

Smoke Alarm Installation Program
Working Smoke Alarms in Every Home
Compliance and Tracking Evaluation



Prepared by:
Oregon State Police
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Introduction

This report is the evaluation of the Oregon State Police (OSP), Office of State Fire Marshal (OSFM), Fire & Life Safety Education (FLSE) Branch, Adult Fire Prevention and Safety (AFPS) Unit, Smoke Alarm Installation Program (SAIP) titled *Working Smoke Alarms in Every Home*. This evaluation includes document review and data analysis, along with fire agency compliance and the OSFM's internal tracking process. The evaluation was conducted by Fire Prevention Coordinator (Program Analyst 3) Stephanie Stafford between November 2014 and April 2015. Assistance from the OSFM, FLSE Branch, Analytics and Intelligence Unit was requested to determine fire agency compliance with the National Fire Incident Reporting System (NFIRS) reporting requirements.

The purpose of the SAIP is to protect Oregon citizens by providing smoke alarms, at no cost, to residences that are otherwise unprotected. The program provides an opportunity for local fire agencies to collaborate with the OSFM to address areas of their community at risk due to lack of protection provided by working smoke alarms. The program provides smoke alarms, materials, and funding assistance to Oregon fire agencies to conduct a smoke alarm installation project in their jurisdiction.

To be eligible for the program, a fire agency representative must complete a one-hour SAIP training. The representative then submits a web-based application requesting between one to 100 smoke alarms, project materials, and an optional funding request up to \$250 per project. After the application is approved, the OSFM orders smoke alarms and sends a funding request to OSP accounting. FLSE forwards the check to the fire agency representative along with an approval letter, installation/waiver forms, and requested materials. Smoke alarms are shipped directly from the vendor (W.W. Grainger, Inc.) to the fire agency within a couple of days of submitting the order to the vendor. The fire agency has 45 days from receipt of smoke alarms to install them, and 10 days after installation to return the installation/waiver forms. The SAIP program guidelines dictate the OSFM follow-up with the fire agency within 60 days of the estimated smoke alarm delivery date and continued follow-up at regular intervals.

A FLSE Branch Standard Operating Guideline (SOG-EB-201) became effective 11/1/2013 (Exhibit 1). The SOG is outdated due to changes in the program. Unique project identification numbers are now being issued for each project based on the fire department identification (FDID) number and the month and year of the project (i.e., FDIDMMYY = 09991214). Installation address data is being tied to the project identification numbers (the specific project each address belongs to).

To record smoke alarm installation data, a generic untitled two-sided installation paper form (Exhibit 2) with fields for nine address entries was originally issued to fire agencies along with the *Smoke Alarm Liability Waiver and Release from Federal and State Claims* form (Exhibit 3) in triplicate format (with an original and two copies for the fire agency, the OSFM, and the occupant). Each smoke alarm installation required duplicate information to be recorded on both forms. The two forms were replaced in the fall of 2014 with a single *Smoke Alarm Installation, Liability Waiver and Release from Federal and State Claims* form (Exhibit 4) in triplicate format.

Section I: Methodology

The electronic documents (fire agency files, project spreadsheet, and training spreadsheet), fire agency paper files, OSP accounting records for funding distributions, and “ship to reports” from smoke alarm vendor W.W. Grainger, Inc. (Grainger), were reviewed to complete the evaluation. Clarifying information was requested from FLSE staff, as needed.

Document review

A Microsoft Excel document titled *SA Install Program Tracking - 13-15* (spreadsheet) was removed from the N drive (command [\\osfm-wfs1\departments\$\SFM\DATA] (N:)) in the N:\PubInfo\Smoke_CO Alarms\SAIP folder during November 2014 with a request to have all other copies of tracking documents deleted. The spreadsheet is used as a depository of information for statistical analysis, reporting, internal tracking, and fire agency compliance.

Additional information was verified via paper files maintained for each individual fire agency project. All paper project files were reviewed with specific information and instructions provided to update each paper file to match with the electronic file. If paper files were absent, they were created. The file cleanup will continue until complete.

The spreadsheet data, at the time of retrieval (November 2014), was used to complete the document review portion of the analysis. Any subsequent data received through April 15, 2015 was also added to the spreadsheet and used in the review. There were several adjustments made to the spreadsheet by the program analyst. If data was missing, incomplete, or incorrect on the spreadsheet, it was modified or added. The information in Table 1, page 7 is replicated from the spreadsheet and reflects all projects conducted from July 1, 2013 through February 28, 2015. Projects applied for after February 28, 2015 were not included in the evaluation. The earliest project included in the spreadsheet was applied for in June 2013, but the application was not processed until July 2013, placing this project in the 2013-2015 biennium, so it was included in this report. All fire agency identifying information has been removed from the table and agencies are referred to by numbers 1-34. Agencies with multiple projects are represented with duplicate numbers.

Each installation/waiver form was reviewed by the program analyst. The Dwelling Type (1-2 family, manufactured/mobile, recreational vehicle, and other dwellings), Pre-Installation Assessment (homes with at least one working alarm, homes with no alarms, % of homes with no alarms, alarms present in homes, and average for smoke alarms per home), and Post-Installation Assessment (alarms in homes and average for alarms per home) data was not evaluated. This is unavailable due to lack of data entered, inaccurate data entry, and confusion on the installation forms by fire agency personnel. The installation data is being processed (data entered), but most of the pre- and post-installation assessment data is invalid due to data collection errors. The Purchasing and Distribution Summary to track incoming inventory and outgoing distribution is also inaccurate and unavailable.

The evaluation does not include smoke alarms distributed by other methods (i.e., Youth Fire Prevention and Intervention) outside of the SAIP for Oregon fire agencies. Deaf and hard of

hearing strobe and shaker smoke alarm installations and the ionization smoke alarms distributed with them were not being recorded on the spreadsheet and therefore were not reviewed in this evaluation.

Data analysis

From July 1, 2013, through February 28, 2015, 4,932 First Alert model SA340B ionization smoke alarms with a 10-year lithium power cell and tamper-proof seal design were distributed through the OSFM's SAIP. Of the 4,932 smoke alarms distributed, 4,583 smoke alarms were directly shipped by Grainger and 349 were distributed from the OSFM inventory (purchased from Grainger). Current paper records (installation/waiver forms) indicate that 2,831 were installed and 99 were returned to the OSFM; 59% project completion rate. Each smoke alarm cost \$13.49 or \$13.75 during this period (\$13.49 for July 1, 2013 – December 31, 2014 and \$13.75 for January 1, 2015 – February 28, 2015). Total cost of smoke alarms was \$66,795.80, funding requests totaled \$4,514. Final cost of the program during this time was \$71,309.80. The above data includes three projects completed by the American Red Cross (ARC) through collaboration with the OSFM.

The remainder of the evaluation focuses on fire agency projects and does not include the ARC since they are not a typical SAIP applicant or project. An excerpt of the spreadsheet is included in Table 1, page 7. With ARC projects removed from the overall data, from July 1, 2013, through February 28, 2015, 4,298 smoke alarms were distributed to 34 fire agencies for 48 projects. Some agencies had multiple projects. Current paper records (installation/waiver forms) indicate that 2,197 were installed and 99 were returned to the OSFM; 53% project completion rate.

Each project was awarded between 10 and 300 smoke alarms, with an average request of 90 smoke alarms per project. This may be due to a per project limit in early 2014 of 100 smoke alarms per project due to an earlier lack of compliance by fire agencies (e.g., smoke alarms were not installed or documentation was not provided for alarm installations).

Twenty-one projects were awarded funding requests ranging from \$40-\$250. Receipts have been provided for seven (33%) of the 21 projects. Twelve (25%) of the 48 projects are considered complete by having installed at least 90% of smoke alarms and providing receipts for the funding requests.

All 48 projects have reached or passed their due date. At the beginning of the biennium, projects were not provided due dates. The due date implemented early in the biennium was "install smoke alarms within 45 days of receiving the smoke alarm shipment" and "return install/waiver forms within 10 days of installation" with follow-up by the OSFM at 60 days of fire agency receipt of smoke alarms per SOG-EB-201. Most projects have not been followed up with unless contact was initiated by the fire agency. In mid-2014, there was contact made with most agencies that were overdue. Most agencies have had no follow-up contact since that time unless they initiated contact with the OSFM.

A review of SAIP training records against fire agencies conducting projects revealed some fire agencies did not have a record of SAIP training, but were approved for projects. This may be due

to staff turnover, missing training records, lack of record keeping, or training being completed several years prior to the revision of the SAIP program.

When comparing fire agency compliance of reporting NFIRS data with potential SAIP program eligibility, all but one agency is currently reporting to the OSFM. It would be beneficial for the OSFM to require NFIRS reporting compliance to participate in the SAIP. The OSFM cannot determine the effectiveness of the SAIP if agencies that receive alarms do not report NFIRS data. The OSFM will not be able to match future fire incidents with smoke alarm installation data if NFIRS data is not reported.

Table 1.

Smoke Alarm Installation Program Projects July 1, 2013 – February 28, 2015													
Date submit app.	Agency	SAIP training date	SA qty. ordered	Grainger shipped SA	OSFM shipped SA	Unit cost	Funding	Total project cost	Receipt received	# Installed	# Returned	Total Install & Return	% Complete
01/12/15	1	No record	10	0	10	\$13.49	\$0.00	\$134.90	NA	2	0	2	20%
10/16/13	2	Unknown	150	150	0	\$13.49	\$250.00	\$2,273.50	Y	100	0	100	67%
02/23/15	3	No record	90	90	0	\$13.75	\$250.00	\$1,487.50	N	0	0	0	0%
06/10/13	4	No record	50	50	0	\$13.49	\$250.00	\$924.50	Y	17	0	17	34%
11/25/13	5	07/15/14	120	120	0	\$13.49	\$250.00	\$1,868.80	N	0	0	0	0%
02/03/15	6	12/15/14	50	50	0	\$13.75	\$250.00	\$937.50	N	0	0	0	0%
11/15/13	7	10/11/13	150	150	0	\$13.49	\$250.00	\$2,273.50	N	0	0	0	0%
10/15/14	8	12/10/14	15	0	15	\$13.49	\$0.00	\$202.35	NA	0	0	0	0%
07/10/14	9	07/15/14	50	0	50	\$13.49	\$0.00	\$674.50	NA	0	0	0	0%
07/29/14	10	07/15/14	100	100	0	\$13.49	\$0.00	\$1,349.00	NA	0	0	0	0%
12/30/13	11	No record	96	96	0	\$13.49	\$250.00	\$1,545.04	Y	55	0	55	57%
08/13/13	12	No record	300	300	0	\$13.49	\$0.00	\$4,047.00	NA	232	0	232	77%
08/25/14	12	No record	100	100	0	\$13.49	\$0.00	\$1,349.00	NA	58	0	58	58%
01/29/15	13	No record	100	100	0	\$13.75	\$0.00	\$1,375.00	NA	0	0	0	0%
02/21/14	14	10/11/13	96	96	0	\$13.49	\$200.00	\$1,495.04	N	20	0	20	21%
10/10/13	15	10/22/13	48	48	0	\$13.49	\$250.00	\$897.52	Y	48	0	48	100%
02/04/14	15	10/22/13	48	48	0	\$13.49	\$0.00	\$647.52	NA	48	0	48	100%
11/15/14	15	07/30/14	100	100	0	\$13.49	\$0.00	\$1,349.00	NA	100	0	100	100%
07/10/13	16	02/04/10	100	100	0	\$13.49	\$0.00	\$1,349.00	NA	100	0	100	100%
08/13/14	16	02/04/10	100	100	0	\$13.49	\$0.00	\$1,349.00	NA	0	0	0	0%
04/29/14	17	No record	174	174	0	\$13.49	\$0.00	\$2,347.26	NA	77	97	174	100%
07/14/14	17	No record	10	0	10	\$13.49	\$0.00	\$134.90	NA	10	0	10	100%
08/26/14	17	No record	10	0	10	\$13.49	\$0.00	\$134.90	NA	9	0	9	90%
09/15/14	17	No record	56	56	0	\$13.49	\$0.00	\$755.44	NA	54	2	56	100%
02/09/15	17	No record	20	0	20	\$13.49	\$0.00	\$269.80	NA	7	0	7	35%
02/19/14	18	10/11/13	48	48	0	\$13.49	\$250.00	\$897.52	N	48	0	48	100%
02/27/14	19	01/29/14	96	96	0	\$13.49	\$100.00	\$1,395.04	N	37	0	37	39%
12/10/14	20	12/10/14	100	100	0	\$13.49	\$250.00	\$1,599.00	N	92	0	92	92%
10/13/13	21	10/11/13	150	150	0	\$13.49	\$250.00	\$2,273.50	N	109	0	109	73%
02/13/15	22	07/05/14	100	100	0	\$13.75	\$124.00	\$1,499.00	N	64	0	64	64%
01/02/15	23	12/10/14	72	72	0	\$13.75	\$0.00	\$990.00	NA	62	0	62	86%
10/15/13	24	10/11/13	150	150	0	\$13.49	\$100.00	\$2,123.50	N	148	0	148	99%
01/09/14	24	10/11/13	96	96	0	\$13.49	\$0.00	\$1,295.04	NA	38	0	38	40%
11/20/14	24	10/11/13	75	75	0	\$13.49	\$40.00	\$1,051.75	N	0	0	0	0%
09/27/13	25	10/11/13	150	150	0	\$13.49	\$0.00	\$2,023.50	NA	0	0	0	0%
01/12/15	26	04/02/15	100	100	0	\$13.75	\$0.00	\$1,375.00	NA	0	0	0	0%
01/09/14	27	04/16/15	48	48	0	\$13.49	\$0.00	\$647.52	NA	39	0	39	81%
12/11/14	27	04/16/15	50	50	0	\$13.49	\$0.00	\$674.50	NA	11	0	11	22%
09/27/13	28	10/11/13	150	150	0	\$13.49	\$0.00	\$2,023.50	NA	107	0	107	71%
01/14/15	29	01/29/14	100	100	0	\$13.75	\$200.00	\$1,575.00	Y	42	0	42	42%
08/18/14	30	08/18/14	50	50	0	\$13.49	\$250.00	\$924.50	N	50	0	50	100%
10/22/13	31	07/23/09	60	60	0	\$13.49	\$250.00	\$1,059.40	Y	51	0	51	85%
02/18/14	31	07/23/09	120	120	0	\$13.49	\$0.00	\$1,618.80	NA	120	0	120	100%
03/31/14	31	07/23/09	100	100	0	\$13.49	\$0.00	\$1,349.00	NA	99	0	99	99%
08/31/14	31	07/23/09	100	100	0	\$13.49	\$0.00	\$1,349.00	NA	22	0	22	22%
10/13/13	32	12/10/14	96	96	0	\$13.49	\$250.00	\$1,545.04	N	63	0	63	66%
09/05/14	33	08/18/14	48	48	0	\$13.49	\$250.00	\$897.52	Y	40	0	40	83%
12/12/13	34	10/11/13	96	96	0	\$13.49	\$0.00	\$1,295.04	NA	18	0	18	19%
Totals			4298	4183	115		\$4,514.00	\$62,653.14		2197	99	2296	53.4%

Section II: Findings and Recommendations

Table 2 provides a summary of the findings and recommendations for the SAIP.

Table 2.

#	Finding	Recommendation
1	<p>Due date/smoke alarm limit At the beginning of the biennium, projects were not provided a due date or a limit to the number of smoke alarms they could order. Several fire agencies had received smoke alarms and provided no paperwork (installation/waiver forms).</p>	<p>A due date (45 days from receipt of smoke alarms by fire agency) was later required and smoke alarms were limited to 100 per project. Recommend reviewing the project timeline and smoke alarm limit. An updated Standard Operating Guideline (SOG) will include this information.</p>
2	<p>Multiple open SAIP projects for one agency There are a few agencies that had multiple projects open and this caused confusion with installation form data due to the inability to determine what forms go with specific projects.</p>	<p>Project identification (ID) numbers (Example: FDIDMMYY (eight characters)) will be issued to all projects. A project ID number field will be added to the installation/waiver form when it is revised. A project for an agency will be closed prior to a new project being opened. Recommend 90% completion before a project is closed.</p>
3	<p>Installation addresses on tracking spreadsheet Address entries do not correlate with a specific project or date of project. It is hard to track address information to a fire agency's project for the purpose of review or to determine completion of a project.</p>	<p>Assign project ID numbers for each project and provide instructions to fire agencies in their approval letter on how to use it. Add this to the SOG.</p>
4	<p>Data entry errors/duplicate forms There were several data entry errors and duplication of address information.</p>	<p>Recommend no data entry of addresses until the project is completed. This helps avoid duplicate address entry. No faxing or copies of installation forms. Provide original forms to the OSFM. Record all address information when all forms for the project have been received and the project is eligible to be closed. Review data through an audit process.</p>
5	<p>Residence type Missing data (residence type) for a few addresses.</p>	<p>Check installation forms for the residence type. If not available, the addresses could be researched on the internet to determine type of residence.</p>

6	<p>Delay in processing applications There are occasional delays when an applicant applies for a SAIP project and they have not received training.</p>	<p>The applicant needs to be been trained and not another member of the fire agency. If an applicant applies before they are eligible, applications will be held until they complete training. Add names to training records.</p>
7	<p>NFIRS compliance to determine eligibility Agencies should submit incident data on at least a monthly basis (even though the statutory requirement is reporting within seven days). The OSFM cannot determine the effectiveness of the SAIP, if participating agencies do not report.</p>	<p>Add an NFIRS compliance question to the application. Notify agencies in the training that their agency's data reporting must be current. Work with the FLSE Analytics and Intelligence Unit to determine what defines reporting.</p>
8	<p>Follow-up contact There are minimal records of contact with fire agencies when they are delinquent or compliant with a smoke alarm project. The paper files do not include organized information to conduct follow-up.</p>	<p>Create a mechanism (form) and include a timeline for follow-up contact in the SOG.</p>
9	<p>Paper files Unorganized and incomplete paper files.</p>	<p>Create a filing system for the projects. This system will be based on the required documents for each project. A sample of files will be audited monthly.</p>
10	<p>Order confirmation One agency requested funds and never received them even though the signed memorandum is in their file. Occasionally, a fire agency may receive two or more partial smoke alarm shipments to fulfill the smoke alarm order.</p>	<p>Confirm receipt of funding check and smoke alarm order with the fire agency. Request that fire agencies verify the number of smoke alarms received.</p>
11	<p>Receipts Missing receipts and no mechanism to track receiving the receipts.</p>	<p>Develop and follow receipt tracking system and include in SOG.</p>
12	<p>Pre- and post-installation assessment This information is currently not being recorded correctly on installation forms.</p>	<p>Revise installation/waiver form to provide a better explanation of the fields.</p>
13	<p>Project completion/status Agencies are not completing projects or are not completing projects on time.</p>	<p>Increase contact with fire agencies. Modify SOG with minimum contact requirements. Establish goal of 90% closure of projects.</p>

14	Smoke alarm inventory tracking Purchasing, distribution, and return of smoke alarms is not being tracked.	Develop an inventory form for smoke alarms issued or returned to the OSFM stock. This would include defective smoke alarms. Regularly balance the OSFM inventory with alarms provided directly from the OSFM.
15	Training records are incomplete Training records are incomplete and the OSFM is unable to verify eligibility to conduct a SAIP project.	Establish process for completion of training records.
16	Initial contact There is no record of initial contact other than the approval letter. Smoke alarms are likely to arrive before the approval letter does.	Establish a set approval contact and a welcome letter. This information can be included in the SOG.

Section III: Summary

The findings of this report indicate a need for improvement and continual monitoring of the Smoke Alarm Installation Program. The above findings and recommendations should be reviewed by the Fire and Life Safety Education, Adult Fire Prevention and Safety Unit and incorporated or modified to fit the needs of the program. Continued evaluation, auditing, and review of the program are important.

Section IV: Exhibits

Exhibit 1: FLSE SOG-EB-201 Smoke Alarm Installation Program (SAIP)

Exhibit 2: Smoke Alarm Installation Form

Exhibit 3: Smoke Alarm Liability Waiver and Release From Federal and State Claims

Exhibit 4: Smoke Alarm Installation, Liability Waiver and Release from Federal and State Claims

Exhibit 1

	<p style="text-align: center;">OFFICE OF STATE FIRE MARSHAL <i>EDUCATION BRANCH</i> STANDARD OPERATING GUIDELINES</p>	<p>Number: SOG-EB-201 Adoption Date: 11/1/2013 Authors: Joe Saltarello Stephanie Stafford</p>
<p>Approved: <u>Claire McGrew</u> Date <u>10/21/13</u> Claire McGrew, Education Manager</p>		
<p>SUBJECT: Smoke Alarm Installation Program (SAIP)</p> <p>OBJECTIVE: Establishes requirements for fire agencies requesting SAIP support and outlines the OSFM process for receiving orders, ordering smoke alarms, and tracking data for the SAIP.</p>		

I. SCOPE

The purpose of the Office of State Fire Marshal (OSFM) Smoke Alarm Installation Program (SAIP) is to protect Oregon's citizens, by providing smoke alarms, at no cost, to residences that are otherwise unprotected. The program provides an opportunity for local entities to collaborate with the OSFM in addressing areas of their community that may be at risk, due to the lack of protection provided by working smoke alarms.

II. GENERAL

The SAIP will be managed by education staff and supported by the education administrative specialist 1 (AS1).

A. Training and Development Specialist 1 (TDS1) Duties

1. Review SAIP application.
 - a. Any orders in excess of 50 smoke alarms need approval from the Program Analyst 3 (PA3).
 - b. Call the fire agency representative to confirm receipt of the form and to review the SAIP compliance requirements within 2 business days of receipt.
 - c. Enter project data into SAIP spreadsheet located at N:\PubInfo\Smoke_CO Alarms\SA Install Program Tracking FY14-15.xlsx.
2. Create a file folder for hard copies.
 - a. Paper files are stored in the education branch library.
 - b. Use the following format for naming files:
 - i. Agency name, date (MMDDYY)
3. If funding is requested, write a memo requesting funding and give to the education manager for approval. The template is located at N:\PubInfo\Smoke_CO Alarms\SA Installation Projects\2013-2015 Biennium SA Projects\2013 Smoke Alarm Installation Projects\Sample letters.
4. Create an electronic folder in N:\PubInfo\Smoke_CO Alarms\SA Installation Projects\2013-2015 Biennium SA Projects\2013 Smoke Alarm Installation Projects.

- a. The folder name should be the agency name.
- b. Multiple requests by the same agency must go into the same folder for that year. In the event the fire agency conducts multiple projects, files may be combined into subfolders.
- c. Use the following format for naming files:
 - i. Agency name, form name, date
 1. Marion Application MMDDYY
 2. Salem Approval Ltr MMDDYY
 3. Polk Funding Req MMDDYY
 4. Lincoln Grant Check MMDDYY
5. Scan the signed memo and save the application into the electronic file folder.
6. Notify the education AS1 by email of the number of smoke alarms to order.
7. Gather printed materials for shipping.
 - a. Mandatory materials include:
 - i. *Working Smoke Alarms Save Lives* rack cards
 - ii. *In Case of Fire Get Out and Stay Out!* rack cards
 - iii. *Get Out and Stay Out!* magnets
 - iv. Waiver forms
 - v. Installation forms
8. Within one business day of the smoke alarms being ordered, email the agency representative and let them know the smoke alarms have been ordered and the material has been shipped. Ask them to confirm when they receive the alarms and materials. (Follow up if no notification is received within 10 days.)
9. Let the education AS1 know when the smoke alarms are received by the agency rep.
10. Utilize the SAIP Action Sheet to track project progress.
11. Follow the compliance procedures outlined below.
12. Provide any pertinent SAIP data for the Weekly Dispatch newsletter.
13. Submit the SAIP Action Sheet to the education manager within 2 business days of all data being entered into the SAIP tracking spreadsheet.

B. Education Administrative Specialist 1 (AS1) Duties

1. Confirm the number of smoke alarms requested by the TDS1 with the number on the fire agency's application.
 - a. The application form should be located in a folder here:
 - i. N:\PubInfo\Smoke_CO Alarms\SA Installation Projects\2013-2015 Biennium SA Projects\2013 Smoke Alarm Installation Projects
2. Within one business day of notification by the TDS1, use Purchase Control to order the smoke alarms in accordance with the AS1 desk manual procedures.

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3. After ordering, send email notification to the TDS1.
4. Follow the accounting process in accordance with the AS1 desk manual procedures and SOG-EB-105 Invoice Processing.

C. Fire Agency SAIP Compliance Requirements

1. Conduct a smoke alarm installation project within 45 days of receiving the smoke alarm shipment.
2. Record all smoke alarms installed by accurately completing the Smoke Alarm Installation Form for all residences inspected.
3. Submit Smoke Alarm Installation Forms and Waivers to the OSFM within 10 days of smoke alarm installation. (The installation information collected is recorded and tracked by OSFM.) Forms may be submitted via post mail, email, or fax.
4. All smoke alarms must be accounted for. Audible smoke alarms not installed must be reported to the OSFM for disposition.
5. If funding assistance was granted, purchase receipts must be submitted to OSFM.
6. Failing to submit required documentation may affect future requests for smoke alarm support.

D. OSFM SAIP Compliance Requirements

1. Contact the fire agency to confirm receipt of smoke alarm shipment if notification from the agency is not received within 10 days of order date.
2. At the time delivery is confirmed:
 - a. Confirm date(s) of installation project(s).
 - b. Remind the agency of 10-day reporting requirement for installation forms and waivers.
 - c. If funding assistance was provided, remind the agency to submit their receipts.
3. Contact the fire agency if more than 60 days have passed without receiving the required forms.
4. Compare installation form data received with the number of smoke alarms distributed to agency.
5. Contact the reporting agency for more information regarding any discrepancy.
6. Report any discrepancy to the PA3 for further instruction.
7. Enter installation form data into the SAIP tracking spreadsheet located at N:\PubInfo\Smoke_CO Alarms\SA Install Program Tracking FY14-15.xlsx.

SMOKE ALARM INSTALLATION PROGRAM (SAIP) ACTION SHEET

Agency: _____

Date Application Received: _____

Project Date(s): _____

Due Date	Action	SOG-EB-201 Section	Completed By/Date
Within 2 business days of receipt	<input type="checkbox"/> Review application. <input type="checkbox"/> Call the agency rep to confirm receipt and review SAIP requirements. <input type="checkbox"/> Enter project data into SAIP spreadsheet. <input type="checkbox"/> Email AS1 to order SA. Prepare materials for shipping.	II.A.1	Block A
Within 1 business day of Block A	<input type="checkbox"/> Smoke alarms ordered.	II.B.2	Block B
Within 1 business day of Block B	<input type="checkbox"/> Email the agency rep to let them know the smoke alarms have been ordered and the material has been shipped. Ask them to confirm when they receive the alarms and materials.	II.A.8	Block C
10 business days after Block C	<input type="checkbox"/> Contact the fire agency to confirm receipt of smoke alarm shipment if notification from the agency is not received within 10 days of order date. <input type="checkbox"/> Confirm date(s) of installation project(s). <input type="checkbox"/> Remind the agency of 10-day reporting requirement for installation forms and waivers. <input type="checkbox"/> If funding assistance was provided, remind the agency to submit their receipts.	II.A.8 II.D.2	Block D
60 days from Block D	<input type="checkbox"/> Contact the fire agency if more than 60 days have passed without receiving the required forms.	II.D.3	
	<input type="checkbox"/> Installation and Waiver forms received.	N/A	Block E
Within 7 business days of Block E	<input type="checkbox"/> Compare installation form data received with the number of smoke alarms distributed to agency. <input type="checkbox"/> Enter received data into SAIP tracking spreadsheet.	II.A.10 II.D.4	Block F
Within 2 business days of Block F	<input type="checkbox"/> Submit this form to the education manager for review.	II.A.13	

Project reviewed by: _____

Date: _____

CM

Exhibit 2

Fire Department Name: _____ Phone: _____

Contact: _____ Date: _____

Name: _____ Phone: _____ Fire safety material left at the home: Yes No

Address: _____ Zip: _____

Not home 1-2 Family Manufactured/Mobile Home RV Other: _____

Number of smoke alarms in the home: Number of working smoke alarms: Number of smoke alarms installed:

Name: _____ Phone: _____ Fire safety material left at the home: Yes No

Address: _____ Zip: _____

Not home 1-2 Family Manufactured/Mobile Home RV Other: _____

Number of smoke alarms in the home: Number of working smoke alarms: Number of smoke alarms installed:

Name: _____ Phone: _____ Fire safety material left at the home: Yes No

Address: _____ Zip: _____

Not home 1-2 Family Manufactured/Mobile Home RV Other: _____

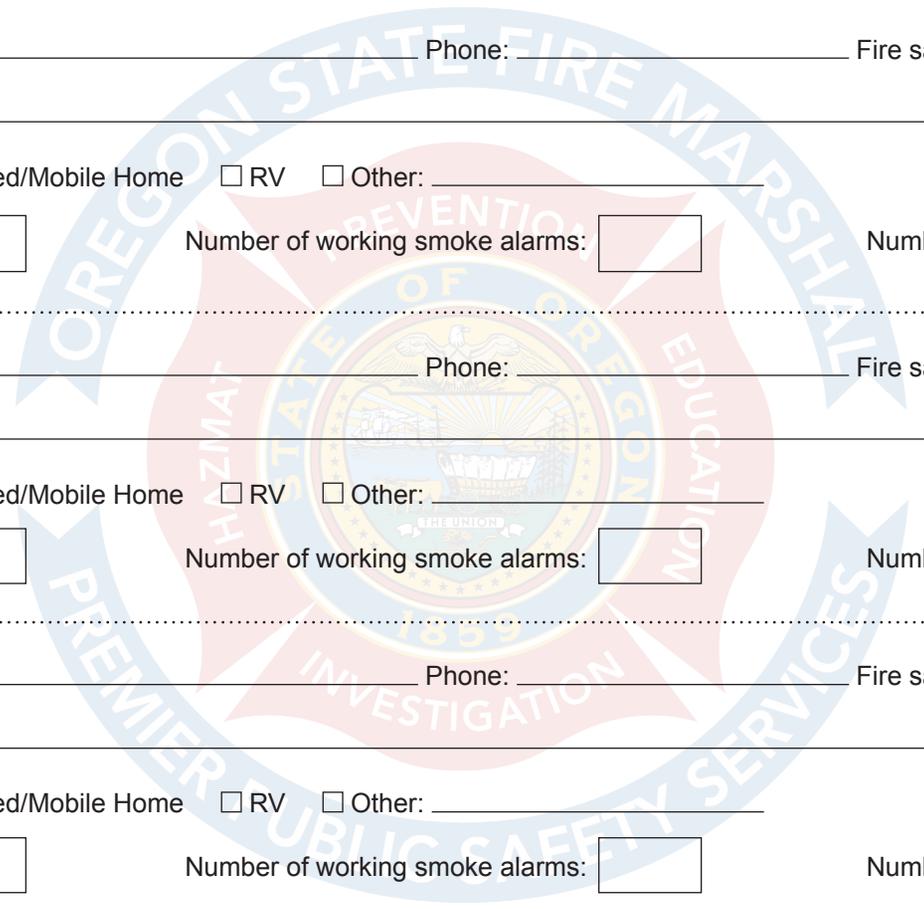
Number of smoke alarms in the home: Number of working smoke alarms: Number of smoke alarms installed:

Name: _____ Phone: _____ Fire safety material left at the home: Yes No

Address: _____ Zip: _____

Not home 1-2 Family Manufactured/Mobile Home RV Other: _____

Number of smoke alarms in the home: Number of working smoke alarms: Number of smoke alarms installed:



Name: _____ Phone: _____ Fire safety material left at the home: Yes No

Address: _____ Zip: _____

Not home 1-2 Family Manufactured/Mobile Home RV Other: _____

Number of smoke alarms in the home: Number of working smoke alarms: Number of smoke alarms installed:

Name: _____ Phone: _____ Fire safety material left at the home: Yes No

Address: _____ Zip: _____

Not home 1-2 Family Manufactured/Mobile Home RV Other: _____

Number of smoke alarms in the home: Number of working smoke alarms: Number of smoke alarms installed:

Name: _____ Phone: _____ Fire safety material left at the home: Yes No

Address: _____ Zip: _____

Not home 1-2 Family Manufactured/Mobile Home RV Other: _____

Number of smoke alarms in the home: Number of working smoke alarms: Number of smoke alarms installed:

Name: _____ Phone: _____ Fire safety material left at the home: Yes No

Address: _____ Zip: _____

Not home 1-2 Family Manufactured/Mobile Home RV Other: _____

Number of smoke alarms in the home: Number of working smoke alarms: Number of smoke alarms installed:

Name: _____ Phone: _____ Fire safety material left at the home: Yes No

Address: _____ Zip: _____

Not home 1-2 Family Manufactured/Mobile Home RV Other: _____

Number of smoke alarms in the home: Number of working smoke alarms: Number of smoke alarms installed:

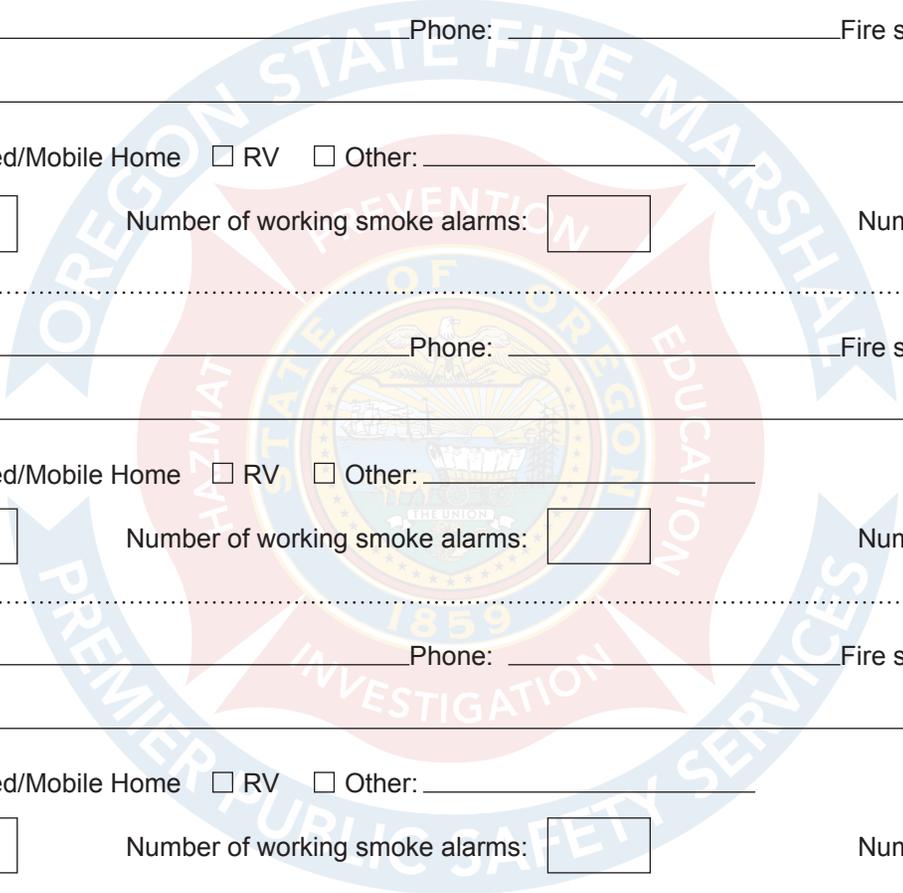


Exhibit 3
READ BEFORE SIGNING

**SMOKE ALARM LIABILITY WAIVER AND RELEASE FROM
FEDERAL AND STATE CLAIMS**

(Please Print Information) ALL BLANKS MUST BE FILLED IN.

Name: _____ Phone: _____

Address, City, State, Zip Code: _____

I, as the Occupant of the residence described above, acknowledge that _____
(Fire Department), with my permission has agreed to install and test ____ smoke alarm(s) within my residence.
The smoke alarms have been provided by the Office of the State Fire Marshal (OSFM) and Fire Department at
no charge to me.

In consideration for the Fire Department and OSFM providing, installing and testing the smoke alarm(s) at the
address described above, I EXPRESSLY AGREE TO SAVE AND HOLD HARMLESS THE FIRE
DEPARTMENT, MUNICIPALITY, OSFM, STATE OF OREGON, AND THEIR OFFICERS, EMPLOYEES AND
AGENTS FROM AND AGAINST ALL CLAIMS, SUITS, ACTIONS, PROCEEDINGS, LOSSES, DAMAGES,
LIABILITIES, AWARDS AND COSTS OF EVERY KIND AND DESCRIPTION, INCLUDING ANY AND ALL
FEDERAL AND STATE CLAIMS, REASONABLE ATTORNEY'S FEES, AND EXPENSES AT TRIAL
(COLLECTIVELY "CLAIMS") WHICH I HAVE OR MAY HAVE A RIGHT TO BRING AGAINST ANY STATE OR
LOCAL AGENCY, MUNICIPALITY, THE STATE, OR THEIR AGENTS, OFFICIALS, EMPLOYEES ARISING
OUT OF OR RELATED TO THE PROVISION, INSTALLATION AND TESTING OF THE SMOKE ALARM(S),
BATTERIES, OR BOTH.

I further agree that the provisions of this **Smoke Alarm Liability Waiver and Release from Federal and State
Claims** shall be effective and binding upon my heirs, executors, administrators, successors, assigns,
beneficiaries, or delegates and shall inure to the benefit of the Fire Department, OSFM, Municipality, the
State of Oregon, and their officers, employees and agents.

By my signature and execution of this form, I acknowledge and agree that I have read this **Smoke Alarm
Liability Waiver and Release from Federal and State Claims** and understand the rights and claims that I am
giving up. I, FOR MYSELF, AND ON BEHALF OF MY HEIRS, EXECUTORS, ADMINISTRATORS,
SUCCESSORS, ASSIGNS, BENEFICIARIES, OR DELEGATEES, HEREBY RELEASE AND FOREVER
DISCHARGE FIRE DEPARTMENT, OSFM, THE MUNICIPALITY, THE STATE OF OREGON, AND THEIR
OFFICERS, EMPLOYEES AND AGENTS, FROM ANY AND ALL DEMANDS AND CLAIMS, KNOWN OR
UNKNOWN, THAT I HAVE OR MAY HAVE AGAINST FIRE DEPARTMENT, OSFM, THE MUNICIPALITY,
THE STATE OF OREGON, AND ITS OFFICERS, AGENTS OR EMPLOYEES FOR ANY AND ALL HARM OR
DAMAGE TO MY HEALTH OR PROPERTY IN ANY MANNER RESULTING FROM OR ARISING OUT OF
THE PROVISION, INSTALLATION AND MY USE OF THESE SMOKE ALARMS. By signing this form, I also
certify that the smoke alarm(s) was tested in my presence, is in good working order and that I have received
information from the Fire Department regarding proper smoke alarm maintenance and testing.

Occupant Signature Date

Witness Signature Date

Exhibit 4

*PREFIX and SUFFIX TYPE FIELD

There are only 8 possible values that should be entered here as applicable to an address, they are:

N	North	S	South	E	East	W	West
NE	Northeast	NW	Northwest	SE	Southeast	SW	Southwest

**STREET TYPE FIELD

ALY	Alley	EXPY	Expressway	LN	Lane	RDS	Roads
ANX	Annex	EXT	Extension	LGT	Light	RT	Route
ARC	Arcade	EXTS	Extensions	LGTS	Lights	ROW	Row
AVE	Avenue	FALL	Fall	LF	Loaf	RUE	Rue
BCH	Beach	FLS	Falls	LCK	Lock	RUN	Run
BND	Bend	FRY	Ferry	LCKS	Locks	SHL	Shoal
BLF	Bluff	FLD	Field	LDG	Lodge	SHLS	Shoals
BLFS	Bluffs	FLDS	Fields	LOOP	Loop	SHR	Shore
BTM	Bottom	FLT	Flat	MALL	Mall	SHRS	Shores
BLVD	Boulevard	FLTS	Flats	MNR	Manor	SKWY	Skyway
BR	Branch	FRD	Ford	MNRS	Manors	SPG	Spring
BRG	Bridge	FRDS	Fords	MDW	Meadow	SPGS	Springs
BRK	Brook	FRST	Forest	MDWS	Meadows	SPUR	Spur
BRKS	Brooks	FRG	Forge	MEWS	Mews	SPRS	Spurs
BG	Burg	FRGS	Forges	ML	Mill	SQ	Square
BGS	Burgs	FRK	Fork	MLS	Mills	SQS	Squares
BYP	Bypass	FRKS	Forks	MSN	Mission	STA	Station
CP	Camp	FT	Fort	MTWY	Motorway	STRA	Stravenue
CYN	Canyon	FWY	Freeway	MT	Mount	STRM	Stream
CPE	Cape	GDN	Garden	MTN	Mountain	ST	Street
CSWY	Causeway	GDNS	Gardens	MTNS	Mountains	STS	Streets
CTR	Center	GTWY	Gateway	NCK	Neck	SMT	Summit
CTRS	Centers	GLN	Glen	ORCH	Orchard	TER	Terrace
CIR	Circle	GLNS	Glens	OVAL	Oval	TRWY	Throughway
CIRS	Circles	GRN	Green	PARK	Park	TRCE	Trace
CLF	Cliff	GRNS	Greens	PKY	Parkway	TRAK	Track
CLFS	Cliffs	GRV	Grove	PKYS	Parkways	TRFY	Trafficway
CLB	Club	GRVS	Groves	PASS	Pass	TRL	Trail
CMN	Common	HBR	Harbor	PSGE	Passage	TRLR	Trailer
CMNS	Commons	HBRs	Harbors	PATH	Path	TUNL	Tunnel
COR	Corner	HVN	Haven	PIKE	Pike	TPKE	Turnpike
CORS	Corners	HTS	Heights	PNE	Pine	UPAS	Underpass
CT	Court	HWY	Highway	PNES	Pines	UN	Union
CTS	Courts	HL	Hill	PL	Place	UNS	Unions
CV	Cove	HLS	Hills	PLZ	Plaza	VLV	Valley
CVS	Coves	HOLW	Hollow	PT	Point	VLVS	Valleys
CRK	Creek	INLT	Inlet	PTS	Points	VIA	Viaduct
CRES	Crescent	IS	Island	PRT	Port	VW	View
CRST	Crest	ISS	Islands	PRTS	Ports	VWS	Views
XING	Crossing	ISLE	Isle	PR	Prairie	VLG	Village
XRD	Crossroad	JCT	Junction	RADL	Radial	VLGS	Villages
XRDS	Crossroads	JCTS	Junctions	RAMP	Ramp	VL	Ville
CURV	Curve	JCTS	Junctions	RNCH	Ranch	VIS	Vista
DL	Dale	KY	Key	RPD	Rapid	WALK	Walk
DM	Dam	KYS	Keys	RPDS	Rapids	WALK	Walks
DV	Divide	KNL	Knoll	RST	Rest	WALL	Wall
DR	Drive	KNLS	Knolls	RDG	Ridge	WAY	Way
DRS	Drives	LK	Lake	RDGS	Ridges	WL	Well
EST	Estate	LKS	Lakes	RIV	River	WLS	Wells
ESTS	Estates	LNDG	Landing	RD	Road		

READ BEFORE SIGNING

**SMOKE ALARM INSTALLATION, LIABILITY WAIVER
AND RELEASE FROM FEDERAL AND STATE CLAIMS**

(Please Print Information) ALL BLANKS MUST BE FILLED IN.

Name: _____ **Phone:** _____

_____	_____	_____	_____	_____
Number	Prefix*	Street or Highway	Street Type**	Suffix *
_____	_____	_____	_____	_____
Apt./Suite/Room	City	State	ZIP Code	

Agency Name: _____ **Fire safety material left at the home:** Yes No

Not home 1-2 Family Manufactured/Mobile home RV Other: _____

Number of smoke alarms in the home: _____ **Number of working smoke alarms:** _____

I, as the Occupant of the residence described above, acknowledge that _____ (Agency), with my permission has agreed to install and test _____ smoke alarm(s) within my residence. The smoke alarms have been provided by the Oregon State Police, Office of State Fire Marshal (OSFM) and Agency at no charge to me.

In consideration for the Agency and OSFM providing, installing and testing the smoke alarm(s) at the address described above, I EXPRESSLY AGREE TO SAVE AND HOLD HARMLESS THE AGENCY, MUNICIPALITY, OSFM, STATE OF OREGON, AND THEIR OFFICERS, EMPLOYEES AND AGENTS FROM AND AGAINST ALL CLAIMS, SUITS, ACTIONS, PROCEEDINGS, LOSSES, DAMAGES, LIABILITIES, AWARDS AND COSTS OF EVERY KIND AND DESCRIPTION, INCLUDING ANY AND ALL FEDERAL AND STATE CLAIMS, REASONABLE ATTORNEY'S FEES, AND EXPENSES AT TRIAL (COLLECTIVELY "CLAIMS") WHICH I HAVE OR MAY HAVE A RIGHT TO BRING AGAINST ANY STATE OR LOCAL AGENCY, MUNICIPALITY, THE STATE, OR THEIR AGENTS, OFFICIALS, EMPLOYEES ARISING OUT OF OR RELATED TO THE PROVISION, INSTALLATION AND TESTING OF THE SMOKE ALARM(S), BATTERIES, OR BOTH.

I further agree that the provisions of this **Smoke Alarm Installation, Liability Waiver and Release from Federal and State Claims** shall be effective and binding upon my heirs, executors, administrators, successors, assigns, beneficiaries, or delegates and shall inure to the benefit of the Agency, OSFM, Municipality, the State of Oregon, and their officers, employees and agents.

By my signature and execution of this form, I acknowledge and agree that I have read this **Smoke Alarm Installation, Liability Waiver and Release from Federal and State Claims** and understand the rights and claims that I am giving up. I, FOR MYSELF, AND ON BEHALF OF MY HEIRS, EXECUTORS, ADMINISTRATORS, SUCCESSORS, ASSIGNS, BENEFICIARIES, OR DELEGATEES, HEREBY RELEASE AND FOREVER DISCHARGE AGENCY, OSFM, THE MUNICIPALITY, THE STATE OF OREGON, AND THEIR OFFICERS, EMPLOYEES AND AGENTS, FROM ANY AND ALL DEMANDS AND CLAIMS, KNOWN OR UNKNOWN, THAT I HAVE OR MAY HAVE AGAINST AGENCY, OSFM, THE MUNICIPALITY, THE STATE OF OREGON, AND ITS OFFICERS, AGENTS OR EMPLOYEES FOR ANY AND ALL HARM OR DAMAGE TO MY HEALTH OR PROPERTY IN ANY MANNER RESULTING FROM OR ARISING OUT OF THE PROVISION, INSTALLATION AND MY USE OF THESE SMOKE ALARMS. By signing this form, I also certify that the smoke alarm(s) was tested in my presence, is in good working order and that I have received information from the Agency regarding proper smoke alarm maintenance and testing.

Occupant Signature **Date**

Witness Signature **Date**