

COMPLAINT PROCEDURE

If you wish to make a complaint about the action of a police officer or about any aspect of police operations you can do so by asking to speak to a supervisor. If you wish to file a formal complaint of Police Misconduct you may do so through any one of the following procedures.

Obtaining a Complaint Form

1. Come to the Narragansett Police Department and tell any employee that you wish to make a complaint; or
2. Call the Narragansett Police Department or the Town Manager's office and tell the person answering the phone that you want to make a complaint; or
3. Visit the Town website at <http://www.narragansettri.gov/> and download a complaint form.

Returning a Complaint Form

1. Completed complaint forms may be dropped off in person or mailed to the Narragansett Police Department; or
2. Completed complaint form may be faxed to the Narragansett Police Department at (401) 783-6201.

Investigation of Complaint

Once your complaint is received it will be thoroughly investigated by an officer designated by the Chief of Police. You will be contacted regarding your complaint and you will be advised if the investigation is expected to exceed thirty (30) days. At the completion of the investigation you will receive written notification of the findings.

If you have any questions or suggestions you can contact the Department's Office of Professional Standards by the following means:

Captain Sean Corrigan
Narragansett Police Department
40 Caswell St.
Narragansett RI. 02882
(401) 789-1091 X302
Scorrigan@narragansettri.gov

**NARRAGANSETT POLICE DEPARTMENT
COMPLAINT OF POLICE MISCONDUCT**

40 Caswell St, Narragansett, RI 02882
Tel: 401-789-1091/ Fax: 401-783-6201

Name: _____ Phone: _____

Address: _____ Language Spoken: _____

Date of Occurrence: _____

Location of Occurrence: _____

Names or Badge Numbers of
employees involved (if known)

Names, addresses and contact telephone numbers of witnesses
present at the time of occurrence (if known)

(LIST ADDITIONAL EMPLOYEES AND/OR WITNESSES UNDER THE "DETAILS" SECTION.)

Details- (Please state your complaint, including names, times, locations, witnesses and any other information that would help in investigating your complaint. If employee's names are unknown, explain what each employee looked like.)

(Attach additional sheets if necessary)

Date: _____

Signature: _____

DEPARTMENT USE ONLY

To be completed by the supervisor receiving this form.

Supervisor's name: _____ Badge number: _____

Date and time received _____