BUILDING DEPARTMENT
TOWN OF EAST HAMPTON

300 Pantigo Place – Suite 104
East Hampton, New York 11937

BUILDING INSPECTOR'S OFFICE ***PHONE***
631) 324-4145

SMOKE ALARM AFFIDAVIT

STATE OF NEW YORK)
)SS:
COUNTY OF SUFFOLK)

I, _____, being duly sworn, dispose and say:

1) I am the _____ of the premises located at

Suffolk County Tax Map Number 300 -_____._____-_____-_____._____, which is improved by a single family dwelling.

2) That at least one smoke detection alarm device is installed on or near the ceiling adjacent to all sleeping spaces in the dwelling with one in every sleeping room. Outside each separate sleeping area in the immediate vicinity of the bedrooms and one on each additional story of the dwelling, including basements and habitable attics

3) That I make this affidavit to comply with NFPA 72 and Section R314 of the Residential and Fire Prevention Code.

_____
Signature

Sworn to before me this _____

Day of _____, 20_____

_____
Notary Public