



LOUISVILLE METRO POLICE DEPARTMENT TRESPASS ENFORCEMENT REQUEST



Business name: _____

Property Address: _____ Jefferson Co, KY.

Owner/Person with authority to act on behalf of owner: _____

As owner/person of authority of the above-listed address, I am requesting the assistance of the Louisville Metro Police Department (LMPD) to enforce criminal trespassing statutes on my property. I hereby authorize members of the LMPD to act as my agents in enforcing trespass laws (KRS Chapter 511). LMPD officers may order, on my behalf, that person(s) not enter or remain on the above listed property, and to prosecute person(s) found trespassing there.

As a part of this authorization, **I hereby agree to post and maintain "No Trespassing" signs** that are visible at all major points of ingress to the property so that they are likely to come to the attention of a person entering thereon. I hereby agree to be present and assist the prosecution of those persons removed under this agreement for a period of two (2) years or until this agreement expires. **I hereby agree to hold harmless and to relieve LMPD, its officers and agents, of any liability** in connection with actions taken under the terms of this authorization, including for incidental damage to my property and land which may occur as part of any enforcement action taken.

I understand this enforcement request constitutes an agreement with LMPD which will remain in effect for two (2) years from the date of its execution, or so long as I own the property, whichever term is shorter. The agreement may be renewed or rescinded in writing with thirty (30) days' notice to LMPD.

I UNDERSTAND IT IS MY RESPONSIBILITY TO NOTIFY LMPD WITHIN 30 DAYS OF THE SALE OR TRANSFER OF THE ABOVE IDENTIFIED PROPERTY.

Signature: _____ Effective Date: _____

Address of signator: _____

Contact number for owner/authorized signator:(_____) _____

After Hours contact number for owner/authorized signator:(_____) _____

STATE OF KENTUCKY)

)

COUNTY OF JEFFERSON)

SUBSCRIBED AND SWORN to before me by _____, this ____ day of _____, _____.

My Commission Expires: _____

NOTARY PUBLIC