

**Town of Marshfield**

**Weed Complaint Form**

Date: \_\_\_\_\_

Complaint Location: \_\_\_\_\_

Tax Key Number (if known): \_\_\_\_\_

Is problem visible from the road: \_\_\_\_\_

Type of Noxious Weed: Please Check

- Canadian Thistle
- Leafy Spurge
- Field Bindweed (Creeping Jenny)
- Other (Be specific) \_\_\_\_\_

Property Owner Name: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Complainant Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone (Cell) Number \_\_\_\_\_

Complaint: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_