



POLICE COMMISSION

George D. Campbell, III
Diana Francis
Ira Margolis
Thomas A. Nolan
Richard J. Remsnyder

1 VETERANS DRIVE

P.O. Box 550

NEW PALTZ, NY 12561

Compliment/Complaint/Suggestion Form

1. Please identify the type of report being made by checking one of the appropriate boxes below.

a. Compliment

If you wish to compliment a specific officer or member of the Town of New Paltz Police Department, please identify in section 2 below the officer(s) name and/or badge number(s) if you can. Please include as much detail as possible including date, time, location and circumstances.

b. Complaint

If you wish to report an unsatisfactory or unpleasant experience with one of our officers or members, please complete section 2 below. Be specific and as detailed as possible. Please include date, time, location and circumstances as well as any names and contact numbers for potential witnesses. Please identify the officer's name and/or badge number if you can. If you cannot, please provide a description of the officer.

c. Suggestion

The New Paltz Police Department welcomes suggestions made by the community. Many of these will be used in helping formulate the activity of our department. Please complete section 2 below.

2. Narrative: _____

3. Your information: *Although optional, your contact information is suggested so that we may contact you for further details or follow-up.*

Name: _____ Address: _____ Contact number: _____

Today's Date: _____ email address (optional): _____