

# FORM

## *Public Health and Wellbeing Act*

### Nuisance Log Sheet

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*This form provides nuisance records collected at the complainant's premises by the complainant.*

#### Details of complainant

Title and Full Name: .....

Residential address: .....

Suburb: ..... Postcode: .....

Postal address: .....

Suburb: ..... Postcode: .....

#### Contact details

Mobile: ..... Home: .....

Email: ..... Work: .....

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#### Details of alleged offending property

Residential address: .....

Suburb: ..... Postcode: .....

Type of nuisance (eg noise, odour): .....

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#### Actions Taken

Have you made contact with your neighbour: ..... Y / N

Have you lodged previous complaint/s to Council regarding this matter ..... Y / N

## How to complete your nuisance logs

Please complete nuisance logs for 4 consecutive weeks, including days when a nuisance is not detected.

1. Fill in the date.
2. Describe the type of nuisance eg music, noise from hammering, dust, odour from wood heater smoke.
3. Fill in the time nuisance began.
4. Fill in the time nuisance ceased.
5. Fill in the duration period of each nuisance eg 15 mins, 2 hours. Please state whether the nuisance was intermittent or continuous.
6. Describe where you were when you experienced the nuisance eg in the bedroom, kitchen, backyard.
7. Identify the source/location of the nuisance eg pool pump, radio in backyard/patio, smoke from neighbours shed.
8. Describe how the nuisance is impacting your health eg difficulty breathing, headaches, anxiety (please note, health impacts must be a result of the nuisance and not a pre-existing condition). If no nuisance was detected on that day, please mark N/A.
9. Declaration - Please complete your address in full and legally sign your name on each sheet. Each participating person in the household should complete a separate sheet. Each sheet should be filled, signed on completion and submitted to Knox City Council Health Services department.

Please submit the nuisance logs (pages 1-6) to [health.services@knox.vic.gov.au](mailto:health.services@knox.vic.gov.au) or post/hand deliver to 511 Burwood Hwy, Wantirna South 3152. Where nuisance logs have not been returned to Council within 2 weeks of completion, Council will consider that the matter has been resolved and no further action will be taken at that time.

Please note once the nuisance logs are submitted to Knox City Council's Health Services Department, an Environmental Health Officer will review them and make contact with you in due course. They will explain the next steps with you at this time.

Disclaimer: this may seem excessive but please remember you may be required to present these logs as accurate and concise evidence in a Magistrate's Court. It is also important to note how the nuisance is effecting you at various times of the day.

If you require further information, please visit our website at [www.knox.vic.gov.au](http://www.knox.vic.gov.au) or phone 9298 8000.

## NUISANCE LOG SHEET

	1. DATE (dd/mm/yyyy)	2. DESCRIPTION OF NUISANCE	3. TIME NUISANCE STARTED	4. TIME NUISANCE ENDED	5. DURATION OF INDIVIDUAL NUISANCE EVENTS	6. WHERE WERE YOU WHEN THE NUISANCE OCCURRED	7. WHERE IS THE NUISANCE COMING FROM	8. EFFECTS OF NUISANCE (HEALTH) ON OCCUPANTS AND OTHER COMMENTS
<i>Example</i>	21/02/2021	Music noise Music noise	6:10pm 10:30pm	8:30pm 1:03am	2 hrs 20 mins 2 hrs 33 mins	Lounge room Bedroom	Car stereo in driveway Stereo in backyard	Unable to relax, felt anxious Noise awoke me, unable to fall back asleep
<b>Week 1</b>								

### 9. DECLARATION

I hereby confirm that the information I am providing on this log sheet is true and correct and that I **am / am not\*** (strike out whichever is inapplicable) willing to give evidence in relation to this matter in a Court of Law or Tribunal.

**Signed:** \_\_\_\_\_ **Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address** \_\_\_\_\_ **Suburb:** \_\_\_\_\_ **Postcode:** \_\_\_\_\_

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Week 2								



**9. DECLARATION**

*I hereby confirm that the information I am providing on this log sheet is true and correct and that I **am / am not\*** (strike out whichever is inapplicable) willing to give evidence in relation to this matter in a Court of Law or Tribunal.*

**Signed:** \_\_\_\_\_ **Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address** \_\_\_\_\_ **Suburb:** \_\_\_\_\_ **Postcode:** \_\_\_\_\_

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Week 3								

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**Signed:** \_\_\_\_\_ **Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address** \_\_\_\_\_ **Suburb:** \_\_\_\_\_ **Postcode:** \_\_\_\_\_

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Week 4								

### 9. DECLARATION

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**Signed:** \_\_\_\_\_ **Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address** \_\_\_\_\_ **Suburb:** \_\_\_\_\_ **Postcode:** \_\_\_\_\_