



TRESPASS ARREST AUTHORIZATION



MICHAEL KENT
CHIEF OF POLICE

UP TO 12-MONTH TRESPASS ARREST AUTHORIZATION FOR PROPERTY CLOSED TO THE PUBLIC

California Penal Code Section 602(o)

INSTRUCTIONS: Complete the information below and submit to PS_Records@cityofirvine.org.

I am the **OWNER**, **OWNER'S AGENT**, or **PERSON IN LAWFUL POSSESSION** of real property located in the City of Irvine, _____ (Company Name), with the following address: _____ (the "Property").

I declare that I have not leased or subleased the Property to another individual or entity.

I declare that the Property is closed to the public for the period from _____ to _____ [not exceeding 12 months]; or,

I declare that the Property is closed to the public between the hours of _____ to _____ daily. I further declare that I have posted the Property as closed to the public for the same time period.

Persons found on the Property in violation of Penal Code Section 602(o) should be considered trespassers unless they possess written authorization from me to be on the Property. I hereby request and authorize the Irvine Police Department to enter the Property and enforce the trespass provisions set forth by the California Penal Code Section 602(o). This request will remain in effect during the above listed dates unless revoked by written notice signed by me and delivered to the Irvine Police Department prior to the expiration period.

The above request for service shall expire upon transfer of ownership of the Property, subsequent lease or sublease of the Property, or at such a time as the undersigned is no longer an owner, owner's agent, or person in lawful possession of the Property.

I understand the Trespass law under Section 602(o) does not apply to persons engaged in lawful labor union activities, or who are engaged in activities protected by the United States or California Constitution, or to persons on the Property at my request.

I hereby declare and/or certify under the laws of the State of California that the above information is true and correct.

This form will expire one year from the date below. It is the owner's responsibility to update the form and submit it to the Irvine Police Department Records Unit at PS_Records@cityofirvine.org.

FIRST NAME: _____ LAST NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

SIGNATURE: _____ DATE: _____