



Covina Police Department
 444 North Citrus Avenue
 Covina, CA 91723
 (626) 384-5623

**PRIVATE PATROL OPERATOR PERMIT
 APPLICATION PACKET**

<http://www.covinapd.org/special-permits>

FEE \$950

DATE: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

CONTACT NUMBER: _____

SECURITY BOND (ATTACH COPY): _____

A. OWNER(S) AND LOCAL CONTACT(S)/MANAGEMENT: Provide Name, Title, Phone, & Email

1. _____
2. _____
3. _____
4. _____

B. LOCATION(S) TO BE PATROLLED:

1. Business Name: _____
 - 1.1. Address: _____
 - 1.2. How location will be patrolled: _____
 - 1.3. Proposed schedule: _____

2. Business Name: _____
 - 2.1. Address: _____
 - 2.2. How location will be patrolled: _____
 - 2.3. Proposed schedule: _____

3. Business Name: _____
 - 3.1. Address: _____
 - 3.2. How location will be patrolled: _____
 - 3.3. Proposed schedule: _____

4. Business Name: _____
 - 4.1. Address: _____
 - 4.2. How location will be patrolled: _____
 - 4.3. Proposed schedule: _____

C. DESCRIPTION OF PATROL VEHICLES (ATTACH COLOR PHOTOS OF FRONT, SIDE, AND REAR)

	<u>Make/Model</u>	<u>Color</u>	<u>License No.</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

D. DESCRIPTION OF GUARD UNIFORMS (ATTACH COLOR PHOTO)

1. Uniform shirt type and color: _____
2. Uniform pant type and color: _____
3. Outerwear color: _____

E. DESCRIPTION OF BADGE (ATTACH COLOR PHOTO)

F. LIST ALL GUARD INFORMATION (ATTACH COPY OF GUARD CARD AND ID FOR EACH GUARD)

	Name	CA DL or ID #	Guard Card #	Additional Permit # (firearm)
1				
2				
3				
4				
5				
6				
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