



# CITY OF MISHAWAKA



Department of Code Enforcement  
Joe VanNevel  
Director of Code Enforcement

Mishawaka Fire Department  
Bill Dempler  
Fire Inspector, Captain

DAVID A. WOOD, MAYOR

## CERTIFICATE OF COMPLIANCE SMOKE DETECTOR AND PROTECTED PREMISES (LOCAL)

FIRE ALARM SYSTEMS  
Mishawaka Municipal Code Book, Title IX  
Chapter 34 FIRE PREVENTION

**SMOKE DETECTORS:**

**REQUIRED** - All single rental and multiple family dwelling units and all mobile home rentals shall be equipped with smoke detectors.

**MAINTENANCE** - It shall be unlawful for any person to tamper with or remove any smoke detector except for maintenance or inspection purposes. At every change of tenant, smoke detectors shall be tested to see that they are in operable condition.

**DUTY OF PROPERTY OWNER** - Every homeowner, manager or agent of any rental property shall be responsible for the installation and maintenance of all smoke detectors.

**CERTIFICATE OF COMPLIANCE** - between January 1 and January 31, EACH YEAR, the owner/agent of each dwelling unit and mobile home in which a smoke detector has been installed shall certify in writing to the Mishawaka Fire Prevention Bureau that the required maintenance has been performed on all detectors in the owner's units and that the detectors are in good working condition as of the date of certification.

**PROTECTED PREMISES (LOCAL) FIRE ALARM SYSTEMS:**

**TESTING** - Fire alarm pull stations and alarm-sounding devices shall be tested annually in accordance with NFPA 72.

The undersigned owner(s) of the real estate stipulated below, hereby certifies that the maintenance has been performed on all detectors in the owner's rental unit(s) and that the detectors are in good working condition and that the pull stations and alarm sounding devices have been tested annually and maintained in good working condition as of the date of the certification.

**ADDRESS OF RENTAL PROPERTY      NUMBER OF UNITS      NUMBER OF DETECTORS**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Name of Rental Property** \_\_\_\_\_

**Print Name of Owner/Agent** \_\_\_\_\_ **Phone #** \_\_\_\_\_

\_\_\_\_\_  
**Signature of Owner or Agent**

\_\_\_\_\_  
**Date**

**This Certificate is valid for the year of 2023. This Compliance Certificate is accepted on the condition that all Ordinance provisions have been complied with.**

**PLEASE FILL OUT THE REQUIRED INFORMATION BY LISTING ALL PROPERTIES THAT YOU OWN WITHIN THE CITY OF MISHAWAKA, ALONG WITH YOUR PREFERRED MAILING ADDRESS AND SEND IT TO THE MISHAWAKA FIRE DEPARTMENT. USE BACK OF FORM FOR ADDITIONAL LISTINGS.**