AFTER RECORDING – RETURN TO: Name: Address:

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 & street address, if available) TAX FOLIO NO.:

SUBDIVISION	BLOCK	TRACT	LOT	BLDG	UNIT
2. GENERAL DESCRIPTION OF IN	APROVEMENT:				
3. OWNER INFORMATION: a. N	ame				
b. Address			c. Interest	in property	
 d. Name and address of fee simple titleho 4. CONTRACTOR'S NAME, ADDR 					
5. SURETY'S NAME, ADDRESS AN	ND PHONE NUMBER AND BOND A	MOUNT:			
6. LENDER'S NAME, ADDRESS A	ND PHONE NUMBER:				
7. Persons within the State of Fl Section 713.13 (1) (a) 7., Florida NAME, ADDRESS AND PHONE NU	Statutes:	n whom notices or c	ther documen	its may be serve	ed as provided by
8. In addition to himself or herse 713.13 (1) (b), Florida Statutes: NAME, ADDRESS AND PHONE NU		ing to receive a cop	y of the Lienc	or's Notice as p	rovided in Section
9. Expiration date of notice of c specified):	, 20 AYMENTS MADE BY THE OWN PAYMENTS UNDER CHAPTER 7 CE FOR IMPROVEMENTS TO YO HE JOB SITE BEFORE THE FIRS	ER AFTER THE EXF 13, PART I, SECTIO DUR PROPERTY. A T INSPECTION. IF	PIRATION OF N 713.13, FLC NOTICE OF C YOU INTEND	<u>THE NOTICE O</u> DRIDA STATUT COMMENCEME TO OBTAIN FI	F COMMENCEMENT ES, AND CAN NT MUST BE NANCING, CONSUL
Signature of Owner or Owner's Authorized Officer/D State of Florida	irector/Partner/Manager	Print Name	e and Provide	e Signatory's T	itle/Office
County of Broward					
The foregoing instrument was ac	knowledged before me this	day of		_, 20	
By (name of		, as			
For	person)	(type of au	thority,e.g.	officer, trustee,	attorney in fact)
(name of party on behalf of	whom instrument was executed)				
Personally known or	_ produced the following type of	of identification:			
Notary					
i votai y				ture of Notary	

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

AFTER RECORDING – RETURN TO:		
Name:		
Address:		
NOTICE OF TERMINA (of Notice of Commencement)	-	
STATE OF FLORIDA:		
COUNTY OF:		
	Spa	ce above reserved for use of recording office
 The undersigned hereby gives notice that the effective per dated	, recorded in O.R. Book/Page vill terminate; and, in accordance wit Commencement being terminated ar o this NOTICE OF TERMINATION. of ater. d Notice of Commencement.	// h Section 713.132, Florida Statutes, the re as described above, and all information
 All lienors have been paid in full or prorata in accordar A copy of this notice has been served on the contract 		
Owner Signature: Print Name		
SWORN TO AND SUBSCRIBED before me this by:		20
Personally known to me, or produced		as identification.
Notary Signature:		
Print Name:		

seal

Exhibit attached:

Contractor's Final Payment Affidavit

Property Legal Description

 $\hfill\square$ Copy of Notice of Commencement