

New Milford 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 address or email: Chief Spencer Cerruto, New Milford Police Department, 49 Poplar St, New Milford, Connecticut 06776. Email: scerruto@newmilfordpolice.org

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:																								
<ol style="list-style-type: none"> To your knowledge, was all or any part of the incident complained of video or audio taped by anyone? Are you afraid for your safety, or that of any other person, for any reason as a result of making this complaint? Has anyone threatened you or otherwise tried to intimidate you in an effort to prevent you from making this complaint? Are you able to read, write and speak the English Language? 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? 			<table border="1"> <thead> <tr> <th>Yes</th> <th>No</th> <th>Unsure</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Yes	No	Unsure																		
Yes	No	Unsure																						
(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.

(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 _____	Notary (For Authority See C.G.S. §§ 1-24, 3-94a et seq.)
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.	
	Print Rank/Name/ ID Number:

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

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

Signature of person receiving complaint

Complaint Control Number

Citizen Complaint Continued: