



DEPARTMENT OF POLICE SERVICES
WEST HAVEN, CONNECTICUT

I.A. CASE #

Citizen Complaint Statement Form

COMPLAINANT'S NAME

DATE OF BIRTH

HOME ADDRESS

TELEPHONE #

BUSINESS ADDRESS

TELEPHONE #

LOCATION OF INCIDENT

DATE OF INCIDENT

TIME OF INCIDENT

COMPLAINT AGAINST

RANK

BADGE #

COMPLAINT AGAINST

RANK

BADGE #

WITNESS NAME

ADDRESS

TELEPHONE

WITNESS NAME

ADDRESS

TELEPHONE #

COMPLAINT :

Citizen Complaint Statement Form

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COMPLAINT CONTINUED :

I.A. Case #

I have read (or have had read to me the above statement, consisting of _____ pages, and it is true to the best of my knowledge, information and belief. I fully understand that if I make a statement that is untrue and which is intended to mislead a law enforcement officer in the performance of his/her official function, I will be in violation of Section 53a-157 of the Connecticut General Statutes, regarding making a False Statement and Section 53a-156 of the Connecticut General Statutes regarding Perjury.

Signature of Complainant _____ Date _____

Supervisor Receiving Complaint _____ Date _____