

Inspectorate of Policing Public Complaint Form

Please send this completed form to:

Email: iopcomplaints@ontario.ca or

Mail: Public Complaints - Inspectorate of Policing
777 Bay Street, 7th Floor, Suite 701
Toronto, ON M5G 2C8

If you have questions about how to complete this form, please email iopcomplaints@ontario.ca or call 416-314-4130 / 1-888-333-5078.

Before you begin:

- Please ensure all sections of the complaint form are complete. An incomplete form may delay the processing of your complaint.
- You will be required to provide some personal information in order to complete this form; we do not accept anonymous complaints.
- The Inspector General of Policing only handles complaints related to compliance with Ontario's Community Safety and Policing Act and its regulations by:
 - police services
 - police service boards
 - organizations that employ special constables
 - This includes complaints about the provision of adequate and effective policing.
- We also accept:
 - complaints regarding the conduct of police service board members
 - complaints about police service board policies and procedures established by Chiefs of Police
- Complaints related to the actions of individual police officers should be directed to the [Law Enforcement Complaints Agency](#) or the [Special Investigations Unit](#). Complaints about the conduct of special constables should be directed to their employers.

Members of a police service and special constables can make a disclosure of misconduct under section 185 of the Community Safety and Policing Act. Contact iopdisclosures@ontario.ca , or 416-314-4130 / 1-888-333-5078 for more information.

Ce formulaire est disponible en français.

Step 1 of 5

Complainant Information

Last name (required):

First name (required):

Preferred name (optional):

Pronouns (optional):

Date of birth (optional):

Contact Information

Address line 1 (required):

Address line 2 (optional):

Province (required):

Postal code (required):

Country (required):

Preferred method of correspondence (required): Email Mail

Email (required):

Please include a telephone number we can use to contact you during business hours (Monday to Friday, 8:30 am to 5 pm, excluding holidays).

Telephone (primary) (required):

Telephone (alternative) (optional):

Accommodation needs (optional)

The Inspectorate of Policing adheres to the *Ontario Human Rights Code* and the *Accessibility for Ontarians with Disabilities Act*. If you have any accommodation requests, please describe them below.

Board membership

Are you a current or previous member of a police services board, including OPP detachment or First Nation OPP board? (required)

No:

Yes:

If yes:

Your role in the organization (optional):

Other role description and/or organization description (optional):

Representative

You do not need a representative to file a complaint. However, if you have someone assisting you with your complaint, please provide their contact details. By supplying their information, we will be able to share the details of your file with your representative and they will be copied on any future correspondence related to your complaint.

Will you be using a representative?

No:

Yes:

If yes:

Last name (required):

First name (required):

Address line 1 (required):

Address line 2 (optional):

City (required):

Country (required):

Province (required):

Postal code (required):

Email (required):

Telephone (required):

Other agencies

Have you reported this complaint to another agency, such as the Law Enforcement Complaints Agency or the Special Investigations Unit? (required)

No:

Yes:

If yes:

Agency name (required):

Step 2 of 5

Complaint details

Date of incident: Please identify the date span relevant to your complaint to the best of your knowledge.

From (required):

To (required):

Board member complaints

Only complete this part of the form if your complaint is about the conduct of a police service board member.

If your complaint is about another matter, skip this section and go directly to the next section.

Examples of subject individuals include:

- a member of a police service board
- a member of an Ontario Provincial Police detachment board
- a member of a First Nation Ontario Provincial Police board

Last name (required):

First name (required):

Organization the individual is associated with (optional):

Policing complaints

Only complete this portion of the form if your complaint is about:

- the adequacy and effectiveness of policing provided under this Act or its regulations
- a failure of a subject organization including a systemic failure to comply with the Community Safety and Policing Act and its regulations (Other than misconduct), or
- the policies or procedures of a police service board or Chief of Police

Examples of subject organizations include:

- a police service, including the Ontario Provincial Police
- a police service board
- an Ontario Provincial Police detachment board
- a First Nation Ontario Provincial Police board
- an organization that employs special constables

Organization (required):

Step 3 of 5

Complaint summary

Please include as much information as possible about your complaint in the text box below, such as:

- Who is your complaint about?
- What is your complaint about?
- Where did the incident occur?
- When did the incident occur?
- Why are you filing this complaint?
- How does the incident impact you or the community as a whole?
- What outcome are you seeking by filing this complaint?

Summary (required):

Step 4 of 5

Witnesses

Witnesses include any individuals who may have information that is relevant to your complaint.

Witness 1 (optional)

Last name:

First name:

Address line 1:

Address line 2:

City:

Province:

Country:

Postal code:

Email:

Telephone:

Witness 2 (optional)

Last name:

First name:

Address line 1:

Address line 2:

City:

Province:

Country:

Postal code:

Email:

Telephone:

Step 5 of 5

Declaration

I certify that the information provided in this complaint is true and accurate to the best of my knowledge, and I provide it to the Inspector General to be used pursuant to the Community Safety and Policing Act (required).

I understand that the Inspector General may be required to disclose my information as required in connection with the administration of the Community Safety and Policing Act, for law enforcement purposes, or where otherwise required by law.

Freedom of Information and Protection of Privacy

The personal information that you have provided on this complaint form is collected by the Inspector General pursuant to the Community Safety and Policing Act. The Inspector General's use of the information is subject to the Freedom of Information and Protection of Privacy Act. Should you have any questions about privacy protection, please contact the Freedom of Information and Privacy Office at the Ministry of the Attorney General at 416-326-4300.

Enter your first and last name, as entered in Step 1 of the form (required):

Date submitted: