

**VILLAGE OF SPRINGVILLE  
POLICE DEPARTMENT**

**Police Department Commendation/Complaint Form**

This form is to be completed by any citizen who wishes to make a complaint against a police officer or commend an officer for outstanding performance. The completed form should be dropped off at the police station or mailed to Village of Springville Police Department Attn: Officer in Charge, 5 West Main Street PO BOX 17 Springville, NY 14141, or e-mailed to the Officer in Charge (nbudney@villageofspringvilleny.com).

**Person making commendation or complaint**

Name:	Date of Birth:	Sex:
Home Address:		
Home Phone:	Work Phone:	Cell Phone:
Incident Case Number(If possible):	Incident Date/Time:	
Incident Location:		
Date:	Time:	Location:

**Officer(s) Involved**

Name:	Badge #:	Race:	Sex:
Name:	Badge #:	Race:	Sex:
Name:	Badge #:	Race:	Sex:

**Witnesses**

Name:	Phone:
Address:	
Name:	Phone:
Address:	
Name:	Phone:
Address:	

**Details of Incident**


Continue on reverse

