

## City of Santa Fe No Trespassing Authorization Form

I,	am the owner, the owner's agent, or th	ne person in lawful
possession of the property located at		
in the City of Santa Fe. I request that City personnel remove trespassers from this property. The persons listed below		
are the only people permitted on the property. Anyone else present is unauthorized, and I would like them to be		
removed. This authorization is valid for one (1) year from the date it is signed.		
Only these individuals listed are permitted to be on the property and anyone else are trespassing:		
Property Owner First and Last Name:		
Mailing Address:	City:	State: Zip:
Telephone Number: Em	ail Address:	
Signature:		
I am willing to testify, if necessary, that the Police Department make any arrests of unauthorized persons on		
my property.		
I agree and acknowledge the statement above.		
I do not agree with and acknowledge the statement above.		
When complete, please email this form to Constituent Services, <u>constituentservices@santafenm.gov</u>		
City Official Use:		
City of Santa Fe Witness Name:		Date:
Signature:		