

Tax Parcel Number

Permit No

NOTICE OF COMMENCEMENT

State of Florida County of Volusia

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(s) information:

- a. Name(s) and address
- b. Interest in property
- c. Name and address of fee simple title holder (if other than owner)

4. a. Contractor: Name and address

b. Contractor's phone number

5. Surety (if applicable, a copy of the payment bond is attached):

- a. Name and address
- b. Phone number
- c. Amount of bond \$.00

6. a. Lender: Name and address

b. Lender's phone number

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:

- a. Name and address
- b. Phone numbers of designated persons:

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

- a. Name and address
- 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 Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager (Section 713.13[1] [d])

Signatory's Title/Office

State of , County of

The forgoing instrument was acknowledged before me by means of [] physical presence or sworn to (or affirmed) by [] online notarization,

this day of , 20 , by , as

(Type of authority) for (name of party on behalf of whom instrument was executed).

Personally Known___ Produced ID___ Type of ID Produced___

(Signature of Notary Public – State of Florida)

Print, Type or Stamp Commissioned Name of Notary Public)