



# City of Hemet Building & Safety Division

Phone (951) 765-2475

[www.cityofhemet.org](http://www.cityofhemet.org)

## Self-Certification & Verification Form -Smoke and Carbon Monoxide Alarm Retrofit -Water Efficient Plumbing Fixture Retrofit

I, \_\_\_\_\_, owner of the units located at: \_\_\_\_\_  
verify that the smoke and carbon monoxide alarms required by the 2019 California Residential Code have been installed in the dwelling, in compliance with the code and with the manufacturer's instructions and further that they have been tested and do function properly.

In an effort to enhance life safety, alarms must be installed in all of the following locations within the existing dwelling:

- ◆ Smoke Alarms in each sleeping room.
- ◆ Smoke and Carbon Monoxide Alarm in the immediate vicinity outside of the bedroom.
- ◆ Smoke Alarms on each story level of the dwelling, including basements and habitable attic rooms.

In addition, I (the property owner) have read and understand that when plumbing fixtures within the unit are altered or improved that retrofit provisions of California Civil Code Section 1101, those plumbing fixtures shall be replaced with fixtures that do not exceed the following rates stated:

- ◆ Toilets – not more than 1.28 gallon of water per flush
- ◆ Urinals – not more than .5 gallon of water per flush
- ◆ Showerheads – not more than 2.0 gallons of water per minute
- ◆ Faucets – not more than 1.5 gallons of water per minute
- ◆ Kitchen Faucets – not more than 1.8 gallons of water per minute

I have read and understand the above requirements and affirm by my signature, that all required Alarms mentioned above have been properly installed and tested and that the plumbing fixtures mentioned above are in compliance with the applicable water conservation requirements of California Civil Code Section 1101.

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Date

Tenant Acknowledgement:

I, \_\_\_\_\_, reside at: \_\_\_\_\_ and certify that smoke and carbon monoxide detectors have been installed as described above and understand they are installed to enhance my safety and that they should remain in place and not removed. To enhance their effectiveness, we suggest that they be tested monthly.

\_\_\_\_\_  
Tenant

\_\_\_\_\_  
Date