



# WALLINGFORD CONNECTICUT

## Smoke Alarm Program Request Form

1 and 2 family houses and owner occupied 3 family dwellings within the Town of Wallingford are eligible to have free battery operated smoke alarms installed by the American Red Cross. Rental properties or condominiums should contact their landlord or property owner's association for smoke alarms.

Please complete this form and email to [firemarshal@wallingfordfd.com](mailto:firemarshal@wallingfordfd.com) or return to the Wallingford Fire Department CFHQ at 75 Masonic Avenue, Wallingford, CT 06492.

### REQUEST INFORMATION

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

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

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

### SMOKE ALARM INFORMATION

☐ Single-Family House                      ☐ Two-Family House                      ☐ Owner occupied 3 family dwellings

# of Levels, including basement: \_\_\_\_\_ # of smoke alarms currently in the residence \_\_\_\_\_

# of Smoke alarms greater than 10 years old, if known: \_\_\_\_\_

Do you have at least one Smoke Alarm per level?      ☐ Yes                      ☐ No

If no, which levels? \_\_\_\_\_

Is anyone in the residence deaf or hearing impaired?      ☐ Yes                      ☐ No

Additional comments: \_\_\_\_\_

### OFFICIAL USE ONLY

Date Received: \_\_\_\_\_ Received by: \_\_\_\_\_

