

ENVIRONMENTAL NUISANCE INVESTIGATION NOISE RECORDING LOG

Whitsunday Regional Council is currently investigating an environmental nuisance complaint in relation to noise. We are seeking your assistance in gathering valuable information in relation to the time, duration and frequency of occurrence of the noise generating activities.

Please find attached a *Noise Recording Log*. This enables Council to capture critical information needed to continue with the investigation and assessment of the noise nuisance. Please be aware the information contained in the Noise Recording Log may be used as evidence in any enforcement proceedings; therefore it is vital record entries are **comprehensive, accurate and relevant**.

The Noise Recording log is for recording noise that is unreasonable or not usually present in the environment. Log entries should relate to the nuisance noise only. If you have additional information you feel is relevant please detail in a letter and attach to the noise log.

Council may request Noise Recording Logs are maintained for a considerable period of time. Please be aware that this is to assist the investigating officer in accurately assessing the nuisance and identifying solutions to properly resolve the complaint in manner that prevents the nuisance reoccurring.

Details of person completing the log:

Full Name	
Postal Address	
Property Address	
Details of Property Causing Nuisance <i>(Please provide street address if known)</i>	
Description of the nuisance (e.g. fan on air conditioning unit, power tools, engine operation, power tools, refrigeration unit, compressor on truck)	

Day	Date	Time Noise Started <i>24 hr time or indicate AM/PM</i>	Time Noise Stopped <i>24 hr time or indicate AM/PM</i>	Source of Noise <i>(if known)</i>	Briefly describe how the noise affected you. <i>Please include details such as, were windows closed or open, where were you when you first noticed the noise, where in your dwelling was the most affected.</i>

Day	Date	Time Noise Started <i>24 hr time or indicate AM/PM</i>	Time Noise Stopped <i>24 hr time or indicate AM/PM</i>	Source of Noise <i>(if known)</i>	Briefly describe how the noise affected you. <i>Please include details such as, were windows closed or open, where were you when you first noticed the noise, where in your dwelling was the most affected.</i>

I confirm that the information above is a true and accurate record of the observations I made.

Name: Signature: Date: