



Rockland County Sheriff's Office Police Division

HOW TO MAKE A COMPLAINT

1. If you wish to make a complaint about the actions of an officer or about any aspect of law-enforcement operations, please:
 - a. Come to the department and tell any employee that you want to make a complaint; or
 - b. Call the department office and tell the person answering the phone that you want to make a complaint;
or
 - c. Write your complaint and mail it to:

Chief of Police /Sheriff
Rockland County Sheriff's Police Division
55 New Hempstead Rd.
New City, N.Y. 10956

2. A Supervisor will assist you in filling out a complaint form. This form asks you to identify yourself and then to give specific details about your complaint.
3. Your complaint will then be investigated. You may be contacted and asked additional questions about your complaint.
4. If it is going to take a long time to investigate your complaint, you will receive a letter telling you approximately when you may expect a reply.
5. When your complaint has been investigated, the Chief /Sheriff will review the investigation and will write you a letter explaining what has been found out about the matter.



**Rockland County Sheriff's Office
Police Division**

Civilian Complaint Form

(Refers GO 501) – 08.28.2020

CONFIDENTIAL

Name of complainant: _____

Contact address? _____

Phone number? Residence: _____ Work: _____

Date and time of incident: _____

Location of incident: _____

Name of officer(s) or employee(s) against whom complaint is being filed, or other identifying marks (car number, badge number, etc.)

Rank: _____ Name: _____

Badge # _____ Vehicle #: _____

Vehicle: _____

Name(s)/address/phone number or other identifying information concerning any witnesses, if applicable:

Statement of allegation: _____

(If further space is needed use reverse side of sheet)

I understand that this statement of complaint will be submitted to the Rockland County Sheriff's Office and may be the basis for an investigation. Further, I sincerely and truly declare and affirm that the facts contained herein are complete, accurate, and true to the best of my knowledge and belief. Further, I declare and affirm that my statement has been made by me voluntarily without persuasion, coercion, or promise of any kind.

I understand that, under the regulations of the department, the employee against whom this complaint is filed may be entitled to request a hearing before a board of inquiry. By signing and filing this complaint, I hereby agree to appear before a board of inquiry if requested by the employee and to testify under oath concerning all matters relevant to this complaint.

The filing of a false statement is a class A misdemeanor in the State of New York. [NYS Penal Law Sect. 175.30]

Signature of Complainant

Date

Refused to sign _____

Signature of Person Receiving Complaint

Date and Time Received

Incident # _____