

# **Hempstead Police Department**

## **CITIZEN COMPLAINT PROCEDURE AND FORMS**

Dear Citizen:

The public's trust, confidence, and support are vital to successful police service. The public is entitled to have ready access to the police administration that is sworn to serve them. This access will help foster public understanding and acceptance of police procedures, and aid in the detection or correction of improper or undesirable practices.

The Hempstead Police Department has adopted a policy that provides a fair, orderly, and uniformly applied process for receiving, investigating, and resolving complaints of alleged police misconduct.

Complaints against Hempstead Police Department employees may be filed by contacting a police department supervisor and giving all details regarding the incident. The complaint will be promptly forwarded to Police Chief to review and assignment for investigation. When the complaint investigation is completed, the Police Chief will review the case and determine a course of action.

**YOU HAVE THE RIGHT TO MAKE A COMPLAINT AGAINST A MEMBER FOR ANY IMPROPER CONDUCT. THIS AGENCY'S POLICIES HAVE A PROCEDURE TO INVESTIGATE CITIZENS' COMPLAINTS. YOU HAVE A RIGHT TO A WRITTEN DESCRIPTION OF THIS PROCEDURE. THIS AGENCY MAY FIND AFTER INVESTIGATION THAT THERE IS NOT ENOUGH EVIDENCE TO WARRANT ACTION ON YOUR COMPLAINT; EVEN IF THAT IS THE CASE, YOU HAVE THE RIGHT TO MAKE THE COMPLAINT AND HAVE IT INVESTIGATED IF YOU BELIEVE THE OFFICER BEHAVED IMPROPERLY. CITIZEN COMPLAINTS AND ANY REPORTS OR FINDINGS RELATING TO COMPLAINTS MUST BE RETAINED BY THIS AGENCY FOR AT LEAST TWO YEARS.**

*I have read and understood the above statement.*

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Complainant

**HEMPSTEAD POLICE DEPARTMENT  
CITIZEN COMPLAINT REPORT**

Your Name \_\_\_\_\_

Home Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Work Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Today's Date \_\_\_\_\_ Date and Time of Incident \_\_\_\_\_

Location of Incident \_\_\_\_\_

Name(s) of Police Employee(s) Involved (if known) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Name(s) of Witness(s) \_\_\_\_\_

Address \_\_\_\_\_

Phone ( ) \_\_\_\_\_ ( ) \_\_\_\_\_

Additional witness information attached.

Did you speak to a supervisor of the Hempstead Police Dept. regarding the incident?

YES      NO

Would you like to speak to a supervisor prior to making a formal complaint?

YES      NO

If you've already spoken to a supervisor, name of supervisor: \_\_\_\_\_



# HEMPSTEAD POLICE DEPARTMENT CITIZEN COMPLAINT REPORT

DO NOT WRITE BELOW THIS LINE-FOR DEPARTMENT USE ONLY

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Supervisor's Comments:

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Name of Supervisor receiving complaint: \_\_\_\_\_

Copy sent to Complainant? YES NO Date \_\_\_\_\_ Emp. Initials \_\_\_\_\_

Forwarded to Police Chief for invest.? Date \_\_\_\_\_ Emp. Initials \_\_\_\_\_

Action to be taken:

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Supervisors Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Chief's Signature: \_\_\_\_\_ Date: \_\_\_\_\_