

DIRECTIONS FOR COMPLETING FORM

You may call or email to initiate the complaint. However, this form **must** be completed or the complaint will be withdrawn.

Please complete entire form legibly. You may reference initial email or submit email document in lieu of completing Section 3 (Nature of Complaint or Tip).

Form must be signed and dated.

To submit anonymously do not complete Section 1 of this form and do not sign. Forward complaint/tip to the address listed on the form via USPS without return address. Be advised, phone calls are not necessarily anonymous

After review of this form and any additional information submitted, the Department has final determination as to whether an investigation is warranted. Submission of this form does not guarantee an investigation. The Department may also forward to other Agencies as needed.



COMPLAINT/TIP FORM

Maryland Department of Agriculture
Pesticide Regulation Section
50 Harry S. Truman Parkway Annapolis,
Maryland 21401
Phone (410) 841-5710
Fax (410) 841-2765
Email: pest.reg@maryland.gov

DO NOT WRITE IN THIS SPACE

DATE RECEIVED _____

COMPLAINT NO. _____

ASSIGNED TO: _____

PLEASE BE ADVISED THAT BY FILING THIS COMPLAINT IT MAY BE NECESSARY FOR YOU TO APPEAR AT A FORMAL HEARING BEFORE THIS DEPARTMENT OR IN CRIMINAL COURT.

CHECK THOSE THAT APPLY:

COMPLAINT _____ TIP _____

TYPE OF COMPLAINT OR TIP

PESTICIDE USE/MISUSE _____ PEST INSPECTION _____ OTHER (explain below) _____

1. Your Name

Last Name _____ First Name _____ MI _____

Address _____ County _____

City _____ State _____ Zipcode _____

Phone _____ Email _____

2. Complaint Against

Individual/Company Name _____ License No. (If known) _____

Street Address _____

City, State, Zipcode _____

3. Nature of Complaint or Tip - Please give a detailed concise explanation. Continue on a separate sheet if necessary.

I CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Signature _____ Date _____

TO ENSURE A TIMELY RESPONSE, COMPLETED FORM(S) MUST BE MAILED TO THE ABOVE ADDRESS OR EMAILED TO PEST.REG@MARYLAND.GOV