



**Town of East Hampton Police Department**

131 Wainscott NW Rd  
Wainscott, New York 11975  
Attn: Capt. Anderson

Anonymous Tips Line: 631-537-7226  
General Business: 631-537-7575  
Fax: 631-537-6833  
Emergency: 911

**Compliment / Complaint Form**

**Instructions:** If you would like to compliment a East Hampton Town Police Department Employee, or file a complaint against a Police Employee, please write legibly and fill out this form. Personal information will not be disclosed to public, unless required by law. You can submit this form by mail to PO Box 909, Wainscott NY 11975 or returning it to the East Hampton Town Police Department at the above address.

I wish to file a (please check one):  Compliment  Complaint

**Notice:** You may file a compliment or complaint anonymously. Please understand filing anonymously does not provide the opportunity to contact you for more information or advise you of our actions related to your compliment or complaint.

**Your information (May be left blank if you wish to remain anonymous)**

Last Name	First Name	M.I.	D.O.B.
Street Address & Apt#	City	State	Zip Code
Home Phone	Work Phone	Cell Phone	

Are you filing this on behalf of someone else?  Yes  No **If Yes, then complete this section**

What is his/her Last Name	First Name	M.I.	D.O.B.
Street Address & Apt#	City	State	Zip Code
Their Relationship to You?	Home Phone	Work/Cell Phone	

**Police Officer or Employee Involved**

Name or ID of Employee	Name or ID of Employee
Name or ID of Employee	Name or ID of Employee

**Information about the Incident**

Incident Location	Date of Incident	Time of Incident AM / PM	
Witness Last Name	First Name	Age	
Witness Address	City	State	Phone

Narrative \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I attest that the above information and my statement are true and correct to the best of my recollection

Signature \_\_\_\_\_ Date \_\_\_\_\_