

**LAFAYETTE COUNTY BUILDING
DEPARTMENT**

120 West Main Street
PO Box 28
Mayo, Florida 32066
Phone (386) 294-4403
Fax (386) 294-4225
ref@windstream.net

RESIDENTIAL POOL AFFIDAVIT

DATE _____

PERMIT# _____

PROPERTY OWNER: _____

ADDRESS: _____ TOWN _____ ZIP _____

PARCEL I.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 _____ Date _____
Qualifying agent/agent

Approved by _____ Date _____
Building Official

This affidavit becomes part of the permit application.