

## Pool Spa Permit Building Permit Florida Building Code 8th Edition (2023)

Florida Fire Prevention Code 8th Edition

Job Information	Application Date:	Est. cost:	Permit #:	
Parcel ID #:		Job Address:		
Legal: Sub/Unit/B	lk/Lot:			
<b>Primary Contrac</b>	tor Information			
Contractor:		State Cert/CC Co	mp Card #:	
			_	
•				
Work being perfo	ormed			
- ·		eration   Square Footage (not in	cluding deck):	_
Size of footing and	d reinforcing if screen enclosur	re is anticipated:		
_	_	•		_
J 1				_
Sub-Contractor I	<mark>Information</mark> (Enter Compan	y Name, License Number, and Add	ress.)	
Electric:				
	by the Electrical Contractor			
_	rvice: am		anel: amps	
	pool pump motor:		3TU's:	
	house:		<u>:</u>	
Horsepower of Blo	owers:	Pool heater amperage:		_
Decaded and the Australia	·		I was to the same I do to the country of	.4 41
		<mark>y of Marco Island are subject to de</mark> that may be applicable to their pro <sub>l</sub>		
		Association (MICA) at (239) 642-77		
	ist be included with the appl			
		evation, seawall elevation and location		
a commercial pool		b Safety Act Notice of Requirements	form, unless submitting for	
-	a. et of signed and sealed engine	ered nool plans or		
		neered mastered typical pool plan on:	file with building department.	
		venting and provision for combustion	= =	e installed.
_	ty option to be installed.	6 1 done.	<i>G</i> 1	

Job Info	ormation	Address:			Permit #:	
City of M	farco Island	Building Service				
•			23			
				ial Swimming Pool Hot Tub Safety Act		
			Notice	of Requirements		
					ted or installed at following methods wil	l be used to meet the
Please in	itial the me	thod(s) to be use	ed for your pool:			
	Specification	ons for Safety Co ill be isolated fro	vers for Swimming Po	ols, Spas and Hot Tub	es).	(Standard Performance quirements of the Florida
Where a R4501.1′		welling serves as	part of the barrier, a	t least one of the foll	owing must also be se	lected (FBC
	and has a m All doors p positive me A swimmir entrance in	ninimum sound providing direct acceptanical latching good alarm that to the water. Such affects of the control	ressure rating of 85 decess from the home to clocking installed a mit, when placed in a poor pool alarm must mee	cibels at 10 feet. the pool will be equipnimum of 54" above to, sounds an alarm upt and be independently	oped with self-closing, he threshold. on detection of an accidence of the contraction of	self-latching devices with dental or unauthorized andard F2208, titled essure, sonar, laser, and
and will b	be considere	_		· 1		violation of Chapter 515.F.S O and/or up to 60 days in jail
Contracto	or's Signatur	e & Date		Owner's	s Signature & Date	-
Contracto	or's Name (I	Print)		Owner's	Name (Print)	

lob Infor	mation Address:	Permit #:		
Regulation	s and Information			
		gulated by the Florida Building Code 8 <sup>th</sup> Edition (2023). For more information about		
the cod	de or to purchase the code, visit <a href="https://">https://</a>	/floridabuilding.org/c/default.aspx.		
		nore information about how to submit for permit.		
propert		the City of Marco Island are subject to deed restrictions. It is incumbent upon the that may be applicable to their property. Questions regarding deed restrictions should not at (239) 642-7778		
	r pool heaters, Fencing and Screen End			
. Before and FB	Before filling the pool with water, the final electrical and pool barrier inspections must be completed. See Florida Statute s. and FBC R4501.19.			
pools, a		H) proof of application is required prior to the issuance of a permit for commercial ing permit is required prior to the certificate of completion or occupancy (FBC		
. All area See Ma	as that are disturbed by construction a arco Island Administrative Construction			
		riginal signature of the qualifier pulling the permit.		
		tin is \$0.82 per square foot for the pool, minimum \$587.00 plus electric fee of \$0.25		
	e for a single-family pool is \$445.00, i	ft for alteration work, minimum fee of \$77.00.		
		will be charged at the time of application. This fee is not refundable nor is it credited		
	other fee.			
<mark>esign Pro</mark>	<mark>ofessional Information</mark> (Enter Name,	License Number, and Address.)		
architect:_				
architect:_				
rchitect:_ ngineer:				
rchitect: ngineer: <mark>Iiscellane</mark> e		ame and Address.)		
rchitect:ngineer: liscellanee	ous Information (Enter Company Norther Holder:	ame and Address.)		
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rchitect:_ ngineer:_ liscellanee ee Simple onding Co	ous Information (Enter Company Note: Title Holder:	ame and Address.)		
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rchitect:_ngineer:_ liscellance ee Simple onding Co fortgage L	Title Holder:  cous Information (Enter Company Note Title Holder:  company:  cender:  Portal Access Permission	ame and Address.)		
rchitect:_ ngineer:_ liscellane ee Simple onding Co lortgage L  dditional am author	Title Holder:	oject, and/or permitting service		
rchitect:_ ngineer:_ liscellane ee Simple onding Co lortgage L dditional am author	Title Holder:	oject		
rchitect:_ngineer:_ liscellane ee Simple onding Co fortgage L dditional am author	Title Holder:	oject, and/or permitting servicell access to this permit via the Citizens Self Service Portal. I acknowledge that I am		
rchitect: ngineer: liscellance ee Simple onding Co lortgage L dditional am author	Title Holder:	oject		
rchitect:ngineer: liscellanee ee Simple onding Co fortgage L dditional am author olely respo	Title Holder:	oject		

Job Information Address:	Permit #:		
Owner's Affidavit I certify that all the foregoing information applicable laws regulating construction and zoning.	ion is accurate and that all work will be do	one in compliance	ce with all
WARNING TO OWNER: YOUR FAILUR COMMENCEMENT MAY RESULT IN Y TO YOUR PROPERTY. A NOTICE OF C POSTED ON THE JOB SITE BEFORE TI OBTAIN FINANCING, CONSULT WITH COMMENCING WORK OR RECORDIN	YOUR PAYING TWICE FOR COMMENCEMENT MUST I HE FIRST INSPECTION. IF H YOUR LENDER OR AN A	R IMPROVI BE RECOR YOU INTE ATTORNEY	DED AND END TO BEFORE
Print Name of Owner or Agent for Owner	Signature of Owner or Agent for	Owner	
State of County of			
The foregoing instrument was acknowledged before me this	day of	, 20	,
by, who is □persona	ally known to me, or □has produced		as identification,
by means of $\square$ physical presence or $\square$ online notarization.			
Signature, Notary Public – State of Florida	(Seal)		
Printed, Typed, or Stamped Name of Notary			
Contractor's Affidavit			
<ul> <li>I certify that all the foregoing information is accurate and the construction and zoning. I understand THERE WILL BE as be strictly enforced.</li> <li>No work whatsoever will commence until the building period of the permit fee will be quadrupled if work is started with the permittee further understands that only licensed confocupied until a Certificate of Occupancy is issued.</li> <li>See Section 105.5 of the Marco Island Administrative Conformation in the provide the Florida DBPR - Florida Lien Law states.</li> </ul>	A FINAL INSPECTION of the work permit has been issued. Thout an approved permit. Thout an approved permit. The permit has been issued. The per	ermitted herein.  tructure shall not	Compliance will to be used or expiration date.
Print Name of Licensed Contractor	Signature of Licensed Contractor		
State of County of			
The foregoing instrument was acknowledged before me this	sday of	, 20	,
by, who is □persona	ılly known to me, or □has produced		as identification,
by means of $\square$ physical presence or $\square$ online notarization.			
Signature, Notary Public – State of Florida	(Seal)		
Printed, Typed, or Stamped Name of Notary			