

Interpreter required? No Yes If Yes, Language: _____

SIGNATURE OF COMPLAINANT _____

DATE _____

If name(s) of officer(s) unknown, see reverse	Name of officer involved Badge #
	Name of second officer involved Badge #
	Name of third officer involved Badge #

Form #1

January 2, 2003

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PUBLIC COMPLAINT FORM

PRINT CLEARLY

Brief description of complaint: (continued)

Description of officer(s) involved, if name(s) unknown:

Names, addresses and telephone numbers of witness(es) (include badge number and/or description of any police officers who were not involved but may have witnessed incident)

List of photographs or other physical evidence submitted (continued)

TO BE COMPLETED BY OFFICER RECEIVING COMPLAINT

Complaint received by: (officer name/rank/badge, if applicable) _____

Location: _____ Date: _____

Complaint received: Letter In Person Fax OCCOPS

Confirm receipt of evidence supplied by complainant

Photos taken by police? No Yes If Yes, date/time and name of officer, including badge no.

Consent to release of medical information obtained from complainant

Copy of completed complaint provided to complainant.

Preliminary complaint classification by Chief or designate:

Services Policies Officer(s) Conduct

INFORMAL RESOLUTION DISCUSSED No Yes If Yes, Use Record of Informal Resolution and attach to original complaint. If No, explain

The personal information on this form is collected and disclosed under the authority of the Police Services Act (s. 57 and/or 58) and will be used for the purpose of investigating the complaint referenced herein. Questions should be directed to:

The Professional Standards Branch, _____ Police Service, (Telephone) _____
(Address) _____