



## Town of Charlestown

Post Office Box 154  
241 Market Street  
Charlestown, Maryland 21914  
Staff@CharlestownMD.org

### Contact Information Form

This form is to be used for the purpose of residents to provide their contact information to the Town for billing and emergency purposes. Kindly complete all fields, as applicable, and click the "SUBMIT" button below. Thank you!

#### Contact Information (PLEASE PRINT):

Property Owner(s), as listed on deed:.\* \_\_\_\_\_

Property Address:.\* \_\_\_\_\_

Mailing Address, if different: \_\_\_\_\_

Telephone (primary):.\* \_\_\_\_\_

Telephone (alternate): \_\_\_\_\_

Email Address(es): \_\_\_\_\_

Would you like to add your email to our Town Distribution Lists? Yes No

-- If so, choose the list(s) you'd like to be added to:

Critical Updates	Newsletters	Meetings	Events
Boating – Town Pier/Boat Ramp	Watershed Master Plan	Green Team	

Would you like to receive your utility bill via mail, email or both?.\*

Mail Only	Email Only	Mail AND Email
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#### Tenant Information (IF APPLICABLE):

Name(s): \_\_\_\_\_

Mailing Address, if different: \_\_\_\_\_

Telephone (primary): \_\_\_\_\_

Telephone (alternate): \_\_\_\_\_

Email Address(es): \_\_\_\_\_

Who should receive the quarterly utility bill?

Owner Only	Tenant Only	Owner AND Tenant
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If submit button does not work, please email completed form to  
[mculver@charlestownmd.org](mailto:mculver@charlestownmd.org). Thank you!