

Neath Port Talbot Council
Environmental Health
Statutory Nuisance Noise Log

Complainant: Name :
 Address:

Premises complained of :

Day and Date e.g. Sat 3/4/04	Time the noise starts	Time the noise stops	Where is the noise coming from	Where can you hear the noise? e.g. outside and/or inside	How does the noise affect you?

Signature:

Date: