

This Instrument Prepared by:

Name:

Address:

Tax Folio No. \_\_\_\_\_

Permit No. \_\_\_\_\_

### Notice of Commencement

State of Florida

County of Flagler

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 and street address)

**2. General Description of Improvement:**

(Be specific – no “all improvements”)

**3. Owner Information or Lessee Information if the Lessee contracted for improvement**

Name and address:

Interest in Property:

Name and address of fee simple titleholder:

(If other than owner)

**4. Contractor Information:**

Name and address:

Phone number:

**5. Surety Information:**

Name and address:

Phone number:

Amount of bond:

**6. Lender Information:**

Name and address:

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:

Phone Number:

8. In addition to him/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 and Address:

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 here:* \_\_\_\_\_).

**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 1, 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.**

Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated therein are true to the best of my knowledge and belief

\_\_\_\_\_  
Signature of Owner or Lessee, or Owner’s or Lessee’s Authorized Officer/Director/Partner/Manger

\_\_\_\_\_  
Signatory’s Title/Office

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_ as \_\_\_\_\_ for \_\_\_\_\_ year \_\_\_\_\_ type of authority

\_\_\_\_\_  
Officer/trustee/attorney name of party on behalf of whom instrument was executed

\_\_\_\_\_  
Signature of Notary Public State of Florida

\_\_\_\_\_  
Print, type or stamped commissioned name of Notary Public

Personally known \_\_\_\_\_ or Produced Identification \_\_\_\_\_