Civilian Complaint Information Sheet

The members of the Upper Saddle River Police Department are committed to providing law enforcement services that are fair, effective, and impartially applied. It is in the best interests of everyone that your complaint about the performance of an individual officer is resolved fairly and promptly. The Police Department has formal procedures for investigating your complaint. These procedures are designed to ensure fairness and protect the rights of both citizens and law enforcement officers:

1. Reports or Complaints of officer/employee misconduct must be accepted from any person, including anonymous sources, at any time.

2. Complaints shall be accepted regardless of age, race, ethnicity, religion, gender, sexual orientation, disability, or immigration status of the complaining party.

3. Your complaint will be sent to a superior officer or a specially trained internal affairs officer who will conduct a thorough and objective investigation.

4. You might be asked to help in the investigation by giving a detailed statement about what happened or providing other important information or documents.

5. All complaints against law enforcement officers are thoroughly investigated. You will be kept informed of the status of the investigation and its ultimate outcome, if requested, and you provide contact information. The exact discipline imposed is confidential, but you will be advised of the ultimate finding, namely :

    a. Sustained: A preponderance of the evidence shows an officer violated any law; regulation; directive, guideline, policy, or procedure issued by the Attorney General or County Prosecutor; agency protocol; standing operating procedure; rule; or training.

    b. Unfounded: A preponderance of the evidence shows that the alleged misconduct did not occur.

    c. Exonerated: A preponderance of the evidence shows the alleged conduct did occur, but did not violate any law; regulation; directive, guideline, policy, or procedure issued by the Attorney General or County Prosecutor; agency protocol; standing operating procedure; rule; or training.

    d. Not Sustained: The investigation failed to disclose sufficient evidence to clearly prove or disprove the allegation.

6. If our investigation shows that a crime might have been committed, the county prosecutor will be notified. You might be asked to testify in court.

7. If our investigation results in an officer being charged with a violation of department rules, you might be asked to testify in a departmental hearing.

8. If our investigation shows that the complaint is unfounded or that the officer acted properly, the matter will be closed.

9. Internal affairs investigations are confidential and all disciplinary hearings shall be closed to the public unless the defendant officer requests an open hearing.

10. You may call the Internal Affairs Officer at 201-327-2700 with any additional information or any questions about the case.

Department/Agency **Upper Saddle River Police Department** IA Case Number _____

INTERNAL AFFAIRS REPORT FORM

Person Making Report (Optional, But Helpful)

Full Name _____ **Phone** _____ Preferred? ☐

Address _____ **Email** _____ ☐

City, State _____ **DOB** _____

Officer(s) Subject to Allegation (Provide Whatever Info Is Known)

Officer(s) _____ **Badge No.** _____

Incident Site _____ **Date/Time** _____

In the space below, describe the type of incident (traffic stop, street encounter) and any information about the alleged conduct. If you cannot fit your response below, feel free to use extra pages and attach them to this document. If you do not know the officer's name or badge number, provide any other identifying information.

Other Information

How was this reported? ☐ In Person ☐ Phone ☐ Letter ☐ Email ☐ Other _____

Any physical evidence submitted? ☐ Yes ☐ No **If yes, describe:** _____

Was incident previously reported? ☐ Yes ☐ No **If yes, describe:** _____

To Be Completed by Officers Receiving Report

_____ _____ _____

Officer Receiving Complaint Badge No. Date/Time

_____ _____ _____

Supervisor Reviewing Complaint Badge No. Date/Time