Hawkesdale Asset Trust Pty Ltd ABN: 59 553 743 263 Level 2, 73 Northbourne Avenue Canberra ACT 2601



NOISE COMPLAINT FORM

Name:	Date:	
	Time:	
Postal Address:	Phone:	
Email:	Company Representative:	
Please tick preferred contact method	Complaint Receipt Number:	
□ E □ SMS □ PH □ Mail		
Date and time of incident:		
Complaint Location (if applicable, distance from project infrastructure):		
Weather Conditions (Temperature, wind direction and speed, general conditions):		
Source of weather condition information (Web page, Personal weather station, Observation):		
How often is the noise heard?		
What does it sound like? Any particular characteristics?		
Can the noise be heard inside your residence?		

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Have you kept a noise diary? If yes, please attach copy	
Full description of the issue. How does this at	ffect you?:
Any Additional Information:	
Any Additional information.	
Attached Documents:	
Has this form been seen and approved by	
both parties?	YES / NO
•	-, -
Signature of Complainant:	Signature of RCWF Representative:
Signature or complainant.	Signature of New Nepresentative.