



# City of Groton Police Department CIVILIAN COMPLAINT FORM



Please give this completed document to a Police Supervisor or send it to the Chief of Police of this agency at the following address or email: Chief of Police, City of Groton Police Department, 295 Meridian Street, Groton, Connecticut 06340. Email: [policedept@cityofgroton-ct.gov](mailto:policedept@cityofgroton-ct.gov)

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
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"/>



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*(If you answered "Yes" to any of the above questions, please provide details below.)*

**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.

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**(Use additional statement paper, 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.

<b>Complainant's Signature</b>	<b>Date and Time Signed</b>
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.	<b>Notary (For Authority See C.G.S. §§1-24, 3-94a et seq.)</b>
	<b>Print Rank/Name/ID Number:</b>

Person Receiving the Complaint		
<b>Rank/Name/ID Number</b>	<b>Date Received</b>	<b>Time Received</b>

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

<b>Signature of person receiving complaint</b>	<b>Complaint Control Number</b>
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