



# HENRICO COUNTY POLICE DIVISION

## Trespassing Enforcement Authorization

HCPD-087 (06/21)



I/We hereby authorize the Henrico County Police Division to serve as persons lawfully in charge of my/our property located in the County of Henrico for purposes of enforcing the trespassing laws of the Commonwealth of Virginia and the County of Henrico, Virginia and forbidding others from trespassing on my/our property. This is requested for the purpose of deterring criminal activity on my/our property. I/We understand that the property must have "No Trespassing" signage posted on the property so as to be visible at entrances or other likely points of access.

I/We acknowledge that a copy of this signed request will be retained on file with the Henrico County Police Division. I/We understand that this request for enforcement and authorization can be rescinded at any time and I/we agree to provide dated, written notice of such to the Chief of Police. Authorization is valid for a period of one year from the date this authorization letter is signed by the Chief of Police (or his designee).

I/We shall hold the County of Henrico harmless and indemnify the County of Henrico for any claims arising from, or in connection with, the enforcement of trespassing laws. I understand that this form shall be kept on file in the Office of the Chief of Police, or in such other location he deems appropriate. (County Code §13-26)

Original Request     Renewal Request

Property name: _____			
Property address: _____			
Street	City	Zip	
Description of property, structures, and operating hours at this site: _____			

### AGENT OF THE PROPERTY

<i>Last name</i>	<i>First name</i>	<i>Title (Mr./Mrs./Ms.)</i>	<i>Job title</i>
Agent address: <input type="checkbox"/> Same as above _____			
Street	City	State	Zip
Email address: _____			
<i>Work phone</i>	<i>Home phone</i>	<i>Cell phone</i>	<i>Fax number</i>

### PROPERTY OWNER (if different than the property agent)

<i>Last name</i>	<i>First name</i>	<i>Title (Mr./Mrs./Ms.)</i>	
Owner address: <input type="checkbox"/> Same as above _____			
Street	City	State      Zip	
Email address: _____			
<i>Work phone</i>	<i>Home phone</i>	<i>Cell phone</i>	<i>Fax number</i>

**I have read, understand, and will comply with the conditions set forth on this form.**

Owner/agent signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

### ADMINISTRATIVE REVIEW – TO BE COMPLETED BY THE COMMUNITY POLICING SECTION

Property sufficiently posted with "No Trespassing" signs? <input type="checkbox"/> Yes <input type="checkbox"/> No	Police Service Area: _____ <small>(not patrol zone)</small>
Officer: _____	Code #: _____      Date: _____
Commander, Community Policing: _____	Date: _____

### AUTHORIZATION GRANTED

Commanding Officer, Community Services: _____	Date: _____
Support Technician – Entered into Trespassing Database <input type="checkbox"/>	Code #: _____      Date: _____

**Mail completed form to Henrico Police, Community Policing, P. O. Box 90775, Henrico, VA 23273**