PROVIDENCE POLICE DEPARTMENT POLICE DETAIL AGREEMENT

(1). Request for d	letail services	(descriptio	on):	
(2). Requested No	umber of offic	ers and ho	urs:	
a) DATE	FROM	TO	NO. OF OFFICERS	TOTAL HOURS
b)	FROM	TO	NO. OF OFFICERS	TOTAL HOURS
c) DATE	FROM	TO	NO. OF OFFICERS	TOTAL HOURS
d) DATE	FROM	TO	NO. OF OFFICERS	TOTAL HOURS
e) DATE	FROM	TO	NO. OF OFFICERS	TOTAL HOURS
f) DATE	FROM			
g) DATE			NO. OF OFFICERS	
h)	FROM	TO	NO. OF OFFICERS	
I)DATE	FROM	TO	NO. OF OFFICERS	

(6). Bank Reference:

(8). Complete Billing Address:

- (a). Four (4) hours minimum per officer.
- (b). Any time worked in any part of one-half (1/2) hour from the start of the detail shall be considered one (1) full hour. Example 4.5hrs rounds to 5hrs
- (c). Double time shall be charged for: Thanksgiving Day Eve, Thanksgiving Day, Christmas Eve, Christmas Day, New Year's Eve, New Year's Day, Holy Saturday, Easter Sunday.
- (d). If an arrest is made during a detail and is related to said detail, time for processing said arrest shall be included in the billing for the detail.
- (e). If details are to be requested on a regular basis, write "VARIOUS" where applicable.
- (3). Cancellation: To avoid billing, cancellation must be received by the Detail Office, at (401)243-6405, twelve (12) business hours prior to commencement of requested detail. The detail office is open from 7:00 AM to 3:00 PM, Monday through Friday (excepting Holidays). If cancellation is not received, a four (4) hour minimum for each of the requested detail officers shall be billed and owed from the company, agency, or individual, which requested the detail.
- **(4). Disputes:** To avoid billing with respect to disputes, a phone call must be received by the Detail Office, at (401) 243-6405, within one (1) business day of the dispute with a written letter sent within seven (7) business days of the dispute outlining same.
- (5). Payment: Payment shall be made to the City Controller's Office, Providence City Hall, 25 Dorrance Street, Providence, RI 02903, (401) 458-4198 ext 11534, within thirty (30) days of invoice date. Payment by company checks, money orders and certified bank checks only.

 Prepayment is required for all new accounts

Interest at eighteen (12%) percent per annum shall accrue after thirty (30) days. The cost of collection, if necessary, together with reasonable attorney's fees, shall be the responsibility of the company requesting the detail and failing to make payment when due. Personal checks are not acceptable and cash payments are not permitted.

Bank Name:	Type of Account:	Account Number:
(7). Credit Card Refer	ence (attach copy):	
<u>Credit Card Type</u> :	Account Number:	

Federal Tax ID #	
Company Address:	***************************************
Billing Address (if different from above)	•
	MARINE CONTROL OF THE
Contact Person:	THE THE PARTY AND ADDRESS OF THE PARTY AND ADD
Phone Number:	
Fax Number:	
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	, hereby request police detail(s) as descr of Date

EXHIBIT A

NEW BILLING RATES FOR POLICE DETAILS STARTING ON 7/1/22:

<u>Officers</u>		Plain Clothe	s Detectives	Mounted Horseperson
Patrol officer	76.03	Patrol Officer	84.91	Flat Rate 82.69
Sergeant	86.92	Sergeant	86.62	
Lieutenant	94.71	Lieutenant	94.71	
Captain	101.80	Captain	113.78	

If a police car is also needed then an additional \$15.00 per hour per vehicle is added to the bill. If a police boat is also needed then an additional \$75.00 per hour for boats 27 feet long and \$45.00 per hour for boats 15 feet long and 19 feet long.

For credit card payments please add thirty cents (\$.30) per hour

These rates may change without notice, at the time of your request please verify billing rates.

CREDIT CARD AMOUNTS:

<u>Officers</u>		Plain Clothes Detectives		Mounted Horseperson	
Patrol officer	76.33	Patrol Officer	85.21	Flat Rate	82.99
Sergeant	87.22	Sergeant	86.92		
Lieutenant	95.01	Lieutenant	95.01		
Captain	102.10	Captain	114.08		

Please initial this exhibit and return it along with pages 1 through 3 of the attached agreement. Revised 6/28/22