



How to Initiate a Citizen Complaint

A relationship of trust and confidence between members of the Police Department and the community is essential to effective law enforcement. In order to preserve that relationship, public confidence must be maintained in the ability and willingness of the Police Department to investigate and properly adjudicate allegations of misconduct made against its employees.

The Citizen Complaint form should be completed whenever an employee of the Everett Police Department has allegedly acted in an improper manner. This can include, but is not limited to alleged illegal, unethical or unprofessional conduct.

The Citizen Complaint form should include whenever possible, the identity of all persons involved in the alleged incident including the officer(s), witnesses, etc. The form should also include the specific issue(s) of misconduct about which the complaint is being made; the date and time that the alleged misconduct occurred and the location where the alleged misconduct occurred. The Citizen Complaint form should be accurately and thoroughly completed and returned to the Everett Police Department within **30 days of receipt**. Your concerns will be investigated, and you will be informed in writing of the outcome of the investigation.

Substantiated allegations can lead to serious consequences including verbal and/or written reprimands, suspension, and even termination of the employee. Therefore, safeguards against false and/or malicious complaints are provided to employees of the Everett Police Department. Complaints that are found to be false and/or malicious may result in criminal and/or civil liability on the part of the complainants.

Completed Citizen Complaint forms may be returned to the Everett Police Department in person or mailed to the Everett Police Department, Office of Professional Standards, 3002 Wetmore Avenue, Everett, WA 98201. Citizen Complaint forms may also be emailed to: police@everettwa.gov.

If you have any questions, please contact the Office of Professional Standards at 425-257-8555.

Thank you,

DAN TEMPLEMAN
Chief of Police

Everett Police Department Citizen Complaint Form

Complainant Name		Date of Birth	Home Phone
Complainant Address			Business/Cellular/Message Phone
Witness Name		Date of Birth	Home Phone
Witness Address			Business/Cellular/Message Phone
Date and Time of Incident	Location of Incident		Incident or Event No. (If known)
Employee Involved (If known)		Additional Employee Involved	

Describe incident in detail including additional witnesses, officer or employee names, etc.

I certify/declare under penalty of perjury under the laws of the State of Washington (R.C.W. Title 9A.72) that the foregoing statement is true and correct and that no threats, promises or inducements have been made to me regarding my statement.

Signature		Date	Witness Signature		Date
Supervisor/Desk Officer Taking Complaint		Pers. No.	Date	UPON RECEIPT OF COMPLETED CITIZEN COMPLAINT FORM, IMMEDIATELY ROUTE ORIGINAL TO OPS	

OPS USE ONLY

OPS RCVD ON	RCVD BY	ASSIGNED TO	OPS NO.
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