

**TOWN OF SKOWHEGAN
APPLICATION FOR APPOINTMENT AS A CIVIL CONSTABLE**

Name: _____ Date: _____

Address: _____ DOB: _____

Affiliated Business Name (If any): _____

Business Address: _____

Home Phone: _____ Cell Phone: _____

Business Phone: _____ Email: _____

I swear that I am at least 18 years of age and a legal citizen of the State of Maine and of the United States.

I understand that appointment is strictly for the purpose of serving civil process, and that I have no powers of arrest, nor do I have permission nor authority to carry or use a firearm in the course of my duties.

I understand that I am obligated to submit annual reports to the Chief of Police of my activities in Skowhegan.

I understand that as part of this application, I am subject to a criminal back ground check.

Signature

I have attached:

- A. Evidence of adequate training for the functions of the position;
- B. Evidence that I have a performance bond in an amount not less than \$500.00 (with two sureties) to be signed by the Municipal Officers;
- C. Evidence of active general liability insurance of at least \$400,000.00 with the Town of Skowhegan named as an additional insured; and
- D. Authorization for criminal background check.
- E. Payment in the amount of the annual insurance premium charged to the Town – currently \$358.00 in 2015 – to be adjusted annually, dependent upon increases by the Town’s police liability coverage provider.

See 14 M.R.S.A. Sec 703, 30-A M.R.S.A. Sec. 2526(3) and 2673(1).

Name: _____

Date: _____

Criminal Back ground Check completed.

Pass: ____

Fail: ____

Date: _____

Signature – Chief of Police

This application for appointment as a Civil Constable is hereby:

____ Approved

____ Denied

This approval expires one year from the date of approval.

Signed and Dated at Skowhegan, Maine this ____ day of _____, 20 ____.

Chairman

Selectman

Vice Chairman

Selectman

Selectman