



Greeley Police Department

Citizen's Complaint Form



Please Complete All Areas That Apply

Your Name: _____ Date: _____

Date of Birth: _____ Phone Number: _____

Address: _____

Sex: _____ Email: _____

Are you a city of Greeley resident? Yes No

If not how long will you be in the Greeley area? _____

Contact information or who you are staying with:

Complaint Information:

Date of Incident: _____ Time of Incident: _____

Location of Incident: _____

Patrol Vehicle Number: _____ Badge Number _____

Employee (s) Involved (if known) _____

Description of Employee (s) (race, sex, height, weight, hair color, ext.)

Please describe the incident in detail (use additional sheets if necessary):

Witness Information:

Is this the first time you have raised this concern about this person?

___ Yes ___ No

Do you have additional information? If so, please explain:

The Greeley Police Department considers citizen complaints against its employees to be serious and actively pursues investigations into misconduct. For this reason, you must ensure that your complaint is based upon fact and you have provided us with all the facts to the best of your ability. If you intentionally make a false report to this Department you should know that making the false report could result in criminal and civil legal proceedings being filed against you. (CRS 18-8-111)

I declare and affirm that my statement has been made by me voluntarily, without persuasion, coercion, or promise of any kind.

Signature: _____ Date: _____

Signature: _____ Date: _____

(Signature of person assisting with complaint)

Supervisor Signature: _____ Date: _____

FOR POLICE USE ONLY- DO NOT WRITE BELOW

Received by:

Date & Time:

GPD1925 (02/19)