



TOWN OF NARRAGANSETT

Fire Department, 40 Caswell Street, Narragansett, RI 02882-3393
Tel. 789-1000

Chief of Department
Scott M. Partington

Fire Marshal
David S. Arnold

APPLICATION FOR SMOKE DETECTOR AND CARBON MONOXIDE COMPLIANCE

ALL FIELDS MUST BE COMPLETED

NO. _____ RECEIPT NO. _____ TODAY'S DATE: _____

LOCATION: _____ PLAT _____ LOT _____

APPLICANT: _____ ADDRESS: _____

CURRENT OWNER: _____ ADDRESS: _____

TELEPHONE OWNER: _____ TELEPHONE APPLICANT: _____

NEW OWNER: _____ ADDRESS: _____

INSPECTION DATE _____ TIME REQUESTED: _____

- TYPE OF BUILDING USE (circle one):

SINGLE FAMILY DWELLING / DUPLEX DWELLING / APARTMENT BUILDING

ROOMING HOUSE / CONDOMINIUM UNIT / OTHER DWELLING

- NUMBER OF LIVING UNITS / APARTMENTS IN BUILDING TOTAL: _____
- WILL THIS PROPERTY BE RENTED? _____
- YEAR BUILDING WAS BUILT: _____

REQUIREMENTS OF INSTALLATION: Residential dwellings units shall within 120 days prior to title transfer have an inspection and certification of an operating and approved smoke detection system in accordance with the **FIRE SAFETY CODE OF RHODE ISLAND; CHAPTER 23-28.1.**

AT THE TIME OF THE INSPECTION AND CERTIFICATION, I UNDERSTAND THAT THE OWNER OF THE PROPERTY OR AN APPROVED AGENT SHALL BE PRESENT AND IF SMOKE DETECTORS ARE PART OF A COMBINATION BURGLAR/FIRE ALARM SYSTEM THAT A REPRESENTATIVE OF THE ALARM COMPANY SHALL ALSO BE PRESENT.

\$30.00 FEE MUST ACCOMPANY THIS APPLICATION

NARRAGANSETT TOWN ORDINANCE CHAPTER 10, ARTICLE III REQUIRES THAT ALL BUILDINGS SHALL DISPLAY THE PROPER STREET NUMBER, CLEARLY VISIBLE FROM THE STREET OR HIGHWAY. INSPECTION WILL NOT BE CONDUCTED IF THE ABOVE ORIDINANCE IS NOT COMPLIED WITH.

Owner or Applicant

