CITIZEN COMPLAINT INFORMATION FORM

- The members of the Washington Township Police Department are committed to providing law enforcement services that are fair, effective and impartially applied. It is in the best interest of everyone that your complaint about the performance of an individual officer is resolved fairly and promptly. The police department has formal procedures for investigating your complaint. These procedures ensure fairness and protect the rights of both citizens and police officers.
- < Your complaint will be sent to a superior officer or a specially trained internal affairs officer who will conduct a thorough and objective investigation.
- < You might be asked to help in the investigation by giving a detailed statement about what happened or providing other important information.
- < All complaints against police officers are thoroughly investigated. You will be advised in writing of the outcome of the investigation.
- < If our investigation shows that a crime might have been committed, the county prosecutor will be notified. You might be asked to testify in court.
- If our investigation results in an officer being charged with a violation of department rules, you might be asked to testify in a departmental hearing.
- < If our investigation shows that the complaint is unfounded or that the officer acted properly, the matter will be closed.

It is unlawful to provide information in this matter which you do not believe to be true.

You may call the Washington Township Police Department, Internal Affairs Officer at 908-876-3232 with any additional information or any questions about the case.

INTERNAL AFFAIRS COMPLAINT REPORT

IR#	UCR		IN	INTERNAL AFFAIRS#		PROSECUTOR=S CASE #			
COMPLAINANT									
NAME				A	ALIAS				
ADDRESS									
CITY	STATE	ZIP		CODE		PHONE ()		DOB	
SSN	AGE		SEX		RACE				
EMPLOYER/SCHOOL					PHONE ()				
ADDRESS		CITY			STATE			ZIP CODE	
INCIDENT									
COMPLAINT TYPE PROCEDURAL[] USE OF FORCE[] DEMEANOR[] OTHER: []									
COMPLAINT AGAINST: 1.				BADGE#					
2.				BADGE#					
DATE/TIME OCCURRED	LOCATION	LOCATION		ZONE					
DATE/TIME REPORTED HOW REPORTED IN PERSON []				MAIL[] PHONE[] OTHER[]					
DETAILS (GIVE DESCRIPTION OF ANY INJURIES, TREATMENT LOCATION, DATE, AND DOCTOR IF APPLICABLE)									
<u> </u>									
FALSE POLICE REPORTS TO A LAW ENFORCEMENT AGENCY Anyone who makes a fictitious report to a law enforcement agency of an offense or incident knowing it did not occur, is a Disorderly Person and can be charged under 2C:28-4b1 of the New Jersey Criminal Justice Code.									
SIGNATURE OF COMPLAINANT							DATE		
REPORT RECEIVED BY						DATE/TIME			
INTERNAL AFFAIRS USE									
FORWARDED TO:					DATE				
INTERNAL AFFAIRS OFFICER SIGNATURE				*	BADGE#	Г	DATE/TIME		