

Safety Equipment Survey

So that we have a record of the existing Safety Equipment in your dwelling, please fill out and sign this form and return to Harding and King.

Name:

Address:

Date:

I have checked the safety equipment in my dwelling today. The location and quantities of the devices are as follows:

SMOKE DETECTORS: There are _____ smoke detectors in my apartment.

They are located:

CARBON MONOXIDE DETECTORS

There are _____ Carbon Monoxide Detectors in my apartment.

They are located:

FIRE EXTINGUISHERS

There are _____ Fire Extinguishers in my apartment.

They are located:

All the devices above are in good working order and or I have indicated any that are defective. I understand that although Harding & King surveys this equipment annually, it is my responsibility to maintain them in working order.

Signature

Date