

EL CAJON POLICE DEPARTMENT

ILLEGAL LODGING ENFORCEMENT LETTER 647(e) PC

Please print all information, sign, date, and return form to

El Cajon Police Department
Metropolitan Unit
100 Civic Center Way
El Cajon, CA 92020

ADDRESS OF PROPERTY:		
(List each separate address if more than one)		
NAME OF BUSINESS:		
OWNER OF PROPERTY:		
MANAGEMENT COMPANY: (if application)	able)	
MAILING ADDRESS: (if different from	above)	
Agent, Manager, or representative of	property, please complete the following:	
Police Department to arrest and remove cooperate with the El Cajon Police Department on the below date and expire	_ am the owner, agent, or representative agent (ciretter is to serve as my authorization for the El Cajore anyone found illegally lodging on the property. I wartment to facilitate this matter. This letter shall e after two years. I realize that I will have to submit ange of owner, manager, or representative agent.	/ill
SIGNED:	DATE:	
PHONE NUMBERS: DAY	NIGHT	