



## Residential Swimming Pool, Spa and Hot Tub Safety Act

### Notice of Requirements

I (We) acknowledge that a new swimming pool, spa or hot tub will be constructed or installed at \_\_\_\_\_ and hereby affirm that one of the following will be used to meet the requirements of Chapter 15, Florida Statutes and Florida Building Code Sec 454/Chapter 45 Residential Code.

- The pool will be equipped with an approved **safety pool cover** that complies with the American Society for Testing Materials (ASTM) standard F1346-91 (**Submit Manufacturer's Specifications**).
- A continuous one-piece (child) barrier meeting the requirements of Florida Building Code Sec. 454.2.17/R4501.2.17 will protect the pool perimeter. The plans shall show the fence location and method of attachment, including one end that shall not be removable without the aid of tools (**Submit Manufacturer's Specifications**).
- A combination of **non-dwelling walls and fences** (screen enclosure, child fence, masonry fence walls, chain link or wood fence, etc.) will protect the pool perimeter. The plans must specify the type and location of all non-dwelling walls.
- Any combination of protection which incorporates **dwelling walls** with openings directly into the pool perimeter and **all windows and doors must be equipped with exit alarms complying with Florida Building Code Sec. 454.2.17.1.9/ R4501.17.1.9** (Submit Manufacturer's Specifications).
- Any combination of protection which incorporates **dwelling walls** with openings directly into the pool perimeter and **all doors will be equipped with a self-latching device with positive mechanical latching/ locking installed a minimum 54" above the threshold**. If this option is selected, submit plans showing all types and locations of all perimeter protection. The plans must also show the location and type of all openings and the hardware type for each location (Submit Manufacturer's Specifications).
- 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 Standard 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.



# DEVELOPMENT SERVICES DEPARTMENT – BUILDING SERVICES

## RESIDENTIAL SWIMMING POOL, SPA & HOT TUB SAFETY

Rev: 3 | Revision Date: 11/7/2024 | Print Date: 11/7/2024 I.D. Number: RSPSHTSA

In accordance with the Code, 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 unsafe.

I understand that not having one of the above installed will constitute a violation of Chapter 515, Florida Statutes, and will be considered as committing a misdemeanor of the second degree, punishable as provided In Chapter 775, Florida Statutes.

**This form must be signed by the owner/agent and the prime contractor.**

THE POOL SHALL NOT BE FILLED WITH WATER UNTIL THE FINAL ELECTRICAL AND ZONING (POOL BARRIER) INSPECTIONS HAVE PASSED, FBC 454.2.19/R4501.1.19.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Prime Contractor's Signature

\_\_\_\_\_  
Owner's Name (please print)

\_\_\_\_\_  
Prime Contractor's Name (please print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

STATE OF \_\_\_\_\_:  
COUNTY OF \_\_\_\_\_:

STATE OF \_\_\_\_\_:  
COUNTY OF \_\_\_\_\_:

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this \_\_\_ day of \_\_\_\_\_, 202\_\_, by \_\_\_\_\_ (Name and title of authorized officer) for \_\_\_\_\_(Name of corporation), a \_\_\_\_\_(whatever type of corporation).

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this \_\_\_ day of \_\_\_\_\_, 202\_\_, by \_\_\_\_\_ (Name and title of authorized officer) for \_\_\_\_\_(Name of corporation), a \_\_\_\_\_(whatever type of corporation).

\_\_\_\_\_  
(Signature of Notary Public – State of Florida)

\_\_\_\_\_  
(Signature of Notary Public – State of Florida)

\_\_\_\_\_  
Print, Type or Stamp Commissioned Name of Notary Public)

\_\_\_\_\_  
Print, Type or Stamp Commissioned Name of Notary Public)

Personally Known \_\_\_ OR Produced  
Identification \_\_\_ Type of Identification  
Produced \_\_\_\_\_

Personally Known \_\_\_ OR Produced  
Identification \_\_\_ Type of Identification  
Produced \_\_\_\_\_