

Fairmont Police Department Citizen Complaint Form

The Fairmont Police Department strives to objectively address citizen complaints and concerns regarding the actions of our employees. Often times, complaints and concerns can be resolved without filing a "Formal Complaint". These issues can be handled by contacting an on-duty supervisor or Chief of Police and discussing the concern with them. If you wish to complete a formal complaint, please complete all information as accurately as possible. Please use additional sheets if necessary. Please sign this form when completed and return to the Chief of Police. Complaints against officers are handled under Fairmont Police Policy 1010 and Minnesota Statute 626.89.

Complainant's Name:		
Complainant's Street Address:		
City, State, Zip Code:		
Primary Phone Contact Number:		
Witness Name:		
Witness Address:		
Witness Contact Phone Number:		
Witness Name:		
Witness Address:	·	
Witness Contact Phone Number:		
Date of Incident:	Time of Incident:	
Location of Occurrence:		
	ption of officer):	
Citation or Case Number if Known:		
Minnesota State Statute 609.505 to falsely repo	nt Form, I acknowledge that I am aware that it is a crime underent an act of police misconduct. I certify that the information rocess is truthful and accurate to the best of my knowledge.	
Signature of Complainant	 Date	

Summary of Alleged Misconduct: On the following page, please provide a complete and accurate description of the incident. Include all relevant information and a narrative of the events or incident. Please describe in detail what you feel the officer(s) or any Fairmont Police Department employee did that was not proper. You may include additional pages, copies of supporting documents, or any video/audio that you may have. Please sign or initial all additional pages included with this form. If you have any questions or need assistance of any kind with completing this form, please contact an on-duty supervisor at 507-238-4481.



Summary and Description of Incident or Events:

	
	
Signature	 Date