



APPLICATION FOR POLICE SERVICES



POMPTON LAKES POLICE DEPARTMENT
25 LENOX AVENUE
POMPTON LAKES, N.J. 07442

(PLEASE FILL OUT SECTIONS I. AND II.)

I. APPLICANT SECTION

I HEREBY REQUEST THE SERVICES OF _____ POLICE OFFICERS.
FOR DUTY ON _____ FROM THE HOURS OF _____ TO _____

NAME OF ORGANIZATION: _____

NATURE OF SERVICES: _____

LOCATION: _____

PRINT NAME OF PERSON MAKING APPLICATION: _____

SIGNATURE OF PERSON MAKING APPLICATION: _____

DATE: _____

II. NAME AND ADDRESS OF PERSON TO BE BILLED FOR SERVICES

NAME: _____ PHONE# _____

ADDRESS: _____

**(NOTE: ALL CONTRACTORS/APPLICANTS CANCELLING SCHEDULED WORK
MUST CALL THE POLICE DEPARTMENT AT (973) 835-0400 AT LEAST TWO (2)
HOURS PRIOR TO THE SCHEDULED START TIME. OTHERWISE YOU WILL BE ASSESSED
AND SHALL BE RESPONSIBLE FOR PAYING A MINIMUM OF FOUR (4) HOURS PER OFFICER
AT THE OFFICER'S CONTRACTUAL RATE OF \$75.00 PER HOUR.**

III. (FOR POLICE DEPARTMENT USE ONLY)

POLICE OFFICER ASSIGNED:

Day: _____ Date: ____/____/____ Officer: _____/____ Hours: _____

Day: _____ Date: ____/____/____ Officer: _____/____ Hours: _____

Day: _____ Date: ____/____/____ Officer: _____/____ Hours: _____

Day: _____ Date: ____/____/____ Officer: _____/____ Hours: _____

Day: _____ Date: ____/____/____ Officer: _____/____ Hours: _____

SIGNATURE OF STAFF OFFICER MAKING ABOVE ASSIGNMENTS: _____

DATE: _____

PLEASE RETURN COMPLETED FORM TO LT. DEREK CLARK
FAX# (973) 831-1412