Date	Time (please use 24 hr or am/pm)	Duration of Odour (Hours/minutes)	Climatic Conditions (e.g. wind strength – still, moderate or strong) and direction (from S/SW etc.) Dry/rain/warm/cold etc.	Location (e.g. outside the house, inside the house, a particular room in the house)	Description of event (e.g. unable to hang washing out, have to close windows, unable to sit in room, etc.	Strength of Odour using a scale of 1-5, with 1 being the least strong and 5 the most

STATEMENT OF WITNESS

(Criminal Justice Act 1967-S.9(2), Magistrates Court Act 1980-S.102, Magistrates Courts Rules 1981, r70, Criminal Procedures Rules r.27.1 (1))

STATEMENT OF:					
Age of Witness (if over 21 enter "over 21"):					
Occupation of Witness:					
Address:					
Tel:	Email:				

2025

This statement, consisting of 2 sides and signed by me, is true to the best of my knowledge and belief and I make it knowing that, if it is tendered in evidence, I shall be liable to prosecution if I have wilfully stated in it anything which I know to be false or do not believe to be true.

I have recently made a formal complaint to Wyre Borough Council regarding odours from a neighbouring property that is causing me a nuisance. Following this complaint I have kept a detailed record of the times I am impacted by the odour, its duration on each occasion, the source of the odour where known, and how the odour has affected me personally, for consecutive days. This detailed record is overleaf and continued on a further page.

I confirm that during the recorded periods the odours have caused me a nuisance.

Dated the day of

SIGNED:

BLOCK CAPITALS: