



DEPARTMENT OF COMMERCE & INSURANCE
STATE FIRE MARSHAL'S OFFICE
 500 James Robertson Parkway
 Nashville, TN 37243

Instructions

1. Fill out the information for each installation
2. Make a copy for your records
3. Return to the State Fire Marshal's Office

SMOKE ALARM INSTALLATION SUMMARY REPORT

Page ___ of ___

Organization Name: _____

Date (MM/DD/YY): _____	Address _____	City _____	ZIP _____
<input type="checkbox"/> Single Family	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Apartment	<input type="checkbox"/> Manufactured Home
Number of Smokers _____		Number of Smoke Alarms Installed _____	
Name _____	Phone _____	<input type="checkbox"/> Own	<input type="checkbox"/> Rent
		Number of Deaf/Hard of Hearing Alarms Installed _____	

Date (MM/DD/YY): _____	Address _____	City _____	ZIP _____
<input type="checkbox"/> Single Family	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Apartment	<input type="checkbox"/> Manufactured Home
Number of Smokers _____		Number of Smoke Alarms Installed _____	
Name _____	Phone _____	<input type="checkbox"/> Own	<input type="checkbox"/> Rent
		Number of Deaf/Hard of Hearing Alarms Installed _____	

Date (MM/DD/YY): _____	Address _____	City _____	ZIP _____
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Name _____	Phone _____	<input type="checkbox"/> Own	<input type="checkbox"/> Rent
		Number of Deaf/Hard of Hearing Alarms Installed _____	

TOTAL ALARMS INSTALLED:	
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Return this form by email, fax or mail.
 Email: SFMO.GetAlarmedTN@tn.gov
 Fax: 615-741-1475
 (Attn: Adam Wodzinski)

Department of Commerce & Insurance
 Division of Fire Prevention
 500 James Robertson Parkway
 Nashville, TN 37243

