





v00[Wp]



Form must be completed entirely before being submitted for approval

**Event Information**

Date(s): \_\_\_\_\_ Time: \_\_\_\_\_ to \_\_\_\_\_

Event Description: \_\_\_\_\_

Location: \_\_\_\_\_

Contact Info(name,address,phone): \_\_\_\_\_

Payment Method: Check: \_\_\_\_\_ Cash: \_\_\_\_\_

Please read and initial each of the following:

- I understand that the Beckley Police Department holds the right to approve or deny any request for off duty security based on the information provided above. \_\_\_\_\_
- I understand that if the event is cancelled for any reason, I will make every effort to call the Beckley Police Department within 24 hours of the scheduled event and advise them that security is no longer needed. If I fail to do so, it will be my responsibility to pay each scheduled officer the minimum of three hours at \$20.00 per hour. \_\_\_\_\_
- I understand that the officer(s) may enforce federal, state and municipal laws. \_\_\_\_\_

I have read, understood, and agreed to all the above statements.

**Print name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**For official use:** Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Off duty Coordinator: \_\_\_\_\_ Chief: \_\_\_\_\_