



RESIDENTIAL POOL/SPA SAFETY REQUIREMENTS

City of New Port Richey, Florida • Community Development Department
 5919 Main Street • New Port Richey, FL 34652 • 727-853-1047 • www.cityofnewportrichey.org

*Please complete ALL sections of this application.
 Incomplete applications will be returned to the property owner or contractor of record.*

Date Received

1. Job Address	City	County	State	Zip
2. Description of Proposed Work: _____ _____				
3. Primary Contact Info: {Name/Phone/Email}				

Applicant's Affidavit

I (We) acknowledge that a new in-ground or above ground swimming pool, spa, or hot tub will be constructed or installed and hereby affirm that once of the following methods shall be used to meet the requirements of section R4501.17, Florida Building Code 2020, 7th Edition.

Please Initial any and all of the methods proposed:

	1. Outdoor swimming pools shall be provided with a barrier complying with R4501.17.1.1 through R4501.17.1.14, per FBC 2020-R (<i>Submit plans specifying the type and location of barrier</i>)
	2. The pool/spa will be equipped with an approved safety pool cover that complies with ASTM F1346. (<i>Submit manufacturer's product compliance information</i>)
	3. A combination of non-dwelling walls, such as a screen enclosure and child fence, will protect the pool perimeter. R4501.17.1.11 (<i>Submit plans specifying the type and location of non-dwelling walls</i>)
	4. A wall of a dwelling serves as part of the barrier with direct access to the pool/spa will comply with section R4501.17.1.9. (<i>Submit plans and manufacture's product information specifying the type and location of all perimeter protection such as alarms, latching/locking devices, and swimming pool alarms</i>)

Fences and Screen Enclosures require a separate permit. Fences must comply with New Port Richey Code of Ordinance, and section 12.05.7 of the New Port Richey Land Development Code. Enclosures must comply with standards for minimum distance between buildings and be located no closer than five (5) feet from side and rear lot lines, except in waterfront yards where they shall not encroach more than ten (10) feet into the required setback. The encroachment shall be constructed with materials which allow for a clear, unobstructed view through said enclosure. (LDC 12.04.2.e) All screen enclosure doors shall swing out, be self-closing and self-latching. Latches must be a minimum of fifty-four (54) inches from exterior landing.

A safety barrier shall protect the pool perimeter after excavation and while area is under construction.

I the undersigned, agree that not having at least one of the above methods installed at the time of Final Inspection, or when the pool is completed for contract purposes, shall constitute a violation of chapter 515, 2020 F.S Residential Swimming Pool Safety Act, and shall be considered as committing a misdemeanor of the second degree, punishable as provided in section 775.082 or section 775.083.

 Signature of Property Owner/Agent

Sworn to and subscribed before me by _____

this _____ day of _____, 20_____.

Personally Known OR Produced Identification

Type of Identification Produced: _____

Notary Signature: _____

(NOTARY STAMP)

 Signature of Contractor

Sworn to and subscribed before me by _____

this _____ day of _____, 20_____.

Personally Known OR Produced Identification

Type of Identification Produced: _____

Notary Signature: _____

(NOTARY STAMP)

ANSI/APSP SAFETY COMPLIANCE WORKSHEET

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ANSI/APSP-7 SUCTION OUTLET SAFETY COMPLIANCE WORKSHEET:

1. Job Address	City	County	State	Zip
2. Primary Contact Info: {Name/Phone/Email}				

THIS DATA IS FOR THE: POOL AUXILIARY (SPA, FEATURE[S], ETC.)

SUCTION OUTLETS:

Are there drains: YES NO (IF NO, GO TO PIPE SIZE)

Single Unblockable (if single unblockable, indicate make, model & flow rating, then go to PIPE SIZE) Two or More

Drain Make & Model: _____

Listed Cover Flow Rate: _____ GPM

SYSTEM FLOW RATE:

System Flow Rate: _____ GPM

Method of Determining System Flow Rate:

- Maximum flow rate from the pump curve
- Total dynamic head calculation (attach calculations)
- Simplified total dynamic head (attach pipe length + filter + heater resistance)

PUMP SELECTION:

Pump Make & Model: _____
(attach pump performance curve, indicating flow as calculated above)

PIPE SIZE:

Branch Piping Size _____ inch @ 6 fps or lower

Trunk Line Size _____ inch @ 8 fps

PIPE SIZE SUMMARY – THIS JOB – PER THE APPLICATION STANDARD:

- Suction Side Filtration Branch Piping Size: _____ in.
- Suction Side Filtration Trunk Line Piping Size: _____ in.
- Return Side Filtration Branch Piping Size: _____ in.
- Return Side Filtration Trunk Line Piping Size: _____ in.
- Auxiliary Drain Branch Suction Line Piping Size: _____ in.
- Auxiliary Drain Trunk Suction Line Piping Size: _____ in.
- Auxiliary Return Line Piping Size: _____ in.

Vacuum line, if installed shall be sized to flow at 8 fps per ANSI-5 and shall be covered with a self-closing, self-latching cover per ANSI-7.

ANSI/APSP-15 ENERGY EFFICIENCY COMPLIANCE WORKSHEET:

FLOW CALCULATIONS PER STANDARD:

Pool Water Volume _____ / 360 = _____ GPM = calculated flow rate.

Note: For pools less than 13,000 gallons, the calculated flow rate or 36 GPM, whichever is greater, equals the filtration flow rate.

Is there an Auxiliary load on the filtration pump: YES NO

If YES, what is the calculated auxiliary flow rate: _____ GPM

MAXIMUM FLOW RATE: _____ GPM

(greater of the filtration flow rate or the auxiliary flow rate if the auxiliary flow is powered by the filtration pump)

Minimum suction side filtration pipe size @ 6 fps _____ in. Minimum suction side branch pipe size @ 6 fps _____ in.

Minimum return side filtration pipe size @ 8 fps _____ in. Minimum return side branch pipe size @ 8 fps _____ in.

Note: Pipe sizing requirements apply ONLY to filtration piping - do not apply to auxiliary load piping.

PIPE SIZE:	1.5"	2"	2.5"	3"	3.5"	4"	5"	6"
Nominal GPM @ 6 fps	38	63	90	138	185	238	374	540
Nominal GPM @ 8 fps	51	84	119	184	247	317	499	720

FILTER TYPE: _____ **SIZE:** _____

MINIMUM FILTER AREA: Per filter factor in the standard _____ x .375 = _____ GPM (max. flow through filter)

Factor = filter area x .375 (cartridge) or x 20 (D.E.) or x 15 (sand)

Backwash Valve? YES NO (If YES, must be 2 inch minimum)

PUMP SELECTION: As listed on pump

Curve 'A' Less than 17,000 gallons

Curve 'C' greater than 17,000 gallons

Make: _____ Model: _____

Flow Rate: _____ GPM @ _____ RPM. (flow rate must be <= maximum filtration flow rate)

PUMP CONTROLS:

Filtration pump with no auxiliary load - stand time clock. _____

Filtration pump with auxiliary load - control model for low-speed default within 24 hours. _____

HEATER MODEL: _____

Gas heater efficiency rating: _____ (no pilot light)

Heath pump efficiency C.O.P.: _____

EQUIPMENT PIPING:

Minimum 4 pipe diameters in front of pump and minimum 18" after filter for future solar. Directional return fitting will be installed.

Signature of Contractor

Sworn to and subscribed before me by _____

this _____ day of _____, 20_____.

Personally Known OR Produced Identification

Type of Identification Produced: _____

Notary Signature: _____

(NOTARY STAMP)