

LAKE MARYPOLICE DEPARTMENT Special Detail Service Application

EMPLOYER INFORMATION SECTION							
Business Name or Individual							
Address							
Contact Person				Title			
Phone Number		Fax:		Email			
Person Responsible for Payment						Phone Number:	
MANAGEMENT COMPANY (COMPLETE THIS SECTION IF YOU RELY ON AN OUTSIDE MANAGEMENT COMPANY TO PROCESS YOUR ACCOUNTS PAYABLE)							
Management Company Name							
Address							
Representative Name:				Title:			
Phone Number				Fax:			
JOB SITE LOCATION INFORMATION							
Location Name:							
Address:						Gate Access Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>(Include the exact location e.g. Suite 180, parking lot, etc)</i>							
JOB INFORMATION SECTION:							
Have you spoken to a particular Officer in reference to coordinating this job? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, Name			
Are there any other agencies working this detail? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, who?			
Number of officer(s) requested?		Anticipated Crowd Size? <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-149 <input type="checkbox"/> 150-200 <input type="checkbox"/> 259-599 <input type="checkbox"/> 600+					
Alcohol Sold? <input type="checkbox"/> Yes <input type="checkbox"/> No		Alcohol Served? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Describe Job Duties (e.g. crowd control, traffic control, security, etc):							
Type of Event – Please describe the nature of your event (e.g. carnival, concert, grand opening, construction, etc.)							
Is this an ongoing detail over 31 calendar days? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Please provide a listing of your requested shifts (A detailed schedule may be attached. If shifts are yet to be determined, please write the start and end dates and contact the Off-Duty Detail Coordinator)							
Start Date		Start Time		End Date		End Time	
Start Date:		Start Time:		End Date:		End Time:	
Submitted by:							
OFFICE USE ONLY							
<input type="checkbox"/> Approved		<input type="checkbox"/> Denied		Comments:			
Off-Duty Detail Coordinator's Signature:						Date:	
Comments:							
Lieutenant's Signature:						Date:	

The City of Lake Mary, in coordination with its Police Department, recognizes the need for individual parties to seek law enforcement presence for safety and security reasons unrelated to the City. It is understood that this is a non-binding agreement and the City of Lake Mary Police Department may cancel this request/detail without advance notice or cause at any time for such reasons as emergencies, inability to find an officer to work the event or other unforeseen circumstances.

The City of Lake Mary requires any requests for special detail (off-duty) of officers be for a minimum of four (4) hours. Further, the scheduling of a detail shall hold the hiring party liable to pay compensation for the officer(s) for the full hours scheduled, even if they are released early by the hiring party. Furthermore, the hiring party shall also compensate the officer(s) for any additional hours worked beyond those originally scheduled. The requesting party will be accountable for the four (4) hour minimum payment if they fail to notify the Police Department of a cancellation by at least 24 hours prior to the scheduled start time.

Current Lake Mary Police Department special detail rates per officer are:

\$38.00/hour for an officer

\$47.00/hour for an officer on the holidays listed below:

New Year's Eve, New Years, Easter, Memorial Day, Independence Day, Labor Day, Thanksgiving, Christmas Eve and Christmas.

I understand and agree to pay the City of Lake Mary for officer-provided services with the understanding that the City of Lake Mary will compensate those officers for the services performed and provide Workers Compensation insurance through its provider in accordance with Florida Statutes. It does not constitute a waiver of the individual officer's rights.

Business Name (if applicable): _____

Print Name: _____

Signature: _____

Date: _____