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| C:\Users\Nancy.Gardner\OneDrive\My Documents\Forms & Procedures\Clearwater Logo 300 x 85.gif | Planning & Development Department  100 S. Myrtle Avenue, Suite 210  Clearwater, FL 33756  Telephone: (727) 562-4567  www.myclearwater.com |

Residential Swimming Pool, Spa or Hot Tub Safety Act

Notice of Requirements

I (we) acknowledge that a new swimming pool, spa, or hot tub will be constructed or install\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and hereby affirm that one of the following methods will be used to meet the requirements of Florida Statue Chapter 515 and Florida Building Code Section 454.2.17.1.

Please initial the method(s) used for your pool or spa.

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | The pool will be equipped with an approved safety pool cover that complies with ASTM F1346-92 (Submit Manufacturer Specifications). |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | A removable child barrier (with one end that shall be removable without the aid of tools) in compliance with 454.2.17.1.13 will protect the pool perimeter. (Submit Manufacturer specifications) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | A combination of “non-dwelling” walls (fences, screen enclosure, etc) will protect the perimeter. The plans must specify the type and location of all non-dwelling walls. |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | A combination of protection with incorporates dwelling walls with openings into the pool perimeter and complying with FBC Section 454.2.17.1.9 (2): All doors and windows providing direct access to the pool must be equipped with self close and self-latching mechanical devices installed a minimum of 54” above the threshold. (Submit Manufacturer specifications) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | A combination of protection which incorporates dwelling walls with openings into the pool perimeter and complying with FBC Section 454.2.17.1.9 (1): All doors and windows providing direct access to the pool shall be equipped with an exit alarm complying with UL 2017. (Submit Manufacturer specifications) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | A combination of protection which incorporates dwelling walls with openings into the pool perimeter and complying with FBC Section 454.2.17.1.9 (3): A swimming pool alarm that, when placed in a pool, sounds an alarm upon detection of an accidental or unauthorized entrance into the water. Such pool alarm must meet and be independently certified to ASTM F2208, titled “Standard Safety Specification for Residential Pool Alarms,” which includes surface motion, pressure, sonar, laser, and infrared alarms. For purposes of this paragraph, the term “swimming pool alarm” does not include any swimming protection alarm device designed for individual use, such as an alarm attached to a child that sounds when the child exceeds a certain distance or becomes submerged in water. |

In accordance with the Florida Building Code, a final inspection of the pool project will not be approved without compliance with Private Swimming Pool Safety Requirements, and upon expiration of the permit, the pool shall be presumed to be unsafe.

I understand that not having one of the above systems installed will constitute a violation of Chapter 515, FS, and will be considered as committing a misdemeanor of the second degree, punishable as provided in Section 775.082 or Section 775.083 FS. This form must be signed by the owner/agent and the prime contractor.

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Owner/Agent Printed Name, Signature and Date | State of Florida  County of Pinellas  Sworn and subscribed before me this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_  By \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ who is personally known, or produced \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as identification  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Notary Public, State of Florida |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Prime Contractor Printed Name, Signature and Date | State of Florida  County of Pinellas  Sworn and subscribed before me this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_  By \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ who is personally known, or produced \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as identification  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Notary Public, State of Florida |