



**State of Florida
County of DeSoto
Notice of Commencement**

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.

Permit Number *(Leave blank if the project will require more than one permit):* _____

Description of property _____
Street Address, legal description/Parcel ID

General description of improvement _____

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

Name and address _____

Interest in property _____

Name & address of fee simple titleholder *(if different from Owner listed above)* _____

Contractor _____
Name Address

Contractor's phone number _____

Surety (if applicable, a copy of the payment bond is attached):

Name and address _____

Phone number _____ Amount of bond \$ _____

Lender _____
Name Address

Lender's phone number _____

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 # _____

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 will be 1 year after 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 SITE OF THE IMPROVEMENT 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/Lessee, or Owner's/Lessee's Authorized Officer/Director/Partner/Manager

Signatory's Title/Office (printed)

State of _____

County of _____

The foregoing instrument was acknowledged before me by means of physical presence OR online notarization, this _____ day of _____

_____, 20____ by _____, as _____ for _____.
Month Year Printed Name of Owner/Lessee/Officer Type of Authority (officer, trustee, attorney in fact...) Name of party on behalf of whom instrument was executed

Signature of Public Notary-State of Florida

Print, Type, or Stamp commissioned Name of Notary Public

Personally Known or Produced Identification Type of Identification shown if applicable: _____