



Virgin Islands Casino Control Commission

3005 Orange Grove
Christiansted, VI 00820

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Email: info@casinocontrolcommission.vi | Website: www.casinocontrolcommission.vi

For Commission Use Only
Incident No.

PATRON COMPLAINT REPORT

TYPE OF REPORT – PLEASE CHECK ONE

PATRON COMPLAINT

☐

CRIME/OTHER VIOLATION

☐

CONTACT INFORMATION

Your Name: _____

Address: _____

Home Phone: (_____) _____ Mobile Phone: (_____) _____

Email Address: _____

SUMMARY OF INCIDENT

Gaming Establishment where Incident Occurred: _____

☐ Table or ☐ Slot Machine Number: _____ Location Number: _____

Date of Incident: _____ Approximate Time of Incident: _____

CASINO EMPLOYEES INVOLVED:

WITNESS(ES)

Describe in as much detail as possible the nature of incident, whether you reported this to the VI Casino Control Commission, the gaming facility's security, or another authority, and if so, how they responded to the incident. Use additional pages if necessary.

Signature: _____

Date: _____