



Environmental Health – Noise Complaint Form

Environmental Protection (Noise) Regulations 1997
(TO BE COMPLETED BY COMPLAINANT)

Date: _____ Complaint No. **(Office use only)** _____

Complainant's Name: _____

Complainant's Address: _____

Telephone Number (H) _____ (W) _____

Nature Of Complaint: _____

Source Of Noise (Address): _____

Occupier's Name (If Known): _____

Time Of Day When Noise Occurs: _____

How Often Does The Problem Occur: _____

Further Remarks:

I the undersigned am willing to be called as a witness (if the need arises) in any legal prosecutions that are undertaken in relation to this noise complaint.

Signature Of Complainant: _____

Environmental Health Officer: _____

