NAUGATUCK POLICE DEPARTMENT

CIVILIAN 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 C. Colin McAllister, Naugatuck Police Department, 211 Spring Street, Naugatuck, Connecticut 06770. Email: amcmasters@naugatuckpd.gov

Date of Incident	Time of Inc	Time of Incident		Date Reported		Time Reported		
Location of Incident								
Complainant's Name Complain			ainant's Address (Street, City, State, ZIP)					
Complainant's DOB	nplainant's DOB Complainant's Home Phone# Co			Complainant's Work Phone#				
Complainant's Cell Ph	none#	Complainant	's E-mail					
Employer			Occupation					
Employer's Address				Employer's	ver's Telephone			
Name of Person Assisting Complainant Address					Telephone			
Employee Complained about (if known): (Name or physical description, Badge #, Car #, etc.)								
Witness Information (Name, D.O.B., Address, Telephone #, etc.)								
Please provide answe	ers to the following	questions:			YES	NO	UNSURE	
To your knowledge, was all or any part of the incident complained of video or audio taped by anyone?								
audio taped by anyone?Are you afraid for your safety, or that of any other person, for any reason as a result of making this complaint?								
3. Has anyone threatened you or otherwise tried to intimidate you in an effort to								
prevent you from making this complaint? 4. Are you able to read, write and speak the English Language?								
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?								
(If you answered "Yes" to any of the above questions, please provide details below.)								

Details of the Incident: Please provide a full description o supporting documentation, as appropriate; including lette			-					
(Attach additional pages, if necessary) I have read, or had read to me, the above and attached con answers are true and accurate to my knowledge. I understallaw enforcement officer in his official function is a violation in my arrest and being fined and/or imprisoned.	and that making a	false statemen	t intended to mislead a					
Complainant's Signature	Date and Time Signed							
On this the day of	Notary (For Authority See C.G.S. §§1-24, 3-94a et seq.)							
acknowledged that he/she truthfully executed this instrument for the purposes herein contained.	Print Rank/Name/ID Number:							
Person Receiving the Complaint								
Rank/Name/ ID Number	Date Received		Time Received					
Method of Contact (Check): Telephone In-Person Mail E-Mail Other								
Signature of person receiving complaint	Complaint Control Number							