



**Marion County  
Board of County Commissioners**

Building Safety ♦ Plans Review

2710 E. Silver Springs Blvd.  
Ocala, FL 34470  
Phone: 352-438-2400  
Fax: 352-438-2464

**RESIDENTIAL SWIMMING POOL, SPA AND HOT TUB  
SAFETY ACT REQUIREMENTS**

Permit Number \_\_\_\_\_

Location \_\_\_\_\_

I \_\_\_\_\_, License # \_\_\_\_\_

Hereby affirm that one of the following methods will be used to meet the requirements of Chapter 515 of the Florida Statutes as well as FBC 454 and FBCR Ch.45.

\_\_\_\_\_ The Pool will be isolated from access to the home by enclosures that meet the barrier requirements of Florida Statute 515. 29, FBC 454 and FBCR Ch. 45;

\_\_\_\_\_ The pool will be equipped with an approved cover that complies with ASTM F1346-91(Standard Performance Specifications for Safety covers for Swimming Pools Spas and Hot Tubs);  
Note: Safety covers do NOT meet barrier requirements for Commercial Pools, Spas and Hot tubs Per FBC 454.1.3.1.9

\_\_\_\_\_ All doors and windows providing direct access from the house to the pool will be equipped with an exit alarm that has a delay for no more than 15 seconds and meets the sound pressure of 85 decibels at 10 feet;

\_\_\_\_\_ All doors providing direct access from the home to the pool or surrounding area to pool will be equipped with a self-closing, self-latching device with a release mechanism placed no lower than 54” above the floor or deck;

I understand that not having one of the above installed at the time of final inspection will constitute a violation of Chapter 515 of the Florida Statute as well as FBC 454 and FBCR Ch. 45 And will be considered as committing a misdemeanor of the Second Degree, Punishable as provided in SECTION 775.082 or SECTION 775.083 of the Florida Statute.

\_\_\_\_\_  
Contractor Signature

\_\_\_\_\_  
Owner’s Signature

\_\_\_\_\_  
Contractors Name (Please Print)

\_\_\_\_\_  
Owner’s Name (Please Print)