

# Baltimore City Fire Department



## Office of the Fire Marshal



### Request for Deaf/Hard of Hearing

### Smoke Detector

#### Section I

Date of Request: \_\_\_\_\_ Request Taken By: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Schedule Installation Date: \_\_\_\_\_

**\*Applicant must provide a certificate of hearing loss from a doctor or audiologist**

Will a sign language interpreter be needed to translate instructions? Yes \_\_\_\_\_ No \_\_\_\_\_

If "yes" has interpreter been scheduled? Name \_\_\_\_\_ Phone \_\_\_\_\_

Callers Name \_\_\_\_\_ Phone # \_\_\_\_\_

Special Instructions: \_\_\_\_\_

#### Section II

Installed By: \_\_\_\_\_ Unit: \_\_\_\_\_

Hearing loss certification provided \_\_\_\_\_

Remarks: \_\_\_\_\_

#### Section III

I have received a smoke detector which has been installed in my home by the Baltimore City Fire Department and is not to be re-sold.

Occupant's Signature \_\_\_\_\_

**Note: These specialized smoke detectors were purchased at a cost of \$91.00 by the Baltimore City Fire Department. Any contributions to offset the cost will be used to assist other members of the deaf and hard of hearing community. All contributions should be made payable to the "Baltimore City Foundation – Smoke Detector Fund." Mail to the Fire Prevention Bureau – 410 East Lexington Street, Baltimore, Maryland 21202**