



PUBLIC SERVICE REQUEST

Arroyo Grande Police Department

Name

Address

City State Zip Code

Phone Number

Organization Date of Event

Service Requested Time of Event

Set up Time

Location of Event

Age Group/Grade No. Attending

This section for AGPD Use Only

Date Received Received By

Chief of Police Approval

Personnel Assigned 1

2

3

Materials Needed

Equipment Needed

Assigned By Date

TO BE COMPLETED BY PERSONNEL ASSIGNED AFTER THE EVENT

Number in Attendance Time Spent at Event

Comments