



**City of Port St. Lucie Building Department**  
 121 SW Port St. Lucie Blvd  
 Port St. Lucie, FL 34984  
 772-871-5132 • Web Site: <http://www.cityofpsl.com>  
 To Schedule Inspections Call: 871-5270

# Child Safety Barrier

For Swimming Pool Application

Construction under this permit will be done in accordance with the FBC 2007 w/ 2009 Amendments

PERMIT # \_\_\_\_\_ CONFIRMATION # \_\_\_\_\_

MUST BE COMPLETELY FILLED OUT

PROPERTY ADDRESS:				
LEGAL DESCR	SECTION	BLOCK	LOT	Parcel ID#
OWNER		MAIL ADDRESS		ZIP
				PHONE CELL
CONTRACTOR		MAIL ADDRESS		ZIP
				STATE LIC. # PSL COMP #
CONTRACTOR E-mail Address		PHONE	FAX #	CELL
ARCHITECT/ENGINEER		MAIL ADDRESS		PHONE E-MAIL ADDRESS
				LIC #

Child Safety Barriers must be inspected to verify compliance with Florida Residential Code 4101.17 and must include a signed and notarized Pool Alarm/Barrier Affidavit. (see attached page)

Safety Barrier Height: \_\_\_\_\_

Is Safety Barrier removable? YES      NO

Copy of plot plan or survey showing intended location of the safety barrier **must be** attached to this application.

Manufactured by: \_\_\_\_\_

*NOTE: Must attach a copy of manufactures specifications, product approval, and installation instructions with this application.*

Valuation: \$	Applied Date:	Rec'd By:	Reviewed by/Date	<b>PERMIT FEE:</b>
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THIS PERMIT BECOMES NULL AND VOID IF CONSTRUCTION OR WORK AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED.

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS AND AIR CONDITIONERS, etc.

OWNER'S AFFIDAVIT: I certify that all the forgoing information is accurate and that all work will be done in compliance with all applicable laws regulating to construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature of Contractor \_\_\_\_\_ Date \_\_\_\_\_ Signature of Owner (if Owner Builder) \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Print Name \_\_\_\_\_

Notary As to Contractor: \_\_\_\_\_ Notary as to Owner or Agent: \_\_\_\_\_

Sworn before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
 Personally known \_\_\_\_\_ Produced ID \_\_\_\_\_ Type of ID \_\_\_\_\_

Permit Validation: Chk.	M.O.	Cash
Batch # _____	Item # _____	Check # _____

Form Created 10/14/11 revised 03/15/2012



City of Port St. Lucie Building Department
Pool Alarm Affidavit

Residential Swimming Pool, Spa and Hot Tub Safety Act
Notice of Requirements

2007

Permit Number \_\_\_\_\_

I (We) acknowledge that the residential swimming pool, spa or hot tub located at \_\_\_\_\_ shall use the following methods to establish compliance with Chapter 515 & 553, Florida Statutes, The Florida Building Code and ANSI/NSPI 5-2003.

Must INITIAL the method(s) to be used for your pool:

\_\_\_\_\_ The child safety barrier to comply with FBC, R 4101.17.1.15 and ASTM D5034, ASTM D3787 and ASTM G 53.

\_\_\_\_\_ The pool access shall be isolated from the dwelling or yard by an enclosure that meets the pool barrier requirements of the Florida Building Code Residential, Chapter 41, Section R 4101.17.

\_\_\_\_\_ All doors providing direct access from the dwelling to the pool shall be equipped with self-latching devices with release mechanisms placed no lower than fifty-four (54) inches above the floor or deck. Screened or protected windows having a bottom sill height of 48 inches (1219 mm) or more measured from the interior finished floor at the pool access level.

\_\_\_\_\_ All doors and windows providing direct access from the dwelling to the pool shall be equipped with an exit alarm to comply with the Florida Residential Code, Chapter 41, Section R4101.17.1.9.

\_\_\_\_\_ The pool shall be equipped with an approved safety cover that complies with Chapter 515.25, Florida Statutes, ASTM F 1346. (The Standard Performance Specifications for Safety Covers for Swimming Pool, Spa and Hot Tubs).

I understand that not having the above installed at the time of the final inspection, or when the pool is completed for contract purposes, will constitute a violation of Chapter 515, Florida Statutes, and the Florida Building Code and will be considered as committing a misdemeanor of the second degree, punishable by fines up to \$5,000.00 and/or up to sixty (60) days in jail as established in Chapter 775, Florida Statutes. The homeowner shall maintain the safety provisions ordered herein in operable condition.

Owner's Signature and Date

Owners Name (Please Print)

Notary as to Owner:
State of Florida, County of \_\_\_\_\_
Before me this day personally appeared \_\_\_\_\_ who being duly sworn, deposes and say he/she has read and attests to the above notice and shall abide by it.
Sworn and subscribe to me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.
Notary public State of Florida
The above is personally known to me or has produced the following identification: \_\_\_\_\_
Signature of Notary