



DATE	TIME	DESCRIPTION OF NOISE: BARKING /HOWLING / WHINING/ CROWING/CALLING	FREQUENCY (CONSTANT OR INTERMITTENT	HOW LOUD	NO OF ANIMALS	HOW THIS AFFECTS ME	NAME AND ADDRESS OF ANY ADDITIONAL WITNESSES TO OCCURANCE
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	Date	Signature
I confirm that this is a true and accurate record of events.		
I understand that I maybe cited as a witness should the matter come before a court. I understand that if I am unwilling to be cited, the degree of enforcement activity which the council can take will be limited.		