



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

Please read and complete BOTH SIDES of 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: Battalion Chief Daniel C. Besson
Van Buren Fire Department
46425 Tyler Road
Van Buren Township, MI 48111
Or Fax to: (734) 699-6575 (Attention: Battalion Chief Daniel C. Besson)
Or Email: dbesson@vanburen-mi.org

City of Belleville Residents Please Return Application to: Fire Chief William Emerson
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: