



**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: \$100.00 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: \_\_\_\_\_