Swimming Pool
Permit Requirements
FOR OWNER/BUILDER

☐ Permit Application (state whether or not pool will have enclosure of 4’ fence)
☐ Disclosure Statement
☐ Flagler County Residential Tree Protection and Landscape Compliance
☐ Affidavit of Drainage Control
☐ 2 Residential Swimming Pool Safety Act form (1 original and 1 copy)
☐ Notice of Commencement or Affidavit of Notice of Commencement Filing
   Only if over $2,500.00 (Recorded and Certified copy not required until first inspection)
☐ Copy of Warranty Deed
☐ Signed and Sealed Site Plan illustrating the existing & proposed grading
   per 98-03
☐ Survey showing proposed location of pool and all existing structures
☐ Existing septic tank and drain field location (can be added to site plan)
☐ 2 sets of signed and sealed swimming pool construction drawings
☐ Sub cards for all applicable Sub Contractors with postage affixed

*** THIS LIST IS INTENDED ONLY AS A GUIDE LINE FOR APPLICATION SUBMITTAL
AND MAY OR MAY NOT BE ALL INCLUSIVE***

It is the applicant’s responsibility to produce Notice of Commencement as specified in Florida
Statute Chapter 713.13, prior to the scheduling of inspections. All inspections must be complete to
close out the permit when the project is complete. Failure to close out permits may result in additional
fees and/or suspension of rights to obtain additional permits.
OWNER BUILDER
STATEMENT/AFFIDAVIT

Florida Statutes are quoted here in part for you information to indicate the authority for exemptions for
homeowners from qualifying as contractor and to express any applicable restrictions and responsibilities

OWNERS MUST PERSONALLY APPEAR AT CENTRAL PERMITTING TO
SING THIS DOCUMENT AND THE PERMIT APPLICATION

BY SIGNING THIS STATEMENT, I ATTEST: (Initial to the left of each statement)

| I understand that state law requires constructions to be done by licensed contractor and have applied for an |
| owner-builder permit under an exemption from the law. The exemption specifies that, as the owners of the |
| property listed, may act as my own contractor with certain restrictions even though I do not have a license. |
| 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. |
| 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 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 all permit and contractor. |
| 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 costs do exceed $75,000.00. The building or residence must be my only |
| 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 improve myself is sold or leased within in 1 year after the construction is complete, the |
| law will presume that I built or substantially improved it for sale or lease, which violates this exemption. |
| I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction. |
| I understand that I may not hire an unlicensed individual person to act as my contractor or to supervise person |
| working on my building or residence. It is my responsibility to ensure that the person whom I employ have the |
| licenses required by law and by county ordinance. |
| I understand that it is a frequent practice of unlicensed person to have the property owner obtain 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 I am aware of the limits of my insurance |
| coverage for injuries to workers on my property. |
| 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 provide workers compensation for the employee. I understand that my failure to follow these laws |
| my subject me to serious financial risk. |

Revised 03/2015
# OWNER BUILDER
## STATEMENT/AFFIDAVIT

<table>
<thead>
<tr>
<th>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-builder as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am aware of construction practices and I have access to the Florida Building Code.</td>
</tr>
<tr>
<td>I understand that I may obtain more information regarding my obligations as an employer from 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 License Board at 1-850-487-1395 or at <a href="http://www.myflorida.com/dbpr/pro/cilb/">www.myflorida.com/dbpr/pro/cilb/</a> for more information about licensed contractors.</td>
</tr>
<tr>
<td>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 address listed below.</td>
</tr>
<tr>
<td>I agree to notify the building department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure or in the permit application package.</td>
</tr>
<tr>
<td>Licensed contractors are regulated by laws designed to protect the public. If you contractor with a person does not have license, the Construction Industry Licensing Board, the Department of Business and Professional Regulations and the building department 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 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 status of contractor workers compensation coverage.</td>
</tr>
<tr>
<td>I agree to comply with all provisions of the county ordinances and codes pertinent to the building.</td>
</tr>
<tr>
<td>In the event the corrections are required to be completed for code violations, I will assume responsibility to insure they are made and up completion I will call for a reinspections before proceeding with building.</td>
</tr>
<tr>
<td>I will assume full responsibility for the construction and I will not expect supervision of my work from the Building Department.</td>
</tr>
<tr>
<td>I agree to pay any additional fees, including reinspections fees in full prior to requesting a final inspection.</td>
</tr>
</tbody>
</table>

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**THE BELOW AFFIDAVIT MUST BE SIGNED IN FRONT OF A PERMIT TECHNICIAN**

Property Address: ____________________________

I, ____________________________, do hereby state that I am qualified and capable of performing the requested construction involved with the permit application filed and agree to the conditions specified above.

Signature of Owner-Builder: ____________________________  Date: ________________

Form of identification: ____________________________  (Must be Photo ID)  Permit Technician Signature: ____________________________

A Violation of this exemption is a misdemeanor of the first degree punishable by term of imprisonment not exceeding 1 year and a $1,000.00 fine in addition to any civil penalties. In addition, the local permitting jurisdiction shall withhold final approval, revoke the permit, or pursue any action or remedy for unlicensed activity against the owner and any person performing work that requires licensure under the permit issued.

Revised 03/2015
Pulling an Owner/Builder Permit is Risky Business!

If you do not intend to do the work yourself and have been asked by someone without a contractor’s license to pull the permit, you are at risk of financial harm.

Section 489.103 (7), Florida Statutes requires that when property owners act as their own contractor, they must supervise the work being performed. Any person working on your building who is not licensed must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers’ compensation for that employee.

Without workers’ compensation insurance, you could be held liable for injuries incurred on your property. Typically, your homeowners’ insurance policy will not honor your claim if the work being performed required a licensed contractor. You could end up responsible for thousands of dollars of medical bills.

Not only is it dangerous, but it’s against the law.

Section 455.227(1)(j), Florida Statutes prohibits any person from aiding, assisting, procuring, employing or advising any unlicensed person or entity. Individuals who aid unlicensed persons may face fines of up to $5,000.

Is it worth it?

For more information, speak with your local building department before you apply for a permit or contact the Department of Business and Professional Regulation at 850.487.1395 or online at www.MyFloridaLicense.com.
AFFIDAVIT OF
NOTICE OF COMMENCEMENT FILING

I, ________________________________, of
(Owner’s Name)
__________________________________
(Street Address)
__________________________________
(City, State and Zip)

hereby certify the attached is a copy of the Notice of Commencement
that is being filed with the Clerk of the Circuit Court for the improvement
as noted:
__________________________________
(Please specify the improvement/work)

as permitted by Flagler County Building Department.

__________________________________  _____________
(Owner’s or Contractor’s Signature)    (Date)

State of ____________________________
County of __________________________
Sworn and subscribed before me this _____ day of _________________, 20____
who is personally known to me or produced: _____________________________
as identification.

__________________________________
(Notary Public Signature)

_____________________________
(Printed or Typed Name of Notary)

My Commission Expires: ________________
A tree survey is required and shall include at a minimum a description of the species, size, quantity and location of all trees and depiction of the site including proposed structures and vehicle use areas. Tree survey shall be prepared by a Florida licensed land surveyor.

I, ________________________________, the undersigned, certify that I am the owner or duly appointed agent for the property described below:

Property Street Address _____________________________________________ Parcel Number

I

Residential Tree Protection Compliance LDC, §6.01.03

Index tree protection/replacement requirements:
Each single-family residential lot must preserve or replant at least forty (40) percent of the total pre-development caliper inches existing on the site.

- Where replacement trees are required to be planted in order to maintain the minimum number of caliper inches, they shall be from the index tree list, have a minimum caliper of two and one-half (2 ½) inches measured six (6) inches above grade after planting and be Florida Grade #1 or better.

**INDEX TREE: A Tree (listed below) having a caliper of 6 inches or greater.**

<table>
<thead>
<tr>
<th>Flagler County Protected Index Trees</th>
<th>40% of Predevelopment TCI: Minimum replacement tree size 2 ½&quot; diameter, 6&quot; above grade</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Predevelopment Tree Caliper Inches (TCI):</strong></td>
<td><strong>Total Caliper Inches Post Development:</strong></td>
</tr>
<tr>
<td>Common Name</td>
<td>Number of Trees Provided</td>
</tr>
<tr>
<td>--------------</td>
<td>-----------------</td>
</tr>
<tr>
<td><strong>Example:</strong></td>
<td></td>
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<tr>
<td><em>Elm</em></td>
<td>3</td>
</tr>
<tr>
<td>Ash*</td>
<td></td>
</tr>
<tr>
<td>Bay</td>
<td></td>
</tr>
<tr>
<td>Black Cherry</td>
<td></td>
</tr>
<tr>
<td>Cherry Laurel</td>
<td></td>
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<tr>
<td>Cypress, bald</td>
<td></td>
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<tr>
<td>Cypress, pond</td>
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<tr>
<td>Devil's Walking Stick</td>
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<tr>
<td><em>Elm</em></td>
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<tr>
<td>Hackberry</td>
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<tr>
<td>Hickory*</td>
<td></td>
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<tr>
<td>Holly</td>
<td></td>
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<td><strong>Totals:</strong></td>
<td></td>
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</table>
Flagler County
Residential Tree Protection and Landscape Compliance
(For a New Residential Structure)
PAGE 2 of 2

II

Residential Landscape Compliance, LDC § 5.01.04(3)
Each single-family lot must provide at least one (1) tree per three thousand (3,000) square feet of lot area for first quarter (1/4) acre of lot area. For lots exceeding one-quarter (1/4) acre, one (1) tree for every additional one-quarter (1/4) acre, or major fraction thereof shall be planted. (i.e.) Four (4) trees required for the first 10,890 sq. ft. and one more tree for every 10,890 sq. ft. or major fraction, thereafter.
- When trees are planted to meet the minimum requirement they must be shade trees, (see list above with *), have a minimum caliper of one and one-half (1 1/2) inches measured at four and one-half (4 1/2) feet aboveground at the time of planting.
- Existing shade trees, sabal palms and pine trees may be used to satisfy this requirement, in whole or in part, provided that they have a minimum caliper of two and one-half (2-1/2) inches and overall height of ten (10) feet.

Other trees as may be allowed by the County Planner and State Forester.

<table>
<thead>
<tr>
<th>Flagler County Shade Trees to be planted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Square Foot of Lot:</td>
</tr>
<tr>
<td>Common Name of Tree</td>
</tr>
<tr>
<td>---------------------</td>
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<td></td>
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</tbody>
</table>

Total:

III

Please initial the following Statement if no Protected Index Trees over 6 inches in caliper exist on the property.

I certify that no protected index trees exist on the above-described property for which a building permit is sought.

IV

Please initial the following Statement if no Trees will be removed from the property.

I certify that no trees will be removed on the above-described property for which a building permit is sought.

V

Please sign below to certify that the above information is true and accurate.

Owner/Agent Signature ___________________________ Date ________________
FLAGLER COUNTY
AFFIDAVIT OF DRAINAGE CONTROL FOR
RESIDENTIAL AND MINOR COMMERCIAL CONSTRUCTION

A. OWNER/SITE INFORMATION:

Name of Owner: ___________________________ Phone Number: ___________________________
Address: _____________________________________________________________
Subdivision Name: _________________________ Lot Number of Site: __________
Tax Parcel Number: Section: ________ Township: ______ Range: ______-____-_____

B. CERTIFICATE OF COMPLIANCE:
The undersigned owner of the above-described property hereby certifies that development of the above property will not result in:

1. Flooding of adjacent lands.
2. Blockage of existing drainage systems, natural or manmade.
3. The destruction of existing drainage systems, natural or manmade.
4. Erosion of fill or disturbed materials onto adjacent lands or environmentally sensitive areas (as determined by Flagler County).
5. The destruction of roadside drainage swales, roadway pavement and/or shoulders.
6. Flooding of the proposed structure during a 100-year frequency storm.
7. Construction to an elevation less than that required by the Flagler County Land Development Code. (Applicant is cautioned UNAUTHORIZED construction may be subject to demolition).
8. Inadequate onsite drainage in the vicinity of the proposed structure.
9. Deviation from the approved grading plan for this property.

C. RELEASE AND AUTHORIZATION:

1. The undersigned hereby release and holds harmless the County of Flagler and its authorized agents and/or employees from any and all claims of damage of every kind and nature whatsoever to said property, or contiguous properties, arising from the approval of this application or construction of required improvements.

2. The undersigned hereby grants unto authorized agents and/or employees of the County of Flagler the right to enter upon said property for inspection and enforcement activities. Flagler County reserves the right to require the property owner to implement reasonable measures regarding drainage control including, but not limited to, submittal of signed and sealed engineering drainage plans.

(Signature) ___________________________ (Printed Name) ___________________________

State of ___________________________ County of ___________________________

Sworn to and Subscribed before me, the _____ Day of __________________________, 20____ by ___________________________ who is personally known to me or has produced ___________________________ as identification.

(Type of Identification)

Signature of Notary Public ___________________________ Print, Type or Stamp of Notary ___________________________

Revised 07/14
 Permit #______________

**Residential Swimming Pool, Spa and Hot Tub Safety Act**

I (We) acknowledge that a new swimming pool, spa or hot tub will be constructed or installed at (street Address) ____________________ and hereby state that one or more of the following methods will be used to meet the requirements of Chapter 515, Florida Statutes.

*(PLEASE INITIAL THE METHOD(S) TO BE USED FOR YOUR POOL)*

Where a wall of a dwelling serves as part of the barrier, one of the following shall apply:

1. _____ All doors and windows providing direct access from the home to the pool shall be equipped with an exit alarm complying with UL 2017 that has a minimum sound pressure rating of 85 dBA at 10 feet (3048 mm). Any deactivation switch shall be located at least 54 inches (1372 mm) above the threshold of the access. Separate alarms are not required for each door or window if sensors wired to a central alarm sound when contact is broken at any opening.

**Exceptions:**

1. _____ Screened or protected windows having a bottom sill height of 48 inches (1219 mm) or more measured from the interior finished floor at the pool access level.

2. _____ Windows facing the pool on floor above the first story.

3. _____ Screened or protected pass-through kitchen windows 42 inches (1067 mm) or higher with a counter beneath.

2. _____ All doors providing direct access from the home to the pool must be equipped with a self-closing, self-latching device with positive mechanical latching/locking installed a minimum of 54 inches (1372 mm) above the threshold, which is approved by the authority having jurisdiction.

3. _____ A swimming pool alarm that, when placed in a pool, sounds an alarm upon detection of an accidental or unauthorized entrance into the water. Such pool alarm must meet and be independently certified to ASTM Standard F2208, titled “Standard Safety Specification for Residential Pool Alarms,” which includes surface motion, pressure, sonar, laser, and infrared alarms. For purposes of this paragraph, the term “swimming pool alarm” does not include any swimming protection alarm device designed for individual use, such as an alarm attached to a child that sounds when the child exceeds a certain distance or becomes submerged in water.

______________________________
Contractor’s Signature

______________________________
Contractor’s Name (Please Print)

______________________________
Owner’s Signature

______________________________
Date

______________________________
Date
NOTICE OF COMMENCEMENT

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. Description of property: (legal description of the property, and street address if available)

2. General description of improvement:

3. Owner information:
   a. Name and address:
   b. Interest in property:
   c. Name and address of fee simple titleholder (if other than Owner):

4. Contractor:
   a. Contractor name and address:
   b. Contractor’s phone number:

5. Surety
   a. Surety name and address:
   b. Phone number:
   c. Amount of bond:

6. Lender:
   a. Lender’s name and address:
   b. Lender’s phone number:

7. a. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes: (name and address).

   b. Phone numbers of designated persons:

8. a. In addition to himself or herself, Owner designates ______________ of ______________ to receive a copy of the Lienor’s Notice as provided in Section 713.13(1)(b), Florida Statutes.

   b. Phone number of person or entity designated by owner:

9. Expiration date of notice of commencement (the expiration date is 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 Owner's Authorized Officer/Partner/Manager) __________________________

(Signatory's Title/Office) __________________________

The foregoing instrument was acknowledged before me this _____ day of ________, ________, by ________________

_____________ (name of person) as __________________________ for __________________________

(type of authority, e.g. officer, trustee, attorney in fact) __________________________

(name of party on behalf of whom instrument was executed)

(Signature of Notary Public - State of Florida) __________________________

Personally Known _____ OR Produced Identification ______

Type of Identification Produced ________________

Verification pursuant to Section 92.525, Florida Statutes.

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.
Swimming Pool Energy Efficiency Compliance Information
NOTE: These Requirements Apply ONLY to the Filtration Pump

ANSI/SPSP/ICC-15 2011

Flow Calculations
Pool water volume _______ + 360 = _______ gpm - this is the calculated flow rate.
Note: for pools under 13,000 gals. The calculated flow rate or 36 gpm whichever is greater = the filtration flow rate
If there is an Auxiliary load on the filtration pump? Yes _____ No _____
If so, what is the calculated auxiliary flow rate ______ gpm

Flow Rate (low speed) _______ gpm @ ______ rpm.

Minimum suction side pipe size @ 6 fps _______ in. Minimum suction side branch pipe size @ 6 fps _______ in.
Minimum suction side pipe size @ 6 fps _______ in. Minimum suction side branch pipe size @ 6 fps _______ in.

Determine Filter Size:

Filter Factors (GPM/SF) Cartridge (0.375) DE (2.0) Sand (15)
Filter Size: ___________ / ___________ = ___________
(Flow Rate) (Filter Factor) Filter Size (Filter Make and Model)

Pump Controls
Filtration pump has no auxiliary load - standard time clock _______
Filtration pump with auxiliary load - Control model for low speed default within 24 hr. _______

Heater Model
Gas Heater efficiency rating ___________ (No Pilot Light)
Heat Pump efficiency C.O.P. _______

ANSI 5 & ANSI 7 Compliance Work Sheet

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 suction pipe) in _______ inch pipe per 1 ft. @ _______ gpm = _______ (from pipe flow/friction loss chart)

TDH in Piping ___________

Determine Simplified TDH:
4. _______ x _______ = _______
   (Length of Suct. Pipe) (ft of head/1 ft. of Pipe) (TDH Suct. Pipe)
5. _______ x _______ = _______
   (Length of Return Pipe) (ft of head/1 ft. of Pipe) (TDH Suct. Pipe)

Filter/Heater loss in TDH __________________
All other losses __________________
Total Dynamic Head (TDH): ___________

Determine Pipe Sizes:
Branch Piping to be _______ inch to keep velocity @ 6 fps max. at _______ gpm System Flow Rate.
Trunk, Skinner &
Suction Piping to be _______ inch to keep velocity @ _______ fps max. at _______ gpm System Flow Rate.
Return Piping to be _______ inch to keep velocity @ _______ fps max. at _______ gpm System Flow Rate.
Pump Selection as Listed on Curve A or C (circle one)

Filtration pump __________________________ Maximum Flow Rate ______ gpm

Main Drain Cover __________________________ (Make and Model)

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

☐ 3'-0" 2 suction outlets @ _________ gpm max. flow
☐ 3'-0" 3 suction outlets @ _________ gpm max. flow
☐ channel drain @ _________ gpm w/ _______ ports

Flow and Friction Loss Per Foot
Schedule 40 PVC Pipe

<table>
<thead>
<tr>
<th>Pipe Size</th>
<th>6 fps</th>
<th>8 fps</th>
<th>10 fps</th>
</tr>
</thead>
<tbody>
<tr>
<td>1&quot;</td>
<td>16 gpm</td>
<td>0.14'</td>
<td>21 gpm</td>
</tr>
<tr>
<td>1.5&quot;</td>
<td>37 gpm</td>
<td>0.08'</td>
<td>50 gpm</td>
</tr>
<tr>
<td>2&quot;</td>
<td>62 gpm</td>
<td>0.06'</td>
<td>82 gpm</td>
</tr>
<tr>
<td>2.5&quot;</td>
<td>88 gpm</td>
<td>0.05'</td>
<td>117 gpm</td>
</tr>
<tr>
<td>3&quot;</td>
<td>136 gpm</td>
<td>0.04'</td>
<td>181 gpm</td>
</tr>
<tr>
<td>4&quot;</td>
<td>234 gpm</td>
<td>0.03'</td>
<td>313 gpm</td>
</tr>
<tr>
<td>6&quot;</td>
<td>534 gpm</td>
<td>0.02'</td>
<td>712 gpm</td>
</tr>
</tbody>
</table>

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 & attach calculations.

☐ Maximum Flow Capacity
Of the new or replacement pump.

Date __________________________

Contractor Signature __________________________

Contractor Cert. No. __________________________

Contractor Telephone No. __________________________

Scale: None