Rental Housing Association

RHA

SMOKE & CARBON MONOXIDE DETECTOR ADDENDUM

(REQUIRED / MULTI-FAMILY)

Resident Name(s)

Address | City | State | Zip

Building Name | Date

SMOKE DETECTION DEVICES:

1. The described smoke detection device(s) are: (check one) ☐ Hard-wired ☐ Battery operated
   If battery operated, the unit(s) has been checked and is properly operating at the commencement of tenancy. Under the law, it is the tenant's responsibility to maintain the smoke detection device(s) in proper operating condition in accordance with the manufacturer's recommendations, including providing it with replacement batteries as needed. A fine of not more than TWO HUNDRED DOLLARS is imposed for failure to comply with these provisions of RCW 43.44.110(4). Failure to maintain the smoke detector is also grounds for termination of tenancy. Additionally, if liability or damages occur because of a tenants' failure to maintain the unit, you may leave yourself open to potential lawsuits and liability (see WAC 212-10-050). Tenant also agrees to test the smoke detector for proper operation once a month and report any malfunctions to the owner/agent in writing.
2. The subject property (check one) ☐does ☐does not have a fire sprinkler system.
3. The subject property (check one) ☐does ☐does not have a fire alarm system.
4. The subject property (check one) ☐does ☐does not have a smoking policy. The smoking policy, if any, has been provided to tenant and tenant's initials acknowledge receipt: _____.
5. The subject property (check one) ☐does ☐does not have an emergency **notification** plan for its occupants. The emergency notification plan, if any, has been provided to tenant and tenant's initials acknowledge receipt: _____.
6. The subject property (check one) ☐does ☐does not have an emergency **relocation** plan. The emergency relocation plan, if any, has been provided to tenant and tenant's initials acknowledge receipt: _____.
7. The subject property (check one) ☐does ☐does not have an emergency **evacuation** plan. The emergency evacuation plan, if any, has been provided to tenant and tenant's initials acknowledge receipt: _____.

The dwelling unit located at _____, Apt. _____, City of _____

County of _____, State of Washington has been equipped with _____ (insert number)

smoke detection device(s) as required by RCW 43.44.110(4).

CARBON MONOXIDE DETECTION DEVICES:

The above described carbon monoxide detection device(s) are: (check one) ☐ Hard-wired ☐ Battery operated ☐ Plug-in w/battery backup.

In accordance with RCW 19.27.530 a minimum of one carbon monoxide detector is provided. It is the responsibility of the Resident to maintain all carbon monoxide detection devices, including replacement of any batteries. Resident shall not tamper with, remove batteries, or otherwise disable any carbon monoxide detection devices. Resident's initials at the end of this paragraph indicate that all carbon monoxide detection devices in the Premises are in proper working order as of the date of this Agreement. Resident to Initial: _____.

If battery operated, the unit(s) has been checked and is properly operating at the commencement of tenancy. It is the tenant's responsibility to maintain the carbon monoxide detection device(s) in proper operating condition in accordance with the manufacturer's recommendations, including providing it with replacement batteries as needed. Failure to maintain the carbon monoxide detector is also grounds for termination of tenancy. Additionally, if liability or damages occur because of a tenants' failure to maintain the unit, you may leave yourself open to potential lawsuits and liability (see WAC 212-10-050). Resident also agrees to test the carbon monoxide detector for proper operation once a month and report any malfunctions to the owner/agent in writing.

DATED this _____day of _____, 20_____ .
(date) (month) (year)

OWNER / AGENT

RESIDENT

RESIDENT

RESIDENT

Formal legal advice and review is recommended for both Resident and Owner prior to selection and use of provided form.
RHA does not represent your selection or execution of this form as appropriate for your specific circumstances.
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