Department of Building & Safety
City of La Verne
3660 D Street
La Verne, CA 91750

SMOKE DETECTOR & CARBON MONOXIDE ALARM SELF-CERTIFICATION

I, the undersigned, hereby certify that I am the owner or authorized representative of the property referenced below. I further certify, under the penalty of perjury, that smoke detectors and carbon monoxide alarms are present and functional in all the following locations. I further certify that all smoke and CO detectors will be maintained and operable whenever the residence is occupied. (Check all applicable boxes below. Retrofitted smoke detectors and carbon monoxide alarms may be battery-operated.)

PERMIT: #_____ PROJECT ADDRESS: _____ La Verne, CA

PROPERTY OWNER:_____ DATE: _____
(or Representative) SIGNATURE

SMOKE DETECTORS on ceiling or wall:

- ☐ Outside of each separate sleeping area in the immediate vicinity of bedrooms
- ☐ In each room used for sleeping purposes
- ☐ In each story including any habitable basement

NOTE: In dwellings or dwelling units with split levels and without an intervening door between the adjacent levels, a smoke alarm installed on the upper level shall suffice for the adjacent lower level provided that the lower level is less than one full story below the upper level.

CARBON MONOXIDE ALARMS on ceiling, wall, or other location as specified by the manufacturer:

- ☐ Outside of each separate sleeping area in the immediate vicinity of bedrooms
- ☐ In each story including any habitable basement

NOTE: In dwellings or dwelling units with split levels and without an intervening door between the adjacent levels, a smoke alarm installed on the upper level shall suffice for the adjacent lower level provided that the lower level is less than one full story below the upper level.

- ☐ For Residential occupancies only- sleeping units with permanently installed fuel burning appliances.

I, the undersigned, acting the contractor responsible for the above referenced work, do certify under the penalty of perjury, the presence of detectors and alarms as indicated above.

CONTRACTOR: _____LICENSE NO: _____

SIGNATURE: _____DATE: _____

In lieu of physical inspection of smoke detectors and carbon monoxide alarms by the city inspector, this certification may be complete and presented to the inspector during the course of a project as follows:

- ☐ Reroof – at time of sheathing inspection
- ☐ Replace exterior wall cover – at lath inspection
- ☐ Window change out – at weather stripping/rough inspection
- ☐ Attached patio cover – at footing inspection
- ☐ Other: