

BANNING POLICE DEPARTMENT

125 East Ramsey Street • PO Box 1177 • Banning, CA 92220 (951) 922-0039 fax • (951) 849-1003 admin ph

TRESPASS LETTER OF AUTHORIZATION

Business Name (if any): Property Address:				
Contact Person:	Phone: Phone:			
Recently, I have experienced				
☐ Defecating ☐ Drinking ☐ Illegal	-			
This activity affects me in the	following way:			
As OWNER/AGENT of the prendered the criminal laws gover property and/or is engaged in an and continuing through otherwise permitted upon this prosecution of these violators.	rning trespass and re y unlawful activity fo Any perso	equest that officers proor the next twelve-moons who are not ten	onth period beginningants of this property, or w	who are not
I/We have posted all entrance carports and common areas as	1 1		"No Trespassing" signs as	well as all
I/We will support prosecution as	nd will appear in cour	rt to testify if necessar	ry.	
Signature:		Date:	:	
Please include your mailing a	ddress if it is differ	ent from the propert	ty location address:	
Name:				
Address:				
City/State/Zip:			_	
Instructions: Fax this letter be	ack to (951) 922-003	39, or scan and email	it to: banningpolice@ci.ba	ınning.ca.us
You may also mail the form or calendars to submit a new form				Mark your
Received by:	_ Date:	Entered by:BPD	Date: Dept.	