

Green Island Police Department Citizen Complaint Form

All information must be complete and accurate to the best of the complainant's knowledge. No anonymous or third party complaints will be entertained. The complaint must be filed out by the person making such complaint, and the actions being complained about must have been taken against the actual complainant.

Name of Complainant:				
Street Address:				
City:	Stat	te:	Zip:	Phone:
Officer Involved:				
Officer Involved:				
Exact Location of Incident:				
Exact Escation of Incident.				
Time of Incident:	me of Incident: Date of Incident:		Any Case Numbers if Known:	
Witness:				Phone:
Witness:				Phone:
Statement: (use multiple forms if necessary, no attached sheets are acceptable)				
IT IS A CRIME, PUNISHABLE AS A CLASS A MISDEMEANOR UNDER THE LAWS OF THE STATE OF NEW YORK, FOR A PERSON IN AND BY A WRITTEN INSTRUMENT, TO KNOWINGLY MAKE A FALSE				
STATEMENT WHICH SUCH PERSON DOES NOT BELIVE TO BE TRUE.				
This form must be notarized prior to submission:				
				Deponent
				Witness

Please return to the Green Island Police Department at;

Green Island Police Department Attention Chief of Police 73 George Street Green Island, NY 12183