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Town of Carlisle

MASSACHUSETTS

Office of

FIRE DEPARTMENT

Dispatch: 978-369-1442

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80 Westford Road
 P.O. Box 575
 Carlisle, Ma 01741-0575

SMOKE DETECTOR & CARBON MONOXIDE ALARM INSPECTION APPLICATION

FOR SALE OR TRANSFER OF PROPERTY ONLY M.G.L. CH. 148, SECT. 26F, 26F 1/2

NOTE: IF THIS IS FOR NEW CONSTRUCTION, (*HOUSE OR ADDITION*), OR ALTERATION OF MORE THAN 20% A NEW FIRE ALARM SYSTEM PLAN REVIEW NEEDS TO BE FILED.

1. Complete this form and attach a check for \$50.00 payable to “TOWN OF CARLISLE”.
2. Leave completed application in the FIRE DEPT. mailbox at Town Hall, mail to the address below, or file electronically using the button provided below. ***You will be contacted within five business days (excluding holidays) to schedule an inspection.***
3. Permit will be issued once payment is received. Leave a check in the CFD mailbox at Town Hall or mail payment to Carlisle Fire Dept. P.O. Box 575, Carlisle, MA 01741-0575.
4. Please test your smoke and carbon monoxide detectors prior to the inspection to be sure they are all working.
5. **Identification numbers (House Numbers) are required on the dwelling in accordance with MGL Chapter 148, Sect. 59.**
6. **Please have alarm codes for system reset if needed and notify your alarm company (if monitored) of the test prior to the inspection time.**

Contact Information

Number of Dwellings: _____

Realtor Name: _____

Telephone #'s: (cell) _____ (other) _____

E-Mail Address: _____

Address of Inspection: _____

Homeowner Name: _____

Telephone #'s: (cell) _____ (other) _____

E-Mail Address: _____