



**STATE OF CONNECTICUT**  
**DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION**  
Special Duty Coordinator's Office

To: All Contractors

From: The Special Duty Coordinator

Date: Effective July 1, 2017

Re: Employment of State Police Personnel at Outside Overtime Assignments

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The employment of State Police personnel for outside assignments shall encompass the following conditions:

1. Requests for State Police personnel **must be made in writing at least one (1) week in advance through the Special Duty Coordinator's Office via facsimile (860) 706-1407 or emailed to [specduty.clerk@ct.gov](mailto:specduty.clerk@ct.gov) and will only be accepted on the form provided.** Regular business hours are Monday through Friday 0730 hours (7:30AM) to 1730 hours (5:30PM). Requests will be accepted only during the hours 0730 hours 1730 hours (5:30 pm) Monday through Friday. All requests submitted after 1630 hours (4:30PM) may not be filled until the following business day.

**THERE IS NO GUARANTEE THAT ANY REQUEST MADE WITH LESS THE 24 HOUR NOTICE TO THE START OF THE JOB CAN BE ACCOMIDATED.**

2. Please be reminded that all time requests must be made in military time. (Example: 01:00 PM = 1300 hours - 08:00 PM = 2000 hours)
3. A minimum of four (4) hours for each Trooper/Sergeant assigned will be billed, unless the Special Duty Coordinator's Office or State Police Message receive **notification of cancellation at least twenty-eight (28) hours in advance of the scheduled start time.**
  - A. During regular business hours Monday through Friday 0730-1730 hours, cancellation notifications must be made in writing directly to the Special Duty Coordinator's Office via facsimile **(860) 706-1407**.
  - B. After regular business hours, weekends or holidays, cancellation notifications must be made in writing to the State Police Message Center via facsimile **(860) 685-8346** or via email [dps.messagecenter@ct.gov](mailto:dps.messagecenter@ct.gov).

4. A rate of \$128.14 per hour per Trooper assigned or \$162.18 per hour per Sergeant assigned for OPA (Other Project Assignment) overtime with a four (4) hour minimum will be charged. These rates include costs associated with the uniformed personnel, cruiser, equipment and meals. The mealtimes will not be charged to the employer. These rates are effective until June 30, 2018.
5. Assignments of State Police personnel are made on a rotating basis by computer regardless of rank (Trooper or Sergeant), in accordance with department policy and applicable labor contracts.
6. A Sergeant is assigned for every four (4) Troopers assigned to any one (1) project on the same workday and time. (Example: 4 Troopers = 1 Sergeant or 8 Troopers = 2 Sergeants) In these cases, the Sergeant will act as the supervisor as well as control traffic post(s) and provide the relief of personnel.
7. Assignments will include ½ hour of travel time to job site and ½ hour of travel time from the job site per Trooper/Sergeant assigned.
8. The wishes of the contractor shall be given full consideration at all times by assigned personnel, however, it must be understood that the assigned personnel are not under the command or control of the contractor.
9. It is the contractor's responsibility to make sure that the site foreman or authorized designee verifies the hours worked and signs the DPS-693-C form (HCP or OPA Project Overtime Report) for each Trooper/Sergeant assigned and retains the contractor's copy of the DPS-693-C form.
10. **Forms are to be signed by the Foreman or his designee, at the completion of the assignment.**



**STATE OF CONNECTICUT**  
**DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION**  
**Special Duty Coordinator's Office**  
**REQUEST AND CANCELLATION FORM FOR STATE POLICE TRAFFIC SERVICES**  
Trooper \$128.14 Per Hour  
Sergeant \$162.18 Per Hour  
**RATES THROUGH JUNE 30, 2018**  
OPA

Company Name: \_\_\_\_\_

Meeting Location: \_\_\_\_\_ Town: \_\_\_\_\_

|     | DATE(S) | TIME | NUMBER OF TROOPER(S) | (Existing Request) |    | (Existing Request)        |    | CANCEL                   |
|-----|---------|------|----------------------|--------------------|----|---------------------------|----|--------------------------|
|     |         |      |                      | TIME CHANGE        |    | CHANGE NUMBER OF TROOPERS |    |                          |
| 1.  |         |      |                      | FROM               | TO | FROM                      | TO | <input type="checkbox"/> |
| 2.  |         |      |                      | FROM               | TO | FROM                      | TO | <input type="checkbox"/> |
| 3.  |         |      |                      | FROM               | TO | FROM                      | TO | <input type="checkbox"/> |
| 4.  |         |      |                      | FROM               | TO | FROM                      | TO | <input type="checkbox"/> |
| 5.  |         |      |                      | FROM               | TO | FROM                      | TO | <input type="checkbox"/> |
| 6.  |         |      |                      | FROM               | TO | FROM                      | TO | <input type="checkbox"/> |
| 7.  |         |      |                      | FROM               | TO | FROM                      | TO | <input type="checkbox"/> |
| 8.  |         |      |                      | FROM               | TO | FROM                      | TO | <input type="checkbox"/> |
| 9.  |         |      |                      | FROM               | TO | FROM                      | TO | <input type="checkbox"/> |
| 10. |         |      |                      | FROM               | TO | FROM                      | TO | <input type="checkbox"/> |

Is this a new Job? ☐ Yes ☐ No

Contact Person/Foreman \_\_\_\_\_ Cellular Number (\_\_\_\_) \_\_\_\_\_ \*

Subcontractor Information \_\_\_\_\_

**Email** \_\_\_\_\_ \*

I have read and understand the Department of Public Safety Division of State Police rules for Special Duty Overtime assignments.  
Signature on DPS-693-C form states hours worked are correct and company will be billed for those hours.

**\*THE SPECIAL DUTY COORDINATOR'S OFFICE WILL BE UTILIZING AN EMAIL NOTIFICATION SYSTEM TO  
CONFIRM REQUESTS HAVE BEEN RECEIVED AND TROOPERS ASSIGNED.**

**THERE WILL BE A FOUR (4) HR MINIMUM CHARGE WITHOUT A TWENTY-EIGHT (28) HR CANCELLATION NOTICE**

\_\_\_\_\_  
(Signature and Title of Company Representative)

\_\_\_\_\_  
(Date)



**STATE OF CONNECTICUT**  
**DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION**

**Special Duty Coordinator's Office**

**CONTRACTOR BILLING INFORMATION  
FOR STATE POLICE TRAFFIC SERVICES**

Trooper \$128.14 Per Hour

Sergeant \$162.18 Per Hour

**RATES THROUGH JUNE 30, 2018**

OPA

|                                           |  |
|-------------------------------------------|--|
| <b>Company Name:</b>                      |  |
| <b>Address:</b>                           |  |
| <b>Billing Address:</b>                   |  |
| <b>City/State/Zip:</b>                    |  |
| <b>Telephone:</b>                         |  |
| <b>Facsimile:</b>                         |  |
| <b>Contact Person For Billing:</b>        |  |
| <b>Federal Employers ID Number:</b>       |  |
| <b>Social Security Number:</b>            |  |
| <b>Tax Exempt Number (if applicable):</b> |  |

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