|  |  |
| --- | --- |
| GSC LOGO as of August 2016 | **COMPLAINT****DOG NOISE NUISANCE** |
|  |
| Name of complainant  |       |
| Residential address |       |
| Town |       |
| Postal address |       |
| Town |       |  Postcode |       |
| Email |       |
| Phone |       |  Mobile |       |
|  |  |
| Dog/s, which I believe to be |       |
|  |       |
|  | colour and breed of dog/s |
|  |  |
| has / have created a nuisance as detailed on pages 3-4 of this complaint.  |
|  |  |
| I believe the dog/s belong to |       |
|  | owner’s name if known |
|  |  |
| and is/are kept at  |       |
|  | address where dog (dogs) is (are) kept |
|  |  |
| Have you approached the dog/s owner and advised them of the nuisance being caused? | [ ]  Yes [ ]  No |
|  |
| Are the owners home when dog/s causing problem?  | [ ]  Yes [ ]  No |
|  |  |
| How does the owner react to the dog’s behaviour? |       |
|       |
|  |  |
| Have you noticed a pattern with the barking or noticed something that may be setting dog/s off? |
|       |
|       |
|  |  |
| Other information |       |
|  |       |
|  |
| Names and addresses  |       |
| of additional witnesses |       |
|  |
| **Please complete and sign Notice of willingness to give evidence****statement on page 2 of this document** |
|  |

|  |  |
| --- | --- |
| GSC LOGO as of August 2016 | **Notice of willingness to give evidence** |
|  |
| **Given by (full name)**  |       |
| **Residential address** |       |
| **Town** |       |
| **Email** |       |
| **Phone** |       |  **Mobile** |       |
|  |
| **Complaint type** | Dog noise nuisance |
| **Other party** |       |
| **Address** |       |
|  |
| **I UNDERSTAND** that Gannawarra Shire Council has investigated my complaint and has found that there is a prima facie case and Council is prepared to issue a charge and summons as a result of the complaint I have made.**I FURTHER UNDERSTAND** that it is essential in any prosecution of any charge and summons arising from my complaint that I am available and willing to give evidence in court and be cross examined if called upon to do so. |
| [ ]  | I understand that I may be required to attend court and give evidence on behalf of the prosecution and be cross-examined by the accused or their legal representative. **I am willing to do this.** |
|  |  |
| [ ]  | I understand that I may be required to attend court and give evidence on behalf of the prosecution and be cross-examined by the accused or their legal representative. **I am unwilling to do this.** I understand that my evidence would be required for a successful prosecution but that the Council will not force me to give evidence before a Court against my will. I further understand that as a result of this concession by Council that it will not issue a charge and summons in this matter. |
|  |  |
| Signature |  |
| Full name |       |
| Date |       |
|  |  |
|  |  |
| **Gannawarra Shire Council**Kerang office Patchell Plaza, 47 Victoria Street Kerang **Telephone** 03 5450 9333 **Fax** 03 5450 3023 Cohuna office 23-25 King Edward Street Cohuna **Telephone** 03 5456 5222 **Mail** PO Box 287 Kerang VIC 3579 **Email** council@gannawarra.vic.gov.au **Web** [www.gannawarra.vic.gov.au](http://www.gannawarra.vic.gov.au) **ABN** 98 993 182 937 |

|  |
| --- |
| **NOISE LOG RECORD SHEET** |
|  |
| Name |       | Occupation |       |
|  |
| Address |       | Phone AH |       | Phone BH |       |
|  |
| Date | Time noise started | Duration | Weather conditions | Your location | Description of Noise | Effect on you | Possible cause of noise | Comments |
| 12/11/2014 | 3:00 am | 30 minutes | Windy | Bedroom | Howling | Couldn’t sleep | Wind? | Also woke other members of family |
|       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |
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|  |
| Signature of complainant |  |  | Please return the completed Log Sheet and signed document to the Local Laws Department of Gannawarra Shire Council. **Data to be recorded for two weeks minimum.** |
|  |  |
| Date |       |

|  |
| --- |
| **NOISE LOG RECORD SHEET** |
|  |
| Name |       | Occupation |       |
|  |
| Address |       | Phone AH |       | Phone BH |       |
|  |
| Date | Time noise started | Duration | Weather conditions | Your location | Description of Noise | Effect on you | Possible cause of noise | Comments |
| Continuation from previous sheet |
|       |       |       |       |       |       |       |       |       |
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|  |  |
| Date |       |