

ORANGE PARK POLICE DEPARTMENT

2025 Smith Street, Orange Park, FL 32073

AFFIDAVIT FOR AUTHORIZATION TO ISSUE TRESPASS WARNING

Name:	Phone Number: _	
Authorized Agent (24/7 contact) Name:		Phone:
Address:		
Email Address:		
[,	am the owner \square or	the owner's authorized agent \square of
	Business Name and Address	
I hereby authorize Orange Park Police Of criminal activity, including suspected tresp leave this property to any person found or including such threats as theft, vandalism, of violation of any posted "No Trespassing" si who has previously received notice that they	passing. I further authorize in the property in the case drug possession/sale, or sa igns. I further authorize the	te any Officer to communicate an order to e of a threat to public safety or welfare, afety hazards or persons on the property in the Orange Park Police to arrest any subject
This Affidavit is valid for one year of the da it shall be the responsibility of the Affiant reason revocation of authority is desired, it agent to notify the Orange Park Police Depart	to notify the Orange Park shall be the responsibilit	x Police Department in writing. If for any ty of the owner or the owner's authorized
	IDEMNIFICATION	
The undersigned hereby undertakes and agree from and against any and all liability or didgments against it arising from the Orange Trespass, on the undersigned's property as many controls.	amages the undersigned a Park Police Department er	may suffer as a result of claims, costs or aforcement of Fla. Stat. § 810.08 and 810.09,
I hereby swear that all information stated about	ove is true and correct.	
STATE OF FLORIDA / COUNTY OF CLAY		
The foregoing instrument was acknowledged before	e me this day of	, 202 by
	, who is personally known to	me or produced identification.
Type of Identification produced:		
Notary Signature:		