

NOTICE OF TRESPASS/EXCLUSION

DATE OF NOTIFICATION: _____ IF AVAILABLE POLICE/CRIME CHECK INCIDENT #: _____

INDIVIDUAL TRESPASSED/EXCLUDED: _____
LAST FIRST MI SEX DOB/AGE IF AVAILABLE

☐ PHOTO ATTACHED IF SUBJECT REFUSED TO IDENTIFY THEMSELVES

NAME OF BUSINESS: _____

ADDRESS OF BUSINESS: _____

NAME OF PERSON ORDERING/SERVING THE EXCLUSION: _____

SIGNATURE OF PERSON ORDERING/SERVING THE EXCLUSION: _____

OFFICER/BADGE # ASSISTING WITH SERVING THE EXCLUSION PAPERWORK: _____

You are hereby FORBIDDEN to enter or remain at the above named business and address including all lobbies, common areas, hallways, facilities located thereon, as well as any parking lots, landscaped areas, or undeveloped areas of the property for the duration specified below

TIME PERIOD OF EXCLUSION: _____ DATE OF NOTIFICATION _____ FORWARD
(DAYS/MONTHS/YEARS) DATE

IMPORTANT CONSEQUENCES OF VIOLATION: to enter or remain on any part of the above mentioned property in violation of the terms specified herein is a crime subjecting the violator to arrest for criminal trespass and possible jail time for up to 364 days and up to \$5000 in fines.

☐ COPY SERVED ON SUBJECT BY LISTED EMPLOYEE/RESPONSIBLE PARTY

OR

☐ COPY SERVED ON SUBJECT WITH THE ASSISTANCE OF LAW ENFORCEMENT (SEE OFFICER NAME ABOVE)

DATE OF INCIDENT LEADING TO THE EXCLUSION: _____

BASIS FOR THE EXCLUSION:

**THIS FORM IS MEANT FOR PRIVATE BUSINESSES OPEN TO THE PUBLIC
NOT GOVERNMENT BUILDINGS OR PUBLICLY FUNDED FACILITIES.**

Submit completed form and photos to trespassing@spokanepolice.org.