NOISE NUISANCE DIARY

Complainant's name:……..

Complainant's address:……

Address of where the animal noise is coming from:……..

Name of owner, name of dog (if known):……..

DATE	TIME	DURATION	DESCRIBE THE NOISE, AND EXPLAIN HOW IT DISRUPTED ACTIVITIES AT YOUR HOUSEHOLD
e.g. 9/5/15	1:OOam – 1.20am	20MIN	(EG: Barking woke me up)
e.g. 10/5/15	10.00 pm – 10.30 pm	30 min	Continual barking prevented me from getting to sleep
e.g. 11/5/15	1.00 am – 1.10 am	10 min	Late night barking agitated customers/clients as they couldn't get a peaceful nights sleep. This resulted in complaints the following morning and the early departure of guests (loss of revenue). Barking woke my child from sleep. Led to difficulties getting my child back to bed.
e.g. 12/5/15	5.00 am – 5.20 am	20 min	Continual barking woke me up.
e.g. 13/5/15	10.00 pm – 10.30 pm	30 min	Barking prevented me from getting to sleep

DATE	TIME	DURATION	DESCRIBE THE NOISE, AND EXPLAIN HOW IT DISRUPTED ACTIVITIES AT YOUR HOUSEHOLD/BUSINESS

The diary is to be sent to:
"Attention CEO" at office@burke.qld.gov.au SUBJECT: "Noise Nuisance Diary"
PO BOX 90
BURKETOWN QLD 4830