Roseville Police Department
1051 Junction Blvd.
Roseville, Ca 95678
Michael N. Blair, Chief of Police

Roseville City Jail Imprisonment Conditions

I _____, having accepted the option offered by the Placer County Superior Court to be imprisoned in the Roseville City Jail rather than in the Placer County jail, agree to abide by each of the following conditions:

1. When I arrive at the Roseville City Jail to serve time on my sentence, I will pay the correctional officer with cash or a debit or credit card.
2. I will be confined to a jail cell during the period of my imprisonment. No smoking is allowed in the jail.
3. The cell I am imprisoned in may also be occupied by another sentenced prisoner.
4. I will not be allowed to receive any telephone calls once I enter the jail. I may use the phone in the jail cell.
5. If I become ill or injured at any time during my imprisonment at the Roseville City Jail, I will immediately notify the Correctional Officer on duty.
6. If I require treatment and or hospitalization, I will be responsible for the payment of any and all charges.
7. At any time during my imprisonment, I will if so directed by the Correctional Officer, surrender my cell space to another prisoner. I understand I will be given a later time to return to the Roseville City Jail to complete my sentence at no additional charge to me.
8. I shall bring proper picture identification when I arrive at the Roseville City Jail for my commitment. I understand that failure to do so will result in denial of my commitment in the Roseville City Jail.
9. I have truthfully disclosed any and all medical information. I understand that failure to do so will result in denial of my commitment in the Roseville City Jail.
10. I shall not report for imprisonment with alcohol on my breath or be in an intoxicated condition.
11. I shall not be permitted to use, ingest, or be under the influence of any medication while serving my time at the Roseville City Jail.
12. I understand that violation of any of these rules will result in my removal from the Sentenced Prisoner Program.
13. I shall report at the scheduled time for my commitment, failure to do so will result in my exclusion from the Sentenced Prisoner Program.

14. I understand that the Court has allowed me the option of alternative sentencing by completing my jail sentence at the Roseville City Jail.

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Sentenced Prisoner Program imprisonment conditions (continued)

15. I understand that according to Title 15, Minimum Standards for Local Detention Facilities, section 1006, I am allowed to serve my sentence at the Roseville City Jail by Court Order for my own safekeeping. I understand that my time served will be computed on a two for one basis.

16. You must plan to complete your served time in the Roseville City Jail within the time constraints given to you by the Court. You will need to complete your time served at the Roseville City Jail by _____. If we do not believe that you will be able to complete your sentence prior to your due date, we will notify the Court that you will not be able to complete your sentence with us and they will issue a warrant for your arrest.

I declare that I have read, understand and agree to each of the above conditions.

Print Name: _____

Signature: _____

Dated: _____

Witnessed by: _____