

SC STATE TRANSPORT POLICE
P.O. BOX 1993 BLYTHEWOOD S.C. 29016
CONTRACTOR REQUEST FOR ESCORT (TERMS & CONDITIONS)
Phone: #803-896-5500 Fax: #803-896-5526

Date of Request:

STP Contact: **Kathy Loy/Sgt. Matt Goff**

Phone: 803-896-5500 Email: STPescorts@scdps.gov

Requesting Contractor (Company): _____
Address: _____

Company Representative (Agent): _____
Phone: _____ Email: _____

The above Company Agent request the State Transport Police to make available # _____ State Officer(s) to provide marked police escorts(s) for # _____ movement(s) of oversized vehicles/loads as required by D.O.T. permit.

ESCORT INFORMATION:

Origination Location: _____
Destination Location: _____
Origination Date: _____ Origination Time: _____
Est. Completion Date: _____ Est. Completion Time: _____

Load Dimensions : Weight-_____ Width-_____ Length-_____ Height-_____

TERMS for ESCORT SERVICE:

Services shall be rendered at an inclusive rate of \$50.00 per hour for each Officer. Billed time shall include travel time to and from the Officer's residence and all time during which the Officer is made available for an escort. **There will be a minimum charge of two (2) hours per Officer.** The company will reimburse the Division (STP) mileage driven by the officer to and from the officer's residence and during the entire escort. **Effective July 1, 2022, the rate is calculated at \$0.625 per mile.**

State Transport Police Officers will be compensated at the completion of the escort.

CANCELLATIONS/DELAYS:

Cancellations must be made more than 24 hours prior to the origination time specified above. Notice of cancellation shall be made by speaking to the Transport Police Captain contact or his designee. Failure to timely cancel an escort request shall obligate requestor to pay an administrative fee. This fee will be a minimum charge of \$100.00 per Officer. For any cancellation received after Officers have been dispatched to the assembly point or delays in excess of two hours following the designated origination time shall be deemed a cancellation and a minimum charge of four (4) hours per officer will be assessed.

STP CONTRACTOR REQUEST MUST BE SIGNED AND EMAILED BACK TO STATE TRANSPORT POLICE 48 HOURS PRIOR TO THE ESCORT (NOT INCLUDING WEEKENDS).

By signature below Agent and Company acknowledge responsibility for payment of services as specified herein.

Typed/printed
Name: _____
Signature: _____
Date: _____

Drivers
Name/Cell # _____

