

SC Office of Regulatory Staff Law Enforcement Officer Complaint Form

Purpose

The South Carolina Office of Regulatory Staff ("ORS") operates in a transparent manner and is responsive to complaints alleging law enforcement officer misconduct. ORS's complaint process is intended to provide members of the public with a reasonable avenue for redressing grievances they may have with the service received by or the conduct of ORS law enforcement officers.

ORS will keep Complainants informed throughout the complaint process to include receipt of complaint and results of the investigation. The ORS also will maintain a record of all complaints against the officers and confidentiality of these records shall be maintained in Human Resources.

Instructions to Submit a Complaint Form

Please complete all sections and sign the Complaint Form. The Complaint Form may be submitted via email at tmcgill@ors.sc.gov. Please type "Complaint Submittal" into the Subject line of the email. Please contact Thomas McGill, Deputy Director of Transportation & Safety at tmcgill@ors.sc.gov or (803) 737-0863 with any questions related to the Complaint Form.

Contact Information

First Name: _____

Last Name: _____

Mailing Address

Address Line 1: _____

Address Line 2: _____

City: _____

State: _____

Zip: _____

Phone Number: _____

Email Address: _____

If applicable, list other complainants or witnesses:

Name: _____

Phone Number: _____

Name: _____

Phone Number: _____

Officer Involved: (1) _____

Officer Involved: (2) _____

Officer Involved: (3) _____

Incident Location: _____

Incident Date _____ Time: _____

Please relate your Complaint (include names, times, locations, and any other factual, supporting information below):

By checking the below box, I hereby certify that every statement I have made in this complaint is true and complete to the best of my knowledge. I understand that any false statement made in connection with this complaint may be subject to the provisions of S.C. Code Ann. § 16-17-725.

I agree.

****For Internal ORS Use Only****

Complaint Received by: _____

Date: _____ Time: _____