

SMOKE / CARBON MONOXIDE (CO) ALARM SELF VERIFICATION FORM**CNI-037**

Building Permit Number _____

Project Address _____

California Residential Code (CRC R314 and R315) requires carbon monoxide alarms (CO alarms) in dwellings as well as smoke alarms when building permits are issued and the scope of work exceeds a total cost or calculated valuation of \$1,000. To grant final approval on your permit, it is necessary to verify the installation of these alarms within your dwelling. This form provides the ability to self-verify to Permit Sonoma when work done does not allow convenient access to the interior of the dwelling (e.g., re-roof or other exterior work).

Where one or more smoke alarms are required to be installed within an individual dwelling or sleeping unit, the smoke alarms shall be powered by a commercial power source and **interconnected** in such a manner that activation of one alarm will activate all alarms. Solely battery-operated smoke alarms not interconnected are permitted for work limited to exterior finishes, furnaces, water heaters, electrical alterations, and any alterations that do not result in removal of interior walls or ceiling finishes.

A. **Smoke alarms** are installed in accordance with the approved manufacturer's instructions in all the following areas:

1. In Each sleeping room
2. Outside each sleeping area in the immediate vicinity of the bedroom(s)
3. On each floor level of dwelling unit, including basements and habitable attics
4. In the hallway and in the room open to the hallway in dwelling units where the ceiling height of a room opens to a hallway serving bedrooms exceeds that of the hallway by 24 inches or more

B. **Carbon Monoxide alarms** are installed in accordance with the approved manufacturer's instructions in all the following areas where **fossil fuel burning** appliances are installed, including fireplaces:

1. Outside of each separate dwelling unit sleeping area in the immediate vicinity of the bedroom(s)
2. On every floor level of dwelling unit, including basements
3. Within a bedroom when a fuel-burning appliance is located in a bedroom or attached bathroom

My signature below certifies to Permit Sonoma that both smoke alarms and CO alarms have been installed on the above referenced project as specified above.

 Owner Contractor

Name _____

Signature and Date Emma Stone _____

Please fill in the permit number and the requested information above, then upload to the record via Permits Online (prmd.sonomacounty.ca.gov), prior to requesting the final inspection.