

Record of Question or Concern from the Public

Office of the Police Complaint
Commissioner
British Columbia, Canada



- Pursuant to **section 85 of the *Police Act*** all municipal police departments are to make record of reports not resulting in registered complaints.
- Pursuant to **section 85(1) of the *Police Act*** the police complaint commissioner has directed that **this** form be used for any oral or written report received from a member of the public or any other person that raises a question or concern about the conduct of a member of a municipal police department but that does not result in the making and registration of a complaint under section 78 [how complaints are made].
- Pursuant to **section 85(1)(b)(1) of the *Police Act*** every person who reports a question or concern is to be provided the information or advice required under the guidelines prepared by the police complaint commissioner.
- Pursuant to **section 85(3) of the *Police Act***, subject to **section 79** [time limit for making complaints] and **section 82** [determination of whether complaint is admissible], nothing in this section prevents any person who raises a question or concern about the conduct of a member or former member from making a complaint about the same matter under **section 78** [how complaints are made].

What you should know:

The member of the municipal police department who receives the question or concern from a member of the public or any other person must complete this form and forward it onto the professional standards section of the involved municipal police department.

The professional standards section must record the question or concern, and forward a copy of this document along with how the question or concern was resolved to the Office of the Police Complaint Commissioner for review.

Person's Contact Details:

* Indicates this information is required for processing purposes. Please be as precise as possible.

Last Name: *

First Name: *

Title (eg. Mr):

Mailing Address (or where you'd like to be contacted):

Date of Birth:

(Year / Month / Day)

Home telephone:

Work telephone:

Cell phone:

Email Address:

** Please provide at least 1 contact option **

Details of the Question or Concern:

When did the incident happen? *

(Year / Month / Day)

Time it occurred? *

Where did the incident happen? *

Name of the Police Department involved: *

Police File # (if known):

Name or badge number of Officer(s) – if known:

Were there any witnesses? If so, please list their names and contact information (if known):

Details of Question or Concern

If required, you may attach additional pages:

__ of __

To be completed by the person receiving the question or concern:

I hereby acknowledge receipt of the above-noted question or concern

Received on _____ at _____
(Year/Month/Day) (Time) (Name of person receiving question or concern)

Municipal Police Department receiving question or concern:

How was it received? In person By mail By phone By webmail On Line

If received orally, was it read back to the person who reported the matter to ensure accuracy? Yes No

Forwarded to PSS: Date sent:

Copied to the Office of the Police Complaint Commissioner Date sent: