

# Town of Burns Harbor Fire Department

308 Navajo Trail  
Burns Harbor, IN 46304

Phone: 219-787-8591  
Fax: 219-787-8199



## SMOKE DETECTOR CERTIFICATE OF COMPLIANCE

Between January 1 and January 31 each year, the owner of each Multiple Family or Mobile Home Rental Dwelling shall certify in writing on this form prescribed by the Town Of Burns Harbor Fire Department that the required maintenance has been performed on all detectors in the owner's units, that all detectors are in good working condition as of the date of this certificate. Each Owner shall certify each new occupancy of any dwelling unit or mobile homes covered by this ordinance that all smoke detectors have been installed and are in proper working condition to the best of the owner's ability or manufacture recommendations.

I, \_\_\_\_\_, \_\_\_\_\_  
(Print) Name of Owner Address

Have made all maintenance replacement and any other needed repairs to make all detectors in my opinion up to proper working order. I hereby certify by signature of this certificate that all Smoke Detector are in working order at the following locations:

ADDRESS	NO. OF DETECTORS
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____

This certificate is issued and signed on the condition that all ordinance provisions now adopted, or that may hereafter be adopted, have been complied with as of the below listed date. This certificate is valid for the year 20 \_\_\_\_

Owner's Signature \_\_\_\_\_

Contact Number (\_\_\_\_)-\_\_\_\_-\_\_\_\_

Date of Signature \_\_\_\_\_

*Saving Lives And Preventing Fires*

White-Fire Department

Yellow- Building Department

Pink- Property Owner