

**CITY OF GULFPORT  
SPECIAL DUTY AGREEMENT  
FOR PUBLIC SAFETY**

**I. PURPOSE**

This agreement is in accordance with governing off duty and extra duty employment of the Fire Department. It is in the best interest of the City of Gulfport to ensure that its resources are used fairly and equitably and to this extent, the following agreement for extra duty services has been established.

**II. AGREEMENT**

Contractors may request a certain number of employees, but the City reserves the right to require additional personnel as may be required for safety and operational integrity.

The charges for services shall be as follows:

1. Firefighter/EMT	\$51.00 per hour
2. Firefighter/Paramedic	\$51.00 per hour
3. Fire Supervisor (if three or more firefighters, or in certain circumstances)	\$55.00 per hour
4. Fire Engine	\$35.00 per hour
5. Marine Vessel (when required to perform duties):	\$25.00 per hour

Requests for off-duty public safety services requires advance notice. Requests submitted fewer than five business days before the event may not be honored.

The minimum charge for any extra duty agreement shall be three hours per employee for any contracted job.

The above fee is subject to change upon 14 days notice given by the Gulfport Public Safety Department to the Contractor.

The Contractor will be billed by the Administrative Services Department of the City of Gulfport, Florida.

Failure to pay the bill may result in prohibition of the Contractor from participating in future extra duty agreements as well as any civil action allowed by law.

### **III. CANCELLATION**

The City may cancel the agreement at any time with or without notice if deemed in the best interest of the City.

The Contractor may cancel the agreement or change service hours by contacting the Fire Department 24 hours in advance of the time of service.

Failure to cancel within 24 hours advance notice shall result in the Contractor being billed for a three-hour minimum charge.

### **IV. STATUS OF PERSONNEL PERFORMING SPECIAL SERVICES**

City employees performing special services under the terms of this agreement shall be deemed to be on duty as representatives of the City of Gulfport, and their principle responsibility shall be to the City and to the general public. Any special assignment under this agreement shall terminate in the event of an emergency; a situation to which the special duty employee deems it is appropriate to respond for public safety; or in any situation where the special duty employee is ordered by a supervisor to terminate the special duty assignment and respond to a matter affecting the general public. In the event of such an interruption, the Contractor will not be required to pay for any time the employee is not actually working the extra duty services.

The Contractor understands that the City assumes no liability for any damages resulting from the services performed by the special duty employee in connection with duties under this agreement. In the event a special duty employee's services are interrupted for the aforementioned reasons, it is understood that the City shall assume no liability for any damages that may occur during the suspension of services.

**V. CONTRACTOR REQUEST**

Name of Contractor \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City) (Zip)

Billing Address \_\_\_\_\_  
(If different from above address)

Alternate Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

Description of duties requested: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Extra Duty Date(s):

Day/Date \_\_\_\_\_ Hours From \_\_\_ To \_

Personnel requested: EMT & Paramedic  
\_\_\_\_\_

Day/Date \_\_\_\_\_ Hours From \_\_\_\_\_ To \_\_\_\_\_

Personnel requested: \_\_\_\_\_

Day/Date \_\_\_\_\_ Hours From \_\_\_\_\_ To \_\_\_\_\_

Personnel requested: \_\_\_\_\_

Day/Date \_\_\_\_\_ Hours From \_\_\_\_\_ To \_\_\_\_\_

Personnel requested: \_\_\_\_\_

Day/Date \_\_\_\_\_ Hours From \_\_\_\_\_ To \_\_\_\_\_

Personnel requested: \_\_\_\_\_

**I have read and understand this agreement.**

\_\_\_\_\_  
**Contractor Signature** **Date**

**VI. PUBLIC SAFETY DEPARTMENT REVIEW (to be completed by city staff)**

- 1. Are the requested services lawful and in compliance with applicable policies? YES NO
- 2. Is the number and type of personnel requested by the contractor sufficient to perform the required duties? YES NO
- 3. Does the Gulfport Public Safety Department have the resources required to perform the requested duties? YES NO

If the answer to any of the above questions is "NO," provide an explanation:

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This extra duty detail will require the following resources:

\_\_\_\_\_ Firefighter/EMT @ \$51.00/hr X \_\_\_\_\_ hours = \$ \_\_\_\_\_

\_\_\_\_\_ Firefighter/Medics @ \$51.00/hr X \_\_\_\_\_ hours = \$ \_\_\_\_\_

\_\_\_\_\_ Fire Supervisors @ \$55.00/hr X 2 days \_\_\_\_\_ hours = \$ \_\_\_\_\_

\_\_\_\_\_ Fire Apparatus @ \$35.00/hr X 2 days \_\_\_\_\_ hours = \$ \_\_\_\_\_

**Total for Services Required** \$ \_\_\_\_\_

If this total represents more resources than requested, the contractor must be notified. Indicate the date, time, and name of employee making such contact, if required:

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\_\_\_\_\_  
Fire Chief Date

**VII. SCHEDULED PERSONNEL (to be completed by city staff)**

Once this agreement has been approved by the Chief or his designee, or designated Fire Lieutenant shall arrange scheduling of required personnel.

Fire Department Resources Assigned:

Day/Date \_\_\_\_\_ Hours From \_\_\_\_\_ To \_\_\_\_\_ FF/Medic \_\_\_\_\_

Day/Date \_\_\_\_\_ Hours From \_\_\_\_\_ To \_\_\_\_\_ FF/Medic \_\_\_\_\_

Day/Date \_\_\_\_\_ Hours From \_\_\_\_\_ To \_\_\_\_\_ FF/Medic \_\_\_\_\_

Day/Date \_\_\_\_\_ Hours From \_\_\_\_\_ To \_\_\_\_\_ FF/Medic \_\_\_\_\_

Day/Date \_\_\_\_\_ Hours From \_\_\_\_\_ To \_\_\_\_\_ Supervisor \_\_\_\_\_

Apparatus needed: \_\_\_\_\_

Copy to:

Fire Chief  
Personnel Assigned