



Waterloo Regional Police Service Paid Duty Request

Region of Waterloo Customer #: _____

Date of Paid Duty: _____ Time Requested: From: _____ To: _____ Total # of Hours: _____

Type of Event: _____

Will Alcohol be Served: Yes No # of Participants Expected: _____ #. of Officers Requested: _____

Location of Paid Duty: _____

Type of Paid Duty: Traffic Direction Security Escort/Oversize Load Licensed Premise Crowd Control Funeral Escort

Specific Duties: _____

Equipment Required (please indicate # required) _____ Cruiser _____ Motorcycle _____ Canine _____ Bicycle No Additional Equipment

Company or Group: _____

Billing Address: _____

Name of Contact Person: _____

Telephone No.: _____ Cell No.: _____ Email Address: _____

**Please e-mail the completed and signed forms to the PaidDutyCoordinator@wrps.on.ca.
If you have any questions you can reach the Paid Duty Coordinator at (519) 653-7700 extension 8629.**

FOR POLICE USE ONLY

Received by: _____ Date: _____

Comments:

Approved By: _____ Date: _____
(Signature, Rank and Badge No.)