



# CITY OF PINOLE

DEVELOPMENT SERVICES DEPARTMENT

2131 Pear Street  
Pinole, CA 94564

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## AFFIDAVIT-SELF CERTIFICATION FOR SMOKE DETECTORS & CARBON MONOXIDE ALARMS

PERMIT WILL NOT BE FINALED UNTIL THIS FORM IS COMPLETED AND COLLECTED BY INSPECTOR

PERMIT NO: \_\_\_\_\_, PROJECT ADDRESS: \_\_\_\_\_

I, (print name) \_\_\_\_\_  
PROPERTY OWNER

As owner of the above reference property, I hereby verify that smoke detectors and carbon monoxide alarms have been installed in compliance with current California codes and as described below, and all alarms have been tested and are functional for the above permit.

Confirm that smoke alarms and carbon monoxide alarms are in place and operational in the following locations:

### **SMOKE ALARMS: *In accordance with 2016 California Building Code 907.2.11.2***

1. In each room use for sleeping purposes.
2. On ceiling or walls outside each separate sleeping area, in the immediate vicinity of bedrooms.
3. On each additional story of the dwelling, including basements and habitable attics but not including crawl spaces and uninhabitable attics. 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: *In accordance with 2016 California Building Code 420.4.3***

1. Outside of each separate dwelling unit sleeping area in the immediate vicinity of the bedroom/s.
2. On every level of a dwelling unit, including basements.

**I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING  
STATEMENTS ARE TRUE AND CORRECT.**

PROPERTY OWNER SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_, PHONE NUMBER: \_\_\_\_\_