

**APPLICATION AND CERTIFICATION
IN LIEU OF INSPECTION FOR CERTIFICATE OF SMOKE DETECTOR
AND CARBON MONOXIDE ALARM COMPLIANCE**

Block _____ Lot _____
Street _____
Municipality _____ County _____

*NOTE: ALL BOXES MUST BE CHECKED IN ORDER FOR CERTIFICATION TO BE VALID

- Smoke detector has been installed on each level of the dwelling, including basements, excluding unfinished attic or crawl space; and
- Smoke detectors and carbon monoxide alarm has been installed outside each separate sleeping area; and within 10 feet of bedrooms
- All smoke detectors are in working order. Carbon monoxide alarm(s) in working order

This is a _____ story dwelling with without a basement.

An inspection shall be conducted by the owner or an authorized representative of the owner. The smoke detectors required above shall be located in accordance with NFPA 74; the carbon monoxide alarm(s) installed per NFPA-720. The detectors are not required to be interconnected. Battery powered detectors and alarms are acceptable. Note: AC powered and/or interconnected alarms and smoke detectors installed in homes constructed after January, 1977 shall be maintained in working order. See diagrams on the back of this application for further information regarding installation.

Please mail certificate to: _____ Phone _____

_____ ZIP _____ Fax #: _____

Contact Person: _____ Phone #: _____ Closing Date _____

I do hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I will be subject ot penalty.
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Sworn and subscribed to before me this _____ day of _____, 20_____.

Notary Signature

Applicant Signature

Printed Name