



East Lyme Police Department



CIVILIAN COMPLIMENT/INQUIRY/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 of Police, Town of East Lyme – Police Department, 277 West Main St. P.O. Drawer 519, Niantic, Connecticut 06357. Email: kglenn@eastlymepolice.com

Date of Incident	Time of Incident	Date Reported	Time Reported		
Location of Incident					
Contact's Name		Contact's Address (Street, City, State, ZIP)			
Contact's DOB	Contact's Home Phone#	Contact's Work Phone#			
Contact's Cell Phone#		Contact's E-mail			
Employer		Occupation			
Employer's Address			Employer's Telephone		
Name of Person Assisting Contact	Address		Telephone		
Employee commented 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:			YES	NO	UNSURE
1. To your knowledge, was all or any part of the incident inquired about video or audio taped by anyone?			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are you afraid for your safety, or that of any other person, for any reason as a result of making this inquiry?			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Has anyone threatened you or otherwise tried to intimidate you in an effort to prevent you from making this inquiry?			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Are you able to read, write and speak the English Language?			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. 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?			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(If you answered "Yes" to any of the above questions, please provide details below.)					

[illegible]

I have read, or had read to me, the above and attached request 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.

Contact's Signature	Date and Time Signed
<p>On this the ____ day of _____, _____, before me the undersigned officer, personally appeared the individual whose name is subscribed above and acknowledged that he/she truthfully executed this instrument for the purposes herein contained.</p>	Notary (For Authority See C.G.S. §§1-24, 3-94a et seq.)
	Print Rank/Name/ID Number:

Person Receiving the Inquiry Request		
Rank/Name/ ID Number	Date Received	Time Received

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

Signature of person receiving request	Inquiry Control Number
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