

SMOKE DETECTOR AND CARBON MONOXIDE INSTALLATION SELF CERTIFICATION FORM

California Residential Code (CRC) Section 314 requires that Smoke alarms are installed in existing dwellings **anytime** a building permit with a job valuation of more than \$1,000.00 is issued for an addition, repair or alteration.

California Residential Code (CRC) Section 315 requires that Carbon Monoxide (CO) alarms are installed in existing dwellings that have attached garages or fuel burning appliances **anytime** a building permit with a job valuation of more than \$1,000.00 is issued for an addition, repair or alteration. Furthermore, Health and Safety Code Section 17926 states that **all single family** dwellings that have attached garages or fuel burning appliances must have a CO alarm installed prior to July 1, 2011 and that all other dwelling units that have attached garages or fuel burning appliances must have a CO detector installed prior to January 1, 2013.

Smoke and carbon monoxide alarms shall be located outside each sleeping area, in the immediate vicinity of bedrooms and on every story of the dwelling; including basements and habitable attics (split levels are considered one story).

Additional smoke alarms are required in each sleeping room and any room with a closet.

Work subject to a building permit includes but is not limited to; furnaces, water heaters, sewer or water line replacement, reroofs, etc.

This self certification form may be used if the interior of the dwelling will not be accessible to inspect the placement of smoke and CO alarms at the time of final inspection. The permit referenced below cannot be finalized until this form is completed, signed, and reviewed by the City of Capitola Building Inspector.

Property address: _____ Building Permit #: _____

I am the ___ Contractor; ___ Owner, or ___ Authorized Agent.

I hereby declare and certify, under penalty of perjury under the laws of the State of California, that:

___ Smoke detectors have been installed as required by the CRC and the manufacturer's recommendations.

___ Carbon monoxide detectors have been installed as required by the CRC and the manufacturer's recommendations.

Signature

Date

(Please print name)

Phone Number

Mailing Address

City, State, Zip Code

Smoke detector and CO detector were installed by: _____

Street address, City, & Zip Code

Phone Number