

AUTHORIZATION TO ACT AS AGENT To: HENDERSON COUNTY SHERIFF'S OFFICE

I hereby authorize each sworn Deputy Sheriff of the Henderson County Sheriff's Office to act as my agent in ordering individuals to leave the premises described herein during the enumerated hours. I understand that each sworn officer can act as my agent and order individuals to leave the premises described herein, and it is understood that if any individual does not leave said premises, the Deputy Sheriff(s) of the Henderson County Sheriff's Office may make arrest(s) for violation of the trespass statute(s) (N.C.G.S. 14-159.12 or 14-159.13) or any other applicable statute(s).

I understand and agree that I can be called on to sign a complaint pursuant to this agreement, and I agree to testify in court that I have authorized the Henderson County Sheriff's Office and its officers to order individuals or groups to leave the premises described herein (vacant lot, occupied business, vacant house, etc.) during the enumerated hours. If I wish to terminate this authorization to act as agent prior to the one-year expiration date or if my ownership or authority over this property should terminate, I will notify the police department immediately.

Hours of Enforcement: _____ until _____ or 24 hours _____
(Hours during which ABSOLUTELY NO ONE is permitted to be on the property)

"NO TRESPASSING" SIGNS MUST BE UP POSTING THE PROPERTY BEFORE THIS AUTHORIZATION CAN BE USED. A PHOTOGRAPH OF THE SIGN(S) MUST BE ATTACHED TO THIS AUTHORIZATION

Property Location and description: _____

Property Owner or Manager _____ Telephone _____

Address _____

NORTH CAROLINA
_____ COUNTY

I, _____ a Notary Public for said County and State do hereby certify that _____ personally appeared before me this date and acknowledged the due execution of the above instrument.

Witness my hand and notarial seal this _____ day _____ of , _____.

_____ (SEAL)

Notary Public

My Commission expires: