

Record of noise incidents – 7 Consecutive Days.

Please begin completing this log form once received. If not returned to Council within 21 days of this dated letter, no further action will be taken.

Complainants Details

Name:

Address:

Subject Property:

Complainant's Signature: _____

Date	Name of person taking record	Duration of Noise		Source of noise	Description of noise: volume / pitch / tone	Location where noise could be heard	Effect noise had on you
		Time first heard	Time last heard				

Privacy Statement
 The Council is collecting this information under the requirements of the Public Health and Wellbeing Act 2008 for enforcement and public health purposes. It may be used for the application of the Act. It will be treated in compliance with Hobsons Bay City Council's Privacy Principles and the Privacy and Data Protection Act 2014