

PUBLIC NUISANCE COMPLAINT FORM

NAME: _____

ADDRESS: _____

CITY/ZIP: _____

PHONE # home _____ mobile _____

DOB: _____ STATE/DRIVERS LICENSE#: _____

ADDRESS OF COMPLAINT LOCATION

NAME: _____

ADDRESS: _____

CITY/ZIP: _____

COMPLETE DESCRIPTION OF THE COMPLAINT:

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FILL IN ALL THE BLANKS FOR AN INVESTIGATION TO BE IMPLEMENTED. BY MAKING A COMPLAINT AND SUBMITTING THIS COMPLAINT UNDER FALSE ACCUSATION COULD BE RESULT IN CRIMINAL CHARGES BY TEXAS PENAL CODE 42.06. USE OF THE SUBMIT IS CONSIDERED AN ELECTRONIC SIGNATURE BY THE COMPLAINANT.