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Please Print

TRESPASS ENFORCEMENT REQUEST

TO: Chief of Police, Coeur d'Alene Police Department
FROM: YOUR Name: _____
Mailing Address: _____ Suite / Unit #: _____
City: _____ State _____ Zip Code: _____
Phone Number: _____ Cell Phone: _____
E-Mail Address: _____ *** REQUIRED**

I am the: Owner Manager Other (Specify) _____

I, _____, as the owner or person having lawful control of business / property name: _____, located at (street address only; no intersections): _____, Coeur d'Alene, Kootenai County, Idaho, hereby authorize the Coeur'd Alene Police Department and its officers to act as my agents in enforcing the provisions of I.C. 18-7008(8). Officers of the Coeur d'Alene Police Department are specifically authorized to make reasonable requests to leave of any persons who refuse to leave in or on the premises at a time or in a place wherein the premises are not open to the public. Furthermore, the officers are authorized to act as agents of the owner in arresting and prosecuting any persons who refuse a reasonable request to leave given by the officers. The property owner agrees to defend and indemnify the City of Coeur d'Alene and its employees from and liability alleged in any civil suit that may arise under the actual express special agency created not amounting to gross negligence. This actual express special agency does not create any liability on the part of the City of Coeur d'Alene or its employees for any damage to real property or personal property or to timely remove persons from the owner's property. The City of Coeur d'Alene will not be liable for any litter, debris, or trash that accumulates during the property owner's absence.

Reasonable requests to leave may be made in person or by posting "NO TRESPASSING" signs, which give reasonable notice prohibiting entry onto your property. The statement "Violators will be prosecuted under I.C. 18-7008(8)" must be printed on the sign. Signs must be placed at entryways and be highly visible.

This authorization is in effect for one (1) year from the date received by the Coeur d'Alene Police Department. The undersigned owner agrees to notify the Coeur d'Alene Police Department in writing when this authority is revoked or amended and any change in contact information.

For emergency contact purposes, I can be reached by phone after hours at _____, or by phone during normal business hours at _____.
Signature: _____ Date: _____

"I certify (or declare) under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct."

(Owner/Agent Signature)

(Date)

After completing this form, MAIL ORIGINAL to:
Coeur d'Alene Police Department
Attn: Trespass Enforcement
3818 Schreiber Way
Coeur d' Alene, ID 83815

ADMINISTRATION USE ONLY
DO NOT WRITE IN THIS BOX
Date Received: _____
Date Expires: _____
By: _____

