

Public Protection Statutory Odour Nuisance Log

Your details	Source of Odour
Name	Address
Address	
Tel Number	
Email address	

In order to for us to assess your odour complaint you need to keep a detailed record of the problem. This record may be used as evidence in a Court so it is very important that details are accurate and relate *only* to the specific odour issue you have complained about. You should not, therefore, record odour nuisance which is just an annoyance or occasional.

The odour monitoring log is designed for you to complete one line on each occasion when the odour affects you. The following information is required each time you record an odour event.

DATE Include the day, month and year.

TIMES OF ODOUR It is important to make a note of the time when the odour starts and

finishes. Be sure to specify AM or PM

If you do not know when the odour finished because, for example, you go out, then make a note of when you last noticed the smell.

SOURCE OF ODOUR Describe where the odour is coming from, for example, extractor

fan or from a building

AFFECTS OF ODOUR This is very important because it helps us assess how strong the

odour is & tells us how badly the odour is affecting you.

ABOUT YOU Tell us your details and where the odour is coming from.

If you have a disability which may affect how we contact you please

tell us how you would prefer to be contacted.

Complete the log for 14 DAYS and then either scan or e-mail to us at publicprotectionwest@wiltshire.gov.uk or send to us at Environmental Protection, Wiltshire Council, County Hall, Trowbridge, Wilts, BA14 8JN

An example is shown below.

Date	Start time	Finish time	Type of Odour	How it affects you
24.11.18	12.15 pm	5.15pm	Smell of rotten eggs from extraction	Meant I had to close the windows and couldn't put washing out

The information you provide will be used to deal with your complaint. Information on how we use and store this information can be found on our website http://www.wiltshire.gov.uk/community-safety-privacy-notice

I certify that the following record is a true record of the complained odour. I confirm that I am willing to attend Court and act as a witness should legal action be considered necessary.

Signatura	Name in block capitals	Doto
Signature	Name in block capitals	Dale

Reference Number: WK/ Address: Start time Finish time Source of odour How it affects you Date

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