



NOTICE OF COMMENCEMENT

Permit No. _____

Tax Folio No. _____

State of _____

County of _____

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 the Notice of Commencement.

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

2. **General description of improvement:**

3. **Owner information:**

Name _____

Address _____

Phone _____ Fax _____

Interest in property _____

Name and address of fee simple titleholder (if other than Owner)

4. **Contractor:**

Name _____

Address _____

Phone _____ Fax _____

5. **Surety:**

Name _____

Address _____

Amount of bond: \$ _____ Phone _____ Fax _____

6. **Lender:**

Name _____

Address _____

Phone _____ Fax _____

7. **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 _____

Address _____

Phone _____ Fax _____

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

Name _____

Address _____

Phone _____ Fax _____

9. **Expiration date of notice of commencement** (the expiration date is 1 year from 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 PAYMENT 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 BY 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 Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager) (Signatory's Title/Office)

STATE OF _____ COUNTY OF _____

The foregoing instrument was certified and subscribed before me by means of _____ physical presence OR _____ online notarization, this _____ day of _____, 20____, by _____, _____ who is personally known to me OR _____ who has produced _____ as identification.

(SEAL)

Notary Public Signature