



CITY OF WINTER SPRINGS

1126 East State Road 434
Winter Springs, FL 32708
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RESIDENTIAL SWIMMING POOL SAFETY ACT AFFIRMATION

I, _____, License # _____,
(Print contractor's name)

hereby affirm that one of the following methods will be used to meet the requirements of Chapter 515, Florida Statutes. I further understand that I must comply with the city ordinance Sec 6-217. (enclosure height of 5ft.) and complete and attach this form to the permit file with a copy displayed on the job site at all times.

Initial

_____ The pool will be isolated from access to the home by an enclosure that meets the pool barrier requirements of Florida Statute 515.29; or

_____ The pool will be equipped with an approved safety pool cover that complies with ASTM F1346-91 (standard performance specifications for safety covers for swimming pools, spas, and hot tubs); or

_____ All doors and windows providing direct access from the home to the Pool will be equipped with a self closing, self catching device with a release mechanism placed no lower than 54" above the floor or deck; or

_____ All doors and windows providing direct access from the home to the pool will be Equipped with an exit alarm that has a minimum sound pressure rating of 85 decibels at 19 feet.

I understand that not having one of the above installed at the time of the final inspection will constitute a violation of Chapter 515 F.S. and will be considered as committing a misdemeanor of the second degree, punishable as provided in section 775.082 F.S.

Contractor's Signature: _____ Date: _____

Print Name: _____

Owner's Signature: _____ Date: _____

Print Name: _____