



AFFIDAVIT OF INSTALLATION & TESTING FOR SMOKE AND CARBON MONOXIDE ALARMS

This affidavit is to be completed at the time of the testing of the project's required smoke and/or carbon monoxide alarms. It is permitted to modify this form as required to provide a more complete and/or clear record. Insert N/A on all unused lines. Attach additional sheets, data, or calculations as necessary to complete form.

Form Completion Date: November 18, 2024 DOB Job/Application No.: X00820445

1. PROPERTY INFORMATION

Property Owner: 1817 Topping Holding LLC
 Address: 1817 Topping Avenue, Bronx, 10457
 Phone: 347-478-3280 Email: arditdekaj@yahoo.com Other: _____

2. INSTALLING CONTRACTOR INFORMATION

Installing Contractor: J & H Electrical Contracting Inc. License No.: 012925
 Address: 2568 E17th Street Suite 101 Office 2 Brooklyn NY 11235
 Phone: 718-775-7937 Email: JS@JHEGNY.COM Other: _____

3. ALARM TYPE(S)

Check all devices that have been installed as part of this application and provide the quantity of the installed devices.

- ☐ Smoke alarm (battery operated) Qty. _____
- ☐ Smoke alarm (hard-wired) Qty. _____
- ☐ Carbon monoxide alarm (battery operated) Qty. _____
- ☐ Carbon monoxide alarm (hard-wired) Qty. _____
- ☐ Combined Smoke/CO alarm (battery operated) Qty. _____
- ☒ Combined Smoke/CO alarm (hard-wired) Qty. 20

4. STATEMENT & SIGNATURES

I, Javid Singh as having the following relationship to the property above:
 (print name)

Check the applicable box: ☐ Owner ☐ Registered Design Professional ☒ Licensed Electrician
 swear or affirm under penalty of perjury that the required smoke and carbon monoxide alarm devices have been installed and tested in the above premises in complete accordance with all applicable Codes and regulations.

Name (please print): Javid Singh

Signature: _____

Date: November 18, 2024

SEAL ONLY REQUIRED FOR
HARD-WIRED INSTALLATIONS

P.E./R.A./Licensed Electrician Seal