# STANDARD OPERATING PROCEDURE "APPENDIX"

## SOP P-251 - "CITIZEN COMPLAINTS AND INTERNAL INVESTIGATION PROCEDURES"

## FORMS PACKAGE

The following forms are provided to be used for accepting and processing complaints made against Portsmouth Police Department personnel:

## A. Citizen Complaint Affirmation

\*The accepting employee shall ask the complainant to complete this form for all complaints.

## B. Citizen Complaint Investigation Form

\*To be used as the cover page for all citizen complaints.

## C. Complaint Reception Receipt

\*To be given to the complainant in all citizen complaints by the accepting employee. A copy shall be retained for the file.

## D. Authorization for Release of Medical Information to Law Enforcement Agency

\*To be completed by the accepting employee and signed by the complainant whenever the complainant alleges injury, and medical attention has been or will be sought.

\*Not included in package – Use current release form

## E. How to Make a Complaint

\*This document explains how a member of the public can file a complaint against a employee of the department.

## F. Notification of Administrative Rights

\* This form shall be completed when an employee is formally interviewed relative to a complaint or investigation and discipline may result.

## G. Notice of Complaint

\* This form shall be completed and served to the employee outlining the specific allegations contained in the complaint or investigation.

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complaint and my testimony is required, that I will make myself available when requested to

SIGNATURE OF COMPLAINANT DATE

ACCEPTING EMPLOYEE'S SIGNATURE DATE
AND RANK

WITNESS SIGNATURE DATE

do so.

# COMPLAINT INVESTIGATION FORM

Control#:	Charge	e(s):
Type of Complaint:  Police Brutality ( )  False Arrest ( )	Conduct of Employee ( ) Policy/Procedure Complain	
Against: Employee(s) Bel	ow ( ) Department Itself ( )	Policies/Procedures ( )
Date/Time Reported:	Dat	e/Time Occurred:
Location of Incident:		
-	*********	**********
<u> </u>	ale ( ), Juvenile ( ), Anonymo	
*Defendant(s), if other than	n complainant:	
Address of Complainant:	Talaak	( <b>XX</b> / <b>I</b> )
Deta of Divide	1 elepn	one(Work):
	Place of Employment:_	
- ·		
Accepting Employee's Obs	ervation of Complainant:	
Sobriety: Intoxicated ( )	<u>=</u>	per()
Clothing: Neat ( )	Torn ( ) Soiled ( )	
Attitude: Excited ( )		
• • • • • • • • • • • • • • • • • • • •		cooperative ( ) Argumentative ( )
	d complainant's attitude. ion (any bruises, cuts, reddene	ed areas or any identifiable injuries).
Reporting Officer:		
Time Spent on Complain	t:	

## **COMPLAINT INVESTIGATION FORM -- CONTINUED**

*Describe your observations and	d complainant's attitude:	
*Describe physical condition: (	Any bruises, cuts, reddened areas or a	ny identifiable injuries.)
*Synopsis of Incident:		
Reporting Officer	Date	

# COMPLAINT RECEPTION RECEIPT

The Portsmouth Police Department hereby acknowledges the receipt of a complaint filed against one or more of its members.

Complainant:	Name:		
	Address:		
investigator to gacarefully reviewe	ather all of the facts. Once ed by senior police officials	tion of the Chief of Police, the investigator has filed has, including the Chief of Po you as to the results of the in	is/her report, it will be lice. A representative of the
Signature of Con	nplainant	Date	
	epting Employee	Date	

(Original to Complainant/Copy to File)



City of Portsmouth, NH

Police Department 3 Junkins Avenue Portsmouth NH 03801

#### **CHIEF OF POLICE**

\*IT IS THE POLICY OF THE PORTSMOUTH POLICE DEPARTMENT to receive and investigate all complaints against the Department or its members in a manner that will assure the Community of prompt corrective action if Department members conduct themselves improperly, and the protection of Department members from unwarranted criticism when properly performing their official duties.

## **HOW TO MAKE A COMPLAINT:**

If you wish to make a complaint against a member of the Portsmouth Police Department, please:

- (1) Come to Police Headquarters and ask to speak to the Shift Commander; or
- (2) Call the Police Department at **610-7406** and ask to speak to the Shift Commander; or
- (3) Mail your written complaint to the Chief of Police at the above address.
  - -Your Complaint will be thoroughly investigated.
  - -You may be requested to fill out a report form and submit a written statement.
  - -You will be kept apprised of the status of your complaint.
  - -At the completion of the investigation into your complaint, you will be notified of the results.

**PLEASE UNDERS	STAND that this De	partment will vigo	rously pursue	criminal or	civil
prosecution for any fal	se report or accusati	ions made against o	one of its emp	oloyees.	

Mark D. Newport, Chief of Police

<u>Note</u>: Attachment to Department Standard Operating Procedure Re: Citizen Complaints and Internal Investigation Procedures.

# PORTSMOUTH, NH POLICE DEPARTMENT "NOTIFICATION OF ADMINISTRATIVE RIGHTS"

NAME	<b>:</b>	COMPLAIN	NT # (IA)	
		Notification	<u>on</u>	
made aş	The Portsmouth Police Departn gainst you.	nent is conducting an inv	vestigation to determine the validity of an allegation	on
made aş	The Portsmouth Police Departn gainst the department or a membe		vestigation to determine the validity of an allegation	on
	No charges are being made aga or to being interviewed.	inst you. This form is to	o only inform you of your Administrative Rights	
	The purpose of this interview is on(s) which may result in Admini		t will assist in determining the validity of the	
You wi	ll be required to answer all of the	questions truthfully. An	nswering untruthfully may result in your dismissal	l.
	<u>A</u>	DMINISTRATIV	<u>VE RIGHTS</u>	
1.		e asked questions specific	art of an official investigation of the Portsmouth N ically directed and narrowly related to the perform	
2.			e rights and privileges guaranteed by the law and to be compelled to incriminate yourself.	the
3.	duties or fitness for duty, you w	rill be subject to administ	er questions relating to the performance of your of trative charges, which could result in your dismissel, may also result in administrative charges or	
4.	gained by reason of such statem	nents can be used against	tatements, nor any information or evidence which tyou in any subsequent criminal proceeding. relation to subsequent administrative charges.	is
5.	You are directed not to engage, who files a complaint, testifies,		retaliation or reprisals of any kind against any per e assists this investigation.	rson
	dersigned hereby acknowledges n bove Administrative Rights.	otification of the allegation	ions, and also acknowledges they have been information	med
Employ	vee Signature	Date	_	
Investig	gator Signature	Date	_	

Distribution: Original with Investigative File, Copy to Employee

# **NOTICE OF COMPLAINT**

# **Standard Operating Procedure P-251**

mployee's Name	Division
osition	Date of Report
Violation Specifics:	
Rules and Regulation(s):	
SOP(s)	
	may be discovered during the course of the investigation.
ate/Time of Alleged Occurre	nce:
ate and Time Complaint Re	eived:
	MANNER OF NOTIFICATION
IN HAND	OTHER (explain)
Employee	
Supervisor	
Date Time_	