



FOUNTAIN VALLEY POLICE DEPARTMENT

CRAIG HEREDIA, CHIEF OF POLICE

10200 SLATER AVENUE | FOUNTAIN VALLEY, CA 92708-4736

(714) 593-4485 | FAX (714) 593-4453

CIVILIAN COMPLAINT FORM

Your Name: _____ Date Reported: _____

Your Address: _____ City/Zip: _____

Email Address: _____

Home Phone: _____ Alternative Phone: _____

Date and Time of Incident: _____

Location of Incident: _____

Name (if known) or Description of Employee(s) Involved: _____

Name, Address, Phone Number of Witness(es): _____

Statement of Complaint: _____

(USE BACK AND ATTACH ADDITIONAL PAGES AS NECESSARY)

Statement of Complaint (continued):

Per the California Penal Code Section 148.6:

YOU HAVE THE RIGHT TO MAKE A COMPLAINT AGAINST A POLICE OFFICER FOR ANY IMPROPER POLICE CONDUCT. CALIFORNIA LAW REQUIRES THIS AGENCY TO HAVE A PROCEDURE TO INVESTIGATE CITIZEN'S' COMPLAINTS. YOU HAVE THE 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 AN OFFICER BEHAVED IMPROPERLY. CITIZEN COMPLAINTS AND ANY REPORTS OR FINDINGS RELATED TO COMPLAINTS MUST BE RETAINED BY THIS AGENCY FOR AT LEAST FIVE YEARS.

Please sign and date this complaint form and return it to us so we can proceed with the investigation. You have the right to a copy of this completed form.

IT IS AGAINST THE LAW TO MAKE A COMPLAINT THAT YOU KNOW TO BE FALSE. IF YOU MAKE A COMPLAINT AGAINST A POLICE OFFICER KNOWING THAT IT IS FALSE, YOU CAN BE PROSECUTED ON A MISDEMEANOR CHARGE.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT.

Signature: _____

Date: _____

Name (please print): _____

Office Use Only	
Received By: _____	Administrative #: _____
Date and Time: _____	CN/DR# _____
Copy to Complainant: <input type="checkbox"/> Yes <input type="checkbox"/> No	Recording or Other Attachments: _____