Urban Village by the Bay

# ALBANY CALIFORNIA

Building Division · 1000 San Pablo Ave., Albany, CA 94706 · Phone: (510) 528-5760 – com-dev@albanyca.org

## Smoke Alarm Installation Acknowledgement

Job Address:_____ Permit #:_____

I, the undersigned, certify under penalty of perjury that smoke alarms will be installed by me or my contractor in the residence(s) associated with the permit issued for the above address in accordance with 2025 California Residential Code, § R310 (single-family homes and duplexes); 2025 California Building Code, § 907 (residential buildings with 3 or more units); 2025 California Fire Code, § 907.2.9; City Ordinance Chapter XI, Sections 11.2.3f and 11.4, in accordance with all requirements of the City of Albany and the California Office of the State Fire Marshal, and according to the manufacturer's installation requirements.

I further affirm that I have received and read a copy of the City of Albany's "Residential Smoke Alarms" information packet.

**I understand that the smoke alarms must be installed prior to the Final Inspection.**

Signature:_____ Date:_____

Name: _____

Company Name: _____

[ ] Contractor [ ] Owner [ ] Agent for Contractor [ ] Agent for Owner

## Carbon Monoxide Detector Installation Acknowledgement

Job Address: _____ Permit #:_____

I, the undersigned, certify under penalty of perjury that carbon monoxide detectors will be installed by me or my contractor in the residence(s) associated with the permit issued for the above address in accordance with California Health & Safety Code § 17926(a), 2025 California Residential Code § R311 (single-family homes and duplexes), 2025 California Building Code § 915 (residential buildings with 3 or more units), 2025 California Fire Code, § 915, and all manufacturer's installation requirements.

**I understand that the carbon monoxide detectors must be installed prior to the Final Inspection.**

Signature:_____ Date:_____

Name: _____

Company Name: _____

[ ] Contractor [ ] Owner [ ] Agent for Contractor [ ] Agent for Owner