



**COLONIAL HEIGHTS POLICE DEPARTMENT**  
**100-A Highland Avenue**  
**Colonial Heights, Virginia 23834**



**Guidelines and Application for Employing Off-Duty Officers**

Contact: Captain Robert Ruxer  
 E-mail: [ruxerr@colonialheightsva.gov](mailto:ruxerr@colonialheightsva.gov)  
 Mon.-Fri. 8:30 am – 4:30 pm      804-520-9312(Office)  
 In case of emergency, contact the Shift Supervisor at 804-520-9300

*\*The term **Secondary Employer** refers to the business, organization, group or individual that solicits for and compensates a law enforcement officer for employment that is indigenous to their law enforcement authority, commonly referred to as "off-duty employment."*

**GUIDELINES**

1. The Secondary Employer should submit a request for off-duty employment at least five (5) business days prior to the date of employment. In emergency situations, this requirement may be waived.
2. Off-duty employment is voluntary for officers; therefore, while every attempt will be made to fill requests, manpower cannot be guaranteed.
3. The Secondary Employer will be required to compensate the assigned officer(s) for a minimum of three (3) hours, even if the event is of a shorter duration. The Police Department establishes the rate of pay for off-duty employment. Current rates are \$30.00 per hour for an officer and \$35.00 per hour for a supervisor, if one is required.
4. The Secondary Employer must compensate the officer(s) for his/her services at the conclusion of the assignment, unless other arrangements have been made with the Off-duty Coordinator for the Police Department. Only a monetary payment can be accepted.
5. The Secondary Employer must notify the Off-duty Coordinator (or Shift Supervisor, if outside of normal business hours) of any cancellation at least 24 hours prior to the date of the scheduled employment. Failure to do so will require the Secondary Employer to compensate the assigned officer(s) for a minimum of three (3) hours. If an event is cancelled due to inclement weather, and there has been prior notice given to the Off-duty Coordinator of a possible weather cancellation, no compensation will be required.
6. For events that require multiple officers, the Police Department shall be the final authority in determining the minimum number of officers required to police a particular event. If more than three (3) officers are hired for a single event, a supervisor must be assigned and hired as well. The Police Department will determine the supervisor-to-officer ratio for larger events.
7. The Secondary Employer shall exercise no control over a hired officer's enforcement of laws during the off-duty employment. The Secondary Employer will not interfere and/or attempt to influence decisions or actions made by the Police Department's personnel. Officers will not enforce any rules or regulations established by the secondary employer that are not otherwise violations of the law. Off-duty officers remain employees of the Colonial Heights Police Department and are subject to all laws, departmental policies and procedures, and they may be subject to emergency call-back at any time.
8. The City of Colonial Heights does not provide liability insurance coverage or worker's compensation insurance unless the officer is injured while initiating an action under the authority of his office as a sworn police officer.
9. The Secondary Employer must fulfill all city and state permit and licensing requirements prior to the event.

**APPLICATION**

Business/Organization Name:			Applicant Name:		
Phone Number:		Fax Number:		E-mail:	
Event Location:	Date of Event:	Ongoing: Yes No	Start Time:	End Time:	
On-site Contact Person:	No. Officers Requested:	Anticipated Attendance (if relevant):	Alcohol Served: Yes No	ABC Permit Required/Obtained: Yes No	
Parade/Demonstration Permit Required/Obtained: Yes No		Will weather conditions affect the ability for event to proceed: Yes No			
Request officer(s) for inside security, outside security, traffic control, etc. (Explain):					

Signature of Secondary Employer Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by Department Administrator: \_\_\_\_\_ Date: \_\_\_\_\_