



## Carbon Monoxide and Smoke Detector Alarm Affidavit

**PERMIT WILL NOT BE FINALED UNTIL THIS FORM IS COMPLETED AND RETURNED TO BUILDING & SAFETY**

**FOR COMPLIANCE WITH SECTION R314 AND R315 OF THE CALIFORNIA RESIDENTIAL CODE, WHERE PERMITTED WORK REQUIRED NO INTERIOR ACCESS.**

PROPERTY ADDRESS: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_ PERMIT NO.: \_\_\_\_\_

When the valuation of additions, alterations, or repairs to existing dwelling units exceeds \$1,000.00, Smoke detectors shall be installed in each sleeping room, and outside each separate sleeping area in the immediate vicinity of the bedroom, and each additional story of the dwelling, including basements and habitable attics as required by Section(s) R314 and R315 of the California Residential Code **(CRC)**.

For dwellings or sleeping units containing fuel burning appliances or having attached garages, carbon monoxide alarms shall be installed outside each separate sleeping area in the immediate vicinity of the bedrooms, and on each additional story of the dwelling, including basements as required by CRC, Section R315.

Carbon Monoxide Alarms are not required in dwellings which do not contain fuel-burning appliances and that do not have an attached garage.

**Multi-purpose** (combination carbon and smoke) alarms may be used and shall comply with CRC, Section R315.

**Power Supply:** In existing dwelling units, alarms are permitted to be solely battery operated where repairs or alterations do not result in the removal of wall and ceiling finishes **or** there is no access by means of attic, basement or crawl space. An electrical permit is required for alarms which must be connected to the building wiring. Go to <http://osfm.fire.ca.gov> for current list of approved State Fire Marshal alarms.

As owner/agent of the above-referenced property, I hereby certify that I have installed the smoke and carbon monoxide alarms in accordance with the manufacturer's instructions and in compliance with the CRC.

**I declare under penalty of perjury that the foregoing is true and correct, and that this declaration was executed on (Date) \_\_\_\_\_ at Glendale, California.**

Print Owner/Agent Name: \_\_\_\_\_ Date: \_\_\_\_\_

Owner/Agent Signature: \_\_\_\_\_

**This is a voluntary self-certification verification procedure. If you prefer an Inspector to perform the verification, you must arrange to have an adult present on the date of when the final inspection is requested.**

This form may be mailed, faxed, or hand delivered to the address provided below:

**Building & Safety Division  
633 E. Broadway, Room 100, Glendale CA 91206  
Fax to: 818-548-4362**