

# SMOKE ALARM WAIVER AGREEMENT FORM

The \_\_\_\_\_ upon permission by the occupant, have installed and tested one or more new smoke alarms. The alarms were tested using the test button to ensure they were in working order before the installer left the premises.

In consideration for providing and installing the smoke alarm(s) in my home, I, myself, my heirs, executors, administrators or successors, agree to hold harmless the program participants, the fire department, the municipality and its officers, agents or employees from all damages of any kind, to person or property, resulting from the installation and failure of the smoke alarms and/or batteries.

By signing this document, I certify that the smoke alarms were tested in my presence and are in good working order. I have received information from the installer regarding proper smoke alarm maintenance, and I agree to maintain the alarms properly by testing them once a month.

I acknowledge having read, understood and agreed to the above waiver, release, and indemnity.

\_\_\_\_\_  
Occupant (print name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness (print name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date