

## 22.0 Appendix C: Complaint Record

### Envirofert Compost Facility- Odour Response Check Sheet

Name of person filing out form		
Date when call received		
Time when call received		
Name of caller if offered		
Address of caller		
Phone number of caller		
Name of person receiving complaint		
Day and time when odour was noticed		
Date and time when odour discontinued		
Address at location where odour was detected		
Distance from compost operation		
Odour description		
Wind direction		

Additional comments or concerns


Follow up inspection conducted

Initials

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Observations during follow up inspection


Corrective actions taken


Caller contacted after inspection to discuss results.

Initials

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