

THE CITY OF SAN DIEGO

Office of the City Treasurer STRO License Update Form

For Office Use Only		
Liaanaa Na		
License No		
Processed Date		

LICENSE INFORMATION		
STRO License: STRL		
Action Required: Local Contact Update	OR	☐ License Cancellation
NEW LOCAL CONTACT INFORMATION		
Local Contact Name:		<u> </u>
Phone Number:	_	
Email Address:		
Mailing Address:	_ City,	State, Zip Code:
premises, pursuant to Chapter 5 of the Munici	pal Code.	aging and preventing any nuisance activity at the The local contact shall respond to a complainant in omplaints and shall take action to resolve the matter.
STRO LICENSE CANCELLATION		
for(Zip Code). I acknowledge that it is unlawful for	or any per nally, I ack	el the STRO license STRL (License Number) (Street Address), (City), CA rson to use a dwelling unit for short-term residential knowledge that the application and license fees are
regulations set forth in the STRO Ordinance information provided in this STRO License U	e. Host fi Ipdate Foi	nowledges that they will comply with all rules and urther asserts under penalty of perjury that all rm is true and factual to the best of the Host's complete or inaccurate, the update may be denied,
Host Name (Print)		
Host Signature		Today's Date

This form must be submitted via email to the STRO Administration at stro@sandiego.gov from the Host email address on file. For additional questions, please visit the STRO website at www.sandiego.gov/stro or contact the STRO Administration at (619) 615-6120 or stro@sandiego.gov.