

GREEN COVE SPRINGS POLICE DEPARTMENT Application for Off-Duty Service



This application is required to engage the off-duty services of police officers for public safety, health and welfare services in addition to those already provided to the public. It is understood that this is a non-binding agreement. A minimum of 10 days notice should be given when requesting services. The Green Cove Springs Police Department may cancel this service without advance notice or cause at any time. The Green Cove Springs Police Department will attempt to place officers during the requested dates and hours. Because of emergencies, inability to find a police officer to work this request, may not be filled when requested. The Green Cove Springs Police Department will not permit an officer to work in the capacity of "bouncer" at a bar or other establishment where liquor is served. There is a three (3) hour minimum for all off-duty employment. A supervisor may or may not be required and will be determined on an individual basis.

Rate per hour:	Officer Supervisor	\$30.00 \$35.00		
Scheduling fee rate	e \$30.00 X the corresponding m hours scheduled 1hr – 12 hrs 13 hrs -50 hrs 51 hrs – 75 hrs 76 hrs – 150 hrs 151 hrs – up	umber of hours in the hours paid = 0 hrs = 3 hrs = 5 hrs = 10hrs = 15hrs	ne chart below:	
Business Name	:Friends of Augusta S	avage	Fax Number:	
Applicant:Hen	rietta Davis-Francis		Phone Number: (904)652-5491	
Address of Eve	_{nt:} Vera Hall Francis P	ark		
Mailing Addres	ss:1503 Martin Luther I	King, Jr., Blvd	, GCS, Fla 32043	
Contact Person	At Event: Henrietta Day	vis-Francis ₁	Phone Number: (904) 652-5491	
Type of Event:	Community Outreach			
Will alcohol be	served at the event? No	Numl	per of expected participants:300	
What are the of	ficer(s) duties: To provide	provide police pro	esence to maintain orderly conduct.	
Do you require	a uniformed officer? Yes	How 1	many? <u>1</u>	
Starting Date: <u>0</u> Starting Time: <u>1</u>	2/27/2021 Ending Da 0:00am Ending T	ate:02/27/2021 ime:1:00pm		
Other Commen	ts:			
Applicant Signa	ature:		Date: 01/25/2021	
Official Use O	nly ent Review:			
Approval: 🗌 Y	Yes No By:		Date:	