



# SMOKE ALARM CERTIFICATION

## APPLICATION DETAILS

DA/CC/CDC No.:

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Address:

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Suburb:

Post Code:

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Lot / Sec / DP:

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## INSTALLATION DETAILS

Number of  
alarms:

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Location of  
alarms:

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Date of  
installation:

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## INSTALLER DECLARATION

I certify that the smoke alarm system installed at the abovementioned property for the works subject of this application:

- a) are connected to the consumer mains power; and
- b) are interconnected where there is more than one alarm; and
- c) comply with the National Construction Code, Volume 2, Part H3D6 & ABCB Housing Provisions Part 9.5
- d) comply with Australian Standard's AS 3786:2023 & AS/NZS 3000:2018

## INSTALLER'S DETAILS

Name:

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Company Name:

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Address:

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License No:

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Signature:

Date:

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