



# Local Nuisance Customer Complaint Form

This form is to be used to report allegations that a local nuisance is occurring within the District Council of Lower Eyre Peninsula area. To enable the Council to determine what action (if any) can reasonably be taken to resolve your concerns, it is important that you include as much detail as you can in response to the matters set out in this form (including on any additional pages if necessary).

**Important Note:** The contents of this form may be disclosed to a third party where necessary, which includes where required by law (for example, under the *Freedom of Information Act 1991*) or, in connection with any investigation into or enforcement action undertaken by the Council for an offence. Wherever possible the customer's personal information will be redacted in connection with any disclosure.

## CUSTOMER INFORMATION

Full Name:	
Date of Birth:	
Residential Address:	
Contact Phone Number:	
Email Address:	

## INFORMATION RELATING TO YOUR COMPLAINT

<b>What type of nuisance is impacting you?</b>	<input type="checkbox"/> Noise	<input type="checkbox"/> Odour
	<input type="checkbox"/> Smoke	<input type="checkbox"/> Fumes
	<input type="checkbox"/> Vibration	<input type="checkbox"/> Dust
	<input type="checkbox"/> Aerosols	<input type="checkbox"/> Animals
<b>Location of the Nuisance</b> Please provide: <ul style="list-style-type: none"><li>the address where the activity causing the nuisance is taking place and a description of the land (i.e. vacant land); and</li><li>details of the location on the premises where the nuisance is occurring (if known).</li></ul>		
<b>When did you first notice the nuisance and for how long has it occurred/continued?</b>		

<p><b>Provide details of the specific dates and times when the nuisance occurs.</b> Attached to this form is a Local Nuisance Activity Diary to assist you in documenting the relevant dates and times that the nuisance occurs.</p>	
<p><b>Provide a description of the person (or persons) who is causing the nuisance and the reasons why you suspect this person (or persons).</b> For example, have you observed the person carrying out the activity or does the person reside at the address where the nuisance is occurring?</p>	
<p><b>Explain how the nuisance is impacting upon you and your day-to-day activities.</b></p>	
<p><b>Have you had any communication with the person you suspect of having caused the nuisance about your concerns?</b> If so, provide details, including a copy of any written communication</p>	
<p><b>Do you have evidence (photographs or video) of the nuisance?</b> If so, please provide a copy to the Council</p>	
<p><b>Are you willing to attend Court and give evidence?</b></p>	

**I acknowledge and agree that the information in or accompanying this form is, to the best of my knowledge, true and accurate. I understand that this information may be used as evidence in relation to an offence under the Local Nuisance and Litter Control Act 2016.**

**Full Name:** .....

**Signature:** .....

**Date:** .....