



The Rochester Police Department encourages citizens to report legitimate complaints against employees of this Department. As a result, a thorough, impartial, and confidential investigation will be conducted. If this complaint leads to a formal civil service hearing, you will be notified and invited to participate in the hearing panel selection process.

PSS. NO. _____

PAGE ____ OF ____

DATE OF REPORT: _____ TIME: _____

COMPLAINANT: _____ BIRTHDATE: _____

ADDRESS: _____ ZIP: _____

TELEPHONE: (HM) _____ (BUS) _____ OTHER: _____

EMAIL ADDRESS: _____

EMPLOYMENT: _____

ADDRESS: _____ YEARS OF EDUCATION: _____

DATE OF INCIDENT COMPLAINED OF: _____ TIME: _____

LOCATION OF INCIDENT: _____

CR#: _____

<u>COMPLAINT TYPE:</u>		<u>HOW RECEIVED:</u>	
USE OF FORCE	<input type="checkbox"/>	IN PERSON	<input type="checkbox"/>
PROCEDURAL	<input type="checkbox"/>	LETTER	<input type="checkbox"/>
PROPERTY	<input type="checkbox"/>	PHONE	<input type="checkbox"/>
OTHER	<input type="checkbox"/>	OTHER	<input type="checkbox"/>

PERSONNEL COMPLAINED OF:

NAME	ID#	CAR NO#	DESCRIPTION

WITNESS INFORMATION:

NAME	ADDRESS	PHONE #	AGE	EMAIL ADDRESS/ EMPLOYER
		D		
		N		
		D		
		N		
		D		
		N		
		D		
		N		
		D		
		N		
		D		
		N		

rochester police department personnel complaint rpd 1253

PSS NO.: _____

DETAILS OF INCIDENT:

NOTE: PURSUANT TO SECTION 210.45 OF THE PENAL LAW OF THE STATE OF NEW YORK, ANY INCORRECT OR FALSE STATEMENT ATTRIBUTED TO YOU AND CONTAINED HEREIN IS PUNISHABLE AS A CLASS A MISDEMEANOR

COMPLAINANT'S SIGNATURE

DATE

CONCILIATION NUMBER _____

REQUEST CIVILIAN ADVOCATE

COMPLAINT RECEIVED BY: _____
(NAME AND ID NO.)

WHERE RECEIVED: _____
(SECTION/UNIT)