

**CHARLES COUNTY GOVERNMENT
PLANNING & GROWTH MANAGEMENT
P. O. BOX 2150
LA PLATA, MARYLAND 20646**

NUISANCE COMPLAINT FORM

Alleged Nuisance

Owner's Name: _____ Property Address: _____

Mailing

Address: _____ Street Address/
Subdivision: _____

Occupant's Name (If different from Owner):

Specific Directions to location:

Brief description of activity or thing constituting a nuisance:

Signature of Complainant: _____

Date:

Complainant's Property Address:

Mailing Address (if different from above) _____

Home Phone: _____

Work Phone:

County Use Only

Complaint #:

Date Received: _____