

Do NOT WRITE IN THIS SPACE

**MICHELE
REAGAN**
Secretary of State

State of Arizona – Office of the Secretary of State
No Trespass Public Notice List

SEND BY MAIL TO:

Secretary of State Michele Reagan, Atten: Business Services
1700 W. Washington Street, FL. 7, Phoenix, AZ 85007-2808

OR return this application in person:

PHOENIX - State Capitol Executive Tower, TUCSON - Arizona State Complex,
1700 W. Washington Street, 1st Fl., Room 103 400 W. Congress, 1st Fl., Suite 141
Office Hours: Monday through Friday, 8 a.m. to 5 p.m., except state holidays.

PLEASE NOTE: All information provided and attached to this form is public record.
Information will be provided to the newspaper of public record in the county in which the
employer is located. Every law enforcement agency in the state will be provided the No
Trespass Public Notice list under A.R.S. § 23-1326.

FOR OFFICE USE ONLY
No TRESPASS LIST REV. 1/5/2015

INSTRUCTIONS

When to use this form: Employers shall use this form and supply appropriate documents that establish the employer's private property rights to include the address or addresses and legal descriptions of the property or properties to which it has legal control.

How to complete this form: Review A.R.S. § 23-1326 found on our website under "Business Services." Print clearly or computer generate this form online. Use the supplement form to request more than one property listing. Remember to attach copies of the documents that establish private property rights.

Recording Fees ~ A.R.S. § 23-1326(B): Fees are posted on our website, under "Business Services."

Website: All forms are available on the Secretary of State's website, www.azsos.gov.

Submission: Include all forms, documents and check or money order and send by mail to the address above.

Questions? Call (602) 542-6187; in-state/toll-free (800) 458-5842.

1. Employer Information

Business, Corporation or Company Name (as shown on legal documents)

Employer Address

City

State

Zip Code

Employer representative

First Name

Middle Name (if used)

Last Name (if used)

Title

Phone Number (include area code)

Fax Number (include area code)

E-mail address

County in which the employer is located

Check Apache Cochise Coconino Gila Graham Greenlee La Paz Maricopa
One Mohave Navajo Pima Pinal Santa Cruz Yavapai Yuma

2. Property Information

Number of properties to add to list

If more than one property, attach supplement form.

Property or Business Name (if applicable)

Legal Description of the Property

Property Address

City

State

Zip Code

Property Phone Number

3. Attachments – Property rights documents shall include the address and legal description of the property to which the employer has legal control.

1. Type/description of document attached

2. Type/description of document attached

3. Type/description of document attached

4. Type/description of document attached

4. Employer's Representative Signature – Must match the name in Section 1 of this form.

Signature

Date