

NOTICE OF COMMENCEMENT

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

State of Florida County of St. Lucie

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.

Legal Description of Property: (and street address if available):  
\_\_\_\_\_

General description of improvement: \_\_\_\_\_

**Owner information or Lessee information if the Lessee contracted for the improvement:**

Name \_\_\_\_\_

Address \_\_\_\_\_

Interest in property: \_\_\_\_\_

Name and address of fee simple titleholder (if different from Owner listed above):  
\_\_\_\_\_

Contractor's Name: \_\_\_\_\_

Contractor Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Surety (if applicable, a copy of the payment bond is attached): Amount of bond: \$ \_\_\_\_\_

Name and address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Lender Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Lender's address: \_\_\_\_\_

**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: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone number of person or entity designated by owner: \_\_\_\_\_

Expiration date of notice of commencement: (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 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.**

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/Manager)

\_\_\_\_\_  
(Signatory's Title/Office)

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

By \_\_\_\_\_ as \_\_\_\_\_ for \_\_\_\_\_  
Name of Person Type of authority (e.g. officer, trustee) Party on behalf of whom instrument was executed

Personally known \_\_\_ or produced Identification \_\_\_\_.

\_\_\_\_\_  
(Signature of Notary Public - State of Florida)  
(Print, Type, or Stamp Commissioned Name of Notary Public)

Type of Identification produced \_\_\_\_\_.