Wolfeboro Police Department

Application for Private Detail

Name of Business: _____

Billing Address: _____

Contact Person: _____ Phone #: _____
Email: _____

Type of Function: _____

Location: _____ Wolfeboro, NH 03894

Date (s): _____ From: _____ To: _____ Time: _____
_____ From: _____ To: _____ Time: _____

Type of Detail: Traffic Control _____ Crowd Control _____ Security _____
Other: _____

Number of Officers Requested: _____ Police Cruiser Requested for detail: Yes____ No____

I understand that this application is subject to the approval of the Chief of Police and that he may make additional requirements. I further understand that the cost for this service is **$67.00** per hour for each officer. I understand that the officer must be guaranteed a minimum of four (4) hours of pay and that I will receive billing through the Wolfeboro Police Department.
I understand that I am required to notify the Wolfeboro Police Department at least two hours before the start of the detail if the detail is cancelled. **FAILURE TO DO SO WILL RESULT IN YOUR ORGANIZATION BEING BILLED FOR THE SERVICE CONTRACTED.** I understand that officers of the Wolfeboro Police Department will perform their duties consistent with the best interest of the Town of Wolfeboro and the Wolfeboro Police Department, enforcing all laws and ordinances applicable to their jurisdiction or of some other agency.

_____
Authorized Agent

Date: _____/_____/_____

This contract is approved subject to the following Condition: _____

_____

_____ _____
Stuart M. Chase Chief Captain or Sergeant

Following officer(s) is/are assigned to this detail and have been advised of the services expected from the contract person/Business.

_____ _____

Amount Billed $ _____ Date _____/_____/_____ Payment Received _____/_____/_____

Rev 1/12/15