes requiring notification to the Local Council

There are a number of mandatory requirements related to the registration of warm water system(s), including the following:

- Registration remains in force for a period of 12 months after which the applicant must renew the registration to the authority.
- The owner of premises on which a high risk manufactured water system registered with the Local Council is installed, must within 1 month after any change in the particulars registered in relation to the system, notify the authority of the change.

If a high risk manufactured water system registered with the authority is decommissioned, the owner of the premise on which the system is installed must notify the authority of the decommissioning within 1 month after the event.

SECTION 1: REGISTRATION TYPE

New Application:

<input type="checkbox"/>	New Registration of warm water system(s)
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Please indicate the total number of systems to be registered:

Existing Registrations:

<input type="checkbox"/>	Renew registration of warm water system(s)
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<input type="checkbox"/>	Modify business ownership details and/or maintenance and operation contact details of existing registration(s) of warm water system(s)
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Please indicate the total number of systems already registered:



SECTION 2: SITE DETAILS

Registered Business Name:	
ABN:	
Address:	
Trading name of premises:	
Site (Street) Address:	
Postal Address:	
Contact Phone:	
Fax:	
Description of Business Activities:	
Business Operating Hours:	

SECTION 3: BUSINESS OWNERSHIP DETAILS

Name of Business Owner(s):	
Business Address (Street Address):	
Contact Phone:	
Fax:	
Name of Business contact representing business owner(s) in regards to this registration	
Name of Contact:	
Position/Title:	
Residential Address (Street Address)	
Contact Phone:	
Fax:	
Email:	
Mobile:	
Additional after hours contact	
Name:	
Phone:	

SECTION 4: OPERATION AND MAINTENANCE CONTACT DETAILS

Person/Company responsible for operation & maintenance (please tick)

In House:		Contractor:	
Name of Business:			
Name of the Contact Person			
Name:			
Position/Title:			



Business Address	
Street Address:	
Contact Phone:	
Fax:	
Email:	
Mobile:	
Residential Address	
Street Address:	
Contact Phone:	
Fax:	
Additional after hours contact	
Name:	
Phone:	

SECTION 5: PLANT IDENTIFICATION FORM

Please note: Where there is more than 1 warm water system to be registered, you must photocopy this page and complete it for each system to be registered.

Type of water heating device

Make/brand of system:	
Model No:	

System common name / identification no (eg floor 1; warm water system 1):	
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Features of System

Source of water heating:	Gas:		Water:		Other (please specify):	
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Water storage or instantaneous?	Storage:		Instant:	
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Are there any temperature control devices installed with this system?	Yes:		No:	
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Location

Location of areas services by the warm water system:	
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Decontamination Procedure

Please indicate the decontamination procedure utilised for the warm water system:

Prescribed decontamination procedure set out in Schedule 3 Part 2 of the *Guidelines for the Control of Legionella in Manufactured Water Systems in South Australia*, namely;

	Pasteurisation method; or
	Chlorination method; or
	Alternative decontamination procedure approved by the Minister for Health (attach the approval as an appendix to this registration)



SECTION 6: REGISTRATION FORM CHECKLIST

	Application type indicated
	Site details
	Business ownership details
	Operation / Maintenance Contacts
	Cooling water system plant identification form(s) <i>Please indicate number of forms: _____</i>
	Site Plan: (with attachment(s) where necessary)
	System plans

SECTION 7: APPLICANT DETAILS

Name:		Position Title	
Signature:		Date:	

SECTION 8: OFFICE USE ONLY

Fee received: (amount)		Receipt Number:	
Property Identification:	A		
Date registered:			
Registration expiry date:			
Completed by:			



SECTION 9: SITE PLAN

Please draw a site plan identifying the location of all cooling water system(s). Where necessary, please attached additional pages.



SECTION 10: SYSTEM PLANS

Please attach system plans showing:

- (a) for systems installed before 1 October 2009 - the location of all major components* of the system; and
- (b) in any other case - the location of all parts of the system

**major components of a high risk manufactured water system includes cooling towers, condensers, filtration devices, automatic biocide dosing devices, drift eliminators, water inlets, waste outlets and discharge points, water heating devices and water storage facilities.*