

SHELBY POLICE DEPARTMENT
AUTHORIZATION TO ACT AS AGENT

NAME OR TYPE OF PREMISES: _____

ADDRESS: _____

(Use reverse side to show exact location, if necessary)

DATE OF APPLICATION: _____

PERSON TO NOTIFY:
NAME: _____

ALTERNATE PERSON TO NOTIFY:
NAME: _____

ADDRESS: _____

ADDRESS: _____

PHONE(S): _____

PHONE(S): _____

CELL: _____

CELL: _____

TO: SHELBY POLICE DEPARTMENT

I hereby authorize the Shelby Police Department to act as agent in ordering any unauthorized individual(s) to leave my premises and/or property during non-business hours/anytime (**Please circle desired option**). It is understood that the Shelby Police Department will act as my agent and order these individuals to leave my premises/property; and it is understood that if these individuals do not leave, the Shelby Police Department will make arrest(s) for violation of the trespass statute, N.C.G.S. 14-134, or other statutes. It is further understood that I may be called on to sign a complaint under this section, and I hereby agree to do so. I will testify in a court that I requested the Shelby Police Department in my absence to order unauthorized individuals or groups to leave my premises and/or property. I agree to indemnify and to save and hold harmless the Shelby Police Department, Shelby Police Officers, the City of Shelby and all Shelby City officials from any and all liability, costs, and damages arising from any actions taken as my agent pursuant to this authorization.

If I wish to terminate this authorization to act as agent, or if ownership or authority over the property should be transferred from me, I will notify the Shelby Police Department immediately in writing.

The Authorization to Act as Agent shall expire at midnight on June 30, 20____. I understand that I may renew this Authorization to Act on an **annual basis** by filing a new application.

SIGNED: _____

POSITION: _____

DATE: _____

STATE OF NORTH CAROLINA
COUNTY OF _____

I, _____, 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 _____, 20 ____

Notary Public

My Commission Expires: _____

Shelby Police Department Standard Operating Procedure Manual

Policy Number/Title: 400-10 Authorization to Act as Agent
Effective Date: November 1, 2001
Revised Date: August 29, 2007
Authorized By: Jeffrey H. Ledford, Chief of Police



Department Policy

It is the policy of the Shelby Police Department to protect all property within the City limits. One method of accomplishing this is through the Authorization to Act as Agent.

I. Procedure

- A. "Authorization to Act as Agent" forms may be obtained by property owners or managers from the Shelby Police Department either by mail or in person at the Department.
- B. The "Authorization to Act as Agent" forms shall apply to Shelby Police only.
- C. The person receiving the form(s) shall complete the requested information at the top of the form. The person will then sign the form in the presence of a Notary Public and either mail or deliver the notarized form to the Shelby Police Department.
- D. Before the Shelby Police can enforce the "Authorization to Act as Agent", the owner shall install a sign (or signs) which meet the following elements:
 - 1. Displayed in a prominent place
 - 2. States that the property is private property
 - 3. States that no trespassing allowed during non-business hours or anytime
 - 4. Violators will be prosecuted
- E. All "Authorization to Act as Agent" agreements expire at midnight on June 30th.
- F. A current list of properties for which Authorization to Act as Agent forms have been processed will be compiled and published semi-annually by the Chief of Police.