

CHANGES FOR EXISTING SPECIAL DUTY JOB REQUESTS

Phone: (808) 723-3575
 Fax: (808) 768-1699
 Email: specialduty@honolulu.gov

IF YOU NEED TO CANCEL YOUR JOB DURING NON BUSINESS HOURS PLEASE CALL: 1-855-559-3858 AND FAX A COPY OF THIS COMPLETED REQUEST FORM TO: (808)-768-1699 PLEASE PRINT LEGIBLY

Company or Individual's Name: _____ Contact Name: _____ Fax #: _____

Job Location: _____ Phone #: _____ Email: _____

	Job 01		Job 02		Job 03		Job 04		Job 05	
	<input type="checkbox"/> Cancel Job 01		<input type="checkbox"/> Cancel Job 02		<input type="checkbox"/> Cancel Job 03		<input type="checkbox"/> Cancel Job 04		<input type="checkbox"/> Cancel Job 05	
Info	Original Order	Change	Original Order	Change	Original Order	Change	Original Order	Change	Original Order	Change
HPD #										
Job Date										
Amt Of Officers										
Start Time										
End Time										
Total Hours										
Equipment										
Rank										
Payment Type										
Officer Rate										

New Location **Job 01:** _____

New Location **Job 04:** _____

New Location **Job 02:** _____

New Location **Job 05:** _____

New Location **Job 03:** _____

Additional Comments

I understand and agree that I must follow all current Special Duty policies. I understand and agree to pay the officer's fee directly to the officer assigned and any other fees (equipment, mileage, administrative, and workers compensation) associated with my request to The City & County of Honolulu. I understand that officers participate in the Special Duty Program on a voluntary basis and that there is no guarantee that my request will be filled. It is my responsibility to follow up with the Special Duty Section, during normal business hours, to determine if my changes have been received. I understand that there is a 2-hour minimum fee for special duty assignments. If I do not notify the Special Duty Section of the cancellation in writing 24 hours prior to the start of the assignment, I will be assessed the fee for each officer I requested.

Requestor's Signature: _____

Print Name: _____

Date: _____