

Registration Form for using CABLE offline

Name of applicant: MR Kerry Nice
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(Please note that your name, affiliation and phone number will be posted in the **list of users** page.)

If you are a student, please provide information about your supervisor (with his approval, although these would not appear in the **list of users** page).

Name of supervisor: _____
(Title) (First name) (Last name)
Affiliation: _____
Address: _____
Email: _____
Telephone number: _____

From where or whom did you hear about the CABLE model? Peter Isaac

Please provide a short description of your intended use of CABLE offline. And please inform us when your work involving CABLE is being published.

modelling impacts of water sensitive urban design (WSUD).
Determine the impacts of WSUD on human thermal comfort

Please read the Licence Agreement (which does not require your signature) before sending the filled registration form via email to Bernard Pak.

Cushnie