



The Town of
**Leesburg,
Virginia**



65 Plaza Street, N.E. • 20176 • 703-771-4500 • Police Department • FAX: 703-771-4545 • www.leesburgva.gov

**LEESBURG POLICE DEPARTMENT
CITIZEN COMPLAINT FORM**

HOW A CITIZEN MAKES A COMPLAINT

1. If you wish to make a complaint about the actions of a Leesburg Police Department employee or about any aspect of Leesburg Police Operations, please:
 - a. Come to the Leesburg Police Department, 65 Plaza Street, NE, Leesburg, and tell any employee that you want to make a complaint, or
 - b. Call the Leesburg Police, (703)771-4500, and tell the person answering the phone that you want to make a complaint, or
 - c. Complete and sign this form. Place the form into a sealed envelope, sign and date the envelope and give it to a Leesburg Police representative, or
 - d. Complete and sign this form. Mail the form to: Chief of Police, Leesburg Police Department, 65 Plaza Street, NE, Leesburg, VA 20176.
2. Any Leesburg Police supervisor will assist you in completing a complaint. You will be asked to identify yourself and then to give specific details about your complaint.
3. Your complaint will then be investigated. You may be contacted and asked additional questions about your complaint.
4. If it is going to take a long period of time to investigate your complaint, you will receive a letter telling you approximately when you may expect a reply.
5. When your complaint has been investigated, the Chief of Police will review the investigation and will write you a letter explaining what has been found out about the matter.

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Leadership ■ Pride ■ Dedication



LEESBURG POLICE DEPARTMENT CITIZEN COMPLAINT FORM

COMPLAINANT: FILL OUT 1 THROUGH 6 – PLEASE PRINT

1. YOUR NAME: _____ PHONE # (H) _____ (W) _____

YOUR ADDRESS: _____

2. DATE OF INCIDENT: _____ TIME: _____

3. LOCATION OF INCIDENT: _____

4. NAME(S) OF POLICE OFFICER(S)/EMPLOYEES(S) INVOLVED:

5. WITNESS: NAME: _____ PHONE #: (H) _____ (W) _____

6. DETAILS OF COMPLAINT (PLEASE PRINT LEGIBLY): _____

ADDITIONAL SPACE IS PROVIDED ON PAGE 3 IF NECESSARY

AFFIRMATION

I, _____, do hereby affirm that the information provided by me is true and complete to the best of my knowledge and belief. I understand that any false, misleading or untrue statements, accusations or allegations herein made by me, in relation to this complaint, either orally or in writing, to any person or persons investigating this complaint, may subject me to civil suit and/or criminal prosecution.

SIGNATURE

DATE/TIME

