


**Elida Police Department  
Law Enforcement  
Policies and Procedures**

<b>Subject:</b> Citizens Complaint Process and Form	<b>Policy Number:</b> 8.01
<b>Issue Date:</b> October 3, 2016	<b>Revision Date:</b>
<b>Approval Authority:</b> Chief Dale A. Metzger 	

Dear Citizen,

The Elida Police Department strives to maintain the professional integrity of all its employees by thoroughly, fairly and impartially investigating all complaints of misconduct. Attached you will find a Citizen Complaint Form which you will be asked to complete when you report misconduct by one of our employees. The purpose of this form is to provide the Department with the basic information about your complaint so that it can be investigated. You will also be asked to sign the form swearing that all the information you have provided concerning the report is true and correct to the best of your knowledge. Should you affirm that this information is the truth, knowing that it is actually false, you may be subject to criminal prosecution under the Ohio Revised Code, Section 2921.15, and Making False Allegations of Peace Officer Conduct.

Depending upon the nature of the complaint, the investigation into the incident will be conducted by the employee's supervisor or the Chief of Police. You, any witnesses and others involved will be contacted by the investigating person. After the investigation is completed your complaint will be resolved by classifying it in one of the below five ways:

1. Unfounded - The investigation found that the allegation(s) made was false;
2. Exonerated - The allegation was found to be true but was proper and lawful;
3. Inconclusive - The evidence was insufficient to support the complaint;
4. Sustained - The evidence was sufficient to support the complaint;
5. Other Misconduct Sustained - The original complaint was not sustained, however, during the investigation other misconduct was discovered which was sustained.

When misconduct is sustained, disciplinary action of some sort will be taken against the employee(s) involved following prescribed guidelines. You and others may be required to appear at a hearing regarding that disciplinary action.

The investigation may take several weeks. When it is concluded, you will be mailed a letter explaining the outcome of your complaint. If you have any questions either during the investigation or after receiving the letter, please contact my office.

Thank you.  
Sincerely,

Dale A. Metzger  
Chief of Police

# Elida Police Department Citizen Complaint Form

Today's Date: \_\_\_\_\_ Time \_\_\_\_\_ Complaint  
Filed: \_\_\_\_\_

Complaint made (circle one):      In person      By telephone      Anonymously

Your Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone # \_\_\_\_\_

Social Security # (optional): \_\_\_\_\_ D.O.B. \_\_\_\_\_

Date and Approximate Time of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Briefly describe the nature of the incident: \_\_\_\_\_

If known, provide the names of the Officer(s) involved: \_\_\_\_\_

Please list the name, address and telephone number, if known, of any other persons directly involved in this incident. If more space is needed attach a separate page.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Do you know of any witnesses to this incident?    Yes    No    If yes, please lists their name addresses and telephone number below. If more space is needed, attach a separate page.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_



I hereby certify and swear that the listed information is true and correct to the best of my knowledge. I am aware that knowingly making a false statement may subject me to a criminal penalty under the Ohio Revised Code, Section 2921.13, and Falsification.

\_\_\_\_\_  
Signature of Citizen

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian (If under 18 years of age)

\_\_\_\_\_  
Date

Sworn to before me this _____ day of _____, _____, in	
The State of Ohio, County of _____	
ss: _____.	
_____ Notary Public's Signature	
_____ Notary Public's Name (please print)	Notary Seal
_____ Date Commission Expires	
_____ County Where Commission Recorded	

Notes of Person Taking Complaint
Signature: _____

