



## Southington Police Department Uniform 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:

Mailing Address: Internal Affairs, Southington Police Department, 69 Lazy Lane, Southington, Connecticut 06489.

E-Mail: Captain James Armack, JArmack@Southingtonpolice.org

<i>Please Provide Answers to the Following Questions:</i>	Yes	No	Unsure
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 you answer to Question #4 is "No" or "Unsure", have you been provided with adequate			
<i>(If you answered "Yes" to any of the above questions, please provide details on Page #2)</i>			

Nature of the Complaint:	Professional Conduct	Job Performance
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### Incident Details

Date of Incident:	Time of Incident:	Date Reported:	Time Reported:
Location of Incident:			
Complainant's Name:		Complainant's Address (Address, City, State, Zip)	
Complainant's DOB:	Complainant's Home Phone Number:	Complainant's Cell Phone Number:	
Complainant's Alternate Phone Number:	Complainant's Email:		
Employee(s) Complained About (If Known): (Name, Physical Description, Badge, and/or Car Number, etc.)			
Name of Person Assisting Complainant:	Address (Address, City, State, Zip):	Telephone Number:	
Witness Information (Name, DOB, Address, Telephone Number, etc.)			

**Continue to Page #2**

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.

*Attached Additional Pages, if necessary*

**Other there other pages, pictures, videos, or information attached to this complaint?                      Yes                      No**

**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 the best of my knowledge, information, and belief.**

Complainant's Signature:	Date and Time Signed:
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**Person Receiving Complaint**

Printed Rank / Name / ID Number:	Date Received:	Time Received:
Signature of Person Receiving Complaint:		Agency Complaint Number:

Method of Contact (Check):      Telephone      In-Person      Mail      Email      Other: \_\_\_\_\_