

COMPLETE ONLY IF SERVICES ARE PROVIDED IN A PUBLIC FACILITY

SENIOR RESOURCES - AGENCY ON AGING
CERTIFICATE OF FIRE SAFETY REGULATIONS

To: Senior Resources - Agency on Aging

FROM: _____

Instructions: This certificate must be submitted to the Senior Resources Agency on Aging with each application.

I certify that I have visited _____
(Name of Project)

at _____

in _____

and found that the premises meet fire safety requirements and have sufficient exits.

Signed,

Fire Marshall

Date