



VAN BUREN FIRE DEPARTMENT & CITY OF BELLEVILLE FIRE DEPARTMENT SMOKE DETECTOR INSTALLATION PROGRAM APPLICATION

Please read and complete this application. This application and waiver must be completed and SIGNED before approval and installation of smoke detectors).

NAME: _____ DATE: _____

ADDRESS: _____

HOME PHONE: _____ DAYTIME PHONE: _____

AGE OF HOMEOWNERS: MALE: _____ FEMALE: _____ E-MAIL: _____

IS YOUR HOUSEHOLD INCOME BELOW \$30,000? YES _____ NO _____

ARE THERE ANY EXISTING SMOKE DETECTORS IN YOUR HOME? _____

HOW MANY STORIES DOES YOUR HOME HAVE? _____ BASEMENT? _____

HOW DID YOU HEAR ABOUT THIS PROGRAM? _____

If your application is approved, a member of the Van Buren Fire Department or City of Belleville Fire Department will contact you in order to arrange a date and time for installation. We will be able to schedule installations on certain weekdays, evenings, and weekends. Any emergency calls received will take precedence and may delay a scheduled installation. Your flexibility, patience, and understanding will be greatly appreciated.

SIGNATURE: _____ PRINT NAME: _____

Van Buren Residents Please Return Application To: Chief Daniel C. Besson
Van Buren Fire Department
46425 Tyler Road
Van Buren Township, MI 48111
Or Fax to: (734) 699-6575 (Attention: Chief Daniel C. Besson)
Or Email: dbesson@vanburen-mi.org

City of Belleville Residents Please Return Application to: Fire Chief Brian Loranger
Belleville Fire Department
6 Main Street
Belleville, MI 48111
Or Fax to: (734) 697-6837
Or Email: Bellevillefire@comcast.net

(FOR OFFICE USE ONLY)

Date Installed:

By:

of Detectors: