

Pool/Spa:

There are two types of pool permits:

- Above Ground Pool A tenant/renter can apply for this permit with a notarized letter from the property owner granting permission. The pool must be located a minimum of 18' from overhead power lines in all directions. There is a minimum setback of 20' from the rear property line if the deck is installed (deck requires a separate permit). There is a setback minimum of 10' from the rear property line with no deck and minimum of 10' from any electrical outlet.
- In-Ground Pool/Spa The property owner or contractor can apply for this permit type. The pool barrier (fence or screen cage) is paid for with the pool permit, however, the barrier is applied for as a separate pre-paid permit.

Please see below for required documentation.

Return to permitting map



Above Ground Pool Permit Guidelines - Residential

CPC, CGC, CRC, CBC, or Owner/Builder may apply for permit *Tenant can apply with a notarized letter from property owner*

- Miscellaneous application (If tenant applies add to "Contacts" screen as applicant)
- Two (2) copies of Site Plan: (Copies may be obtained at the City Clerk's office however, they may not be acceptable due to age, clarity, etc).
 - Show existing buildings or structures including sidewalks, patios, driveways, seawalls, etc. as applicable
 - Locate pool and deck (pool deck is optional and requires a separate permit)
 - Dimensions of pool and setbacks from all property lines.
 - o Identify power source and overhead/underground wire locations
- Two (2) copies of Pool Plan
 - Show pool, and or hot tub with deck and barrier (if deck is being installed it will be a separate permit)
 - Locate anchoring points
 - o Provide removable ladder details and approved ASTM cover as required
 - Identify barrier fence or screened enclosure (if using fence barrier that attaches to the top of the pool submit the spec sheets for the fence with this permit)
 - Above ground pools must be protected by a barrier that meets the pool safety barrier requirements as outlined in the Residential Swimming Pool Safety Act. For more information on the Safety Act see Florida Statute 515.21 - 515.37 https://codes.iccsafe.org/content/FRC2017/chapter-45-private-swimming-pools
- Two (2) copies of Manufacturer's Pool Assembly and Installation Manual
 - Pool Construction Miscellaneous Sections and Details
 - Provide anchoring details
 - Pump specifications
- · Burrowing Owl/Gopher Tortoise Affidavit
- Notarized owner letter if tenant is applicant.
- · Owner Builder Affidavit (if homeowner).
- NOC required if the value is \$2500 or greater.
- Sub-Contractor fax form for electrical (if owner/builder must be submitted before the permit is issued.



Above Ground Pool Permit Guidelines - Residential Cont.

Setbacks:

- Pools may not extend more than 10 feet beyond the side of the structure or into the required setbacks.
- Located a minimum of 18 feet from overhead power lines in all directions.
- Minimum 20 feet from the rear property line if a deck is installed. A separate permit is required for the deck.
- Minimum 10 feet from the rear property line if no deck is being installed.
- Minimum 10 feet from any electrical receptacle or outlet.

General Notes:

- Pools with filtration systems require an electrical inspection and shall comply with NEC, Article 680
- Pool and installation must comply with the latest adopted Florida Building Code and American National Standard Institute (ANSI) for above ground swimming pools.

Safety Act:

Please note:

A fence that attaches to the top of the above ground pool may be used but this barrier must meet the requirements of the Residential Swimming Pool Safety Act. The specifications sheet for this type of fence must be submitted with the above ground pool permit.

The Structure of an above ground swimming pool may be used as its barrier or the barrier for such a pool may be mounted on top of its structure; however, such a structure or separately mounted barrier must meet all barrier requirements including, but not limited to:

- 1) At least 48 inches tall
- 2) Self-closing, self-locking gate with release device located at least 54" above bottom of access gate.
- 3) No gaps, openings, indentations, protrusions, or structural components that could allow a young child to crawl under, squeeze through, or climb over the barrier.
- 4) Any opening in a such barrier shall not allow passage of a 4-inch-diameter (102 mm) sphere.

Where a wall of a dwelling serves as part of the barrier, all doors and windows providing direct access from the home to the pool shall be equipped with an exit alarm complying with UL 2017, General-Purpose Signaling Devices and Systems. These Devices have a minimum sound pressure rating of 85 dBA at 10 feet.

Above and beyond the requirements, the City of Cape Coral requires that the pool area or the entire back yard shall be enclosed with a minimum four-foot high fence. A fence for this purpose is to be constructed in accordance with the above safety barrier requirements. All sides of a fence must belong to, and be located on, the property. A neighbor's fence can not be used. Portable swimming pools capable of holding 24 inches in depth or more of water shall be anchored into the ground sufficiently to prohibit movement during a hurricane.

A ladder used as a means of access to an above ground pool must be capable of being secured, locked, or removed to prevent access or must be surrounded by a barrier that meets the pool safety barrier requirements.



Above Ground Pool Permit Guidelines - Residential Cont.

Description:

• Dimensions of A/G Pool. Call out yard or attached fence, ladder or cover

Route to: OFFICE USE ONLY

- Building
- Zoning
- Species (if Owl, Eagle or Gopher Tortoise restriction is on property)

Processing: OFFICE USE ONLY

Type: A/G Pool w/ ElecSubtype: Residential

Inspections:

Notice of Commencement (NOC)
Electrical Final (040)
Tie Down (068)
20

Fees:

Above Ground Pool w/ Elec \$65.25Surcharge NO



City of Cape Coral

Department of Community Development

	Gopher Tortoise	Amaavit			
Applicant					
Block	Lot	Unit	Strap #		
Site Address					
	days, I have inspecte y drive vehicles or plac		y described above AND all vacant properties near the jobsite where I or my material.		
			g Owl and/or Gopher Tortoise burrow(s) located on the property or adjacent located in abutting City rights-of-way.		
☐ No burroy	ws found on the Propo	erty, Adjacent	Properties, or Right-of-Way		
On Proper	rty: Number of burro	ws One (1)) Two (2) Three (3) Four (4) (Other)		
Adjacent 1	Properties or Right-o	f-Way: Numbe	er of burrows		
2. If burrows a	re found, please selec	t ONE of the ty	wo options below.		
State and/or Fede	eral permits are requi	red prior to th	CESSARY. I cannot protect the burrow(s) per instruction. I understand that the commencement of development activity. BURROWING OWL GOPHER TORTOISE		
NO STATE A maintained during ** By accepting City b	ND/OR FEDERAL PI g all phases of developr *Please indicate species	ERMITS ARE Inent. , if known. Be all responsible	NECESSARY. I agree that the required protection zones will be installed and BURROWING OWL GOPHER TORTOISE illity of ensuring the protection of Burrowing Owls and/or Gopher Tortoises and their		
(February 15 th -July diameter) is required No activity, mater Burrowing Owls or	10 th), or a minimum of d from the burrow entra- rials, fill, equipment, Gopher Tortoises or the	10 feet (20-foot nce year-round (or parking is a sir burrows is a S	s of 33 feet (66-foot diameter) from the burrow entrance during the nesting season t diameter) outside of nesting season; Gopher Tortoises : a radius of 25 feet (50-foot (Ordinance 20-19). All burrows must be staked and roped off using these dimensions. allowed within these buffers. I understand that molesting, harassing, or harming State/Federal crime. The City shall notify the law enforcement division of the Florida dation is observed and the permit holder will be responsible for any illegal activity.		
Tortoises and their bliable for an applicate failure to fulfill oblialso understand that activities. Copies of	burrows, and I accept fuent(s) violation of State egations imposed by a state the City requires that f State/Federal permits a	Il responsibility or Federal law. ate and/or federa all applicable some required prior	that prohibit the endangerment and/or harassment of Burrowing Owls or Gopher for the actions of my employees and subcontractors. I understand that the City is not I understand that I am liable for failure to obtain any state and/or federal permits, al agency, and will be liable for any violations to state and/or federal law. Further, I state and federal permits be obtained prior to the commencement of development or to any City inspection and shall be posted onsite. I am fully aware that failure to outfers, will result in a Stop Work Order being issued on my site.		
			egoing document and that all information contained herein is true and correct to the unishable by a fine and/or imprisonment.		
BY:	Title of Applicant				
Print Name & T	Title of Applicant		Signature of Applicant (Signature Must be Notarized)		
STATE OF	, COUNTY	OF			
Subscribed and swo	orn to (or affirmed) bef	fore me this	day of, 20, by		
		o is personally	known or produced		
Printed name of per	rson signing	•	known or produced as identification		
			Commission Number:		
		•	of Notary Public:		
		Printed nan	me of Notary Public:		



PERMIT #	ŧ			
DATE			CLERK	
Payment method:				

Miscellaneous Application

		CONTRACTOR INI	ORMATION	
Contractor Business Nan	ne:		License Holde	er's Name:
Mailing Address:			City License #	<i>‡</i> :
City:	State:	Zip:	State License	#:
Phone #:	Fax #:		Contact Person	on:
To Construct:			Email:	
		PROPERTY INFO	RMATION	
Property Owner:				
Site Address:			Strap #:	
City:	State:	Zip:	Block/Lot:	
Phone #:	Fax:		Unit:	
Existing use:				
Proposed Use:				
Setback Distances:	North	South	East	West
Zoned:	Fou	ndation:	Corner Lot:	Waterfront Property:
(Commercial Only)				Woter Heads:
Construction Type:	<u> </u>	Lawn Irrigation Syster	m: 	Water Usage:
Heads in right of way:	Clean-u	p Contractor Name:		
If "YES" Check One or PIPING TO RUN PARAL			I PERPENDICU	JLAR TO ROAD □
		Valuatio	on \$	

Application is hereby made to obtain a permit to do the work and installation as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I further certify that I have entered into a contract with the owner/agent of the subject property to make the specified improvements to, or perform the contracting at, the real property specified in this application. I have also made the owner/agent aware of the provisions of the Homebuyers Protection Act. I certify that all the foregoing information is accurate, the city has been advised of all easements on the property and all work will be done in compliance with all applicable laws regulating construction and zoning. I acknowledge and accept responsibility for compliance with the current Florida Building Code, regulations, and ordinances, as well as the payment of all legally constituted fees regarding this development application, including but not limited to ALL REVIEW FEES, PERMIT FEES, AND IMPACT FEES. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS AND AIR CONDITIONERS, etc. **NOTICE**: In addition to the requirements of this

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permit, there may be additional restrictions to this property that may be found in the public records of this county or that may be required from other governmental entities such as water management district, state agencies or federal agencies.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

OWNER'S ELECTRONIC SUBMISSION STATEMENT: Under penalty of perjury, I declare that all the information contained in this building permit application is true and correct.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

I hereby acknowledge that I have read and understand the above affidavit on the

APPLICANT (PLEASE TYPE OR PRINT)	SIGNATURE OF AP	PLICANT
(SIGNATURE I	MUST BE NOTARIZED)
STATE, COUNTY OF		
Sworn to (or affirmed) and subscribed before me_who is personally	e thisday of known or produced	
as identification.		
Signature of No	tary Public:	
Printed name of	f NotaryPublic:	
	FFICE USE ONLY	
Building Approval by:	Date:	
oning Approval by:	Date:	
Species Approved by:	Date:	
ire Approved by:	Date:	
urface Water Approved by:	Date:	
eleased by (Permit Tracker):	Date:	

day of

N	otice of Commencement				
Perm	nit# Tax Folio#		State of	County of	
	UNDERSIGNED hereby gives notice that improter 713, Florida Statutes, the following informa				ordance with
1.	Description of property: (legal description of the	ne property, and stree	t address if a	available)	
2.	General description of improvement:				
3.	Owner's information or Lessee information if to Name: Address:	Phone	•	vement: Fax	
	Interest in property:				
	Name and address of fee simple titleholder (if	different from Owner	listed above)	
4.	Contractor's information: Name:	Phone _		Fax	
5.	Address: Surety information:		Email		
	Name: Address:		Amount of B	Fax Bond	
6.	Lender information: Name: Address:			Fax	
7.	Persons within the State of Florida designated provided by Section 713.13(1)(a)7., Florida St		m notices or	other documents may	be served as
	Name:	Phone _		Fax	
8.	In addition to himself or herself, Owner designas provided by Section 713.13(1)(b), Florida S		erson(s) to re	eceive a copy of the Li	enor's Notice
	Name:	Phone _		Fax	
9.	Address: Expiration date of Notice of Commencement different date is specified). Date:	(the expiration date	is one year	from the date of record	ding unless a
COM FLOF NOT INSP	RNING TO OWNER: ANY PAYMENTS MADE IMENCEMENT ARE CONSIDERED IMPROPERIDA STATUTES, AND CAN RESULT IN YOU ICE OF COMMENCEMENT MUST BE RECPECTION. IF YOU INTEND TO OBTAIN FIND ORE COMMENCING WORK OR RECORDING	ER PAYMENTS UND R PAYING TWICE FO ORDED AND POST NANCING, CONSUL	ER CHAPTI OR IMPROV ED ON THE T WITH YO	ER 713, PART I, SECT EMENTS TO YOUR PF E JOB SITE BEFORE UR LENDER OR AN	TION <u>713.13,</u> ROPERTY. A THE FIRST
Owne	er's Name	Signature			
STAT	'E OF, COUNTY OF				
	n to (or affirmed) and subscribed before me this spersonally known or produced	s day of,	-	cation	
**************************************	· · · · · · · · · · · · · · · · · · ·	Commis			
	Exp. Date.	Commis	SION NUMBER	•	

The City of Cape Coral and/or its agents, employees, officers, or other persons under its advisement and/or control neither makes nor shall be deemed to have made any warranty or representation, express or implied, concerning the accuracy of the information contained in the Notice of Commencement or for any other matter relating thereto. Further, the City of Cape Coral and/or its agents, employees, officers, or other persons under its advisement and/or control shall not be liable to any individual or entity with respect to the information contained therein or for any other matter relating thereto.

Signature of Notary Public: Printed name of Notary Public:



DEPARTMENT OF DEVELOPMENT SERVICES CUSTOMER SERVICE-PERMITTING DIVISION

P.O. Box 150027 Cape Coral, FL 33915-0027 Tel. (239) 574-0546

OWNER-BUILDER DISCLOSURE STATEMENT

Pursuant to §489.103, Florida Statutes

- 1. I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.
- 2. I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.
- 3. I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on permits and contracts.
- 4. I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.
- 5. I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.
- 6. I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.
- 7. I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.
- 8. I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.
- 9. I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.
- 10. I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 850-487-1395 or www.myfloridalicense.com for more information about licensed contractors.
- 11. I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address: _____
- 12. I agree to notify the <u>City of Cape Coral</u> immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.



DEPARTMENT OF DEVELOPMENT SERVICES CUSTOMER SERVICE-PERMITTING DIVISION

P.O. Box 150027 Cape Coral, FL 33915-0027 Tel. (239) 574-0546

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain because of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

OWNER'S ELECTRONIC SUBMISSION STATEMENT: Under penalty of perjury, I declare that all the information contained in this building permit application and the representations made in the required disclosure statement are true and correct.

Under penalties of perjury, I declare that I have read the foregoing Owner-Builder Disclosure Statement and that the facts stated in it are true.

NOTARY STAMP HERE Signature of Notary Public:	Owner-Builder Printed Nam	e: Date
(SIGNATURE MUST BE NOTARIZED) STATE, COUNTY OF Sworn to (or affirmed) and subscribed before me, by means of □ physical presence or □ online notarization, on this day of 20 by who is personally known or produced as identification. Exp Date: Commission Number: NOTARY STAMP HERE Signature of Notary Public:	Owner-Builder Signature: _	
Sworn to (or affirmed) and subscribed before me, by means of physical presence or online notarization, on this day of 20 by as identification. Exp Date: Commission Number: Signature of Notary Public:		(SIGNATURE MUST BE NOTARIZED)
notarization, on this day of 20 by who is personally known or produced as identification. Exp Date: Commission Number: NOTARY STAMP HERE Signature of Notary Public:	STATE, COUN	TY OF
who is personally known or producedas identification. Exp Date: Commission Number: NOTARY STAMP HERE Signature of Notary Public:	Sworn to (or affirmed) and s	subscribed before me, by means of \square physical presence or \square online
Exp Date: Commission Number: NOTARY STAMP HERE Signature of Notary Public:	notarization, on this	day of 20 by,
NOTARY STAMP HERE Signature of Notary Public:	who is personally known or	producedas identification.
		Exp Date: Commission Number: Signature of Notary Public: Printed Name of Notary Public: