

## COMPLAINT FORM

Section 73 of the Private Security Act (CQLR, c. S-3.5)

**If you believe that the actions of a person or an enterprise violate the Private Security Act (RLRQ, c. S-3.5) (the “PSA”) or any of its regulations, we invite you to lodge a complaint to the Department of Investigations and Inspections.**

In order to do so, this form must be completed and signed by the plaintiff, then forwarded :

• **By email** to : [plaintes@bspquebec.ca](mailto:plaintes@bspquebec.ca)

**OR**

• **By mail** to the following address:

### **Department of Investigations and Inspections**

**Bureau de la sécurité privée**

1611, boulevard Crémazie Est, bureau 500, Montréal (Québec) H2M 2P2.

Should you have any question, please contact our Department of Investigations and Inspections at [plaintes@bspquebec.ca](mailto:plaintes@bspquebec.ca) or at 514 748-7480, ext. 1272.

Thank you for your understanding.

### **Access to information and protection of personal information**

The personal information collected on this form is used for the purpose of preventing, detecting or repressing violations of the Private Security Act and its regulations. They are voluntarily transmitted and are intended to bring to the attention of the Bureau de la sécurité privée facts that could lead to an investigation or inspection under the powers conferred upon it.

The Bureau treats personal information that it collects confidentially, in accordance with the provisions of applicable legislation. This information may be disclosed to other persons or organizations only when permitted by law, including the Act respecting Access to documents held by public bodies and the Protection of personal information, or with your consent, or by order of a court.

However, please note that following an investigation or inspection, a penal or disciplinary process may be initiated against any person who is the subject of your complaint. In this context, the information you provide in your complaint could be released to any person subject of your complaint and could be used in such proceedings.

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**Information preceded by a star (\*) is essential**, otherwise your complaint may be deemed faute d'information inadmissible because of insufficient information for its analysis.

## SECTION A: PLAINTIFF'S IDENTIFICATION

Although your personal information is optional, without that information, it is possible that we may not be able to process your complaint, being unable to obtain additional essential information from you. In addition, we will not be able to inform you of the process of your complaint, if applicable.

Surname					First name						
Address (Civic number and street)										Apt.	
City					Province					Postal code	
Phone number			Other phone number			Ext.					
E-mail address											
<input type="checkbox"/> I wish to remain anonymous											

## SECTION B: NATURE OF THE COMPLAINT \*

### Category targeted by this complaint:

- Agent without licence (116 LSP)       Breach of standards of conduct (agent only)  
 Agency without licence (114 LSP)       Employer employing an unlicensed agent (117 LSP)  
 Other, specify: \_\_\_\_\_

## SECTION C: ESSENTIAL INFORMATION ON THE EVENT

First name and surname of the person* / Name of the enterprise *								Agent/Agency BSP licence No. (if applicable)			
Event date *				Time							
Location* (address or site name)								City*			

## PHYSICAL DESCRIPTION OF THE PERSON\* :

Gender:	Ethnic origin:
Stature:	Height :
Hair (color/length):	Approximate age:
Eyes (color/eyeglasses):	Weight:
Distinctive physical features:	Beard/Mustache:

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IMPLICATED VEHICLE :			
Brand:	Model:	Color:	Licence plate:
WITNESS n°1:			
Surname:			
First name:			
Phone number (if known):			
WITNESS n°2:			
Surname:			
First name:			
Phone number (if known):			
WITNESS n°3:			
Surname:			
First name:			
Phone number (if known):			

SECTION D : CRIMINAL COMPLAINT	
Have you filed a complaint to the police about this event? * <input type="checkbox"/> No <input type="checkbox"/> Yes, specify below :	
Police Department *	Name of agent or investigation on file
Complaint's date A   A   A   A   M   M   J   J	Police Event No. *

SECTION E : DOCUMENTS FILED WITH THE COMPLAINT
Are there any documents attached to this complaint? * <input type="checkbox"/> No <input type="checkbox"/> Yes, specify below : (list of items provided)
_____
_____
_____

SECTION F : PROOF ELEMENT	
Videos, images, invoices:	Others:

## SECTION F: NATURE OF ALLEGATIONS \*

Please describe the details of the allegations, behavior and word spoken:

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### SECTION G: PLAINTIFF'S DECLARATION

I have read and understand the important information on page 1 of this form.

I certify that the information declared herein is true and to the best of my knowledge.

I undertake to preserve and not destroy any document that, to my knowledge, could be relevant in the analysis of this complaint and in an investigation, if necessary.

I understand that, once the complaint has been received by the Bureau de la sécurité privée, and if it considers that there are reasonable grounds to believe that an offense under the Private Security Act or any of its regulations has been committed, it may investigate.

I understand that I may have to met with an investigator-inspector from the Department of Investigations and Inspections in connection to this complaint.

I understand that I may be called upon to give my testimony to the Court in relation to this case, if applicable.

I also understand that the Bureau may decide to continue such an investigation on its own initiative, despite the wishes of the plaintiff to withdraw his complaint.

**In witness whereof, I have signed :** \_\_\_\_\_

Plaintiff's signature

Date | A | A | A | A | M | M | J | J |