

Smoke Alarms for Residential Accommodation Certificate Installation Report

Details

Job Address

Construction Certificate Application No

Complying Development Certificate No

I, _____ of _____
(Print Name) (Company – if applicable)

(Address) Licence No _____ (if applicable)

HERBY certify that the Smoke Alarm/s has/have been interconnected and installed in accordance with the Building Code of Australia – Part 3.7.5 Housing provisions Ref: AS 3786 – 1993 and AS 3000:

(tick where applicable)

TYPE OF SYSTEM

**LOCATION OF DETECTOR
(WIRED TO MAINS POWER)**

- New
- Modification to System
- Addition to existing

- Passageway
- Bedroom
- Other

Number of Detectors _____

Date of Installation and Testing _____

Comments/Notes

Contact No: (Home): Mobile:

(Work): Fax:

Signature: Date: