



Community Resources Agency
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**SMOKE DETECTOR AND CARBON MONOXIDE INSTALLATION
SELF CERTIFICATION FORM**

California Residential Code (CRC) Section 314 requires that **Smoke alarms** be installed in existing dwellings *anytime* a building permit with a job valuation more than \$1,000 is issued.

California Residential Code (CRC) Section 315 requires that **Carbon Monoxide (CO) alarms** be installed in existing dwellings that have attached garages or fuel burning appliances *anytime* a building permit with a job valuation more than \$1,000 is issued. 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; additions, repairs, alterations, furnaces, water heaters, decks, sewer or water line replacement, reroofs, etc.

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**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 the form is completed, signed, and reviewed by the County Building Inspector.**

APN: \_\_\_\_\_ Address/Town: \_\_\_\_\_

I am the:  Contractor;  Owner;  Authorized Agent

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

- Smoke detectors are installed as required by the CRC and the manufacturer's recommendations.
- Carbon Monoxide detectors are installed as required by the CRC and the manufacturer's recommendations.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
(Please print Name/Company) Phone Number

\_\_\_\_\_  
Complete Mailing Address

**Smoke detectors and CO detectors were installed by:**

\_\_\_\_\_  
(Please print Name/Company) Phone Number

\_\_\_\_\_  
Complete Mailing Address