



## NOISE NUISANCE FORM

Please complete this form if you would like to report a noise that is causing you concern.

### Location of noise

Number / Street Address / Suburb **Required**

### Noise Details

Please describe what is causing the noise **Required**

How does the noise affect you? **Required**

Have you taken any steps to try and resolve the issue? **Required**

Yes

No

What time of day does it occur? **Required**

How long does the noise last? **Required**

How often does the noise occur? **Required**

From where on/in your property can you hear the noise from? **Required**

### Personal Details

Your name **Required**

Your Address **Required**

Your email address and mobile contact number **Required**



## SMOKE/ODOUR EMISSION NUISANCE FORM

Please complete this form if you would like to report an environmental nuisance that is causing you concern.

### Location of emission

Number / Street Address / Suburb **Required**

### Emission Details

Please describe what the emission is **Required**

How does the emission affect you? **Required**

Have you taken any steps to try and resolve the issue? **Required**

Yes

No

What time of day does it occur? **Required**

How long does the emission last? **Required**

How often does the emission occur? **Required**

### Personal Details

Your name **Required**

Your Address **Required**

Your email address and mobile contact number **Required**