

# IMPORTANT!

## SMOKE ALARMS AND CARBON MONOXIDE ALARMS

Smoke Alarms and Carbon Monoxide alarms are required by the State of California for **all Building Permits.**

The smoke and carbon monoxide alarms will be inspected first thing at final inspection. If they are not in place, no final inspection will be conducted. Example: If the permit is for a roof, the building inspector will not inspect the roof until the smoke and carbon monoxide alarms are in place and approved. If the alarms fail at the time of the second or any subsequent inspection, a re-inspection fee of \$144 will be accessed for each failed inspection.

Please note: Contractors often call the office to complain they cannot schedule for the next day. Part of the reason for this is the inspectors are going back to check on a project multiple times for the missing alarms.

It is advised to have the alarms in place and have them inspected on the first inspection. If the alarm inspection fails, they should be ready on the next inspection. Please make sure we have access to the interior of the building. Be advised that inspectors are not permitted to enter an occupied building without a responsible adult escorting them.

Please note that most homeowners are unaware of the correct location for the alarms. The contractor should give the homeowner the necessary information about location of alarms or help install the units.

Battery powered or plug in units are permitted unless the room or area is being re-wired.

### REQUIRED LOCATIONS OF CARBON MONOXIDE ALARMS

- ▶ A Carbon Monoxide Alarm is required outside of each separate dwelling unit sleeping area, in the immediate vicinity of the bedroom(s).
- ▶ A Carbon Monoxide Alarm is required on every level of a dwelling unit including basements (3 story home = 3 Carbon Monoxide Alarms, Minimum).

### REQUIRED LOCATIONS OF SMOKE ALARMS

- ▶ One Smoke Alarm is required on each level.
- ▶ A Smoke Alarm is required in each bedroom.
- ▶ **Please note:** Any room with a closet regardless of use is considered a bedroom.
- ▶ A Smoke Alarm is required outside (hall) each bedroom area.
- ▶ If there are bedrooms at opposite ends of the building on the same level, each area outside the bedrooms will require its own alarm.

If the home has hardwired Smoke Alarms, the locations that require Carbon Monoxide Alarms are required to be changed to hardwired combination Smoke/Carbon Monoxide Alarms. If the home has battery powered Smoke Alarms, then battery powered Carbon Monoxide Alarms will be installed in the required locations. Any area that is remodeled or added, and the ceiling opened, will require hardwired combination Smoke/Carbon Monoxide Alarms in the required locations.

Please contact your Building Inspector or call this office if you have any questions or doubts about the above information: 650-599-7311

455 County Center ■ Redwood City, CA 94063  
Mail Drop: PLN 122 ■ TEL (650) 363-4161 ■ FAX (650) 363-4849

# Application for Building Permit

## Site Address

Address: \_\_\_\_\_

\_\_\_\_\_ Zip: \_\_\_\_\_

## County Area (i.e. Moss Beach, etc.)

\_\_\_\_\_

## Property Owner

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Work): \_\_\_\_\_ (Home): \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## Architect/Designer Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Work) \_\_\_\_\_ (Home): \_\_\_\_\_

E-mail Address: \_\_\_\_\_

California Lic. No.: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

## Case Number(s) / Group Number

\_\_\_\_\_  
\_\_\_\_\_

## Assessor's Parcel Number(s)

- -  
\_\_\_\_\_  
- -

## Contractor/Owner

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Work): \_\_\_\_\_ (Home): \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Contractor's Lic. No.: \_\_\_\_\_ Exp. date: \_\_\_\_\_

Workman's Comp. No.: \_\_\_\_\_ Exp. date: \_\_\_\_\_

Carrier: \_\_\_\_\_

## Engineer Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Work): \_\_\_\_\_ (Home): \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Detailed Description of Work**      **Valuation: \$** \_\_\_\_\_      **Sq.Ft.:** \_\_\_\_\_

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