

BUILDING DEPARTMENT

SWIMMING POOL OWNER'S CERTIFICATION

Date:	Permit No.:
I certify that I am the legal owner of t	the property described as:
lc	ocated at
above address cannot be plastered an approved SAFETY BARRIER co	that the swimming pool to be constructed at the luntil a separate permit has been obtained for ompliant with Section 454.2.17 of the Florida C-4 of Chapter 8C of the Miami-Dade County on of the barrier has been approved.
	cation, however, does not eliminate the need for oproved barrier prior to final inspection and use of
I have read and understand the inform	mation in the box below.
X	
Signature of Owner STATE OF FLORIDA COUNTY OF MIAMI-DADE Sworn to and subscribed before me this	
By (Print Name)	
Notary Name Personally known O or I.D	

Swimming Pool Barrier Requirement:

No swimming pool shall be filled with water and the Building Division shall give no final inspection approval for a swimming pool unless a safety barrier has been erected. The safety barrier shall be a screened enclosure, a fence or a safety pool cover.

The screened enclosure and the fence shall comply with the barrier requirements of Section 454.2.17 of the Florida Building Code for residential (private) swimming pools or with the barrier requirements of Section 8C-4 of Chapter 8C of the Miami-Dade County Code.

Safety pool covers shall comply with the requirements of NSPI/ASTM F 1346-91.

Facsimile: (305) 593-6614