



REQUEST FOR SECURITY OFFICERS

Name of Business/Company: _____

Mailing Address: _____

Phone Number: _____

E-Mail Address: _____

FAX Number: _____

Contact Person _____

Contact phone number: _____

Location of Detail: _____

Dates/Times Requested: _____

Number of Officers _____ Officer required to submit W-9: Yes No

Type of Security Officer Off-duty police Security guards

Uniform Plain Clothes

Marked Vehicle Unmarked Vehicle No vehicles

Method of Payment Check Cash Money order

Specify what exactly is expected of the officer(s):

(What type of security; type of business/establishment; anticipated crowd size; traffic control needed.)