



## **Residential Swimming Pool, Spa or Hot Tub Safety Act Notice of Requirements**

Every swimming pool shall be protected by a barrier that prevents accidental or unauthorized entry into the water from adjacent properties, public right of way, and the interior of the dwelling(s).

I (we) acknowledge that a new swimming pool, spa, or hot tub that has a water depth of 24” or more, will be constructed or installed or renovated at \_\_\_\_\_ and hereby affirm that at least one of the following methods below will be used to meet the requirements of Florida Statute (FS) Chapter 515, the Florida Building Residential (FBCR) Code Section 4501.17.1, and the Florida Building Code Building (FBCB) Code Section 454.2 (Private Swimming Pools).

- **Pool Barrier- select one method**

**The Pool Barrier must be 48” high with a sturdy self-closing, self-latching, lockable gate that opens outward and away from the pool, compliant with FBCR 4501.17.1.**

Please ***initial*** next to **AT LEAST ONE METHOD** below to be used as a barrier. Submit **Manufacturer Specifications for any of the methods selected:**

\_\_\_\_\_ The pool will be equipped with an approved safety pool cover that complies with ASTM F1346. FBCR 4501.17.

\_\_\_\_\_ A Mesh Safety barrier in compliance with FBCR 4501.17.1.15 & 4501.17 located around the pool perimeter, with a 48” high sturdy self-closing, self-latching, lockable gate compliant with FBCR 4501.17.1.8. One end of the child barrier shall not be removable without the aid of tools per FBCR 4501.17.1.2. The barrier must be placed no less than 20 inches from the barrier to the water’s edge per FBCR 4501.17.1.13. (This method does not require any additional methods of protection.)

\_\_\_\_\_ A combination of "non-dwelling" walls (fences, screen enclosures, etc.) located around the pool perimeter with a 48” high sturdy self-closing, self-latching, lockable gate compliant with FBCR 4501.17.1.8. The plans must specify the type and location of all non-dwelling walls per FBCR 4501.17.1.11. (This method does not require any additional methods of protection.)

- Alarm(s)- select one method

**ONLY** If the wall of a dwelling with openings leads directly to the pool serves as part of the barrier.

\_\_\_\_\_ Where a wall of a dwelling with openings leading directly to the pool serves as part of the barrier: All doors and windows providing direct access to the pool from the home shall be equipped with an exit alarm complying with UL 2017 per FBCR 4501.17.1.9 (1).

\_\_\_\_\_ Where a wall of a dwelling with openings leading directly to the pool serves as part of the barrier: All doors and windows providing direct access to the pool from the home shall be equipped with self-close-latch & key-lock mechanical devices installed at min of 54" above the threshold complying with FBCR 4501.17.1.9 (2).

\_\_\_\_\_ Where a wall of a dwelling with openings leading directly to the pool serves as part of the barrier: A swimming Pool Alarm compliant with ASTM F2208 as per FBCR 4501.17.1.9(3), placed in the pool that sounds an alarm upon detection of an accidental or unauthorized entry into the water.

In accordance with the Florida Building Code Residential, a final inspection of the pool project will not be approved without compliance with the Private Swimming Pool Safety Requirements, and upon expiration of the permit, the pool shall be presumed to be unsafe. **I understand that not having a pool barrier and one of the above alarm systems installed (if applicable) will constitute a violation of Chapter 515, F.S., and will be considered as committing a misdemeanor of the second degree, punishable as provided in Section 775.082 or Section 775.083 F.S. This form must be signed by the owner/agent and the prime contractor.**

\_\_\_\_\_  
 Owner/Agent Printed Name, Signature, and Date

County of \_\_\_\_\_

Sworn and Subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ By \_\_\_\_\_ who \_\_\_ is personally Known,

or produced \_\_\_\_\_ as identification,

\_\_\_\_\_  
 Notary Public, State of \_\_\_\_\_

\_\_\_\_\_  
Prime Contractor Printed Name, Signature, and Date

County of \_\_\_\_\_

Sworn and Subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ By  
\_\_\_\_\_ who \_\_\_ is personally Known,

or produced \_\_\_\_\_ as identification,

\_\_\_\_\_  
Notary Public, State of \_\_\_\_\_