



THE CITY OF SAN DIEGO

CODE ENFORCEMENT DIVISION
DEVELOPMENT SERVICES DEPARTMENT
1222 First Avenue, MS 511, San Diego, CA 92101-4106
www.sandiego.gov

ACTIVITY RECORD

(PLEASE RETURN TO ASSIGNED INVESTIGATOR AFTER SEVEN DAYS OF RECORDING AND WITHIN 30 DAYS OF THE FIRST RECORDED INSTANCE)

Name:
Address:
City, State, Zip:
Phone: Email:

TYPE OF ACTIVITY:
ADDRESS OF ACTIVITY:

Table with 4 columns: DATE OF ACTIVITY, TIME OF ACTIVITY, ACTIVITY OBSERVED, LICENSE PLATE/DESCRIPTION. Multiple empty rows for data entry.

Attach additional pages, as needed.

I DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE STATEMENTS ARE TRUE AND A CORRECT REPRESENTATION OF THE EVENTS AND ACTIVITIES I WITNESSED.

BY MY SIGNATURE BELOW, I ACKNOWLEDGE THAT THIS DOCUMENT AND THE INFORMATION CONTAINED HEREIN IS A PUBLIC RECORD AND MAY BE PRESENTED AND USED BY THIRD PARTIES TO ASSIST IN THE ENFORCEMENT OF, AND SUBSTANTIATE ANY CLAIMS REGARDING, ACTIVITY OBSERVED.

I [] AM / [] AM NOT WILLING TO BE A WITNESS REGARDING THIS ACTIVITY IN THE EVENT THE CITY WOULD PROCEED TO A HEARING PROCESS.

PRINT NAME SIGNATURE DATE