

TOWN OF TUFTONBORO POLICE DEPARTMENT

P.O. Box 98, 240 Middle Road • Center Tuftonboro, NH 03816-0098 603-539-2284 • Fax 603-569-8642

APPLICATION FOR PRIVATE DETAIL

| Requesting Org | anization: |
|-------------------|--|
| Address: | |
| | |
| Contact Person: | |
| Date: | Time: |
| Function: | |
| Location of Det | ail: |
| | of Employment and/or Duties: Cruiser(s) Requested: [Yes] [No] # |
| pertaining to the | low acknowledges that I have read the terms and understand the rules and regulations contractual agreement in hiring a police officer(s) for the purpose of performing police ate detail officer. I fully understand and agree to the Administrative fees and billing a consists of: |
| | ~ An hourly rate of \$75.00 for police detail, which includes administrative fees ~ A minimum of four (4) hours of duty/employment ~ A 24-hour cancellation notification is required |
| I further acknov | rledge and agree to settle my account, in full, within thirty (30) days. |
| Signature: | Requesting Agent |
| | Patrol Supervisor |
| Application is _ | Approved Not Approved (Explain) |
| () Organization | n contacted on status of application. Date: |