



**LETTER OF AGENCY TRESPASS ARREST  
AUTHORIZATION  
RIVERSIDE COUNTY SHERIFF'S OFFICE**

Date: \_\_\_\_\_

The undersigned hereby acknowledges, requests, and authorizes the Riverside County Sheriff's Office to enforce the provisions of the California Penal Code section 602 with respect to all persons trespassing on the property listed below and/or loitering or remaining on the property without permission, without a lawful purpose, or without the intention of conducting legal business for which it was intended.

The undersigned agrees that he/she/they is/are the owner, owner's agent, or person in lawful possession of the business or property and that he/she/they will cooperate in the prosecution of any persons arrested for a violation of any state or local law.

The undersigned agrees to conspicuously post on the business or property a "NO TRESPASSING" sign at each point of plausible entry to the property.

I/we authorize the Riverside County Sheriff's Office to act as my agent for the purposes of enforcing any law violation(s) on my property.

I/we understand this letter is valid for a maximum period of **12 months** and it is my responsibility to renew this letter at the time it expires if the need arises. In the event of change of ownership, the owner/agent/person in lawful possession must notify the Riverside County Sheriff's Office of any such changes in ownership of the property.

**LOCATION:** I am the:

- Owner
- Owner's Agent in Care and Control of the Property
- Person in Lawful Possession of the Property
- Other: \_\_\_\_\_

**THE PROPERTY IS A:**

- Commercial Building (Business)
- Vacant Lot
- Other (describe) \_\_\_\_\_



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**PROPERTY**

Business Name (if applicable): \_\_\_\_\_

Description of Business: \_\_\_\_\_

Address: \_\_\_\_\_

*(Provide complete address including number and street, unit (if applicable), city, state, and zip code)*

*(Please attach proof of authority, assessor file, lease, or rental agreement)*

Property Owner's Name: \_\_\_\_\_

Address \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Business: \_\_\_\_\_

Manager or Person Responsible for Property: \_\_\_\_\_

Business Address \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Business: \_\_\_\_\_

**I hereby authorize the Riverside County Sheriff's Office to arrest or remove for trespassing any person(s) found on the property without my written consent or without lawful purpose.**

**I hereby further authorize the Riverside County Sheriff's Office to act as my agent and ask unauthorized persons to leave the described property during off business hours. If they refuse to leave, or return thereafter, I authorize the Riverside County Sheriff's Office to act as my agent and arrest said person(s). I authorize the Riverside County Sheriff's Office to act as my agent in my absence and/or after closing hours.**

**I hereby further authorize the Riverside County Sheriff's Office to ask person(s) who are obstructing business or intimidating business operators and customers to leave the property. If they refuse to do so, or return thereafter, I authorize the Riverside County Sheriff's Office to arrest such person(s).**

**I also acknowledge that in order to enforce the California Penal Code section, I or my agent will cooperate in the prosecution of person(s) arrested for these offenses.**



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**I understand that this letter is valid for a maximum period of TWELVE MONTHS, and it is my responsibility to renew the letter at that time if the need still exists. Unless revoked by the owner or agent, this authorization will remain in effect for twelve months from the date it is received by the Riverside County Sheriff's Office.**

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Date)

**FOR SHERIFF'S OFFICE USE ONLY**

Station: \_\_\_\_\_ Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_

Keep original on file at station. Send copy to dispatch for address to be flagged.

As required by State law, the Riverside County Sheriff's Office accepts only Notarized Trespass Arrest Authorizations. Please complete the form below for each unique address for which you are submitting an authorization. After the form has been completed, it MUST be signed in the presence of a notary.

Effective Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ (up to 12 months after effective date)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA )  
 ) ss.  
 \_\_\_\_\_ COUNTY )

On \_\_\_\_\_, before me, \_\_\_\_\_, Notary Public, personally appeared \_\_\_\_\_, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

\_\_\_\_\_  
Notary Public Signature

Notary Public Seal

The document being acknowledged is \_\_\_\_\_, dated \_\_\_\_\_, and consisting of \_\_\_\_ page(s).