

Anderson Fire Department
SMOKE DETECTOR GIVE AWAY PROGRAM
HOLD-HARMLESS AGREEMENT

Name: _____ Telephone: _____

Address: _____ City: ANDERSON State: SC Zip: _____

Total Number Occupants in home: _____ Number Occupants over 60 years: _____

Number Occupants under 8 years: _____ Number Occupants Disabled: _____

Number Occupants Hearing Impaired: _____ Number of Batteries Installed: _____

Number of Smoke Alarms Installed: _____ TESTED: yes _____ no _____

FIRE SAFETY DISCUSSION:

Completed:

- | | |
|--|-------|
| 1. SMOKE ALARMS – test monthly | _____ |
| 2. REPLACE BATTERIES – annually | _____ |
| 3. PLAN TWO (2) WAYS OUT OF EVERY ROOM | _____ |
| 4. PRACTICE A FIRE DRILL TWICE A YEAR | _____ |
| 5. IN CASE OF FIRE: GET OUT; DO NOT GO BACK IN;
GO TO MEETING PLACE, CALL 911 | _____ |

DISCLAIMER OF LIABILITY:

The Anderson Fire Department is providing smoke detectors at no cost to residents of the City. In recognition of this, the City of Anderson is not making any warranties as to the effectiveness of the equipment provided or installed. The only warranties applicable are those of the manufacturer. I also understand that I am voluntarily participating in this service and that the service is not required by the City.

By signing this disclaimer, I agree that my spouse, heirs, and assigns will also be bound by the terms of this disclaimer.

In recognition the facts, I agree to hold harmless, the City of Anderson, it agents, officers, and Fire Department, for any negligence in providing or installing this smoke detector(s).

Officer in Charge _____ Signature _____

Occupant _____ Signature _____

Date _____