



## City of Dunnellon - Community Development

20750 River Dr. | Dunnellon, Florida 34431

Phone: (352) 465-8500 x1010 | Email: [planning@dunnellon.org](mailto:planning@dunnellon.org)

Website: [www.dunnellon.org](http://www.dunnellon.org)

For Office Use Only

Permit Number: \_\_\_\_\_

## POOL PERMIT APPLICATION CHECKLIST 2023 Florida Building Code, 8<sup>th</sup> Edition

### REQUIRED ATTACHMENTS FOR ALL PROJECTS:

1.  **COMPLETED PERMIT APPLICATION**
2.  **NOTICE OF COMMENCEMENT (NOC)** for jobs over \$5,000 (\$15,000 for HVAC) - The city requires a copy of the recorded NOC before scheduling first inspection. To be recorded at Marion County Clerk of Court Annex Building at 19 N Pine Ave, Room 124. Ocala FL 34478.
3.  **PROOF OF PROPERTY OWNERSHIP**
4.  **COPY OF CONTRACTORS' CURRENT INSURANCE CERTIFICATES** with City of Dunnellon, 20750 River Dr, Dunnellon, FL 34431 as certificate holder.

### PLEASE ATTACH THE CORRESPONDING DOCUMENTS BASED ON PROJECT:

#### POOL:

1.  **BOUNDARY SURVEY** - Two (2) signed and sealed surveys of less than one year old which include flood zone and panel number information.
2.  **ELECTRICAL DIAGRAM**
3.  **BUILDING PLANS** – Three (3) sets of engineered/sealed building plans. Plans shall show the electrical and plumbing paths.
4.  **ENVIRONMENTAL RESOURCE PERMIT** or **EXEMPTION LETTER FROM FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION** – see below for criteria.
5.  **EROSION CONTROL MEASURES** – may be displayed on site plan or separate sheet.
6.  **GRADING PLANS** - for flood zones A or AE; in lieu of grading plans, may submit an engineering analysis, prepared in accordance with standard engineering practice by a registered design professional, that demonstrates the proposed work will not result in any increase in the level of the base flood, grading, excavation and earthwork construction, including fills and embankments (FBC, Appendix J)
7.  **IMPERVIOUS SURFACE ASSESSMENT**
8.  **OWNER-BUILDER DISCLOSURE STATEMENT** - ONLY if owner acts as contractor - An affidavit signed by the owner/ builder certifying that the responsibilities and requirements of the construction process are understood by the owner.
9.  **POOL BARRIER AFFIDAVIT**
10.  **SITE PLAN** – Two (2) copies.
11.  **TOTAL DYNAMIC HEAD CALCULATION**
12.  **TREE SITE PLAN** – To identify and number each tree to be removed/preserved.



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2023 FLORIDA BUILDING CODE 8TH ED.D.

## PERMIT # \_\_\_\_\_

Date _____	<b>Residential</b>	<b>Commercial</b>	<b>Owner-Builder</b>
------------	--------------------	-------------------	----------------------

Parcel ID \_\_\_\_\_ Project # / Related Permit / Code Case \_\_\_\_\_

**Project Address** \_\_\_\_\_ **Flood Zone:** \_\_\_\_\_

Lot	Blk	Unit	Sec	Twp	Rge	Subdivision / MH Park
-----	-----	------	-----	-----	-----	-----------------------

Property Owner \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-mail: \_\_\_\_\_

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessory Structure      | <input type="checkbox"/> Electric                | <input type="checkbox"/> Residential (Add. / Alt.) |
| <input type="checkbox"/> Aluminum                 | <input type="checkbox"/> Exterior Door / Window  | <input type="checkbox"/> Re- Roof                  |
| <input type="checkbox"/> Above Ground Pool        | <input type="checkbox"/> Fence / Wall            | <input type="checkbox"/> Solar                     |
| <input type="checkbox"/> Commercial (New)         | <input type="checkbox"/> Fire                    | <input type="checkbox"/> Swimming Pool / Spa       |
| <input type="checkbox"/> Commercial (Add. / Alt.) | <input type="checkbox"/> Mechanical / Gas / HVAC | <input type="checkbox"/> Tent / Temp Use           |
| <input type="checkbox"/> Concrete                 | <input type="checkbox"/> Mobile Home             | <input type="checkbox"/> Waterfront Structure      |
| <input type="checkbox"/> Demolition               | <input type="checkbox"/> Plumbing                | <input type="checkbox"/> Window /Exterior Door     |
| <input type="checkbox"/> DCA - Modular Building   | <input type="checkbox"/> Residential (New)       | <input type="checkbox"/> Other: _____              |

**Description of Work** \_\_\_\_\_

**Job Cost \$** \_\_\_\_\_

Was This Building Damaged by Fire, Flood, or Other? Yes No Damage Assessment Report # \_\_\_\_\_

**BUILDING:** New sqft \_\_\_\_\_ Added sqft \_\_\_\_\_ Alteration/Renovation sqft \_\_\_\_\_ Temp Power Pole? Yes No

Stories \_\_\_\_\_ Bedrooms \_\_\_\_\_ Bathrooms \_\_\_\_\_ Under A/C \_\_\_\_\_ sqft No A/C \_\_\_\_\_ sqft

Water: Existing Well New Well Replacement Well Central Water Irrigation: Yes No Existing

**CONTRACTOR'S Business Name** \_\_\_\_\_

Contractor's Name \_\_\_\_\_ State Lic \_\_\_\_\_ County Cert \_\_\_\_\_

Address \_\_\_\_\_

Contact Phone \_\_\_\_\_ E-mail \_\_\_\_\_

SUBCONTRACTORS: Qualifier Name	County Cert #	State License #	E-mail
MECHANICAL	_____	_____	_____
ELECTRIC	_____	_____	_____
PLUMBING	_____	_____	_____
GAS	_____	_____	_____
ROOFING	_____	_____	_____
IRRIGATION	_____	_____	_____
OTHER	_____	_____	_____

Fee Simple Titleholder's Name (if other than owner): \_\_\_\_\_

Mortgage Lender Name: \_\_\_\_\_ Mortgage Lender Address: \_\_\_\_\_

# PLEASE SIGN BELOW

Application is hereby made to obtain a permit to do the work and installations as indicated. All work will be performed in accordance with the standards of all State and City laws and ordinances regulating construction, whether specified herein or not. I further certify that I have read and examined this application and know the same to be correct, that all work shall be in compliance with all applicable laws regulating construction and zoning, and the building permit may be revoked in the case of a false statement or misrepresentation in the application and/or plans on which the permit was approved.

It shall also be agreed that Impact Fees shall be determined with the application for a building permit and shall be due before Final Inspection. Permit Fees shall be payable at issuance of a building permit. The owner and/or contractor have the sole responsibility of determining compliance with setbacks and non-encroachment of easements. Permits expire 6 months after issuance. You are responsible for the completion of the permit, inspections, and all re-inspection fees

**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 COMMENCEMENT 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.**

Owner's Signature \_\_\_\_\_

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

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

**STATE OF FLORIDA, COUNTY OF MARION**

Sworn to (or affirmed) and subscribed before me by means of \_\_\_\_\_ physical presence or \_\_\_\_\_ online notarization,

this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

By \_\_\_\_\_

Personally Known or  Produced Identification

ID: \_\_\_\_\_

Notary Signature: \_\_\_\_\_

Notary Stamp:

Contractor's Signature \_\_\_\_\_

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

Authorized Agent's Signature \_\_\_\_\_

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

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

**STATE OF FLORIDA, COUNTY OF MARION**

Sworn to (or affirmed) and subscribed before me by means of \_\_\_\_\_ physical presence or \_\_\_\_\_ online notarization, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

By \_\_\_\_\_

Personally Known or  Produced Identification

ID: \_\_\_\_\_

Notary Signature: \_\_\_\_\_

Notary Stamp:

**Pursuant to Florida Statute 713.135(7) all signatures must be notarized**

PERMIT APPROVED BY BUILDING OFFICIAL:

DATE:



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File this form at Marion County Clerk of Courts at 19 NW Pine Ave, Room 124, Ocala FL. Submit a copy of the recorded NOC to City of Dunnellon prior to scheduling the first inspection. F.S. 713.135 requires this form for jobs with direct contract value greater than \$7,500 OR greater than \$14,999 for repair/replacement of existing heating/AC systems.

## Notice of Commencement

Permit no.: \_\_\_\_\_ Tax folio/Parcel ID: \_\_\_\_\_

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Florida Statutes (FS) chapter 713, the following information is provided in this notice of commencement.

1. Description of property should include the full legal description of property and street address, if available:  
\_\_\_\_\_
2. General description of improvement: \_\_\_\_\_
3. Owner or lessee information, if lessee is contracted for the improvement:
  - a. Name and address: \_\_\_\_\_
  - b. Interest in property: \_\_\_\_\_
  - c. Name and address of fee simple titleholder (if different from owner listed above): \_\_\_\_\_
4. Contractor / Qualifier: \_\_\_\_\_
  - a. Name and address: \_\_\_\_\_
  - b. Contractor phone number: \_\_\_\_\_
5. Surety name, address, and phone number (if applicable, attach copy payment bond): \_\_\_\_\_  
 \_\_\_\_\_ 5c. Amount of bond: \$ \_\_\_\_\_
6. Lender name, address and phone number: \_\_\_\_\_
7. Persons within the state of Florida as designated by owner upon whom notices or other documents may be served as provided by FS section 713.13(1)(a),7 (provide name, mailing address and phone number of designated person): \_\_\_\_\_  
 \_\_\_\_\_
8. In addition to himself or herself, owner designates \_\_\_\_\_ of \_\_\_\_\_ to receive a copy of the Lienor's Notice as provided in Section FS section 713.13(1)(b). Phone number of person/entity designated by owner:  
 \_\_\_\_\_
9. Notice of commencement expiration date (the expiration date will be 1 year from the date of recording unless a different date is specified): \_\_\_\_\_

**WARNING TO OWNER:** ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT 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.

\_\_\_\_\_  
 Signature of Owner (or authorized agent) Date

\_\_\_\_\_  
 Signatory's title/office

STATE OF FLORIDA, County of \_\_\_\_\_ The foregoing instrument was acknowledged before me by means of

physical presence or  online notarization, this \_\_\_\_\_ day of, \_\_\_\_\_ 20\_\_\_\_\_,

By \_\_\_\_\_, as \_\_\_\_\_ for  
Authority / representative type; officer, trustee or attorney-in-fact

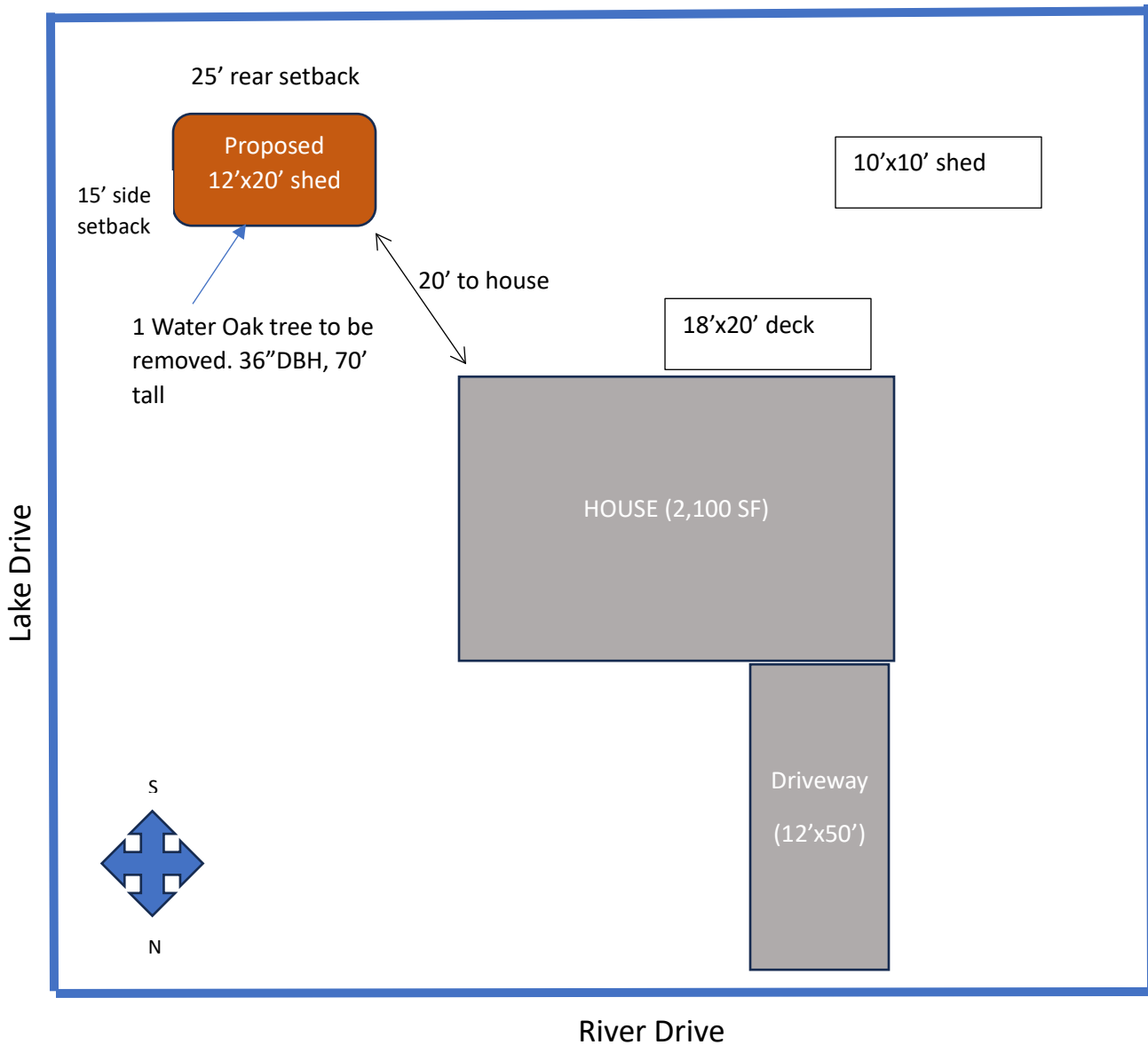
\_\_\_\_\_  
 Name of party/corporation/company for whom instrument was executed

\_\_\_\_\_  
 Signature of Notary Public

Personally, known or  Produced identification \_\_\_\_\_

## RESIDENTIAL SAMPLE SITE PLAN

Do not use this example as your site plan. Use page 2 to create your site plan.



**The following must be included on the site plan. Measurements should be identified in feet.**

1. Identify location of proposed structure(s) and all existing structures on the property (include underground items).
2. Identify all setbacks from proposed structure to the property line using feet.
3. Identify the distance between the proposed structure to existing surrounding structures.
4. Show street names.
5. Show trees to be removed as a result of this request. Include species, circumference of tree at chest height and approximate height. A separate tree removal application needs to be submitted.
6. Show dimensions of all impervious surfaces on property. Include pavers, decks, buildings, concrete, pools, etc. The city will use this information to conduct an impervious surface assessment.

## RESIDENTIAL SITE PLAN

### Applicant site plan

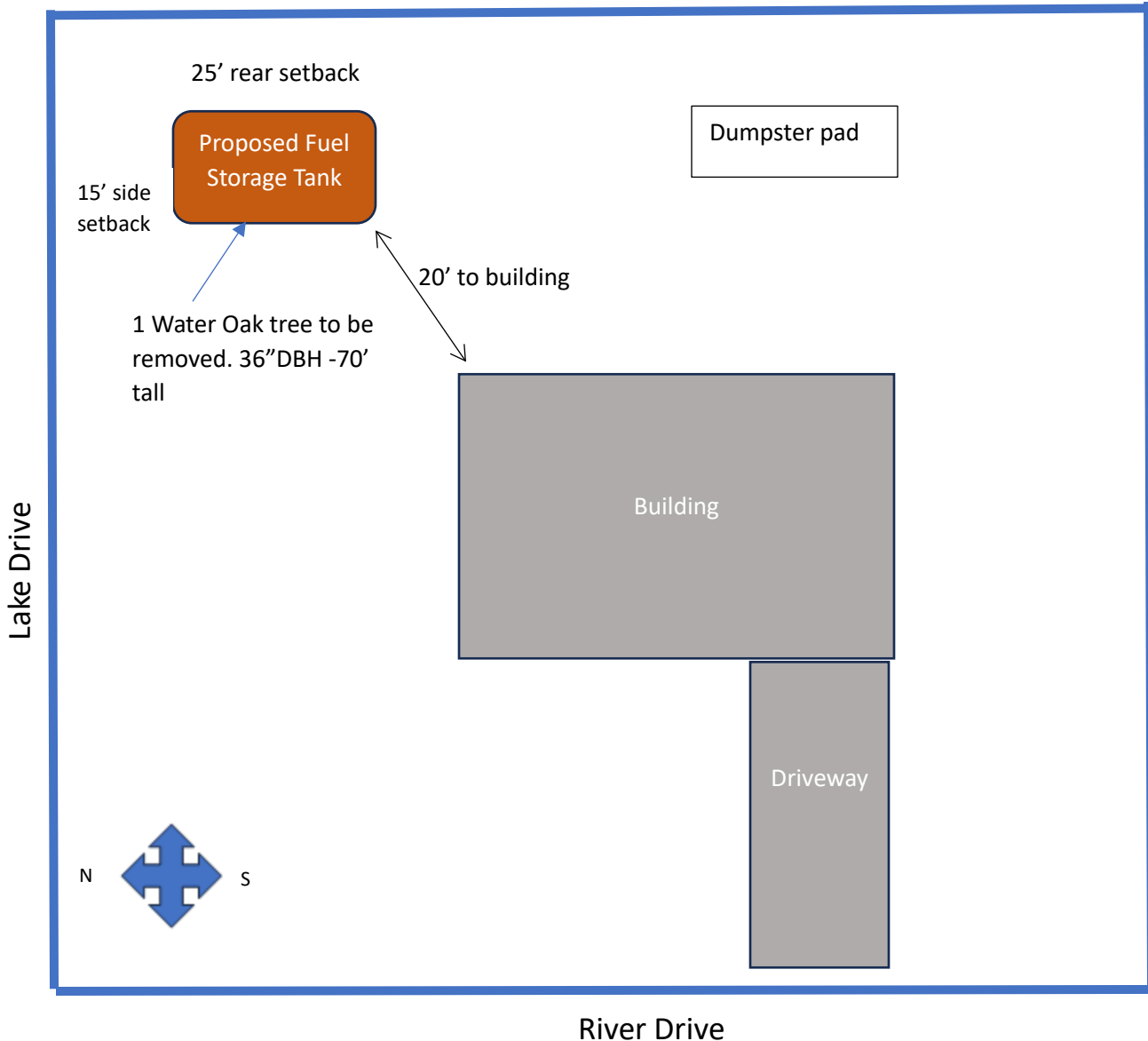
**The following must be included on the site plan. Measurements should be identified in feet.**

1. Identify location of proposed structure(s) and all existing structures on the property (include underground items).
2. Identify all setbacks from proposed structure to the property line using feet.
3. Identify the distance between the proposed structure to existing surrounding structures.
4. Show street names.
5. Show trees to be removed. A separate tree removal application will need to be submitted.
6. Show dimensions of all impervious surfaces on property. Include pavers, decks, buildings, concrete, pools, etc. The city will use this information to conduct an impervious surface assessment.



## COMMERCIAL SAMPLE SITE PLAN

Do not use this example as your site plan. Use page 2 to create your site plan.



**The following must be included on the site plan. Measurements should be identified in feet.**

1. Indicate North, South, East and West.
2. Identify location of proposed structure(s) and all existing structures on the property (include underground items).
3. Identify all setbacks from proposed structure to the property line using feet.
4. Identify the distance between the proposed structure to existing surrounding structures.
5. Show street names.
6. Show parking spaces
7. Show trees to be removed as a result of this request. Include species, circumference of tree at chest height and approximate height. A separate tree removal application needs to be submitted.
8. Show dimensions of all impervious surfaces on property. Include pavers, decks, buildings, concrete, pools, etc. The city will use this information to conduct an impervious surface assessment.

## COMMERCIAL SITE PLAN

### Applicant site plan

**The following must be included on the site plan. Measurements should be identified in feet.**

1. Indicate North, South, East and West.
2. Identify location of proposed structure(s) and all existing structures on the property (include underground items).
3. Identify all setbacks from proposed structure to the property line using feet.
4. Identify the distance between the proposed structure to existing surrounding structures.
5. Show street names.
6. Show parking spaces and number the spaces. Identify ADA spaces.
7. Show trees to be removed. A separate tree removal application will need to be submitted.
8. Show dimensions of all impervious surfaces on property. Include pavers, decks, buildings, concrete, pools, etc. The city will use



## Impervious Surface Calculation

PERMIT #		PARCEL #	
OWNER NAME		ZONING	
ADDRESS		ACREAGE	
CALCULATED LOT SQ. FT. (multiplied acreage by 43,560)			-

NOTES:

HOUSE SQUARE FOOTAGE UNDER ROOF		
DRIVEWAY(S) (PAVED OR UNPAVED)		
WALKWAY(S) (CONCRETE, PAVERS, OR GRAVEL AREAS)		
PATIOS (INCLUDING WOOD SLATTED DECKS)		
OUTBUILDING 1 (SQUARE FOOTAGE OF ROOF AND SLABS)		
OUTBUILDING 2 (SQUARE FOOTAGE OF ROOF AND SLABS)		
OTHER IMPERVIOUS AREA		
OTHER IMPERVIOUS AREA		
OTHER IMPERVIOUS AREA		
OTHER IMPERVIOUS AREA		

**TOTAL SQUARE FOOTAGE OF EXISTING IMPERVIOUS SURFACES** -

TOTAL IMPERVIOUS % ON PARCEL (DIVIDE SF OF IMPERVIOUS SURACES BY SF OF PARCEL) #DIV/0!

PARCEL'S ALLOWABLE IMPERVIOUS SURACE PERCENTAGE 60%

*B-2 ZONING ALLOWS 65% IMPERVIOUS SURFACES PER SECTION 8.11 OF DUNNELLOM CITY CODE  
ALL OTHER ZONING ALLOWS 60% IMPERVIOUS SURFACES PER SECTION 8.10.2 OF DUNNELLOM CITY CODE*

# Impervious Surface Calculation

## Sec. 99-12. - Neighborhood flooding.



- (a) [Chapter 98](#) of this Code requires stormwater management systems for new development. Development that is not subject to those requirements, such as single-family and two-family dwellings on existing lots, can also flood surrounding lots and streets, especially if the lot is raised higher than adjoining properties or if rainfall is concentrated by gutters and downspouts and discharged without an opportunity for infiltration.
- (b) To minimize neighborhood flooding from normal daily rainfall, a fill permit must be obtained from the city when fill material is to be placed on lots that would raise the elevation more than an average of six inches above adjoining lots. The fill permit application must show how normal rainfall will have an opportunity to infiltrate into the ground within the lot using one or more of the following methods or equivalent solution:
  - (1) Gutters and downspouts that collect rainwater must discharge into exfiltration trenches (French drains), or into a subsurface drainfield that meets the construction standards of F.A.C. 64E-6.014(5) (the percolation, depth, location, and setback standards for drainfields need not be met), or onto substantially flat and porous surfaces such as:
    - a. Sodded lawns.
    - b. Clean (washed) gravel or sand over a well-drained base.
    - c. Porous (pervious) paving.
  - (2) Roof areas not served by gutters and downspouts must not drain to impervious surfaces, and must not drain to pervious surfaces that are sloped in excess of five percent. Surfaces not meeting these requirements must be designed to detain or deflect rainfall, for instance through the use of earthen ridges, curbs, or retaining walls that prevent average rainfall from running onto adjoining lots or streets.
- (c) Additions to, renovations of, and replacements for single-family and two-family dwellings that include the installation of gutters and downspouts must also obtain a fill permit showing discharge from the downspouts being directed to the same standards as for filled lots.

( [Ord. No. 2011-02, § 3, 4-11-2011](#) )



**City of Dunnellon  
Community Development**

20750 River Dr. Dunnellon, FL  
34431 P: 352-465-8500 x1010

Email: [Planning@dunnellon.org](mailto:Planning@dunnellon.org)

Received by: \_\_\_\_\_

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

**RESIDENTIAL SWIMMING POOL, SPA AND HOT TUB SAFETY ACT  
Reference: Florida Building Code - Residential chapter 45**

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

Building Permit # \_\_\_\_\_

Property Owner: \_\_\_\_\_  
Last First Telephone Number

Site Address: \_\_\_\_\_  
Street City State Zip

We acknowledge that a new swimming pool, spa or hot tub will be constructed or installed at the above referenced property and hereby affirm that one of the following methods will be used to meet the minimum requirements of Chapter 515, Florida Statutes.

**Section A: Applies to all pools. (Choose one of the following)**

The pool must be isolated from access from all areas by an enclosure (fence) that meets the pool barrier requirements of s. 515.29; (If this option chosen, see section B below)

The pool must be equipped with an approved safety pool cover; (Section B not required)

**Section B: Applies if the home is being used as part of the pool barrier. (Choose one)**

All doors and windows providing direct access from the home to the pool must be equipped with an exit alarm that has a minimum sound pressure rating of 85 dB A at 10 feet;

All doors providing direct access from the home to the pool must be equipped with a self-closing, self-latching device with a release mechanism placed no lower than 54 inches above the floor; or

I understand that not having one of the above installed at the time of final inspection, or when the pool is completed for contract purposes, will constitute a violation of Chapter 515, F.S. and will be considered as committing a misdemeanor of the second degree, punishable by fines up to \$500 and/or up to 60 days in jail as established in Chapter 775, F.S.

Contractor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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### **2020 Florida Statute – Chapter 489.103 (7c) and 489.503 OWNER- BUILDER DISCLOSURE STATEMENT**

The Owner builder must be present at the time of application. To qualify under this subsection, the Owner builder must personally appear to sign the building permit application, the owner builder disclosure statement and associated documents to satisfy local permitting agency requirements, if any, proving that the owner has a complete understanding of the owner's obligations under the law as specified in this disclosure statement.

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, unless I am completing the requirements of a building permit where the contractor listed on the permit substantially completed the project. 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](tel:850-487-1395) or <http://www.myfloridalicense.com/DBPR/> 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 (parcel # if address not yet assigned): \_\_\_\_\_

12. I agree to notify the City of Dunnellon Community Development Office immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.

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 as a result 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 the type of verification acceptable to the local permitting agency is required when the permit is issued.*

Owner's Signature: \_\_\_\_\_

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

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of

**physical presence** or  **online notarization**, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

By \_\_\_\_\_

Personally known or  Produced Identification \_\_\_\_\_

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Print, Type, or Stamp Commissioned Name of Notary Public

ANSI/ASP-7 2006 Specifies three methods for determining the maximum system flow rate. The following simplified TDH calculation is one of the methods specified.

### Simplified Total Dynamic Head (TDH) Calculation Worksheet

Determine Maximum System Flow Rate: Minimum Flow Rate Required: 35 gpm per skimmer

1. Calculate Pool Volume:  $\frac{\text{_____}}{\text{(Surface Area)}} \times \frac{\text{_____}}{\text{(Average Depth)}} \times 7.48 \text{ (gal./cubic foot)} = \frac{\text{_____}}{\text{(Volume in gallons)}}$
2. Determine preferred Turnover Time in hours:  $\frac{\text{_____}}{\text{(Hours)}} \times 60 \text{ (minutes / hour)} = \frac{\text{_____}}{\text{(Turnover in Minutes)}}$
3. Determine Max Flow Rate:  $\frac{\text{_____}}{\text{(Volume in gallons) (Turnover Minutes)}} = \frac{\text{_____}}{\text{(Pool Flow Rate)}} + \frac{\text{_____}}{\text{(Feature Flow Rate)}} = \frac{\text{_____}}{\text{(System Flow Rate)}}$
4. Spa Jets:  $\frac{\text{_____}}{\text{(Number of jets)}} \times \frac{\text{_____}}{\text{(Jet Flow)}} \text{ gpm per jet} = \frac{\text{_____}}{\text{(Total Jet flow Rate)}} \text{ flow rate.}$

(For single pump pool/spa combo, use the higher of No. 3 or No. 4 in the following calculations for the pool & spa)

### Determine Pipe Sizes:

- Branch Piping to be \_\_\_\_\_ inch to keep velocity @ 6 fps max. at \_\_\_\_\_ gpm Maximum System Flow Rate.  
 Trunk Piping to be \_\_\_\_\_ inch to keep velocity @ 8 fps max. at \_\_\_\_\_ gpm Maximum System Flow Rate.  
 Return Piping to be \_\_\_\_\_ inch to keep velocity @ 10 fps max. at \_\_\_\_\_ gpm Maximum System Flow Rate.

### Determine Simplified TDH:

1. Distance from pool to pump in feet: \_\_\_\_\_
2. Friction loss (in suction pipe) in \_\_\_\_\_ inch pipe per 1 ft. @ \_\_\_\_\_ gpm = \_\_\_\_\_ (from pipe flow/friction loss chart)
3. Friction loss (in return pipe) in \_\_\_\_\_ inch pipe per 1 ft. @ \_\_\_\_\_ gpm = \_\_\_\_\_ (from pipe flow/friction loss chart)
4. Length of suction pipe \_\_\_\_\_ x ft. of head/1 ft of pipe \_\_\_\_\_ = TDH suction pipe \_\_\_\_\_
5. Length of return pipe \_\_\_\_\_ x ft. of head/1 ft of pipe \_\_\_\_\_ = TDH return pipe \_\_\_\_\_

TDH in Piping: \_\_\_\_\_  
 Filter loss in TDH (from filter data sheet): \_\_\_\_\_  
 Heater loss in TDH (from heater data sheet): \_\_\_\_\_  
 Total all other loss: \_\_\_\_\_  
**Total Simplified TDH:** \_\_\_\_\_

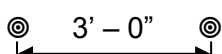

### Selected Pump and Main Drain Cover:

Pump selection \_\_\_\_\_ using pump curve for Simplified TDH & System Flow Rate  
(Pump model and size in Horsepower)  
 Main Drain Cover \_\_\_\_\_ (System Flow Rate must not exceed approved cover flow rate)  
(Make and Model)

Notes: Minimum system flow based on minimum flow per skimmer of 35 gpm.

### Determine the Number and Type of Required In-Floor Suction Outlets:

↓ Check all that apply.

- 2 \_\_\_\_\_ suction outlets @ \_\_\_\_\_ gpm max. flow (see note 2)
- 3 \_\_\_\_\_ suction outlets @ \_\_\_\_\_ gpm max. flow (see note 3)
- Aquastar Channel Drain @ 316 gpm max. flow rate
- A & A Channel Drain @ 217 gpm w/ 2 port & 278 gpm w/ 3 ports (see note 4)

**TDH Calculation Options**

For each pump

↓ Check one

**Simplified Total Dynamic Head (STDH)**  
Complete STDH Worksheet – Fill in all blanks

**Total Dynamic Head (TDH)**  
Complete Program or other calcs. Fill in required blanks on worksheet & attached calculations.

**Notes:**

1. If a variable speed pump is used, use the maximum pump flow in calculations.
2. For side wall drains, use appropriate side wall drain flow as published by the manufacturer.
3. Insert the manufacturer's name and approved maximum flow.
4. See installation instructions for number of ports to be used.
5. In-floor suction outlet cover/grate must conform to most recent edition of ASME/ANSI A112.12.8 and be embossed with that edition approval.
6. Pump & Filter make, model and location can not change without submitting revised plans and TDH worksheet.

**Total Head In Feet Conversion Chart**

Inches Mercury (Vacuum Gauge)										
	0	2	4	6	8	10	12	14	16	18
0	0.0	2.3	4.5	6.8	9.0	11.3	13.6	15.8	18.1	20.3
1	2.3	4.6	5.8	9.1	11.4	13.6	15.9	18.1	20.4	22.7
2	4.6	6.9	6.1	11.4	13.7	15.9	18.2	20.4	22.7	25.0
3	6.9	9.2	11.5	13.7	16.0	18.2	20.5	22.8	25.0	27.3
4	9.2	11.5	13.8	16.0	18.3	20.5	22.8	25.1	27.3	29.6
5	11.5	13.8	16.1	18.3	20.6	22.8	25.1	27.4	29.6	31.9
6	13.9	16.1	18.4	20.6	22.9	25.2	27.4	29.7	31.9	34.2
7	16.2	18.4	20.7	23.0	25.2	27.5	29.7	32.0	34.3	36.5
8	18.5	20.7	23.0	25.3	27.5	29.8	32.0	34.4	36.6	38.8
9	20.8	23.1	25.3	27.6	29.8	32.1	34.3	36.6	38.9	41.1
10	23.1	25.4	27.6	29.9	32.1	34.4	36.7	38.9	41.2	43.4
11	25.4	27.7	29.9	32.2	34.5	36.7	39.0	41.2	43.5	45.8
12	27.7	30.0	32.2	34.5	36.8	39.0	41.3	43.5	45.8	48.1
13	30.0	32.3	34.5	36.8	39.1	41.3	43.6	45.9	48.1	50.4
14	32.3	34.6	36.9	39.1	41.4	43.6	45.9	48.2	50.4	52.7
15	34.6	36.9	39.2	41.4	43.7	45.9	48.2	50.5	52.7	55.0
16	37.0	39.2	41.5	43.7	46.0	48.3	50.5	52.8	55.0	57.3
17	39.3	41.5	43.8	46.1	48.3	50.6	52.8	55.1	57.4	59.6
18	41.6	43.8	46.1	48.4	50.6	52.9	55.1	57.4	59.7	61.9
19	43.9	46.2	48.4	50.7	52.9	55.2	57.4	59.7	62.0	64.2
20	46.2	48.5	50.7	53.0	55.2	57.5	59.8	62.0	64.3	66.5
21	48.5	50.8	53.0	55.3	57.6	59.8	62.1	64.3	66.6	68.9
22	50.8	53.1	55.3	57.6	59.9	62.1	64.4	66.6	68.9	71.2
23	53.1	55.4	57.7	59.9	62.2	64.4	66.7	69.0	71.2	73.5
24	55.4	57.7	60.0	62.5	64.5	66.7	69.0	71.3	73.5	75.8
25	57.8	60.0	62.3	64.5	66.8	69.1	71.3	73.6	75.8	78.0
26	60.1	62.3	64.6	66.8	69.1	71.4	73.6	75.9	78.1	80.4
27	62.4	64.6	66.9	69.2	71.4	73.7	75.9	78.2	90.5	82.7
28	64.7	66.9	69.2	71.5	73.7	76.0	78.2	80.5	82.8	85.0
29	67.0	69.3	71.5	73.8	76.0	78.3	80.5	82.8	85.1	87.3
30	69.3	71.6	73.8	76.1	78.3	80.6	82.9	85.1	87.4	89.6
31	71.6	73.9	76.1	78.4	80.7	82.9	85.2	87.4	89.7	92.0
32	73.9	76.2	78.4	80.7	83.1	85.2	87.5	89.7	92.0	94.3
33	76.2	78.5	80.7	83.0	85.3	87.5	89.8	92.0	94.3	96.6
34	78.5	80.8	83.1	85.3	87.6	89.8	92.1	94.4	96.6	98.9
35	80.9	83.1	85.4	87.6	89.9	92.2	94.4	96.7	98.9	101.2

**Flow and Friction Loss Per Foot**

Schedule 40 PVC Pipe

Velocity – Feet Per Second

Pipe Size	6 fbs		8 fbs		10 fbs	
1"	16 gpm	0.25'	21 gpm	0.66'	26 gpm	0.94'
1.5"	37 gpm	0.16'	50 gpm	0.28'	62 gpm	0.48'
2"	62 gpm	0.15'	82 gpm	0.25'	103 gpm	0.40'
2.5"	88 gpm	0.09'	117 gpm	0.15'	146 gpm	0.23'
3"	138 gpm	0.09'	181 gpm	0.14'	227 gpm	0.23'
4"	234 gpm	0.06'	313 gpm	0.10'	392 gpm	0.15'
6"	534 gpm	0.04'	712 gpm	0.04'	890 gpm	0.10'

Swimming Pool Specification for:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Job Address: \_\_\_\_\_

\_\_\_\_\_

Permit # \_\_\_\_\_