

COMMUNITY DEVELOPMENT DEPARTMENT BUILDING AND SAFETY DIVISION

CERTIFICATION OF SMOKE AND CARBON MONOXIDE (CO) ALARMS SOLAR PANEL AND/OR REROOF FORM

Maged Soliman Building Official

In an effort to enhance life safety within existing dwellings, California Residential Code (CRC) Sections R314 and R315, and California Building Code (CBC) Section 420.6, require that smoke alarms and CO alarms be installed when alterations, repairs or additions are performed and the valuation of the work exceeds \$1,000. Generally, the alarms are required to be hard-wired, have battery backups, and be interconnected; however, they may be solely battery-operated under certain conditions (please check with an Inspector for exceptions). The alarms are required to be installed in the following locations:

- Smoke alarms in all sleeping rooms,
- > CO alarms in all sleeping rooms within dwelling units where fuel-burning appliances are installed,
- > Smoke alarm and CO alarm in area preceding sleeping rooms (such as a hallway), and
- > Smoke alarm and CO alarm on each story level of the dwelling including basements and habitable attic rooms.

> >	PV solar racking has been: (Applicable Non-Applicable) Installed per approved plans, manufacturers specifications, & industry standards. All standoffs located All attachments embedded per approved plans & industry standards.			
A	Re-roof: (Applicable Non-Applicable) ICC Number /Cool Roof Yes No /Min. Class A material			

The alarms are required to comply with the above when requesting the final inspection. Please make sure that an adult is present to allow an inspector within the home to verify compliance with the above requirements. If for some reason an adult will not be able to provide access, you may opt to complete the Installation Certification below. Please leave this signed certification form with the job card.

INSTALLATION CERTI	FICATION	Permit Number:	
For the property locate required smoke alarms		solar panels, Re-roof ha	, I hereby certify that the ve been installed as listed above.
Signature		Print	Date
Relationship to Proje	ct (please check one):		
☐ Property Owner	☐ Agent for Owner	☐ Lic. Contractor	☐ Agent for Lic. Contractor
If "Licensed Contractor	" or "Agent for Licensed Co	ontractor" is checked, ple	ease complete the following:
Company Name		 Contractor's	State License Number