

Please Print Legibly

**MAPLE SHADE POLICE DEPARTMENT  
EXTRA-DUTY EMPLOYMENT REQUEST FORM**

Date: \_\_\_\_\_ Name/Title: \_\_\_\_\_

Company Address: \_\_\_\_\_

Phone # (Office): \_\_\_\_\_ Phone # (Cell): \_\_\_\_\_

Job Description/Location to be performed: \_\_\_\_\_

Meeting Location (Prior to Job): \_\_\_\_\_

Number of Officers Requested: \_\_\_\_\_ Total Hours of Work: \_\_\_\_\_ Start time: \_\_\_\_\_ Estimated End Time: \_\_\_\_\_

Date(s) Officers Requested: \_\_\_\_\_ Additional Dates: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Emergency Contact Phone #: \_\_\_\_\_

\* You agree and acknowledge that by signing this form you **must** supply an Insurance Certificate naming the "Township of Maple Shade" as an additional insured and that certificate must be supplied to the Finance Office along with your escrow payment before any work with our officers can begin\* (**This requirement does not apply to PSE&G, Verizon and established township contractors**)

Signature of Company Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Chief: \_\_\_\_\_ Date: \_\_\_\_\_

Approved:  Not Approved:

Any request for extra-duty employment must be a minimum of 4 hours.

Failure of your organization to notify this agency two (2) hours prior to the start of any job that it has been canceled will result in your organization being billed for two (2) hours per assigned officer at the contracted rate. If the contractor fails to show up and the officer has reported to the job site, your organization will be billed for four (4) hours per assigned officer at the contracted rate.

Any road work related job request must have a traffic control plan that is compliant with the MUTCD that is provided to police along with the extra-duty employment request form.