

**Scheme for Wider Use of Fresh Water in
Evaporative Cooling Towers for Energy-efficient Air Conditioning Systems**

Submission of Operational Information *and Notification of Change of Cooling Tower Details

Date: _____

To: Director of Electrical and Mechanical Services

Operational information for the month of _____ in Year _____

Cooling tower installation(s) at : _____

Number(s) of the WSD meter(s) for provision of water to the cooling towers : _____

1. The operational information and the water sampling results of the above month is shown in the page 2 of this form.
2. This is also to confirm that (*please use a separate sheet to describe the details if the cooling tower shell and / or the supporting framework for the cooling tower is/are in bad condition*):
 - A. The cooling tower shell is in good*/fair*/bad* condition.
 - B. The supporting framework of the cooling tower shell is in good*/fair*/bad* condition.
 - C. The maintenance carried out for each cooling tower of the installation has been recorded according to the requirements as stipulated in the Scheme document.
3. *This is to advise you that there is/are change(s) in the information of the cooling tower system(s). The details of changes have been shown in Form EMSD EE CT4 attached. (To be submitted when there are changes in the cooling tower details)

Signature of the Owner or His Representative: _____

Date: _____

Full Name of the Owner or His Representative: _____

Company Chop:

Company: _____

Tel No.: _____

Fax No.: _____

Correspondence Address: _____

Operational Information:

Cooling Tower Registration No.: PS- _____

Operational information for the month of _____ in Year _____

Owner's cooling tower ref. no. _____

Daily operation time: _____ to _____

Energy consumption: Energy consumption for all water-side equipment of the AC system in the month _____ kWh

Make-up fresh water : Total water consumption in the month _____ m³

Effluent discharge : Total discharge volume in the month _____ m³

Cooling water sampling results:

Water sampling date: _____

Total Dissolved Solids (TDS)	_____ mg/L	Calcium Hardness	_____ mg/L
Conductivity	_____ μS/cm	Total Alkalinity	_____ mg/L
Water Temperature	_____ °C	pH	_____
Residual biocide concentration (1)	_____ mg/L	Residual biocide concentration (2)	_____ mg/L
Residual inhibitor concentration (1)	_____ mg/L	Residual inhibitor concentration (2)	_____ mg/L
Heterotrophic Colony Count (HCC)	_____ cfu/mL	Legionella pneumophila Sg1	_____ cfu/mL
Legionella pneumophila Sg2 to Sg14	_____ cfu/mL	Legionella other species	_____ cfu/mL

Bleed-off water sampling results

Water sampling date:	_____	Water Temperature	_____ °C
5-Day Biochemical Oxygen Demand (BOD ₅)	_____ mg/L	*Chemical Oxygen Demand (COD)	_____ mg/L
Suspended Solids (SS)	_____ mg/L	Dissolved Oxygen (DO)	_____ mg/L
Residual biocide concentration (1)	_____ mg/L	Residual biocide concentration (2)	_____ mg/L
Residual inhibitor concentration (1)	_____ mg/L	Residual inhibitor concentration (2)	_____ mg/L
Ammoniacal N	_____ mg/L	Threshold Odour No.	_____ T.O.N.
Colour	_____ H.U.	Turbidity	_____ N.T.U.
Synthetic Detergents	_____ mg/L	E. Coli / 100 mL	_____ count

Note 1: HCC to be tested every month and Legionella to be tested every three months unless otherwise requested for validation of the effectiveness of water treatment.

Note 2: HCC and Legionella should be tested to APHA 9215B:1998 and AS3896 respectively or equivalent.

Note 3: Copies of the laboratory test reports on Legionella and HCC should be accompanied with this form.

Note 4: Cooling water samples shall be tested every month unless otherwise requested.

Note 5: Bleed-off water samples shall be tested every three months unless otherwise requested.