



DELAWARE STATE FIRE MARSHAL'S OFFICE

Smoke Detector Installation Program

INFORMATION FORM

2307 MacArthur Road
 New Castle, DE 19720
 phone (302) 323-5365
 fax (302) 323-5366

Name							
Date of Birth or Age							
Home Phone Number				Day		Night	
Work/Alternate Phone Number				Day		Night	
Preferred Contact Time							
Address of Residence							
City, State, Zip				DE			
Do you own and occupy this residence?						Yes	No
Number of levels (floors), including the basement, at residence							
Does the home have working smoke detectors?						Yes	No
Total number of occupants in residence							
Age(s) of occupant(s)*							
Any disabled adult(s)?		Yes*	No	How many			Age(s)
Any disabled child(ren)?		Yes*	No	How many			Age(s)
Any infirm (or extended illness) child or adult?		Yes*	No	How many			Age(s)
Hearing impaired?		Yes*	No	How many			Age(s)
*If over the age of 62 or "Yes", name of individual(s)							
Does disability limit resident from changing smoke detector battery?						Yes	No
-- OFFICE USE ONLY -- Office of the State Fire Marshal Electrician - Issue Date - Installed Date - Number of Detectors - Payment Approved -						Amount	