



Christopher C. Mullin
 Fire Chief/Fire Official
 Emergency Management Coordinator



Fire Headquarters
 62 S. Livingston Ave.
 Livingston, NJ 07039

EMERGENCY: 911
 Business: 973-992-2373
 Fax: 973-535-2948
 lfd@livingstonnj.org

Fire Division

**Application & Certification in Lieu of Inspection for
 Certificate of Smoke Detector & Carbon Monoxide
 Alarm & Portable Fire Extinguisher Compliance**

Dwelling Location: Street Address: _____

**** NOTE: ALL BOXES MUST BE CHECKED IN ORDER FOR CERTIFICATION TO BE VALID ****

- Smoke detector on each level of the dwelling, including basements, excluding attic or crawl space; and
- Smoke detector & carbon monoxide alarm outside each separate sleeping area; and within 10 feet of the bedrooms.
- All smoke detectors are in working order.
- Carbon monoxide alarm(s) in working order.
- Fire extinguisher is minimum 2A:10BC is properly mounted, and is located within 10 feet of the kitchen.

This is a _____ story dwelling with _____ without a basement.

An inspection shall be conducted by the owner or an authorized representative of the owner. The smoke detectors required above shall be located in accordance with NFPA 74; the carbon monoxide alarm(s) installed per NFPA=720. The detectors are not required to be interconnected. Battery powered detectors and alarms are acceptable. Note: AC powered and/or interconnected alarms & smoke detectors installed in homes constructed after January 1977 shall be maintained in working order. The fire extinguisher is installed per P.L. 2005, c.71 (N.J.S.A. 52:27D-198.1 et seq). See instructions on the back of this page.

Mail Certificate to:

Name: _____ Address: _____

Phone: _____ Fax: _____

Contact Person: _____ Email: _____

I do hereby certify that the following statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I will be subject to penalty.

Sworn & subscribed to before me this _____ day of _____ 20 _____

Notary Signature

Applicant Signature

Fees

The initial inspection fee is \$50.00 and each re-inspection that is required following an unsuccessful initial inspection will be an additional charge of \$25.00

****Check or Money Order no Credit Cards - Checks are made payable to the Township of Livingston and MUST accompany this form.**

Requirements for the Sale or Rental of a One or Two Family Home

Smoke Detector Locations

Basement - Mounted to the ceiling at the bottom of stairs. If there is a bedroom on this level the detector shall be placed within 10 feet of the bedroom and not at the bottom of the stairs.

Ground Floor - Mounted to the ceiling at the bottom of the stairs that lead to the 1st floor. If there is a bedroom on the ground floor the detector shall be placed within 10 feet of the bedroom and not at the bottom of the stairs.

1st Floor - Mounted to the ceiling at the bottom of the stairs that lead to the 2nd floor. If there is a bedroom on the 1st floor the detector shall be placed within 10 feet of the bedroom and not at the bottom of the stairs.

2nd floor - Mounted to the ceiling within 10 feet of the bedroom.

3rd floor - Mounted to the ceiling at the top of the stairs or within 10 feet of the bedrooms.

Attic - Not required.

Carbon Monoxide Detectors

Install the C/O detector(s) within 10 feet of **ALL** bedroom areas. Mount the unit on the wall or ceiling as specified in the manufacturer's instructions using the supplied hardware. Devices are permitted to be battery powered, hardwired or plug in type.

If there is no outlet within 10' of bedroom hallway, use a battery powered unit.

Note

All detectors shall be UL LISTED. Smoke & Carbon Monoxide detectors (excluding plug in style CO detectors) shall be mounted using screws. Mounting of the detectors using Tape, Velcro, Nails or Hung on a picture hook will NOT be accepted.

****BATTERY POWERED SMOKE DETECTORS AS OF 01/01/2019 SHALL BE THE 10 YR. SEALED BATTERY DESIGN ****