

RED HOOK POLICE DEPARTMENT

Complaint Against Police Personnel Form

Name of Complainant				Date:
Address				
Phone # (Residence)			Phone # (Work)	
Date of Incident			Time of Incident:	
Location of Incident				
Name of employee(s) against whom complaint is being filed or other identifying information				
Name		Rank:	Vehicle #	Badge #
Description				
Name		Rank:	Vehicle #	Badge #
Description				
WITNESSES				
Name				
Address				
Phone # (Residence)			Phone # (Work)	
Name				
Address				
Phone # (Residence)			Phone # (Work)	
Use reverse for additional names				
Statement of allegation: (to be completed by complainant)				
Use reverse for additional narrative				
<p>I understand that this statement of complaint will be submitted to the Red Hook Police Department and may be the basis of an investigation. I state that the facts contained herein are accurate and true to the best of my knowledge and belief. I have made this statement voluntarily without persuasion, coercion or promise of any kind.</p> <p>I understand that the employee against whom this complaint is filed may be entitled to a hearing. I further agree to appear at any such hearing and I agree to testify under oath concerning all matters relevant to this complaint.</p> <p>NOTE: FALSE STATEMENTS MADE HERIN ARE PUNISHABLE AS A CLASS A MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE NEW YORK STATE PENAL LAW.</p>				

Sworn to me this _____ day

of _____, 20 ____.

Signature _____

Title _____

_____ Complainant Signature

Refused to sign _____ Refusal Witness Signature

Date Complaint Received _____