



TOWN OF CLINTON

INCORPORATED APRIL 5, 1865

43 Leigh St., P.O. Box 5194

Clinton, N.J. 08809-5194

(908) 735-8616 FAX (908) 735-8082

APPLICATION FOR ONE & TWO FAMILY DWELLING CERTIFICATE OF SMOKE ALARM AND CARBON MONOXIDE ALARM AND FIRE EXTINGUISHER COMPLIANCE

***Indicates an area that must be completed. Failure to complete this area will result in the application being rejected and possibly causing additional costs to be incurred.**

***Dwelling Location:** Block _____ Lot _____
(Physical Address not mailing address) Street _____
Municipality Town of Clinton County Hunterdon State NJ

***Closing Date:** _____ ***Type of Structure:** Single Family Condo Duplex Apartment Townhouse
(Circle one)

Note: See the last page (page 3) of this form for information on the proper placement of the required devices.

Proper placement of these alarms is dependent upon the type and arrangement of the dwelling in which they are installed. Please refer to National Fire Protection Standard 72 for placement of smoke alarms and National Fire Protection Standard 720 for carbon monoxide alarm placement. Also refer to the manufacturer's installation directions for assistance in the placement of alarms.

If the dwelling currently has no smoke alarms then one alarm shall be installed on each level including basements but excluding attics or crawl spaces; the smoke alarm/carbon monoxide alarm outside of each sleeping area shall be within 10 feet of all bedrooms; and if there is an intervening door on the same level, a alarm may be needed on each side of the door. Battery operated alarms satisfy the minimum requirements for the Fire Safety Code. These alarms need not be required to be interconnected unless the existing structure already has electrical interconnected alarms however.

Carbon Monoxide alarms may be battery operated, plug in style or electrically interconnected. These devices must be installed within 10 feet of all bedroom doors.

An inspection shall be conducted to verify that these alarms are properly placed and functioning. The local Department of Fire Prevention may conduct this inspection however an owner, an authorized representative of the owner may be permitted to conduct this inspection provided a notary authenticates that inspection statements made upon this form are true.

Owner Name _____

Mailing Address:
Street Address/P.O.Box _____

City, State, Zip _____

***Phone Number** _____ **Cell Number** _____

OVER

OVER

OVER

USE THIS AREA IF YOU ARE MAKING A CERTIFICATION AS TO THE INSTALLATION, LOCATIONS AND OPERATION OF THE SMOKE AND CARBON MONOXIDE ALARMS AND THE FIRE EXTINGUISHER.

PLEASE CHECK ALL THE APPLICABLE STATEMENTS THAT APPLY:

- All smoke and carbon monoxide alarms have been tested and verified by myself and found to be in proper working order and properly placed as per the New Jersey Uniform Fire Code, N.J.A.C. 5:70-4.19 and as per manufacturer's installation directions
- Smoke alarms are installed on each level including basement and/or in each bedroom
- A Carbon Monoxide alarms is installed within 10 feet of all bedrooms
- A current unobstructed portable ABC type fire extinguisher is hung within 10 feet of the kitchen

Number of story's of structure: _____ This structure contains a basement: YES NO

DO NOT USE THIS SECTION

Notary Signature

Sworn and subscribed to before me this _____ day of _____, 20__.

I am requesting that the Department of Fire Prevention make an inspection of the above property to determine compliance with the Fire Safety Code.

I hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to the penalty as allowed by law.

*Applicant Signature (must always be signed)

Please Print Name Here

*Closing Date: _____ Contact Person: _____

*Phone Number: _____

SMOKE DETECTOR/CARBON MONOXIDE CERTIFICATES ARE VALID FOR SIX (6) MONTHS

Fee:	Application received more than 10 business days prior to a change of occupant:	\$45.00
	Application received 4 to 10 business days prior to a change of occupant:	\$90.00
	Application received fewer than 4 business days prior to a change of occupant:	\$161.00

Please make a check or money order payable to the Town of Clinton in the amount indicated above. This payment must accompany this application. Please allow for 2 to 3 weeks for processing and delivery. A Certificate of Smoke Alarm, Carbon Monoxide Alarm and Fire Extinguisher Compliance shall not be transferable. If the change of occupancy specified in this application does not occur within six (6) months, a new application shall be required. APPLICATION FEES ARE NON-REFUNDABLE

OFFICE USE ONLY

Date and Time Received: _____ Check Number and Amount Paid: _____

WHERE TO LOCATE SMOKE ALARMS:

Effective January 1, 2019, single station battery only smoke alarms must be the 10 year sealed battery type. Smoke alarms are to be located on every level of a residence, (basement, first floor, second floor) excluding crawl spaces and unfinished attics, and in every separate sleeping area, between sleeping areas and living areas. In homes with only one sleeping area on one floor, an alarm is to be placed in the hallway outside the bedroom. In homes with two or more separate sleeping areas, two alarms may be required, outside each sleeping area. In multi-level homes, alarms are to be located outside sleeping areas at every finished level of the home. Basement level alarms are to be located in close proximity to the bottom of the basement stairwell.

WHERE NOT TO LOCATE SMOKE ALARMS:

To avoid false alarms and/or improper operation, avoid installation of alarms in the following areas:

Kitchen, Attic or Garage - conditions present may cause nuisance activations.

Within 5 feet of Bathrooms -excessive steam from a shower may cause a nuisance alarm.

Within 3 feet of forced air ducts used for heating or air conditioning or the tip of a fan blade - air movement may prevent smoke from reaching the alarm device.

Near furnaces of any type - air and dust movement and normal combustion products may cause a nuisance alarm.

The peak of an "A" frame type of ceiling - "Dead Air" at the top may prevent smoke from reaching the detector. Install along the ceiling approximately 6-30 inches measured vertically down from the peak

Smoke Alarms:

Any existing electrical type smoke alarms must remain in place and be operational. If the alarm device also has a battery backup feature, it too must be operational. If these devices are the type that are interconnected (when one activates they all activate) then this feature must be working correctly. Where there are no smoke alarms present, battery-operated devices may be installed. Effective January 1, 2019, single station battery only smoke alarms must be the 10 year sealed battery type.

Smoke alarms are required on each floor level in the area of the bottom of the stairs leading up to the floor above. The idea is to detect the smoke BEFORE it starts ascending to the floor above. These devices are best located on a ceiling however are allowed to be located within 12 inches of the ceiling on a wall. They are not to be located in a kitchen, attic, garage, within 5 feet of a bathroom door or within 3 feet of the tip of a fan blade. Please follow the installation directions for the proper installation and location of these lifesaving smoke alarms.

Carbon Monoxide Alarms:

These alarms are required only when there are ANY fuel fired appliances present (range, furnace, water heater, gas fireplace, gas dryer, etc.) in the dwelling OR when there is an attached garage. The alarms may be battery operated, plug in style or electric. The location must be **within** 10 feet of ALL sleeping rooms. The best location is on the ceiling but they may be installed on walls. Follow the manufacturer's installation directions regarding the proper placement on a wall or ceiling.

Fire Extinguisher:

The minimum size is designated by how much fire the extinguisher is able to put out. The law requires that there be a current ABC type fire extinguisher mounted within 10 feet of the kitchen area along the exit path and not weighing more than 10 pounds. The minimum size must be a 2A10BC. ALL of the letters (A, B & C) must be on the label. Additionally, the extinguisher must be readily accessible is not permitted to be obstructed from view. This means not placed in a closet, in a cabinet, behind a door, or in the garage. The maximum mounting height is 5 feet above the floor measured to the handle of the extinguisher. The extinguisher must have been serviced within the past 12 months OR be new (evidenced by a sales receipt available at the time of inspection).

FURTHER INFORMATION ON SMOKE ALARM PLACEMENT:

For further information about alarm placement, consult the National Fire Protection Association's Standard #72, entitled "National Fire Alarm and Signaling Code", chapter 29. This publication may be obtained by contacting the Publication Sales Department, National Fire Protection Association, Battery Park, Quincy, MA. 02269.