

COUNTY OF SUFFOLK



JENNIFER BLASKE, ESQ.
EXECUTIVE DIRECTOR

STEVEN BELLONE
SUFFOLK COUNTY EXECUTIVE
DEPARTMENT OF LAW
HUMAN RIGHTS COMMISSION

RABBI DR. STEVEN A. MOSS
CHAIRPERSON

Dear Complainant:

Thank you for contacting the Suffolk County Human Rights Commission. In addition to the investigation of violations of the Human Rights Law, the Commission also accepts complaints of undue force and discriminatory treatment alleged against members of the Suffolk County Police Department.

Please be advised, however, that the Commission has no legal authority to conduct an investigation of charges of police misconduct. The information you provide on the enclosed form will be used to put together a complaint for your signature. Your signed complaint will then be transmitted to the Suffolk County Police Commissioner, who may then assign it to the police department's Internal Affairs Unit for investigation. Our office will be informed of the results of the investigation upon its completion.

Please be advised that filing a complaint with our office is not a substitute for civil litigation and does not preserve your right to file a civil lawsuit. If you wish to file a civil lawsuit or are seeking civil damages, you may wish to consult a private attorney for assistance. Your attorney will give you further information about what you need to do to preserve your rights.

If you choose to file a complaint with the Commission, please complete the enclosed form and return it to:

Suffolk County Human Rights Commission
P.O. Box 6100
Hauppauge, NY 11788

If you have any questions, please do not hesitate to contact our office and speak with an Investigator.

Sincerely,

Jennifer Blaske
Executive Director

LOCATION
H. LEE DENNISON BLDG.
100 VETERANS MEMORIAL HIGHWAY

MAILING ADDRESS
P.O. BOX 6100
HAUPPAUGE, NY 11788-0099

PHONE (631) 853-5480
FAX (631) 853-5478

Police Car numbers (if known):

Date and Time of Incident(s):

Location of incident(s):

Details of Incident(s) (attach additional pages, if necessary):

Names, addresses and phone numbers of witnesses who may have seen what happened to you:

Has this complaint been filed with the Police Department? Yes _____ No _____

Has this complaint has been filed with any other agency or in court? Yes _____ No _____

If "yes", name of agency or court _____

Do you have an attorney? Yes _____ No _____

Attorney Name and Contact Information:

Name, address and telephone number of someone who will always know how to reach

you: _____

Relationship _____

Signature _____ Date _____