

OCCUPANCY SMOKE DETECTOR CERTIFICATION FORM

This form is to be completed by the owner or owner's authorized agent to certify smoke detector installation in existing apartment buildings at the time of the Life Safety Inspection.

PROPERTY INFORMATION

Master Project Number: _____

Name of Property: _____

Property Address: _____

Property Management: _____

OWNER (OR OWNER'S AUTHORIZED AGENT) AFFIRMATION

I hereby affirm that all dwelling units in all buildings located at the address referenced above are equipped with smoke detectors in the required locations and that the smoke detectors shall be maintained in working order as required by the City of Houston Building and Fire Codes.

Printed Name_____
Title_____
Signature_____
Date**FOR OFFICE USE ONLY**

Date Received: _____

Processed By: _____