

Ridgefield Police Department

Civilian Complaint Report

PLEASE GIVE THIS COMPLETED DOCUMENT TO A POLICE SUPERVISOR OR SEND IT TO:
RIDGEFIELD POLICE DEPARTMENT, 76 EAST RIDGE ROAD, RIDGEFIELD, CT 06877 ATTN: INTERNAL AFFAIRS UNIT
PHONE: 203 438.6531 FAX: 203 431.2741 - E-MAIL: rpdiu@ridgefieldct.org

Date of Incident: ____/____/____ Time of Incident: _____ Date Reported: ____/____/____ Time Reported: _____

Complainant's Information

Complainant: _____ Date of Birth: ____/____/____
Residence : _____
Home #: () ____ - _____ Cell #: () ____ - _____ Work #: () ____ - _____
Business: _____ Occupation: _____
Business Address: _____ Business #: () ____ - _____
Person Assisting Complainant, if any: _____

Name	Address	Contact #:
------	---------	------------

Witness Information, if any:

Name	DOB	Address	Contact #:
------	-----	---------	------------

Complaint

Location of Incident: _____

Please answer the following questions:

Yes

No

Unsure

1. To your knowledge, was all or any part of the incident complained of video or audio taped by anyone?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are you afraid for your safety, or that of any other person, for any reason as a result of making this complaint?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Has anyone threatened you or otherwise tried to intimidate you in an effort to prevent you from making this complaint?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Are you able to read, write and speak the English language?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you answered "Yes" to any of the five (5) questions above, please provide details below:

Details of 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.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

(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/her official function is a violation of Connecticut General Statute 53a-147b and could result in my arrest and being fined and/or imprisoned.

Complainant's Signature: _____	Date: ____/____/____ ____ hrs.
On this the ____ day of _____, _____ before me, the undersigned Officer, personally appeared the complainant whose name is subscribed above and acknowledged that he/she truthfully executed this instrument for the purposes herein contained.	Notary: (for Authority, see CGS 1-24, 3-94a et seq.): _____ PRINT Rank / Name / ID Number: _____ # _____

Person Receiving the Complaint

PRINT Rank / Name / ID Number:

Date ReceivedTime Received

_____ / _____ / _____

_____ hrs.

Method of Contact: Telephone ☐

In-Person ☐Mail ☐E-Mail ☐

Other ☐

Signature of Person Receiving Complaint:

Internal Affairs Number:
