BUILDING DIVISION

SMOKE AND CARBON MONOXIDE ALARM COMPLIANCE AFFIDAVIT

Project Address: _____
Permit Number (if applicable): _____

DECLARATION OF COMPLIANCE

I certify that the smoke alarms and carbon monoxide alarms installed at the above-referenced property comply with applicable requirements of the California Residential Code, including proper location, power source, interconnection (where required), and installation per manufacturer's instructions.

Applicable Code Sections: CRC Section R314; CRC Section R315

I further certify that all required alarms are installed in required locations, operational, and tested at the time of this declaration.

THE INFORMATION BELOW IS TO BE COMPLETED AND SIGNED BY THE PERMIT HOLDER ONLY.

CONTRACTOR

Company Name: _____
Contractor / Installer Name (Print): _____
License Number: _____
Phone Number: _____

I certify that the installation and testing comply with applicable codes and manufacturer requirements. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature:_____Date: _____

PROPERTY OWNER

Owner Name (Print): _____

Phone Number: _____

I certify that the installation and testing comply with applicable codes and manufacturer requirements. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature:_____Date:_____

********** SUBJECT TO RANDOM TESTING**********

Note: This affidavit does not relieve the permit holder or property owner from compliance with all applicable codes and regulations, nor does it replace required inspections.