

Polk City Police Department

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Service Integrity Respect Quality

Compliments and Concerns Form

This form can be used for citizens to offer an compliment to the department or make us aware of any concerns they may have had with an officer or staff. We appreciate you taking the time to let us know how we are doing. Thank you!

First Name:			
Last Name :			
Address:			
Email address:			
Phone number:			
Alternative Phone number:			
Incident type :			
Compliment	Concern	Date:	Time:
Location:			
Case number or Citation Number: (If applicable)			
Name of employee(s) involved:			
Description:			