

**Seymour Johnson Air Force Base Noise Complaint Form**

Please fill out this form to the best of your knowledge. The more complete the form is, the quicker your complaint can be researched and responded to.

Last: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contact Number(s): \_\_\_\_\_

E-Mail: \_\_\_\_\_

**INCIDENT:**

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Location: \_\_\_\_\_

Complaint:        (Noise)    (Low Flight)    (Sonic Boom)    (Maneuver)

Other: \_\_\_\_\_

Number of Aircraft: \_\_\_\_\_ Type of Aircraft: \_\_\_\_\_

Direction: \_\_\_\_\_ Altitude: \_\_\_\_\_

Weather: \_\_\_\_\_

**ADDITIONAL COMMENTS:**

**WHEN COMPLETE, EMAIL THIS FORM TO:**

**4fw.pa.civicoutreach@us.af.mil**

**PLEASE LEAVE THE FOLLOWING SECTIONS BLANK**

CASE ID: \_\_\_\_\_

**FINDINGS:**

AIRCRAFT: SERVICE: \_\_\_\_\_ NO: \_\_\_\_\_ TYPE: \_\_\_\_\_

SQUADRON: \_\_\_\_\_ CALL SIGN: \_\_\_\_\_

MISSION: (LOW LVL VR/IR) (ACM/DCM)

(IFR APPROACH) (VFR APPROACH/PATTERN) (FCLP)

(OTHER) \_\_\_\_\_

**ADDITIONAL COMMENTS:**

DATE/TIME REC'D: \_\_\_\_\_ DATE/TIME RET'D: \_\_\_\_\_

**RESPONSE:**

CALLER: \_\_\_\_\_

CALL DATE: \_\_\_\_\_ LETTER DATE: \_\_\_\_\_

**RESOLUTION:**

1. NO ACTION WARRANTED:  
(INSUFFICIENT INFO) (NO DOD A/C IN AREA) (A/C OPS AS AUTH'D)
2. REFERRED TO: (USN) (USAF) (USMC) (OTHER)
3. INVESTIGATE FURTHER:  
(BELOW AUTH'D ALT) (DESIG'D SENS AREA) (UNAUTH MANUEVER)

NO ACTION WARRANTED:  
(WEATHER) (AIRCRAFT EMERGENCY) (UNINTENTIONAL PILOT ERROR)

COMMAND ACTION TAKEN:  
(ADMINISTRATIVE) (OPERATIONAL) (DISCIPLINARY)

**ADDITIONAL COMMENTS:**