



Monroe Township Police Department  
 125 Virginia Avenue  
 Williamstown, New Jersey 08094  
 (856) 728-9800



**EMPLOYMENT REQUEST CONTRACT AGREEMENT – EXTRA DUTY**

**Phone: 856-728-9800 x207 Fax: 856-728-2468**

**PLEASE PRINT**

Name of Applicant (Business/Organization/Individual) \_\_\_\_\_

Designated Representative: \_\_\_\_\_ Phone (Day): \_\_\_\_\_

Fax: \_\_\_\_\_

After Hours Contact & Number: \_\_\_\_\_ Pager/Cell & E-mail: \_\_\_\_\_

Address of Event: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Service Date(s)/Days/Hours to be Worked/Number of Officers Requested: \_\_\_\_\_

Officers Report to: \_\_\_\_\_ Predicted Attendance: \_\_\_\_\_

Description of Services Needed/Event Type: \_\_\_\_\_ Date/Time Taken By: \_\_\_\_\_

**Rates for Calendar Year 2018 (§ 69-20 & 21)**

**Churches & Schools: \$50/hour per police officer plus \$5/hour administrative charge**

**All requests other than churches & schools: \$60/hour (additional \$15/hour for non-county projects)**

*An additional administrative charge of \$5 per hour may be assessed to accounts that do not have sufficient deposits on hand prior to the date that services are rendered.*

*100% of anticipated costs are to be paid in certified funds prior to commencement of any work and further agrees to pay Monroe Township for any additional charges*

Officers will not be permitted to work under unsafe conditions and the on-duty supervisor may order the suspension of work or modification of any work site deemed to be a hazard to public safety. Any person, contractor or utility wishing to conduct work on, under or above the roadway to adhere to § 267-60 to 267-66 regarding Traffic Controls for Construction and Maintenance Operations.

**CANCELLATION POLICY**

If an extra-duty detail ends early, is cancelled upon the officer's arrival, or is deviated from the posted scheduled hours, the officer(s) will be paid, a **minimum, three (3) hours**. Cancellations by the customer shall be made **at least 12 hours** before the time the assignment begins. Cancellations for reasons of inclement weather must be made at least TWO (2) hours prior to the scheduled start of the detail. To request cancellation, contact 856-728-9800 x269. If no answer, contact 856-728-0800 and ask to speak to the Shift Supervisor.

I, \_\_\_\_\_, AS AUTHORIZED REPRESENTATIVE OF \_\_\_\_\_ HEREBY  
**ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THIS CONTRACT AND THE CONDITIONS, AND FURTHER  
 AGREE THAT I WILL ABIDE BY AND BE SUBJECT TO THESE CONDITIONS IN ALL RESPECTS.**

X \_\_\_\_\_  
*Signature of Permittee/Authorized Representative Date*

**OFFICE USE ONLY**

GRANTED – The above application is hereby granted together with the aforementioned Conditions are hereby adopted, by reference, and are made a part of and constitute the terms and conditions of this permit.

Chief of Police/Extra Duty Coordinator: \_\_\_\_\_ Date Approved: \_\_\_\_\_