SUFFOLK COASTAL DISTRICT COUNCIL
COMPLAINT RECORD FORM

Source of complaint (ie – noise, smoke, odour, light):

Location:
(please amend if this is incorrect)

Complainant details:

MVM reference:

When complete, please return this form to:
Environmental Protection Team,
Suffolk Coastal District Council
Melton Hill, Woodbridge, Suffolk, IP12 1AU
Telephone: 01394 444624

Date	Time		Type of disturbance	Effect on you/Comments
	Start	Finish		

Date	Time		Type of disturbance	Effect on you/Comments
	Start	Finish		
				Continue on a separate sheet if required