



# Wrightsville Beach Police Department

## Personnel Complaint Report

Use this form to register your complaint about the Wrightsville Beach Police Department.  
You may leave this form with a supervisor or mail it to:  
Chief of Police, PO Box 452, Wrightsville Beach, NC 28480.

### COMPLAINANT INFORMATION

Internal Use Only: Leave Blank

Your Name \_\_\_\_\_

Phone Number(s) \_\_\_\_\_

Date of Birth \_\_\_\_\_

Home Address \_\_\_\_\_

Business Address \_\_\_\_\_

Control # \_\_\_\_\_

OCA# \_\_\_\_\_

Age \_\_\_\_\_

Sex \_\_\_\_\_

City/State \_\_\_\_\_

Zip \_\_\_\_\_

City/State \_\_\_\_\_

Zip \_\_\_\_\_

If applicable, list other complainants and/or witnesses and their phone numbers:

Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Name of Employee(s) Involved:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Location of Incident \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Were you arrested? (Check one)  Yes  No

Court Date: \_\_\_\_\_

What were you charged with?

Complainants Initials \_\_\_\_\_



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### Summary of Incident:

By signing below you swear the information you have given is true. Any person who shall make or cause to be made to a Law Enforcement agency any false, misleading or unfounded report may be prosecuted under NCGS 14-225. Class 2 Misdemeanor.

\_\_\_\_\_ Date \_\_\_\_\_  
Signature of Complainant

Internal Use Only: Leave Blank

Official Receiving Complaint
Date: _____ Time: _____



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For Internal Use Only: Leave Blank

Attempt to Resolve Complaint:

Complaint Resolved:  Yes  No

Assigned for Further Investigation:  Yes  No

Discipline Administered:

Further Discipline Recommended:  Yes  No  
(If yes attach memorandum of recommendation)

_____ Supervisor Name	_____ Signature	_____ Date
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_____ Commander Name	_____ Signature	_____ Date
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Chief Daniel L. House _____ Chief of Police	_____ Signature	_____ Date
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- FINAL DETERMINATIONS:
- SUSTAINED (allegation is true; the action of the Department or the officer was inconsistent with the Department policy)
  - NOT SUSTAINED (there is insufficient proof to confirm or to refute the allegation)
  - UNFOUNDED (allegation is true; the action of the Department to the officer was consistent with Department policy)
  - EXONERATED (the allegation is demonstrable false)
  - POLICY FALIURE (Allegation is true; the action of the Department or the officer was not inconsistent with the Department Policy. The policy requires modification.)