

**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: _____