



SONORA POLICE DEPARTMENT

100 S GREEN ST, SONORA CA 95370
Business: (209) 532-8143 Fax: (209) 532-4845



TRESPASS AUTHORITY LETTER

Name of Business (If applicable): _____

Address of Business/Residential Property: _____

Have you witnessed or been informed that there has been trespassing on the above-listed property? ☐ Yes ☐ No

I request and give permission for Officers of the Sonora Police Department to enter the above-listed property and enforce any and all law violations. These violations include, but are not limited to: trespassing, unauthorized lodging, unauthorized burning, public intoxication, loitering, and prowling.

I request and authorize the Officers of the Sonora Police Department to remove any unauthorized person found on my property who is committing, has committed, or is going to commit an act which constitutes an infraction, a misdemeanor, or a felony. This authorization includes those offenses that require a private person's arrest to be affected. If an arrest is made on the above-listed property, I agree to appear at any court proceeding necessary to assist in the prosecution of any arrest made pursuant to this letter.

I certify that I am in compliance with the following requirements:

- I have posted "NO TRESPASSING" signs in conspicuous location(s) on the property.
- For my business property, I have posted "CLOSED" signs in conspicuous location(s) on the property during the hours my business is closed to the public.

Twelve-month trespass authority letters filed with the Sonora Police Department by the owner or agent of the described property pursuant to Sonora Municipal Code section 9.60.050 requesting peace officer assistance to remove trespassers from (land/ [or] a buildings) shall be deemed renewed for one additional twelve-month period unless the person who filed the trespass letter requests that there be no such renewal. No such trespass letter filed pursuant to Penal Code Section 602(o) or 602(k) shall be effective for more than one year.

I request that this Authority Letter¹ be valid for the twelve-month period of:

_____ to _____
mm/dd/yyyy mm/dd/yyyy

Reflects Approval by an Owner or an Authorized Representative of the Above-Referenced Business or Residential Property:

Business/Property Owner or Authorized Representative Signature

Date

Print Name: _____

Contact Phone: _____

Address: _____

E-mail: _____

¹ It is the business/property owner's responsibility to renew this Authority Letter after the twelve (12) month time frame.