



OTTAWA POLICE SERVICE SERVICE DE POLICE D'OTTAWA

Authorization Pursuant to the Trespass to Property Act RSO 1990, c. T. 21

ATTENTION

OTTAWA POLICE SERVICE, 474 Elgin Street, Ottawa, Ontario, K2P 2J6

DATE

Dear Sir/Madam,

The Undersigned hereby authorizes all officers of the Ottawa Police Service (OPS) to enter the premises/property of

(List of Official Company name(s) or Property Owner(s) or Tenant(s) or Occupier(s))

located at

(Provide full address of property in the city of Ottawa)

to act as an agent for the purposes of enforcing all of the provisions of the **Trespass to Property Act RSO 1990, c. T21, (the Act) and in particular, section 2(1)(b), which gives the occupier the authority to extend authorization for person, other than the occupier to direct persons to leave the premises.**

This authorization is intended to confer upon the OPS the same authority as the Undersigned under the Act, namely the authority to prohibit entry to the Premises/Property, and/or where the OPS determines it necessary, to remove from the Premises/Property, any person who has been verbally or in writing, prohibited entry and is therefore unlawfully in the Premises/Property. Any individual who unlawfully is on the Premises/Property, **in violation of being prohibited entry, as authorized by Section 9 (1) of the Act, may be arrested and charged with trespass at the discretion of the OPS.**

It is acknowledged that the Undersigned will notify the appropriate OPS district of a withdrawal of notice prohibiting entry which has been issued by the Undersigned and previously communicated to the OPS in relation to the Property/Establishment.

It is further acknowledged that any notice prohibiting entry which has been issued by the OPS on behalf of the Undersigned in relation to the Property/Establishment, will only be withdrawn with the joint concurrence of both the OPS and the Undersigned.

This authorization commences on (date) and shall remain enforceable until revoked.

I understand that this authorization may be revoked at any time upon written notice sent by Registered Mail, to the OPS.

I further agree that if I am no longer the owner or occupier of the said premises, that I will notify the appropriate District of the Ottawa Police Service immediately, in writing and by Registered Mail.

AUTHORIZED PERSON		GENDER		DATE OF BIRTH	
SIGNATURE		TELEPHONE NUMBER			
OWNER/TENANT		GENDER		DATE OF BIRTH	
SIGNATURE		TELEPHONE NUMBER			
MAILING ADDRESS					
EMAIL		FAX NUMBER			