

**COMMANDER NAVY INSTALLATIONS COMMAND**  
**INSPECTOR GENERAL ACTION REQUEST (IGAR)**  
 (READ PRIVACY ACT STATEMENT AND INSTRUCTIONS BEFORE COMPLETING FORM.)  
 \*\*JAVASCRIPT MUST BE ENABLED FOR THIS FORM TO WORK PROPERLY\*\*

**Privacy Act Statement**

**AUTHORITY:** 10 U.S.C. 5014, Office of the Secretary of the Navy; The Inspector General Act of 1978, United States federal law (92 Stat. 1101); 10 U.S.C. 5020, Naval Inspector General (IG): details; duties; SECNAVINST 5430.57 series, Mission and Functions of the Naval Inspector General; SECNAVINST 5370.5 series, DON Hotline Program; and E.O. 9397 (SSN) as amended; CNICINST 5370.1a, Commander Navy Installations Command Inspector General Hotline Program; System of Records Notices (SORN) N05041-1, Naval IG Investigative Records (<https://dpcl.d.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570354/n05041-1/>)

**PURPOSE:** To determine the facts and circumstances surrounding allegations or complaints against Department of the Navy personnel and/or Navy/Marine Corps activities. To present findings, conclusions, and recommendations developed from investigations and other inquiries to the Secretary of the Navy, Chief of Naval Operations, Commandant of the Marine Corps, or other appropriate Commanders. To secure sufficient information to inquire into the matters presented and to provide a response to the requestor(s) and/or take action to correct deficiencies.

**ROUTINE USES:** In addition to those disclosures generally permitted under 5 U.S.C. 552a (b) of the Privacy Act of 1974, these records contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a (b) (3).

**DISCLOSURE:** Personal information is voluntary. However, failure to provide complete information may hinder proper identification of the requestor, accomplishment of the requested action(s), and response to the requestor. If you do not consent to release of your identity, we may be unable to proceed with your complaint.

1. DO YOU WISH TO REMAIN ANONYMOUS?	YES	NO	IF YES, DO NOT IDENTIFY YOURSELF IN SECTION 4 BELOW.
2. IF NO, DO YOU WANT TO CONFIDENTIALITY?	YES	NO	IF YES, IDENTIFY YOURSELF IN SECTION 4 BELOW AND SIGN BLOCK #15. WE WILL NOT RELEASE YOUR NAME WITHOUT YOUR CONSENT.
3. ARE YOU WILLING TO BE INTERVIEWED?	YES	NO	
4. YOUR CONTACT INFORMATION			
a. LAST NAME:	b. FIRST NAME:		c. MI      d. GRADE/RANK:
e. PREFERRED MAILING ADDRESS:		f. EMAIL:	
g. HOME PHONE:	h. OFFICE PHONE:		i. MOBILE PHONE:
5. WHO IS SUSPECTED OF THE WRONGDOING?			
a. LAST NAME:	b. FIRST NAME:		c. MI      d. GRADE/RANK:
e. DUTY STATION / PLACE OF EMPLOYMENT:			
6. WHAT DID THIS INDIVIDUAL / COMMAND DO OR FAIL TO DO THAT WAS WRONG? IF COMPLAINT IS AGAINST ACOMMAND OR ACTIVITY, PLEASE PROVIDE COMMAND / ACTIVITY'S FULL NAME AND LOCATION. (Continue in section 12 if necessary)			
7. WHAT RULE, REGULATION, OR LAW DO YOU THINK THIS INDIVIDUAL / COMMAND VIOLATED? (Continue in section 12 if necessary)			
8. BRIEFLY DESCRIBE THE ALLEGED WRONGDOING. ALSO, PLEASE ATTACH ANY DOCUMENTS THAT SUPPORT YOUR COMPLAINT. (Continue in section 12 if necessary)			

9. **WHEN / WHERE** DID THE INCIDENT OCCUR? BE AS SPECIFIC AS POSSIBLE ABOUT THE DATES, TIMES, LOCATIONS, AND COMMAND. *(Continue in section 12 if necessary)*

10. HAVE YOU USED ANOTHER PROCESS (e.g., CONGRESSIONAL, EEO, CHAIN-OF-COMMAND) OR CONTACTED ANOTHER IG TO RESOLVE THIS MATTER? IF YES, PLEASE IDENTIFY THE PROCESS AND THE CURRENT STATUS OF THE MATTER. *(Continue in section 12 if necessary)*

11. WHAT DO YOU WANT THE IG TO DO FOR YOU? *(Continue in section 12 if necessary)*

12. ADDITIONAL INFORMATION YOU WISH TO PROVIDE. (INCLUDE ANY ADDITIONAL SUBJECT(S), AND/OR WITNESSES NAMES, RANKS/GRADES, DUTY STATION).

#### 13. CONSENT TO RELEASE MY PERSONAL INFORMATION

The Office of Inspector General Enterprise Hotline personnel will not disclose the identity of an individual providing a complaint or information to a OIG Hotline unless: 1) The individual consents to such disclosure; or 2) The disclosure is required by applicable authority, or to address an emergency, or is a matter involving specific danger to health, safety, or national security; or 3) The OIG personnel determines the release of your identity is unavoidable to address the issues raised - this is rarely used.

In other words: If you do not consent to the release of your identity, we may be unable to proceed with your complaint.

I grant consent to the disclosure of my identity outside the NAVY IG channels on a need-to-know basis.

I do not grant consent for the use of my identity outside the NAVY IG channels. I understand my lack of consent may prevent further inquiry.

#### 14. FORM CERTIFICATION

BY SUBMITTING THIS FORM, YOU CERTIFY THAT ALL OF THE STATEMENTS MADE IN THIS COMPLAINT ARE TRUE, COMPLETE, AND CORRECT TO THE BEST OF YOUR KNOWLEDGE AND / OR BELIEF. YOU UNDERSTAND THAT A FALSE STATEMENT OR CONCEALMENT OF A MATERIAL FACT IS A CRIMINAL OFFENSE (18 U.S.C. SECTION 1001; INSPECTOR GENERAL ACT OF 1978, AS AMENDED, SECTION 7; AND/OR THE UNIFORM CODE OF MILITARY JUSTICE, ARTICLE 107). THIS INFORMATION IS SUBMITTED FOR THE BASIC PURPOSE OF REQUESTING ASSISTANCE, CORRECTING INJUSTICES AFFECTING THE INDIVIDUAL, OR ELIMINATING CONDITIONS CONSIDERED DETRIMENTAL TO THE EFFICIENCY OR REPUTATION OF THE NAVY.

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and/or belief.

NOTE: Your local IG should be your first point of contact. Hotline complaints should be sent directly to the IG's command where the alleged allegation(s) of wrongdoing occurred.

15. PRINTED NAME:

SIGNATURE:

DATE OF COMPLAINT: