

La Marque Police Department



431 Bayou Road, La Marque,
Texas 77568
Phone: (409) 938-9269

La Marque Citizen Problem Reporting Form

Complaint Submittal Process

1. Submit the form via email to COP@cityoflamarque.org or print and deliver to the La Marque PD – **Attention COP Officer**, 431 Bayou, La Marque, Texas, 77568.
2. Upon receipt of the complaint, you will be contacted within 3 days to notify you the complaint has been received and has being passed to Community Oriented Policing team for processing.
3. The COP team will determine where the complaint will be routed and you will be contacted within 7 Business days with a notification of disposition of the complaint?

Form Instructions

(The current date will auto populate when the form is access)

1. **Citizen Information (Information about person SUBMITTING the COMPLAINT)**
 - a. Full Name: First Last
 - b. Home Address: address where you can be contacted.
 - c. Call Back Number: Enter the area code + phone number using numerical characters only, e.g., enter (409) 111-2222 as 4091112222. Please enter your PRIMARY phone number only. If you have other means of communication or other phone numbers, please enter them in the "Detailed Information" section.
 - d. Subdivision/Neighborhood: If you don't know your subdivision or neighborhood, just enter the area where you live or use a landmark in your area.
 2. **Type of Violation (Select the item that best describes the complaint).**
 - a. You may select or deselect as needed
 - b. If you select **Other** for any violation category, please explain in detail in the
 - c. "Detailed Information" section.
 3. **Details of Complaint**
 - a. **Brief Summary of Complaint:** You are allowed 5 lines to enter the complaint. If more space is needed, continue in the "Detailed Information": section
 - b. **Date/Time of Violation(s):** Free space. You can enter as many dates/times as you need within the line length
 - c. **Vehicle(s):** Free space per line length
 - d. **Suspect(s):** Free space per line length
 - e. **Detailed Information:** Use this space to complete any information that would not fit in the previous fields or to add more detailed information on the complaint. ****Add any alternate means of communication (i.e., alternate phone numbers and emails)
1. **Name/Phone of person SUBMITTING FORM:**
 - a. Field must be completed please.

Save the completed form and email saved form to COP@cityoflamarque.org or print completed form and deliver to the La Marque PD - **Att. COP Officer**.