

RECORD OF SMOKE NUISANCE

Caution: Please note the contents of this record may be used in future court proceedings. You should therefore take care to ensure the contents are true and accurate to the best of your knowledge and belief.									
Name									
Address									
Tel No Case Officer (If known)	Ref No (<i>if known</i>)								
I certify that this is a true and accurate record									
Signature									
Date									
ADDRESS COMPLAINED ABOUT									
Have you spoken to your neighbour in order to attempt to resolve this	matter? Yes / No Date:								
If no, why were you not able to speak to your neighbour?									

Adverse symptoms / How smoke affects enjoyment of your property					
Time smoke no longer detectable (e.g. 00:30)					
Weather					
Wind					
Description of smoke					
Time smoke first noticed					
Date of record					

Please return this form to your Neighbourhood Enforcement Case Officer at: Neighbourhood Enforcement. London Borough of Hounslow, Hounslow House, 7 Bath Road, Hounslow. TW3 3EB