



City of Pittsburg

Community and Economic Development - Building Division

65 Civic Ave, Pittsburg CA 94565

Phone: (925) 252-4910

Fax: (925) 252-4814

AFFIDAVIT SELF-CERTIFICATION FOR COMPLIANCE OF SMOKE ALARMS AND CARBON MONOXIDE ALARMS

Property address: _____

Permit number: _____

of smoke alarms in home: _____

of carbon monoxide detectors in home: _____

When alterations, repairs or additions requiring a permit occur, or sleeping rooms are created.

- A smoke detector must be installed:
 - ✓ In each bedroom (including sleeping room, sleeping unit, and sleeping area), and
 - ✓ Outside each bedroom in the immediate vicinity of the bedrooms, and
 - ✓ On each additional story of the dwelling, including basements and habitable attics. (2022 California Residential Code (CRC) Section R314, 2022 California Building Code Section 907.2.11 and 420.6, and California Health and Safety Code Section 13113.7, or current applicable codes.)
- Carbon monoxide detectors are required in dwellings or bedrooms containing fuel burning appliances (for example, gas stove, gas water heater, HVAC system, and fireplace) and/or having attached garages. A detector must be installed:
 - ✓ Outside each bedroom and in the immediate vicinity of the bedrooms, and
 - ✓ On each additional story of the dwelling, including basements. (2022 California Residential Code Section R315, and 2022 California Building Code Section 420.6, or current applicable codes.) California Building Code (CBC).
- All alarms shall comply with requirements for listing and approval by the Office of the State Fire Marshal. http://osfm.fire.ca.gov/licensingsinglistings/licenselistig_bml_searchcotest.php

As owner of the above referenced property, I hereby certify that the smoke detectors and carbon monoxide detectors have been installed in accordance with the requirements set forth above and the manufacturer's instructions.

I declare under penalty of perjury that the foregoing is true and correct.

Property owner's Name (printed/typed): _____

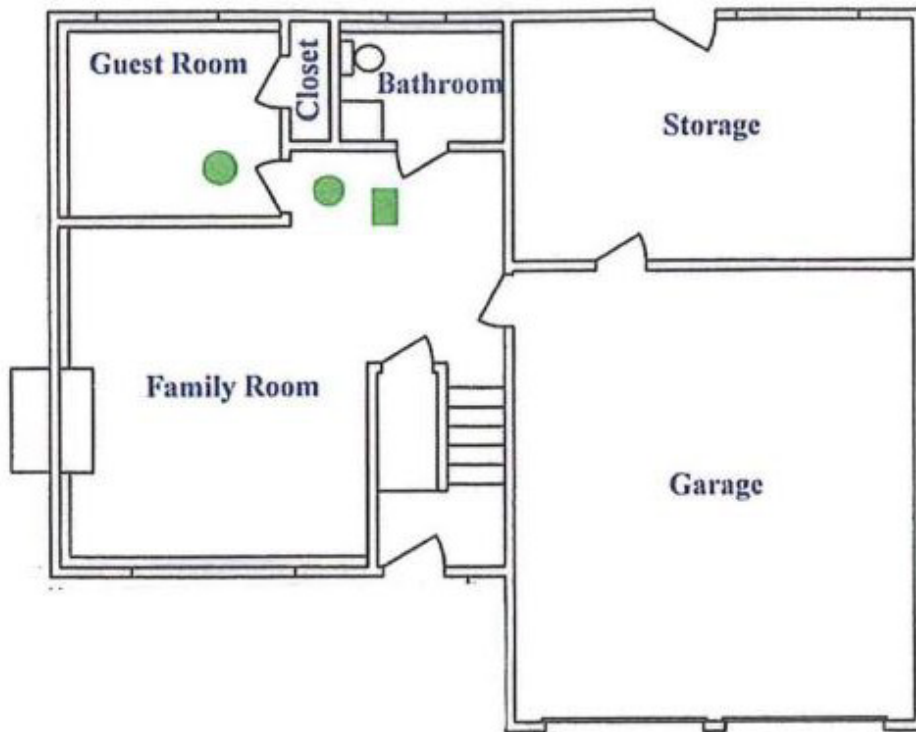
Signature of Owner: _____ Date: _____

This affidavit must be uploaded to the electronic permit portal for review by the city building inspector prior to final inspection sign-off.

See QR Code for link.

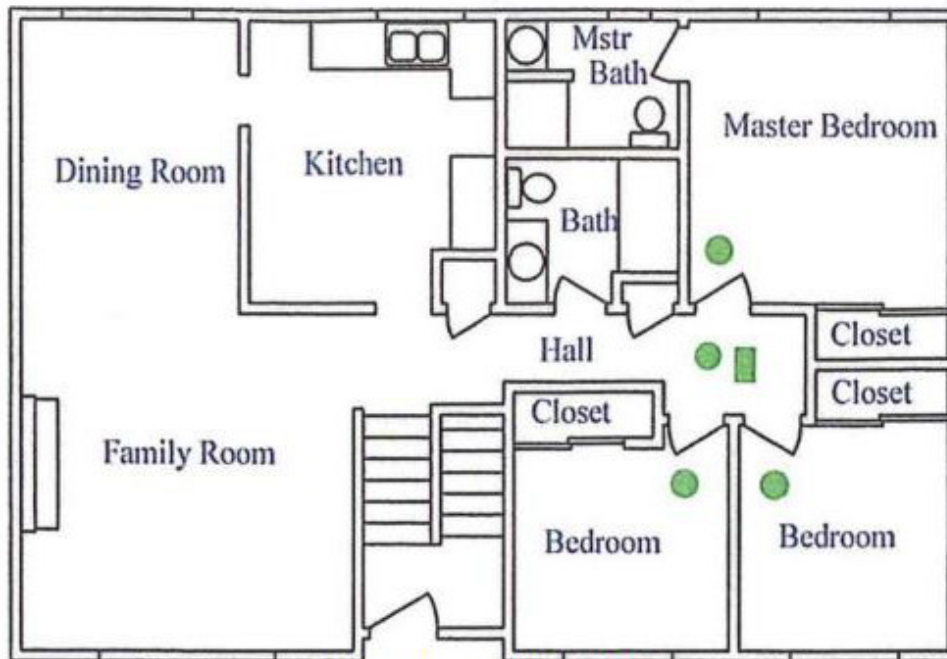


SMOKE ALARM AND CARBON MONOXIDE ALARM LOCATIONS



FIRST FLOOR PLAN

● = SMOKE ALARM ■ = CARBON MONOXIDE ALARM



SECOND FLOOR PLAN

● = SMOKE ALARM ■ = CARBON MONOXIDE ALARM