



CITY OF MONTE SERENO

18041 SARATOGA-LOS GATOS ROAD, MONTE SERENO, CA 95030
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Smoke Alarm and Carbon Monoxide Alarm Certification Form

When the valuation of a permit for additions, alterations, or repairs exceeds \$1,000.00, smoke alarms and carbon monoxide alarms are required. If the Building Official is unable to access the residence to verify their installation at the final inspection, then the owner must certify to us that the smoke and carbon monoxide alarms have been installed in the required locations and are functioning properly. The alarms must be listed (UL 217 for smoke alarms and UL 2034 for carbon monoxide) and approved by the State Fire Marshal for such use.

Smoke alarms shall be installed in each sleeping room, outside each separate sleeping area in the immediate vicinity of the bedrooms and on each additional story of the dwelling, including basements and habitable attics but not including crawl spaces and uninhabitable attics as required by section R314 of the 2016 California Residential Code (CRC) and section 13113.7 of the Health and Safety Code.

Carbon monoxide alarms shall be installed in dwellings which contain fuel burning appliances or having attached garages. Carbon Monoxide alarms shall be installed 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 the basement(s) as required by section R315 of the California Residential Code (CRC). Carbon monoxide alarms shall be listed as complying with UL 2034 and be installed and maintained in accordance with NFPA 720 and the manufacturer's instructions.

Property Address: _____

Permit Number: _____

I, the undersigned, hereby certify that I am the homeowner of the property and I have installed the smoke alarms and carbon monoxide alarms in accordance with the manufacturer's installation instructions and in compliance with the California Residential Code and California Health and Safety code.

Owners Name (printed): _____

Signature of Owner: _____ Date: _____