



CITY OF LAKE ALFRED  
Community Development  
Department

RESIDENTIAL SWIMMING POOL  
SAFETY AFFIRMATION

Permit # \_\_\_\_\_

License# \_\_\_\_\_

I hereby affirm that the pool, located at \_\_\_\_\_ will be isolated from access from within the dwelling AND from adjacent properties by a barrier that meets the pool barrier requirement of Florida Statute 515 and the Florida Building Code 8<sup>th</sup> Edition Residential (2023) R4501.17.

**Check the applicable barrier requirements from the following options and show on the site plan:**

- The pool will be equipped with an approved safety pool cover that complies with ASTM F 1346 (Standard Performance Specifications for Safety Covers for Swimming Pools, Spas and Hot Tubs) per FBC- R4501.17, Exception.
- The pool will be isolated from access by a mesh safety barrier that meets the requirements of FBC- R4501.17.1.15.
- The Pool will be isolated from access by a screen enclosure that meets the requirements of FBC- R4501.17.1.11.
- The pool will be isolated from access by a fence and Pedestrian gates that meet the requirements of FBC-R4501.17.1.1 through R4501.17.1.14.

Does any part of the barrier consist of dwelling walls which contain doors or windows?

**YES**                       **NO**

IF you checked "Yes" to the above question, check which of the following three options below are applicable:

- All doors and windows providing direct access from the dwelling to the pool will be equipped with an exit alarm that meets the requirements of FBC- R4501.17.1.9 (1) unless exceptions a, b or c apply.

All doors providing direct access from the dwelling to the pool will be equipped with self-closing, self-latching devices installed 54" above the threshold that meet the requirements of FBC- R4501.17.1.9 (2).

- A swimming pool alarm that meets and is independently certified to ASTM Standard F2208 will be provided per FBC-R4501.17.1.9 (3).

I understand that the above indicated shall be installed before the time of the Pool Barrier/Safety Device inspection per FBC- R4501.19.

\_\_\_\_\_  
Print Contractor's Name

\_\_\_\_\_  
Print Owner's Name

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

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

THIS COMPLETED FORM MUST BE ATTACHED TO THE PERMIT APPLICATION, AND A COPY MUST BE KEPT AT THE JOB SITE AT ALL TIMES.