



CERTIFICATION FORM FOR SMOKE ALARMS AND CARBON MONOXIDE ALARMS

Building Permit number: _____

Property Address is _____ located within the City of Oakley

The 2019 California Residential Code requires that smoke alarms and carbon monoxide alarms be installed in all dwelling units whenever an application is filed for a permit for alterations, repairs, or additions. This form should be used whenever the Building inspector is not likely to enter the dwelling during the final inspection (i.e. roof replacement, patio covers, siding replacement or repairs, retaining walls, and similar types of exterior work). The property owner shall provide a completely filled out and signed copy of this form to the Oakley Building Department to certify that smoke alarms and carbon monoxide alarms are installed in all of the required locations and that they are functioning properly. Provide a copy of this certification at the time of final inspection, or mail to the address at the bottom of this page prior to the request for a final inspection; attention Building Department.

_____ please initial. Smoke alarms that are listed in accordance with UL 217 have been installed according to the manufacturer's instructions inside each sleeping room, outside each separate sleeping area in the immediate vicinity of the bedroom(s), and at least one on each story of the dwelling including basements and habitable attics. As the owner, I have tested all the alarms and can verify that they are working properly.

_____ please initial: Carbon Monoxide alarms that are listed as complying with the requirements of UL 2034 and are installed according to the current edition of NFPA 720 and the manufacturer's installation instructions and are located outside of each separate dwelling unit sleeping area in the immediate vicinity of the bedroom(s) and on every level of a dwelling unit including basements. As the owner, I have tested all the carbon monoxide alarms and can verify that they are working properly. Carbon Monoxide alarms are required in all dwelling units that have attached garages or that contain fuel-burning appliances.

Date

Owner's signature (or authorized agent)

Mailing address

Please print name

Phone number