

DATE SCHEDULED _____

DAY _____

TIME _____

PERMIT # _____

CHECK # _____

AMOUNT \$ _____



CITY OF SOMERVILLE, MASSACHUSETTS

FIRE DEPARTMENT

FIRE PREVENTION BUREAU

1 Franey Road Somerville, Massachusetts 02144

TEL: (617) 623-1700 Ext#8400

FAX: (617) 666-4597

APPLICATION FOR CERTIFICATE OF COMPLIANCE FOR SALE OR PURCHASE

In accordance with the provisions of MGL Chapter 148, as provided in Section 26, this application is hereby made to inspect the installation of approved smoke detectors and carbon monoxide alarms; as required by Section 26C, 26E, 26F and 26F1/2.

PROPERTY ADDRESS _____

UNIT OR CONDO # _____

NAME OF APPLICANT: _____

(Full name of person, firm or corporation)

PHONE # _____

(# for contact person that will be present during inspection)

NUMBER OF DWELLING UNITS TO BE INSPECTED _____

TOTAL DWELLING UNITS ON PROPERTY _____

COMMERCIAL PROPERTY ATTACHED _____ NAME OF BUSINESS _____

PROPERTY SPRINKLERED (Circle) YES / NO

FIRE ALARM MONITORING COMPANY _____

Occupancies that are required to have annual Fire Alarm and Sprinkler tests are required to provide the Somerville Fire Prevention Bureau with current inspection documentation within full compliance no later than the date of the scheduled inspection. Sprinkler systems are required to be monitored.