

VOLUNTARY RELINQUISHMENT OF CERTIFICATION

Applicant Information

Name Dean Paine

Date of Birth [REDACTED]

Email [REDACTED]

Phone [REDACTED]

Address [REDACTED]

Certification Information

Date of Initial Certification July 01, 2024

Issuing Jurisdiction(s) Massachusetts

Legal and Professional History

1. Have you ever been arrested? NO

2. Have you ever been subject to any criminal prosecution? NO

3. Have you been subject to a restraining order or court order that restricted your conduct or was based on your conduct? NO

4a. Have you been involved in any civil or administrative agency actions related to Law Enforcement service? YES

4b. Have you been involved in any civil or administrative agency actions related to alleged conduct involving (select all that apply): None of these

Provide details on allegations, actions taken, and compliance outcomes.

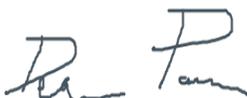
I was internally investigated for a motor vehicle accident in my cruiser that occurred in 2020. In 2024 as a result of an anonymous letter, I was also investigated for removal of suspected marijuana from the evidence room at the time of the accident. Initially I received a two day suspension for violation of the vehicle take home policy and use of a mobile device while driving. I resigned from the department in June of 2024.

Acknowledgement & Attestation

Description Area

By signing this form, I acknowledge and agree that: I have read, understood, and agree to the terms of the Policy on Voluntary Relinquishment of Certification. I understand that upon relinquishment, I will be ineligible for appointment, employment, or engagement in any law enforcement capacity in Massachusetts. I understand that relinquishment is not the same as decertification and that the POST retains authority to take future action based on past conduct.

I hereby certify under the pains and penalties of perjury that all information provided in this application is true, complete, and accurate to the best of my knowledge.



Today's Date

December 01, 2025

**INTERNAL USE ONLY -
Authorization**

Signature & Date

Division of Certification

Division of Standards

Legal

Executive Director

Commission Vote
