HENRICO COUNTY POLICE DIVISION

Citizen Complaint Form

HCPD-031 (02/12)

Complainant's name: _____ Phone number: ( ) _____
area code

E-mail address: _____

Address: _____
Street *City* *State* *Zip code*

Date of incident: _____ Time: _____ AM ☐ PM ☐

Location of incident: _____

Name of officer(s)/Division members involved: _____

Nature of complaint *(if necessary, complete another one of these forms for more information)*:

SUBMIT FORM