



Kentucky National Guard 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:

SUBMIT FORM