

**STATE OF NEW YORK**

**AFFIDAVIT OF COMPLIANCE OF SMOKE ALARM & CARBON  
MONOXIDE ALARM INSTALLATION**

**IN ONE AND TWO FAMILY HOME**

State of New York )

SS.:

County of Rockland )

1. (I) (WE) are the transferor (s) of the property described herein, and attest that the property at the time of transfer has installed on its premises an operable single or multiple station smoke alarms and single or multiple carbon monoxide alarms.
2. The property is a (one) (two) family dwelling located at:  
Address: \_\_\_\_\_  
Town: \_\_\_\_\_ County: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_
3. (I) (WE) make this affidavit in accordance with Section 373 subdivision 5 of the Executive Law.

\_\_\_\_\_  
Transferor L.S

\_\_\_\_\_  
Transferor L.S

Sworn to before me this \_\_\_\_\_ day

of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_

Notary Public