



# COMPLAINT/COMMENDATION REPORT FORM

For all enquiries and follow up regarding the status of your report please contact:  
**Professional Standards Unit, Police Headquarters, PO Box 64, Road Town, Tortola,**  
**British Virgin Islands, VG1110**  
**Tel: (284) 368 5421 / Fax: (284) 494 6141**  
**Email: comp@rvipolice.vg**

		<b>Date</b>	
<b>PERSONAL INFORMATION</b>			
<b>Title</b>	<b>First Names</b>		<b>Surnames</b>
<b>Address</b>			<b>Island</b>
<b>Telephone</b>			<b>Email</b>
<b>INCIDENT INFORMATION</b>			
<b>Incident Date</b>	<b>Time of Incident</b>	<b>Incident Location</b>	
<b>Officers Involved</b>			<b>Unit/Station</b>
<b>Details of Report</b>	<b>Please explain what happened (Continue overleaf if necessary)</b>		
<p><i>The information stated above is an accurate account of the incident to the best of my knowledge. I understand that this complaint will be treated confidentially. I also understand that it may be necessary for someone to contact me in order to obtain additional information regarding my report and I will assist accordingly.</i></p>			
<b>Complainant's Signature</b>		<b>Date</b>	
<b>FOR ADMINISTRATIVE USE ONLY</b>			
<b>Report Number</b>	<b>How Submitted ( Tick one)</b>		
	<b>In Person</b>	<b>Mail</b>	<b>Telephone</b>
			<b>Fax</b>
			<b>Email</b>
<b>Nature of Report</b>		<b>If Complaint, state nature of complaint</b>	
<b>Commendation</b>	<b>Complaint</b>		
<b>Investigation Officer</b>			<b>Date</b>