



HILLSBOROUGH COUNTY SHERIFF'S OFFICE (HCSO)
REQUEST FOR OFF DUTY DEPUTIES



BUSINESS/AGENCY NAME: _____

NAME OF CONTACT: _____ PHONE: _____

E-MAIL: _____ FAX: _____

Date(s) Needed: _____ Start Time: _____ End Time: _____

Date(s) Needed: _____ Start Time: _____ End Time: _____

Date(s) Needed: _____ Start Time: _____ End Time: _____

Date(s) Needed: _____ Start Time: _____ End Time: _____

Date(s) Needed: _____ Start Time: _____ End Time: _____

Number of Deputies Requested: _____ Marked Car Needed: Yes No

Maximum Number of People Expected to Attend: _____ Will Alcohol Be Consumed: Yes No

Address of Event: _____
Street City State Zip

Billing Address: _____
Street City State Zip

Nature of Duties:

Deputies Report To: _____

Deputy Payment: Paid Upon Completion Paid Within 2 weeks of completion

Deputy Wages: \$30.00 Regular Rate / \$36.00 Federal Holiday Rate per deputy per hour (3 hour minimum)
PAYABLE TO THE DEPUTY. Wages payable to the deputy will not be invoiced by HCSO.
Customers are responsible for recording hours worked by the deputy, providing timely payment,
and issuing IRS forms at year-end.

HCSO Fees: Fees below and / or applicable specialty fees are billed by HCSO and are due upon
receipt of statement. Checks are made payable to Hillsborough County Sheriff's Office.
Administrative Fee - \$4.00 per deputy per hour.
Mileage - \$0.25 per mile when a HCSO vehicle is used during the job.
Engine Hours - \$1.00 per hour when HCSO vehicle overhead lights are flashing at jobsite (traffic
control, road projects, etc.).

Cancellations: Cancellations must be in writing and received no later than two (2) hours in advance of starting
time. If you fail to cancel your job timely, you will be required to pay \$90.00 to each deputy
and a \$12.00 administrative fee payable to Hillsborough County Sheriff's Office.

Contact Info: Business Hours (M-F 8am-5pm): 247-8280 After Hours / Holidays: 247-8105
Fax Number: 242-1859 After Hours / Holidays Fax: 242-1812
E-mail Address: OffDutyAccts@hcsotampa.fl.us

Requests: Requests for off-duty deputies must be made in writing, via fax or e-mail. An Indemnification
Agreement and W-9 must be on file with HCSO as a pre-requisite for approval. HCSO reserves
the right to refuse to provide off-duty deputies for any request that violates Florida State Law,
HCSO policy, or creates a conflict of interest with HCSO.

Signature: I have read, understand, and agree to the requirements outlined above. I also understand this
request may not be filled due to the voluntary nature of the off-duty program.

Signed: _____ Date: _____

Purchasing Use Only: Entered by: _____ ABN: _____ Date: _____ Verified by: _____ ABN: _____ Date: _____

Off-Duty: New Cust: _____ Entered by: _____ ABN: _____ Date: _____ Verified by: _____ ABN: _____ Date: _____