NOISE EVIDENCE LOG

Page_____of_____

Source of Noise:

(address) _____

(occupant/owner) _____

(activity): _____

DATE	TIME		NOISE DESCRIPTION	INT'S
YY/MM/ /DD	start	stop	shrill / repetitive / penetrating / woke me / heard indoors, etc.	

INSTRUCTIONS TO COMPLETE:

- If multiple persons make entries, provide initials at each entry.
- All complainants must sign, date, and provide contact details on the back of every page.
- EVERY entry must be 100% accurate; court appearance and testimony may be required.
- When any 3 representative incidents or any 10 day period is logged, forward all pages to the Bylaw Enforcement Department for consideration of enforcement action.

City of Langford Bylaw Enforcement: 250-474-0604, 2nd Flr., 877 Goldstream Avenue, Langford, BC