

[CITY] POLICE DEPARTMENT

123-456-7890
no_reply@example.com

Street
town, State
ZIP

[STATE] COUNCIL MEMBER,

I humbly request that my department be considered for the Hide Lock Take Insurance Council & Agency Program. We support the Hide Lock Take program and actively work with our community in the fight against auto crimes.

Currently our city faces a growing auto crime trend with [% or victim count fact/data]. Our officers who respond to these cases are far too few in comparison to the accounts and claims received. Due to this fact and recent budget cuts along with redistribution of funds orders, we simply cannot keep up.

Hide Lock Take is a successful awareness method that can be implemented by my department in conjunction with the community to have a much larger impact and effect on these types of crimes than any amount of officers could solely.

With your help and the help of Hide Lock Take, we plan to create a campaign and program launch that will involve local broadcast media, social media, and community outreach methods. We would be grateful and extremely honored to receive these signs and implement the program in our city.

If you have a need for any questions answered or would like to contact me, you can do so using the methods supplied here. Thank you for the consideration and support of the [City] Police/Sheriffs Department.

First, Last Name
POSITION/TITLE

Phone

Email