



FP-007C
(Rev. 1.1.2015)

The Commonwealth of Massachusetts

Town of BURLINGTON



► Return completed application to: FIRE DEPT HEADQUARTERS ◀

APPLICATION FOR CERTIFICATE OF COMPLIANCE FOR SMOKE DETECTORS AND CARBON MONOXIDE ALARMS M.G.L. CHAPTER 148, SECTIONS 26F, 26F1/2

City or Town: TOWN OF BURLINGTON Date: _____

Application is hereby made for inspection of smoke detectors and carbon monoxide alarms as required by Massachusetts General Law, Chapter 148, Sections 26F, 26F1/2 and 527 CMR 1:00 Section 13.7.

NOTE: SUBMIT APPLICATION TO LOCAL FIRE DEPARTMENT HEADQUARTERS

Location of Property _____

Owner of Property _____

Number of Dwelling Units _____ Signature of Applicant _____

Inspection/Testing completed on: _____ By: _____
(Inspector)

Fee: (M.G.L. Chapter 148 Sec. 10A) _____ Fire Chief _____

Note: Any certificate issued in accordance with provisions of M.G.L. Chapter 148, Sections 26F, 26F1/2 expires sixty (60) days after issuance by head of the Fire Department.

FIRE DEPARTMENT'S COPY



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Town of BURLINGTON



CERTIFICATE OF COMPLIANCE M.G.L. CHAPTER 148, SECTIONS 26F, 26F1/2

City or Town: TOWN OF BURLINGTON Date: _____

This certifies that the property located at _____

has been equipped with approved smoke detectors, and carbon monoxide alarms* and was found to be in compliance with Massachusetts General Law, Chapter 148 Sections 26F, 26F1/2 and 527 CMR 1.00 Section 13.7.

Inspection/Testing completed on: _____ By: _____
(Inspector)

Fee Paid: _____ Head of Fire Department: _____

Note: This certificate expires sixty (60) days after date of issue.

SELLER'S COPY

PROCEDURE FOR SMOKE DETECTOR/CO ALARM CERTIFICATE

- Residents and real estate agents will be required to request smoke detector inspections by phone by calling Fire Headquarters at 781-270-1925.
- The resident or real estate representative shall give the inspector the completed smoke detector inspection form along with a check for \$25.00 made out to the Town of Burlington at the home at the time of inspection. Cash will not be accepted by the inspector.
- If the applicant has any question as to the amount or the proper location of the smoke detectors, they may call the 781.270.1925 and ask for the on duty Captain who can assist you with a copy of the typical floor plan to assist them with installing the detectors.
- Inspection shall be done the day of receipt of application, otherwise by the same shift at a later date, if possible

Name of person to be present for inspection: _____

Telephone#: (____) _____ Date: _____ Time: _____

TYPE OF INSPECTION:

Smoke Detector: PASSED _____
FAILED _____

Carbon Monoxide Detector: PASSED _____
FAILED _____

Reason for failure: _____

Reason for failure: _____

Applicant to receive lower half of certificate

Reason for failure: _____

Re-inspection date: _____ Time: _____

Will call later: _____

Inspection done by: _____