Business Name:

Business Address:
*(Requests for appeal to this notice may be sent to this address.)*

# Notice of No Trespass

# *Given to:*

Name:

Address:

City: State:

Date of Warning: Time of Warning: Store No.:

Good cause for issuance of Notice of No Trespass:

# NOTICE

Take notice that as of the date indicated above, you are forbidden from entering or coming upon any and all premises of **[BUSINESS NAME]** for a period of *three years*. This notice and restriction are due to the conduct you have displayed in the store and that your presence impedes legitimate customers and/or interferes with **[BUSINESS NAME]** in conducting its business.

Should you fail to abide by this notice, you may be subject to arrest and criminal prosecution under RCW 9A.52.070 and/or RCW 9A.52.080 (Washington State).

This notice and restriction apply to all **[BUSINESS NAME]** locations.

Signature of Person to Whom Warning was Issued Date
**[Note: Indicate “Refused” if the person refuses to sign.]**

Name/Title of Person Issuing Warning (Print) Name of Witness (Print)

Signature of Person Issuing Warning Signature of Witness

Date Date