#### Odour Diary

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| **Reporter name(s):** | **Date** |
| **Time** of test |  |
| **Location of test** (Street name **do not** include details like house name or number) |  |
| **Weather conditions** (dry, rain, fog, snow etc):  |  |
| **Temperature** (very warm, warm, mild, cold, or degrees if known) |  |
| **Wind strength** (none, light, steady, strong, gusting)  |  |
| **Wind direction** (e.g. from NE) |  |
| **Intensity out of a score of 6** (see below e.g. 0/6, 2/6, 4/6 etc) |  |
| **Duration of test** (e.g. 5 mins) |  |
| **Constant or intermittent**? |  |
| **Frequency of detection** during monitoring period e.g. never, once, every 30 seconds, every 60 seconds etc  |  |
| **What does it smell like**? How offensive do you find it?  |  |
| **Sensitivity of location** (see table below) |  |
| Any other comments or observations |  |

Please use the table below to assist with the assessment of odour intensity and to determine the location sensitivity.

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| **Intensity** 0 **No odour** 1 **Very faint odour** 2 **Faint odour** 3 **Distinct odour** 4 **Strong odour** 5 **Very strong odour** 6 **Extremely strong odour** (likely to induce vomiting due to strength)Ref: German Standard VDI 3882, Part 14 | **Location sensitivity (where odour detected )****Low** (e.g. footpath, road)**Medium** (e.g. industrial or commercial workplaces) **High** (e.g. housing, pub/hotel etc)  |