



Lafayette County Building Department
120 West Main Street, Mayo, Florida 32066
Phone: (386) 294-3611 Email: lafcobldg@gmail.com

Date Submitted: _____

Residential Pool Affidavit

DATE: _____ **PERMIT#** _____ **PROPERTY OWNER:** _____

ADDRESS: _____ **TOWN** _____ **ZIP** _____

PARCELI.D. _____ **POOL TYPE** _____ **ABOVE GROUND** _____ **IN GROUND**

CONTRACTOR _____ **LICENSE#** _____

WITH THE SIGNING BELOW, I THE CONTRACTOR DO CERTIFY THAT THE GUIDELINES SET FORTH IN FLORIDA STATUE 515.29 (Residential swimming pool barrier requirements) WILL BE COMPLETED AS A PART OF THIS PERMIT.

SIGNATURE
Qualifying Agent/Agent

DATE

APPROVED BY _____
BUILDING OFFICIAL

DATE

This affidavit becomes part of the permit application.