

JO ANNE BERNAL

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Nuisance Complaint Form

Name:		
Street Address:		
City:	State:	Zip Code:
Primary Phone Number:	A	Alternate Phone Number:
Email Address:		
Other Contact Information:		
Address of Nuisance of Crime (or nearest intersection):		
City, State and Zip Code of the Crime:		
Case Number (if any):		
Crime description (including who, what, where, and how do you know):		

How did you become aware of our program?

Presentation Website Law Enforcement Agency

Media (TV, Radio, etc.) Other (please specify):

If you have additional information (photos, videos, evidence) you would like to provide, please email it to NATreporting@epcounty.com and reference this submission along with date, time, and your name.