

NOTICE OF COMMENCEMENT

PERMIT NO. _____

TAX FOLIO NO. _____

STATE OF FLORIDA
COUNTY OF BREVARD

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 (Name and address) _____
5. Surety: _____
a) Name and address: _____
b) Amount of bond: _____
6. Lender (Name and address): _____
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 and address): _____
8. In addition to himself, Owner designates _____ of _____ to receive a copy of the Lienor Notice as provided in Section 713.13 (1) (b), Florida Statutes.
9. Expiration of date of notice on 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/Director/Partner/manager

Signatory's Title/Office

STATE OF FLORIDA
COUNTY OF BREVARD

The foregoing instrument was acknowledged before me this ____ day of _____, 20__ by _____ (name of person) as _____ (type of authority eg: officer, trustee, attorney in fact) for _____ (name of party on behalf of whom instrument was executed)

Signature of Notary
Print, Type or Stamp Commissioned Name of Notary Public
Commission Number

Personally Known _____ or Produced Identification _____

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 believe.

Signature of Natural Person Signing Above