



Beverly Hills Fire Department Complaint Record Form

Submitting a Complaint

The Beverly Hills Fire Department considers all complaints important. Complaints are documented on the "Complaint Record Form" and forwarded to the BHFD for review and follow-up action. All complaints are handled in an impartial manner in compliance with federal, state and local laws and departmental policy.

The Reporting Party information provides an opportunity for the department to follow-up to verify information or ask additional questions should the original submission lack enough specifics. Once you have completed the form, please print and either fax or mail it to:

Beverly Hills Fire Department
Deputy Fire Chief's Office
445 North Rexford Drive
Beverly Hills, CA 90210
Fax: 310-278-2449

Please complete as much information as you can.

Incident Information

Date*

Time*

Location of Incident*

Incident/Event Type*

Medical Report Number (If applicable)

Officer or Employee Information

Last Name

___ First Name

Badge #

Type of Unit

Ambulance

Truck

Urban Search & Rescue

Battalion Chief

Engine

Bicycle Medic

Other

Reporting Party Information

Last Name

First Name

Address

City

State

Zip

Email Address

Phone Number

Preferred Time to Call

Comments/Statements*

The Beverly Hills Fire Department thanks you for your interest and for taking the time to complete this form.

*** Indicates mandatory field**