

SPA and HOT TUB

Please submit/upload plans in PDF format

Please indicate items submitted with a checkmark (✓)

Please upload [this Checklist and any Required Forms](#) in **.pdf format** to the appropriate category [<Survey>](#) [<Building Plans>](#) [<Supporting Docs>](#) [<NOA>](#) following the TOJ Naming Convention found in Help Documents

Create online as: [Pool \(R\)](#) or [Pool \(C\)](#)

1. Factory Assembled Unit

Work Class: In Ground or Spa Pre-Assembled

(Unit to Plug in outlet, No Wiring, No Plumbing involved)

- a. Survey showing location of Pool, Setbacks, Power Lines, etc. _____
- b. Manufacturer Plans & Specifications _____
- c. Show location of Pool Barrier or Screen Enclosure _____

2. Assembled Unit Delivered Without Wiring or Plumbing

Work Class: In Ground or Spa Pre-Assembled

(Unit **MUST** be Hard Wired to Breaker and may or may not require plumbing)

- a. Survey showing location of Pool, Setbacks, Power Lines, etc. _____
- b. Manufacturer Plans & Specifications _____
- c. Provide Electrical Drawings, as applicable _____
- d. Provide Plumbing Drawings, as applicable _____
- e. Show location of Pool Barrier or Screen Enclosure _____

3. Built and/or Assembled on Site

Work Class: In Ground or Spa In-Ground

(Unit **MUST** be Hard Wired to Breaker and Required Plumbing)

- a. Survey showing location of Pool, Setbacks, Power Lines, etc. _____
- b. Engineer's Signed/Sealed Plans _____
- c. Manufacturer Specifications _____
- d. Provide Electrical Drawings Schematic of Wiring _____
- e. Provide Plumbing Drawings with Riser/Isometric and Pipe Sizes _____
- f. Show location of Pool Barrier or Screen Enclosure _____

4. Commercial Pool-Spa or Hot Tub

(Pool is NOT Residential or used by MORE than 5 Families)

Provide ALL items listed in 3a-3f shown above in addition to items below

a. Plans **MUST** be Reviewed & Stamped by the Following:

- I. Sanitary Sewer - Loxahatchee River District Environmental Control (ENCON) _____
 - Address: 2500 Jupiter Park Drive
 - Phone: 561-747-5700
- II. Septic system - Palm Beach County Health Department _____
 - Phone: 561-840-4500
- III. Jupiter Utilities Department (*If Applicable*): 561-746-5134 _____
- IV. Soil analysis, signed/sealed _____
- V. Public Pool Permit Notification Palm Beach County Health Department _____

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NOTE: HOMEOWNER ASSOCIATION MAY REQUIRE APPROVAL/REVIEW IF PROPERTY IS LOCATED IN A DEED RESTRICTED COMMUNITY

Required items:

- **Provide inspector with a final “as-built” drainage plan at final inspection**
- **Temporary 4 ft. high fence required during construction at ALL times!**
- **Swimming Pool Barriers MUST Conform to current Florida Building Code**
- **Palm Beach County and Jupiter impact fees may be required**