

SAMPLE REPORT ON MAINTENANCE OF WATER COOLING SYSTEM

Name of Owner/Occupier _____

Address of Premises _____

Location of Water Cooling System _____

Name & Address of Contractor Company _____

Contractor License No _____ Employee License No _____

Tower Identity _____

Make & Model _____

Type of Treatment _____

Type & Brand of chemicals used _____

Sample taken for Heterotrophic Plate Count? Yes No

Sample taken for Total *Legionella*? Yes No

General condition of tower? Clean Mildly Dirty Dirty

Process to control microbial growth Certified? Yes No

Defects found: _____

Description of rectification and other work carried out:

Date of last routine maintenance: ____/____/____

System maintained in accordance with maintenance manual? Yes No

Signature of Contractor: _____ Date: ____/____/____

Signature of Site Manager / Owner: _____ Date: ____/____/____