



Akron Police Department Citizen Complaint Process

It is the policy of the Akron Police Department to accept and review all citizen complaints regarding police service, policy, procedure, or personnel. The citizen complaint process is available to anyone who believes our personnel may have performed in a manner that is in violation of our rules, the law, and/or a citizen's rights. The fair, factual, and objective investigation of complaints is a priority.

How to File a Complaint

If you believe an officer or employee of the police department did something wrong, get the officer or employees' name, badge or identification number, car number, or other identifying details so we can determine who is involved. If witnesses were at the scene, get their names and contact information. Collect any evidence you believe is related to your complaint.

Complaints may be filed in person, via telephone, via mail, via e-mail, or may be filed anonymously. They may also be filed by contacting the independent police auditor at:

**OFFICE OF THE POLICE AUDITOR
172 SOUTH BROADWAY, SUITE 207, AKRON, OH 44308
330-375-2705
330-375-2924, Fax.
policeauditor@akronohio.gov**

Complaint forms are available on-line at Akroncops.org and at the information desk located inside the police department. A complaint form may be dropped off at your house upon request or mailed to you if you desire. Once the complaint form is completed, please return it to the police department at 217 South High St, Akron, OH 44308 or e-mail it to APDcomplaints@akronohio.gov.

Who Investigates Complaints?

Citizen complaints are investigated by a police supervisor. The investigator will conduct a detailed investigation of the incident and gather statements from you and witnesses. Your assistance is critical and additional information may be needed.

Once the investigation is complete, it will be reviewed by the investigator's supervisor and the Office of Professional Standards and Accountability. Please be aware that a detailed investigation and review of the facts can take time. Investigations are typically completed within 90 days after filing the complaint. You may contact Patrol Operations at 330-375-2900 to learn the status of your complaint.



AKRON POLICE CITIZEN COMPLAINT FORM

217 South High Street * Akron, Ohio * 44308
Phone: 330-375-2900 * apdcomplaints@akronohio.gov



Complainant Name: _____ Date of Birth: _____
First Last
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Email: _____
 Best Times to Contact: _____

Complete this section ONLY if you are filing on behalf of a minor or disabled person. Otherwise, please skip to next section.

Complainant Name: _____ Date of Birth: _____
First Last
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Email: _____

Were you arrested? No Yes If yes, for what offense? _____
 Did you require medical attention? No Yes If yes, what medical facility? _____
 Will you sign a medical release form? No Yes NA

Date of Incident: _____ Time of Incident: _____
 Location of Incident: _____
 Officer's Name: _____ Badge/ID#: _____
 Description of Officer: _____ Cruiser #: _____
 Officer's Name: _____ Badge/ID# _____
 Description of Officer: _____ Cruiser #: _____
 Officer's Name: _____ Badge/ID#: _____
 Description of Officer: _____ Cruiser #: _____
 Officer's Name: _____ Badge/ID# _____
 Description of Officer: _____ Cruiser #: _____
 Witness Name: _____ Address: _____ Phone: _____
 Witness Name: _____ Address: _____ Phone: _____

THE ORIGINAL COMPLAINT WILL BE FORWARDED TO THE OFFICE OF PATROL OPERATIONS
By Mail or delivered in person: 217 South High Street, Akron, OH 44308
By Email: apdcomplaints@akronohio.gov

DO NOT WRITE BELOW THIS LINE

FOR APD USE ONLY Revised May 19, 2020

Complaint #: _____ Unit/District/Cruiser #: _____ Report #: _____
 Nature of Complaint: _____
 Complaint Received By: _____ Date: _____

Description of Incident:

Section 2921.15(B) of the Ohio Revised Code states that any person who knowingly files a false complaint of misconduct against a police officer is guilty of a misdemeanor of the first degree.

You acknowledge that your above statements are true, and correct, to the best of your knowledge.

Complainant Signature: _____ Date: _____

A parent/guardian must sign on behalf of a minor.