



Fire Marshal

**Marble Falls Fire Department
Application for Smoke Detector**

Name: _____ Address: _____

Phone: _____

Home Owner Yes ____ No ____

Appointment Date: _____ Time: _____

Number of smoke detectors installed _____ Batteries distributed _____

**Marble Falls Fire Department
Smoke Alarm Liability Release Form**

I understand and agree that the Marble Falls Fire Department is providing free smoke alarms as a public service in the interest of promoting safety and that the Marble Falls Fire Department is not a seller, manufacturer, or dealer of smoke alarms, and does not warranty, guarantee, certify, or endorse this or any other brand of smoke alarm.

I verify that the new smoke alarm(s) is in working condition at this time and that I have received and read a copy of the manufacturer's owner's manual. I understand and accept the responsibility for inspecting and maintaining the smoke alarms in accordance with manufacturer's instructions, including checking each alarm unit monthly for proper operation. I further understand that in order for the smoke alarm(s) to be effective, I need to replace and install the battery as specified by the manufacturer. As the owner, I am responsible for providing the batteries and any other necessary maintenance.

In exchange for accepting free smoke alarm(s) and/or home assessment, I do hereby release and discharge the City of Marble Falls, Texas and the Marble Falls Fire Department and its officers, agents, and employees from any and all actions, causes of action, claims, demands, damages, costs, or losses arising from the use of said smoke alarm and/or home assessment. Therefore, I agree not to make any demand or claim or file any lawsuit against the City of Marble Falls or the Marble Falls Fire Department and its officers, agents, and employees in connection with this smoke alarm/home assessment program.

I have read and understood the above provisions. The terms and provisions of this questionnaire and release are binding on me, my legal representatives, and all of my successors, assignees, heirs, and estate.

Date Recipient's Signature Witness Signature

Shift installing smoke detector(s): _____

Officer in charge: _____