

Odour Nuisance Diary in respect of the Statutory Nuisances (Jersey) Law 1999

Your name:

[Redacted]

Your address where any nuisance has occurred:

[Redacted]

Contact number:

[Redacted]

Email:

Premises which is the basis of this complaint:

HOSPITAL CATERING DEPT.
ST. PETER'S TECHNICAL PARK.

Number of diary pages submitted:

Do you have any sensitivities to odour? ~~Yes~~ / No

If yes, please provide more details:

Would you like to be kept updated on the progress of this investigation? ~~Yes~~ / No

The information given in this nuisance diary is correct to the best of my knowledge and accurately reflects and records incidents I have personally experienced.

Signed:

[Redacted]

Print Name:

[Redacted]

Date: 30/05/21

Environmental Health

PO Box 228 | Jersey | JE4 9SS

Date	Time Started	Time Stopped	Intensity *	Offensiveness **	Description of Odour ***	Weather Conditions (Include as much detail as possible such as wind speed and direction if known)	Location where odour was smelt****	How it affects you and your use of your property *****

AFFECT UNPLEASANT COOKING SMELLS
 A [REDACTED] WHEN WINDS ARE IN
 SOUTH - EASTERLY DIRECTION.

The information given in this nuisance diary is correct to the best of my knowledge and accurately reflects and records incidents I have personally experienced.

Signed: [REDACTED]

Print Name: [REDACTED]

Date: 30/05/21