

## Appendix 4 – Noise complaint investigation forms

## Noise complaint investigation form 1 (To be completed by licensee)

Date (DD/MM/YYYY):			
Complainant:	Licensee:		
Legal location:			
Address:			
Telephone:	Telephone:		
Noise characterization Identify the quality and characteristics of the noi	se.		
Distance to source: (m)	When is noise a problem (day/night)?		
Pitch (high/low):	Where is noise most annoying (inside/outside)?		
Is there a noticeable tone?	Describe:		
Is noise steady/intermittent/pulsating?	Describe:		
Is the noise heard and/or a vibration felt?	Describe:		
What is noise comparable to?			
Other comments:			
Weather conditions Identify the weather conditions when the noise i	s most noticeable.		
Temperature:Direction w	vind is coming from:		
Wind speed (km/h):Cloud cove	Cloud cover:Precipitation:		
Ground cover between dwelling and facility (sno	ow, water, grass, crop, trees, ice, etc.):		
Other comments:			
Representative conditions From the above, identify the conditions that sho survey.	uld exist as closely as possible during a comprehensive sound level		

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## Noise complaint investigation form 2 – Event log (To be completed by complainant)

Complainant:	Licensee representative:
Telephone:	_ Telephone:

List any details related to the sound from the facility that concerns you. Refer to the descriptions at the bottom for assistance in providing information.

Categ	gory	Noise event 1	Noise event 2	Noise event 3
Date nois (DD/MM				
Time noise hea	ard (a.m./p.m.)			
Dura	tion			
Noise characteristics	Pitch	O High O Low	O High O Low	O High O Low
	Noticeable tone	O Rumble O Sizzle	O Rumble O Sizzle	O Rumble O Sizzle
	Occurrence frequency	O Steady O Intermittent O Pulsating	O Steady O Intermittent O Pulsating	O Steady O Intermittent O Pulsating
	Noticeability	O Noise heard O Vibration felt	O Noise heard O Vibration felt	O Noise heard O Vibration felt
Wind direction  Weather conditions  Precipitation  Temperature	Wind Speed	O Strong O Moderate O Mild	O Strong O Moderate O Mild	O Strong O Moderate O Mild
		O East O South O West O North	O East O South O West O North	O East O South O West O North
	Precipitation	O Snow O Rain O None	O Snow O Rain O None	O Snow O Rain O None
	Temperature	O Cold O Warm O Hot	O Cold O Warm O Hot	O Cold O Warm O Hot
	Cloud Cover	O Clear O Partly Cloudy O Cloudy	O Clear O Partly Cloudy O Cloudy	O Clear O Partly Cloudy O Cloudy
Ground	cover	O Vegetation O Snow O Water	O Vegetation O Snow O Water	O Vegetation O Snow O Water
Other noise heard during the noise event?		O Vegetation rustling O Wildlife O Traffic	O Vegetation rustling O Wildlife O Traffic	O Vegetation rustling O Wildlife O Traffic
Location				
Other notes				

Noise characteristics: Describe the sound as, for example, a high or low tone, steady, intermittent or pulsating, noise

heard or vibration felt.

Weather conditions: To the extent possible, provide details on temperature, wind direction and speed, cloud

conditions (clear or cloudy), and existence of precipitation when the sound is a problem.

Ground cover: Describe what is covering the ground around the facility; for example, snow, water, grass, crop,

trees, ice, etc.

Location: Note where you were when the sound was concerning (outdoors, such as on the deck or in the

yard or corrals, or indoors, such as in the bedroom or living room). Identify the person who

heard the noise if different than complainant.

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