

Environmental Health Complaint Form

Shire of Donnybrook Balingup EHOCOM.V.23.1



Full Name:		
Residential Address:		
	Townsite:	Postcode:
Postal Address:		
	Townsite:	Postcode:
Email:	Phone:	

NB: Complainant details will be kept confidential unless legal action is taken. By signing below, you agree to provide witness statements if required for a prosecution.

COMPLAINT DETAILS:

Address of Complaint: (exact address required)		
	Townsite:	Postcode:

Please provide the details of your complaint:

How often does this complaint occur? (weekly, at night, etc.)
How long has this been occurring? (every week, once, etc.)
Is this complaint relating to noise? ☐ Yes ☐ No
If yes, what is the type/source of the noise?
If yes, when does the noise occur?
Have you contacted the person making the noise/source of the complaint? Please provide their name, the date you contacted them, and details of the occasion.

Other relevant information:

Signature:	Date:
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Please return the completed form to the Shire of Donnybrook Balingup. Upon the receiving a complete complaint form, an Environmental Health Officer will investigate and advise you of the outcome. You may also be contacted to provide further information.

Privacy Collection Notice

The Shire of Donnybrook Balingup collects personal information to provide services and carry out its functions. If you do not provide the requested information, the Shire may be unable to provide the requested service or process your request. Information about how your personal information is collected, used, disclosed and managed, including the Collection Notice applicable to this service or activity, is available on the Shire's PRIS webpage and in the Shire's Privacy Policy. For information about how your personal information is handled, to request access to your information, or to make a privacy enquiry, please contact Corporate Services.