

COMPLAINT PROCEDURES CITY OF FREEPORT BOARD OF FIRE AND POLICE COMMISSION

To: Citizen and Complainant

The following procedures shall be considered binding upon all parties to your complaint. If you have questions regarding the procedures, please contact the Chief of Police or the Deputy Chief of Police.

1. Complaint forms shall be available to all citizens upon request, in person, at the Freeport Police Department, 320 W. Exchange Street, Freeport, Illinois 61032.
2. Complaints against the Police, or any individual member of the Police Department, shall be filed within three (3) months of the date of the incident which is the basis of the complaint. If there are extenuating circumstances which have prohibited you from filing the complaint within this time period, please explain the circumstances and they will be considered.
3. This form must be completed and returned to the Office of the Chief of Police, at which time your complaint will be dated and a copy provided to you.
4. The Chief of Police, or his designee, shall make copies of the complaint and distribute them to the following individuals:

Complainant, Chief of Police, Officer named in complaint
5. The Freeport Police Department will determine if the complaint is sustained or not sustained, if disciplinary action is necessary, or if the complaint should be forwarded to the Board of Fire and Police Commission.
6. A complaint forwarded to the Board of Fire Commission shall be considered and based upon their judgment of the evidence therein and the officer's report of the incident will make disposition as follows:
 - a) Convene a preliminary hearing to consider the evidence from the complainant and officer, if appropriate; or
 - b) Request complainant and officer to grant the Commission additional time to evaluate the merits of the case; or
 - c) Set the complainant for Formal Hearing as provided by State Statute and local ordinance; or
 - d) Dismiss the complaint.
7. The complainant, officer and Mayor shall receive written notice of the disposition by the Commission.
8. The complainant and officer may have other legal remedies available to them after the Commission has acted.

COMPLAINT FORM

To: Freeport Police Department
City of Freeport, Illinois

Name

vs.

Police Department employee as designated below:

Name

Name

Name

Date & Time of Incident: _____
Date Time

The following people witnessed the following incident and have indicated that they will appear in behalf of the undersigned if it is deemed necessary that their testimony will be helpful in the disposition of this complaint.

Name and Address:

Telephone:

Name and Address:

Telephone:

Name and Address:

Telephone:

Or

() There were no witnesses to the following incident.

Complaint received by: _____ Date:

Investigation assigned to: _____ Date:

COMPLAINT / SWORN AFFIDAVIT

It is the policy of the Freeport Police Department to thoroughly investigate all complaints against members of the Department. **Illinois law requires that all complaints be supported by a sworn affidavit.** As such, you will be required to sign this complaint under oath or affirmation. If the results of the investigation reveal that you knowingly provided false information regarding the complaint, you may be subject to prosecution as provided under Illinois law.

Nature of complaint (Please be as detailed as possible. Should more space be needed you may use the back of the form or additional paper.)

COMPLAINANT'S NAME & ADDRESS

I am willing to meet with the investigating officer(s) of this complaint if needed.

Name: _____ DOB: _____ Date of Complaint: _____

Address: _____ Phone: _____

DO NOT SIGN THIS DOCUMENT UNLESS A NOTARY PUBLIC IS PRESENT

The complainant, being first duly sworn on oath, deposes and says that he/she has read the foregoing complaint by him/her subscribed and that the same is true.

Signature of Parent or Guardian (if complainant is under 21 years of age):

Complainant's Signature:

I, being first sworn on oath, depose and say that I have documented the facts alleged in this complaint as they were related to me, to the best of my ability.

Officer's Signature

*****For Notary Use Only*****

State of Illinois
County of Stephenson

Subscribed and sworn (or affirmed) to me, under penalties of perjury before me this _____ day of _____, by _____.

Who is personally known to me whose identity I proved on the basis of

Signature of Notary Public