

Colleyville Police Department

Police Complaint Form

The following form must be filled out as completely as possible before any action can be taken on your complaint. Disagreements over the validity of a traffic citation and differences of opinion between a citizen and an arresting officer regarding guilt or innocence will not be investigated. Such disagreements will be directed to the judicial system and the court that has jurisdiction in the matter. Complaints relative to differences of opinion regarding contributing factors listed on an accident report will not be investigated.

Name of Complainant: _____

Contact Address: _____

Home Phone: _____ Work Phone: _____

Date and Time of Incident: _____

Location of Incident: _____

Name of officer(s) against whom complaint is being filed, or other identifying marks (car number, badge number, etc.)

Name: _____ Rank: _____ I.D. # _____

Badge: _____ Other: _____

Please write a brief narrative of your complaint in the space provided below and on the following page of this form. Attach additional pages if needed. **(Please Note: False statements made under oath may be subject to prosecution under PC Sec 37.02 Perjury, PC Sec. 37.08 False Report, or civil statutes.)**

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Additional space (if needed):

The undersigned swear that the facts contained on page one, two, and all attachments of this document are within their personal knowledge and are true and correct.

Signature of Complainant

Date