



TOWNSHIP OF MEDFORD
DEPARTMENT OF FIRE & EMS

1 Firehouse Lane ■ Medford, NJ 08055
Administration: (609) 953-3291 ■ Fax: (609) 654-1069
Emergencies: 911 ■ Web Site: www.medfordfire.org



Certificate of smoke detector and carbon monoxide alarm compliance and portable fire extinguisher compliance

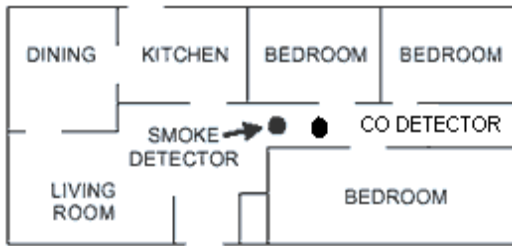
CSDCMAPFEC

1. Before any use group I-1, R-1, R-2, R-3 or R-4 structure is sold, leased, rented, or otherwise made subject to change of occupancy for residential purposes, the owner shall obtain a certificate of smoke detector and carbon monoxide alarm and fire extinguisher compliance CSDCMAPFEC N.J.A.C. 5:70 – 4.19
2. The owner, or authorized agent of the owner, shall apply for a CSDCMAPFEC on a form provided by the enforcing agency. The application shall be accompanied by the appropriate fee.
3. The application fee for a Certificate of smoke detector and carbon monoxide alarm and fire extinguisher compliance CSDCMAPFEC is between \$50.00 and \$125.00 as follows:
 - a. received more than 10 business days prior to the change of occupant: \$50.00;
 - b. received four to 10 business days prior to the change of occupant: \$70.00;
 - c. received fewer than four business days prior to the change of occupant: \$125.00
4. A CSDCMAPFEC shall not be transferable. If the change of occupancy specified in the application for a CSDCMAPFEC does not occur within the six months, a new application shall be required.
5. No CSDCMAPFEC certificate of occupancy shall be issued for any Use-Group R-3 or R-4 structure, or unit therein, as the case may be, unless the structure or unit contains a carbon monoxide detector meeting the requirements of UL Standard 2034; provided, however, that no carbon monoxide alarm shall be required in any building that does not contain any fuel burning appliances and does not have an attached garage.
6. Single station carbon monoxide alarms shall be installed and maintained in the immediate vicinity of the sleeping area(s).
7. Carbon monoxide alarms may be battery-operated, hard-wired, or of the plug in type and shall be listed and labeled in accordance with UL-2034 and shall be installed in accordance with the requirements of this section and NFPA-720.
8. Smoke detectors shall be installed on each level of the premise; and
9. Outside of each separate sleeping area(s) within 10 feet of a bedroom door. N.J.A.C. 5:70 – 4.19
10. Smoke detectors shall be located in accordance with NFPA 72 and maintained in working order.
11. Smoke detectors shall be maintained as originally installed (hard wired smoke detectors shall not be replaced with battery detectors).
12. The requirements for the type and placement of the extinguishers are as follows:
 - a. At least one portable fire extinguisher shall be installed in all one and two-family dwellings (except seasonal rental units) upon change of occupancy;

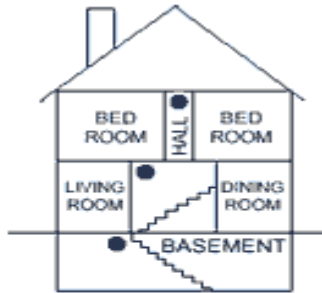
- b. The extinguisher shall be listed, labeled, charged, and operable;
- c. The size shall be no smaller than 2A:10:BC, rated for residential use and weigh no more than 10lbs;
- d. The hangers or brackets supplied by the manufacturer must be used;
- e. The extinguisher must be located within 10 feet of the kitchen;
- f. The top of the extinguisher must not be more than 5 feet above the floor;
- g. The extinguisher must be visible and in a readily accessible location, free from being blocked by furniture, storage, or other items;
- h. The extinguisher must be accompanied by an owner's manual or written information regarding the operation, inspection, and maintenance of the extinguisher, and
- i. Lastly, the extinguisher must be installed with the operating instructions clearly visible.

Definitions:

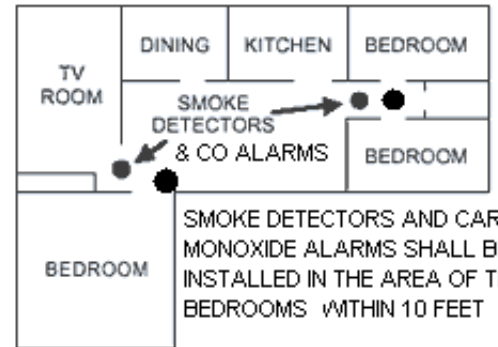
- i. I-1 – Board & care facilities, half-way house, group home, social rehabilitation facilities, alcohol and drug facilities, convalescent facilities.
- ii. R-2 – Hotels, motels, boarding houses, and dormitories.
- iii. R-3 – One or two family dwelling units constructed under the BOCA or ICC building code.
- iv. R-4 – One or two family dwelling units constructed under the CABO one & two family dwelling code or the ICC one & two family code.
- v. CSDCMAPFEC – certificate of smoke detector and carbon monoxide alarm compliance.
- vi. New Fire Extinguisher – New fire extinguishers are not required to be serviced or tagged, as long as the seller or agent can provide proof of purchase or receipt.
- vii. NFPA 720 – National Fire Protection Association standard for the installation of household carbon monoxide (CO) warning equipment.
- viii. NFPA 10 – National Fire Protection Association standard for the installation and maintenance of fire extinguishers
- ix. UL-2034 - Carbon Monoxide Alarm Standard Underwriters Laboratories Inc.
- x. Fuel burning appliance – Includes but not limited to; boilers, heaters, stoves, fireplaces, clothes dryers, water heaters, etc.
- xi. N.J.A.C. 5:70 – 4.19 – New Jersey Uniform Fire Code.



A SMOKE DETECTOR AND CARBON MONOXIDE ALARM SHALL BE INSTALLED BETWEEN THE SLEEPING AREA AND THE REST OF THE FAMILY LIVING UNIT WITHIN 10 FEET OF THE BEDROOMS



A SMOKE DETECTOR SHALL BE INSTALLED ON EVERY LEVEL.
* AND FIRE EXTINGUISHER WITHIN 10 FEET OF KITCHEN



SMOKE DETECTORS AND CARBON MONOXIDE ALARMS SHALL BE INSTALLED IN THE AREA OF THE BEDROOMS WITHIN 10 FEET

****NOTE: AC powered and/or interconnected alarms and smoke detectors installed in homes constructed after January, 1977 shall be maintained in working order.



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REQUEST FOR A CERTIFICATE OF SMOKE DETECTOR, CARBON MONOXIDE ALARM & PORTABLE FIRE EXTINGUISHER

Property Location: _____

Block: _____ LOT: _____

Fire alarm system type (check all that apply)

Hardwired (110v) Low volt system (ADT, BRINKS, ETC.) Battery operated only

Carbon monoxide alarm type (check all that apply)

Hardwired Battery operated Plug in

Fire alarm reporting company's name and phone number: _____

Current property owner's name: _____

Address: _____

Phone number (home) _____ (mobile) _____

Proposed owners name or renter's name: _____

Address: _____

Phone number (home) _____ (mobile) _____

Seller / Realtor: _____ Phone number: _____

Address: _____

Agent: _____

Settlement date: _____

Move in date (if rental): _____

****ALL INFORMATION MUST BE COMPLETED BEFORE INSPECTION IS SCHEDULED**

****CSDCMAPFEC CERTIFICATE IS VALID FOR 6 MONTHS**