CHARLES COUNTY GOVERNMENT
PLANNING & GROWTH MANAGEMENT
P.O. BOX 2150
LA PLATA, MD 20646
NUISANCE ABATMENT: 301-638-0804

NUISANCE COMPLAINT FORM

Property Owner: _____

Property Address: _____

Mailing Address: (if different from above): _____

Occupant's Name (If different from Owner): _____

Are you aware of any prior complaints filed regarding this property? _____

Directions to Property: _____

Specifically identify all nuisance condition(s) on the property. The Board can only address issues that are identified in this complaint.

_____
_____
_____
_____
_____
_____

Do you have pictures which support your complaint? _____Date pictures were taken_____

I hereby swear/affirm that the conditions exist on the property:

Signature of Complainant: _____Date:_____

Printed Name of Complainant: _____

Complainant's Property Address: _____

Mailing Address (if different from above): _____

Home Phone: _____Work Phone: _____

County Use Only
Date Received:
_____
Complaint #:
_____