

Seymour Police Department

11 Franklin Street

Seymour, CT 06483

https://www.seymourct.org/departments/SeymourPoliceDepartment

CIVILIAN COMPLAINT REPORT

Please give this completed document to a Police Supervisor or send it to the Chief of Police at the following address or email: Chief John Bucherati, Seymour Police Department, 11 Franklin Street, Seymour, CT. 06483

Email: jbucherati@seymourct.org

Date of Incident	Time of Incident		Date Reported		Time Reported				
Location of Incident			,						
Complainant's Name Compla			ainant's Address (Street, City, State, ZIP)						
Complainant's DOB	Complainant's Home Phone#		Complainant's Work Phone#						
Complainant's Cell Phone# Complaina			ıt's E-mail						
Employer			Occupation						
Employer's Address				Employer's Telephone					
Name of Person Assisting Complainant Address				Telephone					
Employee Complained about (if known): (Name or physical description, Badge #, Car #, etc.)									
Witness Information (Name, D.O.B., Address, Telephone #, etc.)									

Please provide answers to the following questions:	YES	NO	UNSURE							
 To your knowledge, was all or any part of the incident audio taped by anyone? 	complained of video or									
2. Are you afraid for your safety, or that of any other per										
result of making this complaint?										
prevent you from making this complaint?	3. Has anyone threatened you or otherwise tried to intimidate you in an effort to									
4. Are you able to read, write and speak the English Lang	uage?									
5. If your answer to Question #4 is "No" or "Unsure", have										
with adequate language assistance to help you unders	tand and fill out this form?									
(If you answered "Yes" to any of the above questions, please provide details below.) Details of the Incident: Please provide a full description of the circumstances that prompted your complaint. Attach supporting documentation, as appropriate; including letters, e-mails, photographs, video or audio tapes, etc.										
·										
(Attach additional pages, if necessary)										
I have read, or had read to me, the above and attached con	nnlaint and statement consis	ting of	nages	All of the						
answers are true and accurate to my knowledge. I underst	•	-								
law enforcement officer in his official function is a violation	-									
in my arrest and being fined and/or imprisoned.										
				1						
Complainant's Signature	Date and Time Signed									
On this the,,	Notary (For Authority See	C.G.S. §§1-	-24, 3-94a	et seq.)						
the complainant whose name is subscribed above,										
personally appeared before me, the undersigned	Print Rank/Name/ID Numb	or·								
Officer, and acknowledged that he/she truthfully	Thirt Name, Name, 10 Name	C1.								
executed this instrument for the purposes herein										
contained.										
Person Receiving the Complaint										

Rank/Name/ ID Number Date Received Time Received

Method of Contact (Check):	☐ In-Person	Mail	E-Mail	Other	
Signature of person receiving complaint		Complaint Control Number			