

**GRIEVANCE COMPLAINT FORM**

As provided in Section 22-6(D)(e) of the Ethics Law of the Town of Pine Plains, New York (“Ethics Law”), this form must be used to lodge a complaint or request an investigation by the Ethics Board of an alleged violation of the Ethics Law by a Town officer or employee (“Complaint”).\* Only those Complaints which provide the information sought in the attached form, including reasonable detail of the alleged violation(s) with supporting documentation, if any, and which are signed by the person submitting the Complaint (“Complainant”), will be considered by the Ethics Board. The failure to comply with these requirements will result in the prompt dismissal of the complaint {without waiver of any right to file a compliant Complaint}.

The completed form and all supporting materials must be personally filed with, or mailed by certified mail to, the Town Clerk at the address listed below. The Town Clerk will file a copy of the Complaint and provide a complete copy of the submission to the Chairperson of the Ethics Board. The Ethics Board will then review the Complaint and any accompanying materials to determine if the Complaint has merit alleging a violation of the Ethics Law. The Town Clerk will also provide a complete copy of the Complaint to the person(s) named in the Complaint (the “Subject(s)”).

If, after its preliminary consideration, the Ethics Board finds no reasonable cause for the allegations in the Complaint, the Ethics Board may dismiss the Complaint and notify the Complainant, the Subject(s), the Town Supervisor and the Town Board of its findings. If the Ethics Board finds reasonable cause for the allegations in the Complaint, the Ethics Board shall forward its written findings to the Town Supervisor and the Town Board, together with copies of all information relied on by the Ethics Board in making that determination. The Ethics Board will then pursue additional fact-finding and schedule a hearing as provided in the Ethics Law. The Complaint and related filings shall be kept confidential to the extent required by the Ethics Laws and other applicable laws. However, such information may be subject to disclosure under FOIL (Freedom of Information Legislation) requirements.

Complaints based on knowingly false or misleading information will be redressed to the fullest extent permitted by law.

The Board of Ethics, Town of Pine Plains  
c/o Town Clerk  
Town of Pine Plains  
PO Box 955  
Pine Plains, NY 12567

- NOTE: COPIES OF THIS LAW AND ANY ASSOCIATED NYS STATE ETHICS STATUTES MAY BE OBTAINED FROM THE TOWN CLERK’S OFFICE.

INFORMATION SUBMITTED IN SUPPORT OF COMPLAINT DATED \_\_\_\_\_

**PART ONE:**

1. Date.
2. Full name.
3. Full Local address, Contact phone number and Email address.
4. Mailing address if different from above.
5. Occupation (optional)

**PART TWO:**

1. Do you currently serve as an Appointed or Elected Official of the Town of Pine Plains or are you employed by the Town of Pine Plains or do you serve as an appointed or voluntary representative or committee member within the Town of Pine Plains? \_\_\_\_\_. If yes, please explain your position.

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2. Do you currently serve as a vendor or contractor for the Town of Pine Plains or are actively seeking such a position with the Town of Pine Plains? \_\_\_\_\_. If yes, please explain your position.

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3. NATURE OF YOUR COMPLAINT. Please describe the basic reason for your Complaint and identify the specific Ethics Law provision(s) you believe have been violated and why.

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4. PERSON(S) HAVING PERSONAL KNOWLEDGE OF THE ALLEGATIONS IN THE COMPLAINT. Please provide the following information for each person who was involved in or who has personal knowledge of the conduct giving rise to the Complaint

Name: \_\_\_\_\_

Last known work address, telephone number and email address:

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Position/Services Provided/Service Dates: \_\_\_\_\_

For each of the above-named individuals, list the information believed to be known by them and cite any specific Ethics Laws they may have violated in the course of these actions.

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List any additional persons together with their information on an "ADDITIONAL PERSONS SHEET"

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PART 5. SPECIFIC ETHICS LAWS VIOLATIONS: For each person identified in PART 4, please identify the specific Ethics Laws you have a good faith basis to believe may have been violated or the actions which now create or present a potential or existing conflict of interest as described in Ethics Law 22-4(A) or (B).

**NOTE: Copies of the Ethics Law and any applicable NYS ethics statutes may be obtained from the Town Clerk's Office.**



**PART 8. SWORN SIGNATURE AND VERIFICATION:**

I declare under penalty of perjury that I have, as the initiator of this Form of Complaint concerning an alleged violation of the Ethics Law, reviewed the information I have supplied herein, and confirm that, to the best of my knowledge, they represent a true, accurate and complete statement of the facts, witnesses and alleged Ethics Law violations. You may supplement your original submission to the Ethics Board, by sending any such additional information to the Town Clerk in the manner provided on p.1 above.

SIGNATURE: \_\_\_\_\_

PRINTED FULL NAME: \_\_\_\_\_

DATE SUBMITTED: \_\_\_\_\_