

Seattle
UNIT FILE NO.
Police
TRESPASS ENFORCEMENT
Department
AUTHORIZATION

(please print)

(I, We)

_____ as:

(check all that apply)

owner
tenant
lessee
manager
agent

thereof, of the following property located at :
(single family dwelling? YES NO)

(business / apartment name, address, city, state, zip code)

do hereby request and authorize officers of the Seattle Police Department, in their official police capacity, to go upon or within those common areas generally open to the public and/or tenants, including hallways, entrances, laundry facilities, lawn and yard areas. I further request and authorize officers to go upon or within those areas not open to tenants (as tenants) including furnace rooms, storage areas, etc. This authority does not permit entry to the premises reserved exclusively for tenants.

The purpose of the authority is to deter and detect common criminal activity including trespassing/ loitering, vandalism, thefts, illegal drug trafficking and prostitution which may be occurring on or within the above described premises.

I have posted the public areas with visible signs stating, "Criminal Trespass Prohibited / No Loitering."

Officers are further authorized to act on my behalf in requesting unauthorized person(s) found upon the property without legitimate / lawful purpose to leave the premises.

I agree to fully cooperate in any subsequent prosecution of trespass and other criminal offenses and agree to appear in court to testify if requested to do so.

This authority shall remain in effect until rescinded by written notice to the Commander of the precinct in which the property is located.

NAME OF REQUESTOR #1
ADDRESS, CITY, STATE, ZIP CODE
PHONE (area code)
NAME OF REQUESTOR #2

ADDRESS, CITY, STATE, ZIP CODE
PHONE (area code)

BUSINESS NAME
STORE NUMBER
BUSINESS ADDRESS AND ZIP CODE
BUSINESS PHONE

X _____
DATE ____/____/____
SIGNATURE OF REQUESTOR

X _____
DATE ____/____/____
SIGNATURE OF REQUESTOR

Mail or drop to:
Seattle Police Department, CPT – East Precinct, 1519 12th Ave., Seattle, WA 98122
Faxes and photo copies are not acceptable; this form must bear original signature(s).

Form 5.24 CD 21.837 Rev-3/98