

UNIT CARBON MONOXIDE AND SMOKE DETECTOR TEST

DATE _____

Address: _____

Carbon Monoxide detector and smoke detector has been tested as a result of:

REASON: MOVE IN TO UNIT or **MAINTENANCE**

- 1) CARBON MONOXIDE AND SMOKE DETECTOR IS SECURELY FASTENED TO THE WALL OR CEILING
YES NO
- 2) CARBON MONOXIDE AND SMOKE DETECTOR SHOWS NO EVIDENCE OF PHYSICAL DAMAGE,
PAINT APPLICATION, OR EXCESSIVE GREASE AND DIRT ACCUMULATIONS. YES NO
- 3) VENTILATION HOLES ON THE CARBON MONOXIDE AND SMOKE DETECTORS ARE CLEAN AND
FREE OF OBSTRUCTIONS YES NO
- 4) CARBON MONOXIDE AND SMOKE DETECTOR SIGNAL SOUNDS WHEN THE TEST DEVICE IS
OPERATED. YES NO
- 5) IF BATTERY OPERATED...BATTERIES HAVE BEEN REPLACED ON _____ YES
NO

LANDLORD NAME:

SIGNATURE: _____

TENANT NAME : _____

SIGNATURE: _____

PLEASE NOTE LANDLORD REMINDED TENANT THEY SHOULD HAVE TENANT INSURANCE FOR THEIR CONTENTS. LANDLORD INSURANCE DOES NOT COVER TENANT REQUIREMENTS.

DATE: _____ TENANT INITIALS _____ LANDLORD INITIALS _____

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