

AFFIDAVIT OF COMPLIANCE WITH SMOKE DETECTOR REQUIREMENT FOR ONE- AND TWO-FAMILY

State of New York)
County of) ss.:

The undersigned, being duly sworn, depose and say under penalty of perjury that they are the grantor(s) and grantee(s) of the real property or of the cooperative shares in a cooperative corporation owning real property located at:

_____, New York

County/Borough of _____

Tax Map Designation:

District _____ Section _____ Block _____ Lot _____

(the "Premises"):

That the Premises is a one- or two-family dwelling, or a cooperative apartment or condominium unit in a one- or two-family dwelling, and that installed in the Premises is an approved and operational smoke detecting device.

Name of Grantor (type or print)

Name of Grantee (type or print)

Signature of Grantor

Signature of Grantee

Name of Grantor (type or print)

Name of Grantee (type or print)

Signature of Grantor

Signature of Grantee

Sworn to before me this _____
day of _____, _____

Sworn to before me this _____
day of _____, _____

Notary Public

Notary Public