



Daytona Beach Police Department
129 Valor Blvd.
Daytona Beach, Florida 32114
(386) 671-5364

Date: _____

Dear Property/Homeowner:

The Daytona Beach Police Department is here to assist you in your efforts to keep trespassers from your property. The types of properties covered by the Trespass Arrest Site Program are as follows:

- Business (**when closed**)
- Vacant Building (**24 hours**)
- Vacant residence (**24 hours**) *in excess of 60 days
- Vacant lot (**24 hours**)

Your signature on this form allows law enforcement officers to take the necessary action in your absence. **Both sides of the form must be completed to be valid and a notary or law enforcement officer must sign the form.**

In order to comply with this Statute, "posted land" must be posted with signs that are placed not more than 500 feet apart along, and at each corner of the boundaries of the land. All signage must be "conspicuous" to anyone entering the property from any direction. The signs must list the name of the owner, lessee, or occupant of the property and state the words "NO TRESPASSING" in letters not less than two (2) inches in height. If any land or structure is open to the public at certain times, the sign(s) must indicate when trespassing is prohibited, it must state When Closed. Sign(s) on a business may simply state "NO TRESPASSING WHEN BUSINESS CLOSED." The signs are to be posted within two weeks of receipt of this letter. After the signs have been erected, the site will be inspected by an officer. If the site meets with specifications, it will remain in the Trespass Arrest Site Program for a twelve month (vacant residence and building) or twenty-four month (business or vacant lot) time period. You will be sent a renewal letter and form prior to the expiry date.

Examples:

Business

"No Trespassing"
When Business is Closed
John Doe Owner or Company
Name

Residence

"No Trespassing"
24 hours
John Doe, Owner

This sign may be purchased in any of the area sign shops or home improvement centers.

If you have any questions, please call the Trespass Arrest Site Coordinator at (386) 671-5364.

District # _____

Date: _____

To: Daytona Beach Police Department

This letter is to advise you that no persons are permitted on the premises located at:

(Circle one) When Closed- Business ONLY
24 Hours- Vacant Building, Vacant Residence, Vacant Lot
as posted on the premises. The premises shall include the building and surrounding
property owned or controlled by the affiant.

Property type: **(Circle one)** Business, vacant building, vacant residence, vacant lot

You are hereby authorized to direct persons to leave the premises, to issue trespass
warnings, to make trespass-related arrests, and to otherwise act on my behalf in
removing trespassers from the property.

The authorization shall continue for twelve (12) calendar months from the date signed
above for vacant buildings and vacant residences and (24) calendar months from the
date signed above for businesses and vacant lots or if cancelled in writing by my
request or by the Chief of Police.

Telephone #

Affiant (please print)

Cell/ Work #

Affiant (Signature)

Email Address

Title

STATE OF FLORIDA
COUNTY OF VOLUSIA

Sworn to and subscribed before me this _____ day of _____, 20____, by
_____, who is personally known to me or who has produced
_____ and who did (did not) take an oath.

Notary Public, State of Florida or **Law Enforcement Officer and I.D.#**
Per FSS 117.10

My Commission Expires _____

Commission Number _____

Site Inspection: Officer _____ I.D.# _____ Date _____

TRESPASS ARREST SITE FORM

Property Parcel# _____

Address of (Business/Vacant Building/Vacant Residence/Vacant Lot.
(Please circle one of the above)

Business Name (if applicable) _____

Apt. or Unit/Suite Number (if applicable) _____
(Specify area of residential property)

Property/Business Owner's Name (please print) _____

Property/Business Owner's Mailing Address _____

City _____ State _____ Zip _____

Property Owner's Telephone # _____

Property Owner's Work Telephone # _____

Property Owner's Cellular Phone # _____

Co-owner/Manager's Name (if applicable) _____

Co-owner/Manager's Residence Address _____

City _____ State _____ Zip _____

Co-owner/Manager's Telephone # _____

Co-owner/Manager's Work Telephone # _____

Co-owner/Manager's Cellular Phone # _____