AFTER RECORDING – RETURN TO:

PERMIT NUMBER:

NOTICE OF COMMENCEMENT

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

1. **DESCRIPTION OF PROPERTY** (Legal description and street address, if available) **TAX FOLIO NUMBER:** _____

SUBDIVISION _____**BLOCK**_____**TRACT**_____**LOT**_____**BLDG**_____**UNIT**_____

_____

2. **GENERAL DESCRIPTION OF IMPROVEMENT:**

_____

3. **OWNER INFORMATION:** a. Name_____

b. Address_____ c. Interest in property_____

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

4. **CONTRACTOR'S NAME, ADDRESS AND PHONE NUMBER:**

_____

_____

5. **SURETY'S NAME, ADDRESS AND PHONE NUMBER AND BOND AMOUNT:**

_____

6. **LENDER'S NAME, ADDRESS AND 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:

NAME, ADDRESS AND PHONE NUMBER:

_____

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

NAME, ADDRESS AND PHONE NUMBER:

_____

9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified):_____, ____, 20__

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 **Print Name and Provide Signatory's Title/Office**

State of Florida
County of Palm Beach

The foregoing instrument was acknowledged before me this _____ day of _____, 20_____

By _____, as _____
(name of person) (type of authority,…e.g. officer, trustee, attorney in fact)

For _____.
(name of party on behalf of whom instrument was executed)

_____ Personally known or _____ produced the following type of identification: _____

Notary

_____
(Signature of Notary Public)

Under Penalties of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief (Section 92.525, Florida Statutes).

Signature(s) of Owner(s) or Owner(s)' Authorized Officer/ Director / Partner/Manager who signed above:

By _____ By _____