

FOR OFFICE USE ONLY

**A Smoke Detector / Alarm Report must be submitted with the Fire Report for residential or institutional property fires.**

Fire Number
-------------

DATE OF FIRE			TIME	MUNICIPALITY WHERE INCIDENT OCCURRED	MUNICIPAL CODE
Day	Month	Year			

**LOCATION OF FIRE INCIDENT - Full Address (Apt., Street, City/Town) OR Sec. Twp. Rge. Mer.)**

--

**NAME OF OWNER / OCCUPANT**

--

MANUFACTURER OF DETECTOR OR ALARM	MODEL NUMBER

**TYPE OF SMOKE DETECTOR**  1. Ionization 2. Photoelectric 3. Combination 4. Other 5. Unknown 6. Not Applicable

**POWER SOURCE OF SMOKE ALARM DEVICE**  1. Hardwired 2. Battery 3. Unknown 4. Not Applicable

**PERFORMANCE OF SMOKE ALARM DEVICE**

- |  |  |
|--|--|
| <input type="checkbox"/> 00 No smoke alarm                             | 07 Alarm in room of origin - not activated - mechanical failure            |
| <input type="checkbox"/> 01 Alarm in room of origin - activated        | 08 Alarm not in room of origin - not activated - battery dead              |
| 02 Alarm not in room of origin - activated                             | 09 Alarm not in room of origin - not activated - no battery                |
| 03 Alarm in room of origin - not activated - non-suitable location     | 10 Alarm not in room of origin - not activated - AC not connected/disabled |
| 04 Alarm in room of origin - not activated - battery dead              | 11 Alarm not in room of origin - not activated - mechanical failure        |
| 05 Alarm in room of origin - not activated - no battery                | 12 Not enough smoke to activate smoke alarm                                |
| 06 Alarm in room of origin - not activated - AC not connected/disabled | 99 Smoke alarm activation - unknown  |

- IMPACT OF SMOKE ALARM ACTIVATION ON OCCUPANT RESPONSE/EVACUATION**
- |  |
|--|
| <input type="checkbox"/> 00 Not applicable/no occupants              |
| 01 Occupants evacuated safely  |
| 02 Occupants did not evacuate - alarm inaudible                      |
| 03 Occupants did not evacuate - physically/mentally challenged       |
| 04 Occupants did not evacuate - age related (Infants/Aged)           |
| 05 Occupants did not evacuate - unnecessary to evacuate              |
| 06 Occupants did not evacuate - suspected influence of drugs/alcohol |
| 99 Occupant response/evacuation - unknown                            |

- OCCUPANTS IN DWELLING UNIT AT TIME OF FIRE**
- |       |   |
|-------|---|
| _____ | Senior Citizens (65 Years of Age and Older) |
| _____ | Adults (18 - 64 Years)                      |
| _____ | Youth (12 - 17 Years)                       |
| _____ | Children (11 and Under)                     |

**REMARKS**

--

Signature of Person Making Report \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_