



TRESPASS & ILLEGAL LODGING ENFORCEMENT LETTER

CA Penal Code 602 & 647

(Please provide complete information of owner and
property management company)

PROPERTY ADDRESS: _____

(List each separate address if more than one)

NAME OF BUSINESS(ES): _____

(List each business name if more than one)

PROPERTY OWNER: _____

CONTACT PERSON: _____

PHONE NUMBERS: DAY: _____ **NIGHT:** _____

EMAIL: _____

MANAGEMENT CO. (if applicable): _____

MAILING ADDRESS: _____

CONTACT PERSON: _____

PHONE NUMBERS: DAY: _____ **NIGHT:** _____

EMAIL: _____

RETURN ENTIRE DOCUMENT TO H.E.A.R.T/BIKE TEAM

EMAIL A PDF VERSION TO: HEART_MAIL@ORANGE.PD.ORG

**OR MAIL TO ORANGE PD, C/O HEART/BIKE TEAM, 1107 N. BATAVIA ST.,
ORANGE, CA 92867**

CONTACT (714) 744-7599 OR (714) 744-7479 FOR ASSISTANCE



I have experienced these problems at the property (mark all that apply).

- Defecating Drinking Illegal Lodging Littering Urinating Vandalizing
 Other: _____

This activity affects me in the following way:

*****Property Owner or Agent, please complete the following*****

I, _____, am the **Owner** or **Agent** of the above listed property. Any person(s) who are not tenants of this property, or who are not otherwise permitted upon this property for legitimate purposes, are trespassing.

This letter is to serve as my authorization for the Orange Police Department to arrest and for the prosecution of anyone found trespassing and/or illegally lodging on the above listed property in violation of California State Penal Codes §602 and/or §647. This letter shall commence on the date signed below and expire in 12 months or until revoked in writing by the property owner, manager or representative. I understand that I will have to submit a new "Trespass & Illegal Lodging Letter" if there is a change of ownership or management agent.

I will cooperate with the Orange Police Department, Orange City Attorney's Office, and County of Orange District Attorney's Office to prosecute this matter, appear to testify in court, and facilitate other requests by these agencies.

SIGNED: _____ **DATE:** _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of _____)

On _____, before me, _____, Notary Public, personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature: _____

Place Notary Seal Above