



**City of Egg Harbor
Police Detail Request Form**

INSTRUCTIONS: Form is to be completed by customer and returned to the City Clerk's Office (90) days PRIOR to detail date. An invoice will be provided after the event and must be paid within (30) days of receipt.

Organization Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Name: _____ Contact Phone Number: _____

Contact E-mail Address: _____

Billing Contact Name: _____ Billing Contact Phone Number: _____

Billing Contact E-mail: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Detail Information

Detail Location: _____

Purpose of Detail/Significant Aspects:

Hours Requested: _____ Start Time: _____ End Time: _____ Total Number of

Date Requested: _____ From: _____ To: _____ Hours Officers are

Number of Days: _____ Number of Officers: _____ Vehicle Required: _____ Requested per Day:

Fees: \$85.00 per hour per officer with a two (2) hour minimum.

Cancellation Instructions and Minimum Charge to Customer

Cancellation Instructions and Minimum Charge for Failure to Properly Cancel Requested Detail:

The customer MUST call Police Dispatch at (609) 625-2700 twenty-four (24) hours in advance of the requested detail start time. Failure of customer to properly cancel the detail twenty-four (24) hours in advance of the requested start time will result in a two (2) hour minimum charge per officer to the customer.

Organization Authorized Signer: (print name) and Title: _____

Signature: _____ Date: _____

**City Use Only:
Police Department**

Approved by: Name: _____ Signature: _____ Date: _____