

Wilton Police Department

CIVILIAN COMPLAINT REPORT

Please give this completed document to a Police Supervisor or send it to the Internal Affairs Unit of this agency at the following address or email: Chief _____, Wilton Police Department, 240 Danbury Rd, Wilton, Connecticut 06897. Email: _____

| | | | |
|---|---------------------------|--|-------------------------|
| Date of Incident | Time of Incident | Date Reported | Time Reported |
| Location of Incident | | | |
| Complainant's Name | | Complainant's Address (Street, City, State, ZIP) | |
| Complainant's DOB | Complainant's Home Phone# | Complainant's Work Phone# | |
| Complainant's Cell Phone# | | Complainant's E-mail | |
| Employer | | Occupation | |
| Employer's Address | | | Employer's Telephone |
| Name of Person Assisting Complainant | Address | | Telephone |
| Employee Complained about (if known): (Name or physical description, Badge #, Car #, etc.) | | | |
| Witness Information (Name, D.O.B., Address, Telephone #, etc.) | | | |
| Please provide answers to the following questions: | | | YES NO UNSURE |
| <ol style="list-style-type: none"> 1. To your knowledge, was all or any part of the incident complained of video or audio taped by anyone? 2. Are you afraid for your safety, or that of any other person, for any reason as a result of making this complaint? 3. Has anyone threatened you or otherwise tried to intimidate you in an effort to prevent you from making this complaint? 4. Are you able to read, write and speak the English Language? 5. If your answer to Question #4 is "No" or "Unsure", have you been provided with adequate language assistance to help you understand and fill out this form? | | | |
| <i>(If you answered "Yes" to question 1, 2 or 3, please provide details on next page.)</i> | | | |

Details of the Incident: Please provide a full description of the circumstances that prompted your complaint. Attach supporting documentation, as appropriate; including letters, e-mails, photographs, video or audio tapes, etc. (Attach additional pages, if necessary)

I have read, or had read to me, the above and attached complaint and statement consisting of ____ pages. All of the answers are true and accurate to my knowledge. I understand that making a false statement intended to mislead a law enforcement officer in his official function is a violation of Connecticut General Statute 53a-157b and could result in my arrest and being fined and/or imprisoned.

| | |
|---|--|
| Complainant's Signature | Date and Time Signed |
| On this the ____ day of _____, _____, the complainant whose name is subscribed above, personally appeared before me, the undersigned Officer, and acknowledged that he/she truthfully executed this instrument for the purposes herein contained. | Notary (For Authority See C.G.S. §§1-24, 3-94a et seq.) |
| | Print Rank/Name/ID Number: |

| Person Receiving the Complaint | | |
|---------------------------------------|----------------------|----------------------|
| Rank/Name/ ID Number | Date Received | Time Received |
| | | |

Method of Contact (Check): Telephone In-Person Mail E-Mail Other

| | |
|--|---------------------------------|
| Signature of person receiving complaint | Complaint Control Number |
| | |