



Type of location (e.g. House, Business, Apartment, etc.) and/or name of business or apartment complex. \_\_\_\_\_

# TRESPASS LETTER OF CONSENT

I, \_\_\_\_\_ being the  Owner  Lessee  Manager  
*Full Legal Name* *Check One*

or \_\_\_\_\_ of the premises located at:  
*Other person in lawful control of premise; include title / relationship*

\_\_\_\_\_ Oregon \_\_\_\_\_  
*Street* *City* *Zip*

do hereby designate each and every Deputy Sheriff now and hereafter employed by Lane County as my agent for the purpose of enforcing Criminal Trespass of the Oregon Revised Statutes. This authorization shall continue in full force and effect for one full-year or until such time as it is revoked in writing and delivered to the Lane County Sheriff.

Dated this \_\_\_\_\_ day of \_\_\_\_\_  
*Day* *Month* *Year*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Printed Name*

Your mailing address: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*City, State, ZIP Code*

Telephone (Home) \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_

Email Address \_\_\_\_\_

### For Sheriff's Office Internal Use Only

Date Entered in CAD: \_\_\_\_\_ INI: \_\_\_\_\_

Notes: \_\_\_\_\_