

LECA Complaint Form

The Law Enforcement Complaints Agency (LECA) deals with complaints about the conduct of provincial and municipal police officers in Ontario, special constables with the Niagara Parks Commission, and peace officers in the Legislative Protective Service.

Complaints about a member of a police services board, the adequacy and effectiveness of policing provided by a police service, or the failure of a police services board to comply with the Community Safety and Policing Act, 2019 (CSPA) and its regulations should be made to the Inspector General of Policing.

A. General Information

Have you previously filed a related complaint with LECA Yes ☐ No ☐

If yes, please provide the file number (s) of your other complaint(s):

Have you been informed of any Special Investigations Unit (SIU) investigation related to this matter?

Yes ☐ No ☐

Is there currently an investigation or prosecution underway under a law of Canada, a province, or a territory, such as an offence under the Criminal Code or Highway Traffic Act, relating to this incident?

Yes ☐ No ☐

Please note that if there is an active SIU/Criminal investigation or prosecution relating to this matter, we cannot accept the complaint at this time. Please submit your complaint once the matter is concluded.

Which of the following best describes your role in this complaint (select one):

- ☐ This incident happened to me (proceed to your details)
- ☐ I am acting as an agent or legal representative for someone else*
- ☐ I am filing on behalf of a minor under 12 or a person who lacks capacity (fill out AP section)
- ☐ I am not the directly affected person, but I saw/heard the officer's conduct because I was physically present. (fill out AP section)
- ☐ I am not the directly affected person, but I have a close personal relation to the affected person. (fill out AP section)
- ☐ Other - I learned about the incident another way (fill out AP section)

How did you become aware of the incident?

***If you are acting as an agent or legal representative, you must complete and submit an Agent Consent Form.**

Affected Person (AP):

First Name: 	Last Name:
Street Address: 	City:
	Province: Postal Code:
Telephone: 	Alternative Telephone:

Email Address:

I would like correspondence from LECA sent to me by:

Mail ☐ Email ☐

If one method of delivery becomes unavailable or undeliverable (whether email or physical mail), the alternate contact information provided may be used to ensure delivery

I would consider early resolution for this matter:

Yes ☐ No ☐

Early Resolution (ER) is a voluntary, confidential process designed to resolve complaints within 30 days. A Professional Standards officer facilitates communication between you and the police service to help reach a solution. Agreements are reviewed by LECA and include a 12-business day cooling-off period. If the matter is not resolved through ER, the complaint will proceed to screening.

B. Your Details (Complainant)

LECA does not accept anonymous complaints.

First Name: 	Last Name:
Street Address: 	City:
	Province: Postal Code:
Telephone: 	Alternative Telephone:
Email Address: 	Date of Birth:

LECA does not accept complaints from youth under 12

For youth complainants age 12-17, please provide the name and contact information of a parent, adult agent, guardian, or lawyer (Optional):

First Name: 	Last Name:
Street Address: 	City:
	Province: Postal Code:
Telephone: 	Alternative Telephone:

C. Complaint Details

Which police service is your complaint about?

What police station/division/detachment do the officer(s) work at? (if known)

When did the incident(s) happen? If the complaint is about a singular incident, provide the same From and to date.

From (mm/dd/year):

To (mm/dd/year):

Where did the incident(s) that led to the complaint happen?

Street address/location:

Nearest intersection:

Complaints may be screened out if they are made more than six months after the incident. If the incident you are complaining about happened more than six months ago, please provide a reason for the delay.

Who did this involve? Please give us any details you might have about the police officer(s):

#1 Officer First Name:

Officer Last Name:

Badge Number:

What led to the interaction with the officer?

LECA does not accept and will not review additional evidence or information provided in attachments, embedded hyperlinks, or emails, at the screening stage. If any additional information is needed, you will be contacted by LECA

What did the officer say, do, or not do, that has caused you to make this complaint?

#2 Officer First Name:

Officer Last Name:

Badge Number:

What led to the interaction with the officer?

What did the officer say, do, or not do, that has caused you to make this complaint?

#3 Officer First Name:

Officer Last Name:

Badge Number:

What led to the interaction with the officer?

What did the officer say, do, or not do, that has caused you to make this complaint?

#4 Officer First Name:

Officer Last Name:

Badge Number:

What led to the interaction with the officer?

What did the officer say, do, or not do, that has caused you to make this complaint?

D. Additional Information

☐ I used an interpreter to fill out this form, and I will need to arrange for an interpreter in the event of an interview.

If you have checked off the box above, please fill out the below.

E. Interpreter's Declaration

I declare that I have accurately interpreted the entire content of this form for the complainant from English to the following language:

Language:

I am proficient in both languages and was able to communicate fully with the complainant. The complainant has indicated that they fully understand the entire content and the answers provided.

Please sign below to acknowledge this statement as true:

Interpreter's Signature:

F. Declaration

I certify that the information provided is true. I understand the information on this form will be provided to the officer(s)' designated authority, including police chief or the OPP Commissioner, or their delegates, or the police services board, as well as the subject officers, and that this complaint may be investigated by the professional standards unit of the service I am complaining about, with oversight by LECA.

Write your full name: (First, Last)

Date:

Signature:

If you are submitting this on behalf of another party, please complete the Agent Consent form.

G. Freedom of Information and Protection of Privacy

The personal information that you have provided on this complaint form is collected by LECA under the Community Safety and Policing Act or the Police Services Act. The information will be used to review, process, and investigate your complaint. As an agency of the government, LECA must adhere to the Freedom of Information and Protection of Privacy Act (FIPPA). If you have any questions about privacy protection, please contact the Law Enforcement Complaints Agency at 416-246-7071.

H. Intake at a Police Station

Intake Officer Name:

Badge #:

Date Received (day, month, year):

This complaint form must be submitted to LECA for processing within three business days of receipt, by email to lecacomplaints@ontario.ca, by mail, or by fax at 1- 877- 415- 4773

Personal Information Collection and De-Identified Statistics

Under the authority of the *Anti-Racism Act, 2017* (ARA), the Law Enforcement Complaints Agency (LECA) is obligated to collect personal information from members of the public who make a complaint to LECA. Under the Ontario Regulation 267/18, LECA is required to collect race-based data on: 1) Indigenous identity, 2) race, 3) religion, and 4) ethnic origin. This information will be used to satisfy the requirements of the ARA and corresponding regulations. The sole purpose of the collection of this personal information is for eliminating systemic racism and advancing racial equity.

LECA will de-identify personal information collected under the ARA, and may use the de-identified statistical information for the purposes of satisfying LECA's mandate under the *Community Safety and Policing Act, 2019* including sections 132 and 133. This de-identified information may also be used to meet LECA's mandate, for program development and to improve service delivery.

Answering these questions is completely voluntary. No program, service, or benefit will be withheld if you do not provide or refuse to provide the personal information requested. Your decision will not affect any service provided or decision made by LECA. Personal information collected under the ARA will not be shared with police services or police services boards or any other entity, person or party, except as permitted or required under section 7(14) of the ARA.

You may also access and correct your personal information or withdraw your consent by contacting our office. As an agency of the government, LECA adheres to the requirements of the ARA and the *Freedom of Information and Protection of Privacy Act, 1990* (FIPPA).

For more information about this initiative please contact LECA Inquiries and Intake Assistant, at lecacomplaints@ontario.ca or to 655 Bay Street, 10th floor, Toronto, Ontario M7A 2T4. Telephone **1-877-411-4773**.

Do you identify as First Nations, Métis, and/or Inuit? Yes ☐ No ☐
If yes, select all that apply.

First Nations ☐ Métis ☐ Inuit ☐

Ethnic origin refers to a person's ethnic or cultural origins. Ethnic groups have a common identity, heritage, ancestry, or historical past, often with identifiable cultural, linguistic, and/or religious characteristics. (For example, Canadian, Chinese, East Indian, English, Italian, Filipino, Scottish, Irish, Anishinaabe, Ojibway, Mi'kmaq, Cree, Haudenosaunee, Métis, Inuit, Portuguese, German, Polish, Dutch, French, Jamaican, Pakistani, Iranian, Sri Lankan, Korean, Ukrainian, Lebanese, Guyanese, Somali, Colombian, Jewish, etc.)

What is your ethnic or cultural origin(s)?

In our society, people are often described by their race or racial background. For example, some people are considered ‘White,’ while others are considered ‘Black’ or ‘East Asian,’ or a combination such as ‘White’ and ‘South Asian.’

Which race category best describes you? Select all that apply.

Race category	Examples/descriptions
☐ Black	African, Afro-Caribbean descent / African Canadian
☐ East Asian	Chinese, Korean, Japanese, Taiwanese descent
☐ Indigenous	First Nations, Inuit, or Métis descent
☐ Latino	Latin American or Hispanic descent
☐ Middle Eastern	Arab, Persian, or West Asian descent, e.g., Afghan, Turkish, Kurdish
☐ South Asian	Indian Subcontinent descent, e.g., East Indian, Pakistani, Sri Lankan, Bangladeshi, Indo-Caribbean, etc.
☐ Southeast Asian	Filipino, Vietnamese, Cambodian, Thai, Indonesian, other Southeast Asian descent
☐ White	European descent
☐ Another race category not described above	Please specify:

Note: If you are entering in the “Another race category” section, please specify a race and/or select all that apply above. Do not enter “bi-racial”, or “mixed.”

What is your religion and/or spiritual affiliation? Select all that apply.

☐ Buddhist

☐ Christian

☐ Hindu

☐ Jewish

☐ Muslim

☐ Sikh

☐ Indigenous Spirituality

☐ No religion

☐ Another religion or spiritual affiliation. Please specify: