



2909 Platt Springs Road • Springdale, South Carolina 29170
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www.springdaleesc.com

**ANDREW “BEAR” RICHBOURG
CHIEF OF POLICE**

Springdale Police Department Citizen’s Complaint Form

Name: _____

Today’s Date: _____

Date of Birth: _____

Driver’s License Number and State: _____

Address: _____

Phone: Home: _____

Cell: _____

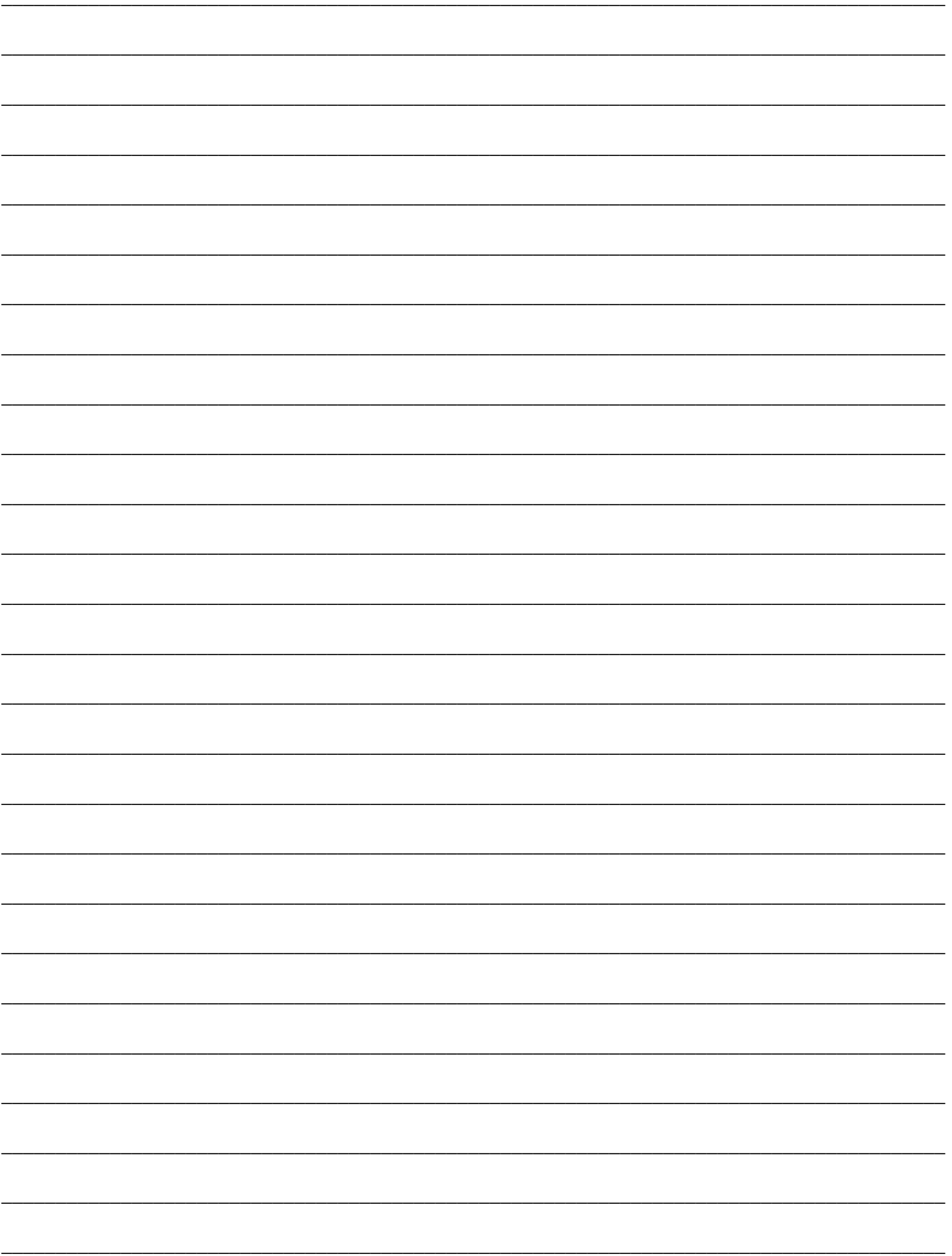
Date and Time of Occurrence: _____

Location of Occurrence: _____

Name of Officer(s): _____

Witness(es) and Phone Number(s): _____

Details of Incident: Please relate your complaint, including names, times, locations and any other factual, supporting information.



Print Name: _____

Signature: _____

Date: _____

*****By signing this complaint form, you affirm everything stated is true and accurate to the best of your knowledge. Intentionally providing false information could lead to criminal and/or civil action.*****

Sworn and subscribed before me on this ____ day of _____, 20__

Notary Public for South Carolina

My commission expires: _____

When completed, send this complaint to:

Springdale Police Department
Attn: Captain Brian Lorick
2909 Platt Springs Road
Springdale, SC 29170

Or

Email: wlorick@springdalesc.com