

City of Port St. Lucie Building Department 121 SW Port St. Lucie Blvd Port St. Lucie, FL 34984

Child Safety Barrier For Swimming Pool Application

772-871-5132 • Web Site: http://www.cityofpsl.com To Schedule Inspections http://pandapublicweb.cityofpsl.com

Construction under this permit will be done in accordance with the FBC 5th Edition (2014)

PERM	IT #		_ CONFIRMAT	ΓΙΟΝ #					
PROPERT	Y ADDRESS:								
LEGAL	SECTION		BLOCK	LOT	Parcel	ID#			
DESCR OWNER		MAIL	ADDRESS			ZIP	PHONE CELL		
CONTRACTOR MAIL A			DDRESS			ZIP	STATE LIC. # PSL COMP #		
CONTRAC	CTOR E-mail Addres	SS .	PHON	NE	FAX#		CELL		
ARCHITE	CT/ENGINEER		MAIL ADDRESS			ONE MAIL ADD	LIC	#	
and no Safety	tarized Pool A Barrier Heigh	Alarm/Barrier Affid		ance with Florida	Residential	Code	4501.17 and must	include a s	signed
Manufa	ectured by:						d to this applicatio		ation.
Valuation:		Applied Date:	Rec'd By:	Reviewed by/D	ate		PERMIT FEE:		
OR ABANI Application will be perl SIGNS, W OWNER'S WARNING A NOTICE IF YOU IN COMMENG Signature Print Name Notary As to Cont	DONED FOR A PER n is hereby made to o formed to meet the s ELLS, POOLS, FUR AFFIDAVIT: I certif TO OWNER: YOU FOR COMMENCEM TEND TO OBTAIN F CEMENT. of Contractor	RIOD OF 180 DAYS AT AN obtain a permit to do the wistandards of all laws regular NACES, BOILERS, HEAT fy that all the forgoing information of the properties of the permitted of the properties	IY TIME AFTER WORK IS ork and installations as ind titing construction in this jur ERS, TANKS AND AIR CO mation is accurate and tha A NOTICE OF COMMENO ED AND POSTED ON THE VITH YOUR LENDER OR A Signature of Ow Print Name Notary	COMMENCED. licated. I certify that no w isdiction. I understand the DNDITIONERS, etc. It all work will be done in a CEMENT MAY RESULT E JOB SITE BEFORE TH	ork or installation hat a separate permit a separate permit ompliance with all N YOUR PAYING E FIRST INSPECTOMMENCING V	as comme it must be applicabl TWICE F FION.	, OR IF CONSTRUCTION (enced prior to the issuance escured for ELECTRICAL le laws regulating to constru OR IMPROVEMENTS TO V RECORDING YOUR NOT	of a permit and t WORK, PLUMBI ction and zoning YOUR PROPER	hat all wo ING, J.
	ore me on this	day of				1	nit Validation: Chk.		Cash
D 11	y known	Produced ID	T ₁	ype of ID		Batch	h# Item#	Check #	



City of Port St. Lucie Building Department Residential Swimming Pool, Spa and Hot Tub Safety Act Notice of Requirements

FBC 5th ED. (2014)

Permit Number

	al swimming pool, spa or hot tub located ath compliance with Chapter 515 & 553, Florida Statutes, T							
Must INITIAL the method(s) t	to be used for your pool:							
The child safety barrier to co	omply with FBC, R 4501.17.1.15 and ASTM D5034, AST	M 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 lorida Building Code Residential, Chapter 41, Section R 4501.17.								
mechanisms placed no lower than fift	scess from the dwelling to the pool shall be equipped with y-four (54) inches above the floor or deck. Screened or pro- re measured from the interior finished floor at the pool according to the pool	otected windows having a bottom sill						
All doors and windows prov. with the Florida Residential Code, Ch	iding direct access from the dwelling to the pool shall be enapter 41, Section R4501.17.1.9.	quipped with an exit alarm to comply						
	with an approved safety cover that complies with Chapter 5 tions for Safety Covers for Swimming Pool, Spa and Hot							
	t, when placed in a pool, sounds an alarm upon detection of meet and be independently certified to ASTM Standard Farms."							
will constitute a violation of Chapter misdemeanor of the second degree, p	e installed at the time of the final inspection, or when the p 515, Florida Statutes, and the Florida Building Code and v unishable by fines up to \$5,000.00 and/or up to sixty (60) all maintain the safety provisions ordered herein in operable	vill be considered as committing a days in jail as established in Chapter 775,						
\overline{C}	Owner's Signature and Date							
(0	Owner's Name (Please Print)							
Notary as to Owner: State of Florida, County of								
Before me this day personally appear								
and shall abide by it.	who being duly sworn, deposes and say he/she ha	s read and attests to the above notice						
Sworn and subscribe to me this	day of							
Notary public State of Florida The above is personally known to n	ne or has produced the following identification:							
Signature of Notary		revised tjv 01/06/17						