



CITY OF RED BLUFF

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Affidavit Self Certification

For Compliance of Smoke and Carbon Monoxide Detectors

SECTIONS R314, 907.2.11.2 AND 420.4 OF THE CALIFORNIA BUILDING AND CALIFORNIA RESIDENTIAL CODES WHERE NO INTERIOR ACCESS FOR INSPECTION IS REQUIRED.

Property Address: _____

Permit No.: _____

Number of Smoke Alarms: _____

Number of Carbon Monoxide Detectors: _____

When the valuation of additions, alterations, or repairs to existing dwelling units exceeds \$1000.00, Sections R314, 907.2.11.5 and 420.4.2 of the California Building and California Residential Codes require that Smoke Alarms and/or Carbon Monoxide Alarms be installed in the following locations:

1. Outside of each separate dwelling unit sleeping area in the immediate vicinity of the bedroom(s).
 - Smoke alarm and Carbon Monoxide Alarm
2. On every level of a dwelling unit including basements
 - Smoke Alarm and Carbon Monoxide Alarm
3. Within each sleeping room
 - Smoke Alarm

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 alarms: Carbon monoxide alarms combined with smoke alarms shall comply with Section 420.4.3.1 of the California Building Code and shall be approved by the Office of the State Fire Marshal.

Power Supply: In dwelling units with no commercial power supply, alarm(s) may be solely battery operated. 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. See Sections R314, 907.2.11.4 and 420.4.1.1 of the California Building and California Residential Codes. An electrical permit is required for alarms which must be connected to the building wiring.

I hereby certify that the alarm(s) referenced above has/have been installed in accordance with the manufacturer's instructions and in compliance with the California Building and California Residential Codes. The alarms have been tested and are operational.

Name & Signature: _____

Date: _____