## STATE OF NEWYORK

## AFFIDAVIT OF COMPLIANCE OF SMOKE ALARM & CARBON MONOXIDE ALARM INSTALLATION

## IN ONE AND TWO FAMILY HOME

State of New York			)	SS:	
Cou	nty of		)	50.	
1.	(I) (WE) are the transferont property at the time of transferont multiple station smoke a	ansfer has in	stalle	ed on its premises a	in operable single or
2.	The property is a (one) (two) family dwelling located at:				
	Address:				
	Town:	County:			
	State:	Zip:			
3.	(I) (WE) make this affida Executive Law	ivit in accord	_	Fransferer	subdivision 5 of theL.S
					L.S
			7	Transferer	L.S
	Sworn to before me this_			day	
	of	20			
	Notary Public				