



BUILDING DIVISION

Community Development Department

1776 Independence Lane, Maitland, FL 32751

Phone: (407) 539-6150 Fax: (407) 539-6275 www.itsmymaitland.com

Email: DigitalPlan@itsmymaitland.com

POOL BARRIER AFFIDAVIT

I. Identification

Permit Number: Job Site Address: Contractor Business Name: Contractor Address: State: Zip: Contractor Telephone: Contractor Email: Licensee Name: License Number: Property Owner: Owner Address: State: Zip: Owner Telephone: Owner Email:

COPIES OF MANUFACTURER'S APPROVAL INFORMATION AND INSTALLATION INSTRUCTIONS FOR ANY/ALL ITEMS UTILIZED IN THE POOL BARRIER/SAFETY INSTALLATION AND THIS COMPLETED AFFIDAVIT MUST BE ON SITE FOR FINAL INSPECTION.

II. Pool Barrier Installation

The pool "Barrier" and all components thereof will be furnished and installed in full compliance with requirements of F.S. Chapter 515 Residential Swimming Pool Safety Act as currently adopted, F.S. 553.73 Florida Building Code generally and specifically Residential Code § R4501.17.1 as adopted at the time of Permit issuance. Compliance with the above has been achieved by the following systems, equipment, apparatus, and/or means as follows:

- Fencing
Gates, self-closing self-latching
Wall(s) of the dwelling unit:
Doors self-closing and self-latching equipped with exit alarms
Windows equipped with exit alarms
Swimming Pool water entrance alarm
Above-ground pool walls, ladders, and barriers properly configured
Standard screen enclosures
Removable child barrier
Mesh safety barrier
Other

IV. Owner Affirmation

I, (Owner in Fee) do personally acknowledge the installation of the above pool "Barrier" life-safety system(s)/components supplied, and further, attest that I have been trained on the proper operation and maintenance of such.

Printed Name of Owner in Fee

Signature of Owner in Fee

Date

III. Contractor Affirmation

I, (licensee) have personally performed or supervised the installation of the above components/systems comprising the Pool Barrier, and further, attest that such installation meets or exceeds the minimum requirements as set forth by F.S. 553.73 Florida Building Code in effect at the time of Permit issuance, the materials Manufacturer Installation Instructions, and proper engineering and workmanship practices.

Signature of Licensee Printed Name of Licensee Date

STATE OF FLORIDA, COUNTY OF ORANGE

The foregoing instrument was acknowledged before me by means of physical presence online notarization this day of 20 by

Name of Person making Statement

Signature of Notary Public

Print, Type, or Stamp name of Notary

(Seal)

- Personally known, or
Produced identification

Type of Identification Produced:

STATE OF FLORIDA
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me by means of physical presence online notarization this day of 20 by

Name of Person making Statement

Signature of Notary Public

Print, Type, or Stamp name of Notary

(Seal)

- Personally known, or
Produced identification

Type of Identification Produced: