



City of Port St. Lucie

Building Department
121 SW Port St. Lucie Blvd
Port St. Lucie, FL 34984 • 772-871-5132

In-Ground Pool Alarm Affidavit

To use the "In pool alarm" allowed in HB 535 Section 14, subsection (1) 515.27(e), this affidavit must be complete and submitted with your pool permit for approval.

Permit #: _____

The in-ground pool alarm device was installed at _____.

The manufacturer of the device is _____ Model # _____

Please initial before each statement:

_____ I understand that the pool alarm device MUST be installed immediately upon filling the pool with water.

_____ I have personally tested the device as per the specifications and installation manual provided by the manufacturer and the device met all criteria included there-in.

_____ I am personally accepting all responsibility for the proper installation and testing of this device.

_____ I have instructed the occupants of the residence on the operation and performance of this device.

_____ I have provided the occupants with a copy of the installation manual and product specifications.

Signature of License Holder (qualifier)

Date

Print Name

Cont. Lic #

The foregoing instrument was acknowledged before me this _____ day of _____, 20____ by

_____.

Notary Public Signature

Personally known _____ Produced ID _____