



CITY OF RICHMOND
POLICE DEPARTMENT
BRYAN T. NORWOOD
CHIEF OF POLICE



Name of Funeral Home Requesting Services

Address: _____

Deceased: _____

Location of Funeral: _____

Date of Funeral: ____/____/____ Day of Week: _____ Time: _____

Location the office should report to: _____

Time Officer should report _____ Location of Burial: _____

Route of Procession: _____

Requested by _____ Contact Number _____

Additional Information or Special Request

ALL REQUESTS MUST BE RECEIVED AT LEAST 48 HOURS IN ADVANCE. MONDAY
REQUEST MUST BE RECEIVED BY 4PM ON FRIDAY BEFORE THE FUNERAL.

RETURN FAX TO: Sergeant Coretta Monts, Outside Employment Coordinator

Office Number: 804-646-0445
Fax Number: 804-646-0446
Email: coretta.monts@richmondgov.com

Officer Assigned: _____

Payment to officer by check or money order for \$84.00/Holidays \$126.00