

**JONESBOROUGH FIRE DEPARTMENT
"OPERATION: BE ALERT!"
SMOKE DETECTOR REQUEST FORM**

PERSON REQUESTING DETECTOR(S)

(CALL TAKER: _____)

Name: _____ Date of Request: _____

Address: _____ Phone: () _____ - _____

City: _____ State: _____ Zip Code: _____

Appointment Date: ____ - ____ - ____ ☐ (8 A.M. – 12NOON) ☐ (1P.M.-5P.M.)

D.O.B.: ____ - ____ - ____ # of Children in Home: _____ Age of Children: _____

MUST MEET THE FOLLOWING CRITERIA:

- ☐ Annual Household Income of \$25,000 or less
- ☐ Children in household under 14 years of age
- ☐ Adults over 65+
- ☐ Occupant suffers from hearing impairment/Vision Impairment
- ☐ Town of Jonesborough resident/Jonesborough County Fire District

COMMENTS: _____

Requested:

- | | |
|--|-----------------|
| <input type="checkbox"/> 10 Year Lithium Smoke Detector | Quantity: _____ |
| <input type="checkbox"/> Hearing Impaired Smoke Detector | Quantity: _____ |
| <input type="checkbox"/> 9V Battery Replacement | Quantity: _____ |

FOR J.F.D. STAFF USE ONLY

INSTALLATION OR BATTERY CHANGE ASSIGNED TO: SHIFT (A) (B) (C)

APPROVED BY: _____

INSTALLATION DUTY CREW: _____

DATE OF INSTALLATION: ____-____-____ LIABILITY FORM SIGNED (YES) (NO)
(NO INSTALLATION CAN BE PERFORMED
WITHOUT A LIABILITY FORM SIGNED)

FINAL INSPECTION: _____ DATE: ____-____-____

ACTION TAKEN:

- | | |
|--|-----------------|
| <input type="checkbox"/> 10 Year Lithium Smoke Detector | Quantity: _____ |
| <input type="checkbox"/> Hearing Impaired Smoke Detector | Quantity: _____ |
| <input type="checkbox"/> 9V Battery Replacement | Quantity: _____ |
| <input type="checkbox"/> Detector checked | Quantity: _____ |

**JONESBOROUGH FIRE DEPARTMENT
WAIVER AND RELEASE OF ALL CLAIMS
"OPERATION: BE ALERT!"**

For and in consideration of my participation in the Town of Jonesborough Smoke Detector Program, I agree to release the Town of Jonesborough, it's agents and employees, and the Jonesborough Fire Department, from all claims, demands, suits, and causes of action, of every nature whatsoever, on account of damage or loss to property including both real and personal bodily injuries, or death, resulting from the installation, failure to operate or faulty operation of the smoke detector installed at my request by the Town of Jonesborough.

It is further understood and agreed that the Town of Jonesborough is not the insurer of the safety of those who would occupy the dwelling in which the detector is installed against the hazards of fire. While the smoke detector device is designed to warn of fires, the Town of Jonesborough makes no guarantee or warranty of any kind, including no implied warranty of merchantability of fitness, or that the fire detection system supplied will avert or prevent fires, or that the detector will timely warn of fires and related occurrences. Any such warranties, if in existence, are given by the manufacturer of the detector, and I agree, that any claims or suits for failure to operate or faulty operation of the detector will be solely against the manufacturer. Additionally, I understand that it is my obligation to purchase batteries to operate the smoke detector as needed and to maintain the detector after installation.

By signing this full release, I hereby consent to the entry of the Town of Jonesborough's employees into my dwelling, at a mutually agreed upon time, for the sole purpose of installing the smoke detection device. The undersigned further acknowledges that the Town of Jonesborough's Fire Department and its agents or employees, expressly disclaim any liability for damage resulting from the installation of this smoke detection device; and I hereby release the Town of Jonesborough and its agents and employees from any and all claims and/or damages resulting there from. I further agree not to remove this device at any time without the expressed written consent of the Town of Jonesborough.

My signature appearing below indicated that I have understood the above and intent to be legally bound.

(OWNER/OCCUPANT)

(DATE)

(JONESBOROUGH FIRE DEPARTMENT)

(DATE)