

APPENDIX "A"



**REQUEST FOR PAID DUTY**  
Contracted Overtime Agreement

Part "A" – to be completed by the requestor / client / organization requesting the services of a St. Thomas Police Service Officer(s). (please print)

Date of Submission: \_\_\_\_\_  
Name of Organization: \_\_\_\_\_  
Requested by (name): \_\_\_\_\_  
Contact person: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
Mailing or billing address if different than above: \_\_\_\_\_

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Type of event: \_\_\_\_\_  
Will liquor permit be obtained? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_  
Date of event: \_\_\_\_\_  
Address / location of event: \_\_\_\_\_  
Times required: From \_\_\_\_\_ To \_\_\_\_\_  
Details of events:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of persons anticipated at event: \_\_\_\_\_  
Number of officers requested: \_\_\_\_\_  
Number of police vehicles required: \_\_\_\_\_

The above information will be reviewed after submission to the St. Thomas Police Service and the number of officers required may be changed. The requestor / client / organization will be notified of any changes accordingly.

Refer to Part "B" - "Terms of Agreement" for further information

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## Part “B” – “Terms of Agreement”

Police officers providing services under this agreement shall be required to perform only those duties which are normally performed by police officers.

The employment shall be of a nature and so located that officer(s) would be available for a call to emergency police duties.

The number of officer(s) and/or police vehicles indicated by the requestor / client / organization is subject to change by the Chief of Police and/or appropriate designate based on the information provided, the nature of the event, officer and public safety issues and concerns.

A minimum of two (2) officers will be contracted for duties in premises where liquor is served. The organization will be notified of any changes to the minimum numbers.

A completed “Request for Paid Duty – Contract Overtime Agreement” (Part “A”) and a signed acknowledgement (Part “B”) must be received by the St. Thomas Police Service at minimum, two (2) weeks prior to the scheduled event.

### **Rates:**

Hours of duty are a minimum of three (3) hours at the appropriate rate of pay. Current First Class Constable’s **hourly rate of pay** at time and one half.

**Administration fee:** ( for the administration of the policy and equipment)  
10%

**HST** will be added effective 01<sup>st</sup> July, 2010. For any contracted Paid Duties arranged between 01<sup>st</sup> May, 2010 and the implementation date of HST (01<sup>st</sup> July, 2010), where the event date is after July 01<sup>st</sup>, 2010 HST will also be applied.

**Vehicle rate:** means the fee that will be charged to the client where a police vehicle is required to complete a required Paid Duty - \$25.00 / hour.

All Paid Duties will be paid in full by the requestor / client / organization, at the time of acceptance of the application by the St. Thomas Police Service and prior to the Paid Duty being posted. If changes are necessary in the invoice, due to extended hours, the invoice will be amended and the amended payment collected and/or billed. Payment will be accepted during regular business hours (08:00 AM – 04:00 PM) Monday to Friday Excluding Statutory holidays via Cash, Debit and/or VISA along with the completed “Request for Paid Duty form” – APPENDIX “A” and the signed copy of the “Terms of Agreement” form – APPENDIX “B” at:

**The St. Thomas Police Service  
30 St. Catherine Street,  
St. Thomas, Ontario, N5P 2V8**

***Delinquent payments will result in suspension of further contracts for service.***

**Cancellation fees:** Where cancellation notification is not received by the St. Thomas Police Service, Officer in Charge, at minimum 24 hours prior to the scheduled commencement of the event, a minimum of 3 hours charge plus the administration fee will apply for each police officer booked for the Paid Duty event. Cancellation payments are due immediately upon receiving an invoice from the St. Thomas Police Service.

Cancellations must be made by calling the On-Duty Officer in Charge at the St. Thomas Police Service headquarters at: (519) 631-1224 ext 119

*By my signature below, I acknowledge that I have read and understood all "Terms of Agreement" contained in Part "B" of this contract, and that I accept and agree to abide by all "Terms of Agreement". Further, that all information provided in part "A" of this request for Paid Duty services is complete and accurate to the best of my knowledge.*

X \_\_\_\_\_  
(Signature of person requesting Paid Duty)

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

Requesting agency / organization: \_\_\_\_\_

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**For Administrative Use:**

Reviewed by: \_\_\_\_\_ date \_\_\_\_\_

Approved by: \_\_\_\_\_ date \_\_\_\_\_

Application paid In full: Yes \_\_\_\_\_ No \_\_\_\_\_

Receipt Issued: Yes \_\_\_\_\_ No \_\_\_\_\_ By: \_\_\_\_\_