

**BERNALILLO COUNTY EMERGENCY COMMUNICATIONS DEPARTMENT
CITIZEN COMPLAINT FORM**

Official Use Only:

Date/Time Received: _____

Received By: _____

CC#: _____

Assigned To: _____

INSTRUCTIONS:

This form should only be completed if you wish to initiate a complaint against the Communications Department or an employee(s). If you would rather attempt to resolve this issue with the employee's supervisor, you may contact the employee's supervisor directly. For assistance, please contact the Communications Department at (505)798-7000.

IF YOU DECIDE TO FILE A COMPLAINT:

Please complete the complainant information and statement portions below. Once the form is completed and signed it may be delivered or mailed to the Communications Department at 10401 Holly Ave NE, Albuquerque, New Mexico 87122. Please notify the Communications Department if your address or phone number changes prior to the resolution of your complaint.

COMPLAINANT INFORMATION

NAME: _____
(First) (Middle) (Last)

ADDRESS: _____

(City) (State) (Zip Code)

TELEPHONE: Home: _____ Cell/Work: _____

Date and Time of Incident: _____

Address where incident happened: _____

NOTE: This complaint form along with other necessary documentation will be forwarded to the employee's supervisor for evaluation and investigative direction. Your complaint may be investigated by the Operations Coordinator. You will be notified by phone, at the above listed phone number upon completion of the investigation (normally within five (5) days after the complaint has been received by the Communications Department. If the investigation is going to take longer than five (5) days the investigator may request an extension.

Also note this complaint form is **only** for complaints involving Bernalillo County Emergency Communications Department/Dispatch center. Any complaints regarding the Bernalillo County Sheriff's or Fire Departments should be filed directly with the specific agency.

