



Officer Equipment Checklist

1. Officer Information

Officer Name: _____

Date: _____

Shift: Morning Midday Afternoon Evening Overnight

Post / Site Assignment: _____

2. Required Daily Carry Equipment

Personal Duty Gear:

- Clean, complete uniform
- Black Flag ID badge visible
- Duty belt properly fitted
- Radio (charged; spare battery if issued)
- Flashlight (charged; functioning)
- Notebook & pen
- Smartphone / work phone (if provided)
- Whistle (if required)

Safety & PPE:

- Gloves (nitrile or cut-resistant)
- High-visibility vest (if required)
- First-aid pouch
- Face mask (if site required)

Access Tools:

- Keys / fobs / access cards
- Master key (if assigned)
- Gate opener / remote (if applicable)

3. Optional or Post-Specific Equipment

- Body camera (charged; memory cleared)
- Pepper spray (if authorized)
- Baton (authorized posts only)
- Handcuffs + key (if permitted)
- Trauma/Tourniquet kit (schools, events)
- Metal detector wand (events, nightclubs, schools)
- Portable air horn
- Patrol clock / checkpoint verifier
- Visitor badges / stickers
- Incident report forms
- Parking citations / warnings

4. Vehicle-Based Equipment (If Assigned a Patrol Vehicle)

Vehicle Safety Gear:

- First aid kit
- Road flares / cones
- Fire extinguisher
- Jumper cables
- Hazard lights functioning
- Spare radio charger

Operational Gear:

- Patrol log clipboard
- Flashlight charger
- Extra gloves
- Extra batteries
- AED (if provided)

Vehicle #: _____ Mileage Start: _____ End: _____

5. Equipment Function Test

Electronics:

- Radio check completed
- Flashlight test
- Body camera recording verified
- Phone functional
- Checkpoints scanning correctly

Mechanical Equipment:

- Baton secured
- Handcuffs operable
- Keys verified

Safety Items:

- Gloves accessible
- Trauma kit present (if required)

Notes:

6. End-of-Shift Checklist

- All equipment accounted for
- Body camera docked/uploaded
- Radio placed on charger
- Incident forms submitted
- Vehicle cleared of trash
- Patrol keys returned
- Missing or damaged equipment reported

End-of-Shift Notes:

7. Officer Certification

I certify that all equipment required for duty was inspected and accounted for.

Officer Signature: _____

Date: _____

Supervisor Signature (if required): _____