

Town of New Paltz **Police Commission** P.O. Box 550 52 Clearwater Road New Paltz, NY 12561

## Compliment/Complaint/Suggestion Form

1.	· · · · · · · · · · · · · · · · · · ·	checking one of the appropriate boxes below.			
a	a. <u>Compliment</u> $\square$				
ir	· ·	per of the Town of New Paltz Police Department, please identify number(s) if you can. Please include as much detail as possible			
	b. <u>Complaint</u>				
a	complete section 2 below. Be specific and as detailed	t experience with one of our officers or members, please d as possible. Please include date, location and circumstances itial witnesses. Please identify the officer's name and/or badge escription of the officer.			
c.	c. Suggestion $\square$				
	The New Paltz Police Department welcomes suggest helping formulate the activity of our department. Ple	cions made by the community. Many of these will be used in ease complete section 2 below.			
. N	Narrative: (please continue on p.2 if there is no	t enough room)			
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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: <u>E</u> mail	Address (optional):			
4.	1 1	ity in one of several ways;			

- - Send or drop off to the New Paltz Police Department: Attn: Chief Lucchesi, 59 N. Putt Corners Rd., New Paltz, NY 12561, fax to 845-255-2648, or email to Lucchesi@newpaltzny.org.
  - b. Send or drop this form off to the Town Clerk's Office, (Attn: Police Commission) P.O. Box 550, New Paltz, NY 12561. (Forms submitted to the Town Clerk's Office must be in a sealed envelope, clearly labeled)

Fax: (845) 255-4084

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