FIREPREVENTION@BETHLEHEM-PA.GOV

www.bethlehem-pa.gov/fire

SMOKE ALARM INSTALLTION REQUEST

The City of Bethlehem Fire Department o	ffers installation of smoke alarms at no cos	st to all residents of Bethlehem	
NAME:		-	
ADDRESS:		_	
PHONE NUMBER:	BEST TIME TO CALL:		
NUMBER OF FLOORS IN HOME: #	NUMBER OF BEDROOM	NUMBER OF BEDROOMS: #	
NUMBER OF SMOKE DETECTORS CURRENTLY IN HOME:			
DO YOU OWN THE HOME OR RENT?	OWN		
SIGNATURE:			
DATE OF REQUEST:			
****For internal use only****			
Officer Receiving Request:			
nstallation Personnel:	Date of Installation:	NFIRS Incident #	
Number of Alarms Installed:	Number of Batteries Installed:		