



CITY OF HOMESTEAD DEVELOPMENT SERVICES  
 790 N HOMESTEAD BLVD  
 HOMESTEAD, FL 33033  
 TEL. 305-224-4500  
 FAX. 305-224-4539

**SWIMMING POOL CONTRACTOR’S CERTIFICATION  
 (PROTECTIVE ENCLOSURE FORM)**

Date: \_\_\_\_\_

I certify that I am the legal owner of the property described as:

Lot(s) \_\_\_\_\_  
 Block: \_\_\_\_\_  
 Section: \_\_\_\_\_  
 Located at: \_\_\_\_\_

In accordance with Ordinance 73-10-46 Sec. 30-501 (a)-(g) of the “Zoning Code” of the City of Homestead, I certify that I understand the following:

**Sec. 30-501 Safety barriers required.**

- (a) No swimming pool final inspection and approval shall be given by the inspector department, unless there has been erected a safety barrier as hereinafter provided.
- (b) The safety barrier shall take the form of a screened-in patio, a wooden fence, a wire fence, a concrete block wall, or other materials so as to enable the owner to blend the same with the style of architecture planned or in existence on the property.
- (c) The minimum height of the safety barrier shall be not less than four (4) feet. The safety barrier shall be erected either around the swimming pool or around the premises on which the swimming pool is erected; in either event, it shall enclose the area entirely, prohibiting unrestrained admittance to the enclosed area.

I further understand that this certification does not eliminate the need for obtaining a permit and erecting an approved safety barrier per Florida Building Code Section 424.2.17 prior to the final inspection and use of pool and failure to erect an approved safety barrier may cause a daily of \$250.00 per day to be levied against the property.

\_\_\_\_\_  
 Signature of Owner:

\_\_\_\_\_  
 Signature of Contractor:

\_\_\_\_\_  
 Print Name:

\_\_\_\_\_  
 Print Name:

\_\_\_\_\_  
 Notary

\_\_\_\_\_  
 Notary

Sworn to and subscribed before me this \_\_\_\_ day of \_\_\_\_\_,  
 20\_\_.

Sworn to and subscribed before me this \_\_\_\_ day of \_\_\_\_\_,  
 20\_\_.