

COMPLAINTS DIARY



Name of Complainant: _____ **PH:** _____

Address of Complainant: _____

Observed Property Address: _____

DATE	Start Time of Nuisance	End Time of Nuisance	Description of Nuisance	Impact Location (bedroom)	Affect on Health

COMMENTS: _____

COMPLAINANTS SIGNATURE: _____ **DATE:** _____

Privacy Statement: The Borough of Queenscliffe considers that the responsible handling of personal information is a key aspect of democratic governance, and is strongly committed to protecting an individual's right to privacy. Council will comply with the Information Privacy Principles as set out in the Information Privacy Act, 2000. The information will not be disclosed to any other party unless Council is required to do so by law.